# EXTENDED TO NOVEMBER 16, 2020 Return of Private Foundation

Form 990-PF or Section 4947(a)(1

Department of the Treasury

Internal Revenue Servic

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.

▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

1912

2019

For calendar year 2019 or tax year beginning and ending Name of foundation A Employer identification number COMMONWEALTH FOUNDATIONS 46-5103846 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 800 E CANAL STREET 1900 804-643-4200 City or town, state or province, country, and ZIP or foreign postal code C - If exemption application is pending, check here RICHMOND VA 23219 Initial return G Check all that apply: Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here 1 Fair market value of all assets at end of year J Accounting method: Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 214 672 (Part I, column (d), must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (b) Net investment (a) Revenue and (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income income (cash basis only) Contributions, gifts, grants, etc., received 12,440,000 N/A Check it the roundation is not required to attach Sch. D. Interest on savings and temporary cash investments Dividends and interest from securities 5a Gross rents b Net rental income or (loss) Internal Revenue Service Received US Bank - USB 6a Net gain or (loss) from sale of assets not on line 10 b Gross cales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) NOV 4 2020 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances <del>Ogabn, UT</del> b Less Cost of goods sold c Gross profit or (loss) 11 Other income Total Add lines 1 through 11 12 440 000 0 Compensation of officers, directors, trustees, etc 0 0 ٥. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 936 0 936. STMT 1 **b** Accounting fees STMT 2 13,385 0 13,385, c Other professional fees Operating and Administrative 17 Interest 18 Taxes 19 Depreciation and depletion Occupancy 20 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 428 0 428. STMT 3 24 Total operating and administrative expenses Add lines 13 through 23 0 14,749 14,749. 25 Contributions, gifts, grants paid 12 260 446 12 260 446. 26 Total expenses and disbursements. Add lines 24 and 25 275 195 12.275.195. 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements 164,805 b Net investment income (if negative, enter -0-) 0 C Adjusted net income (if negative, enter -0-) N/A

Fo	rm 99	00-PF (2019) COMMONWEALTH FOUNDATIONS			.03846 Page 2
F	art	Balance Sheets Attached schedules and amounts in the description column should be for end-af-year amounts only	Beginning of year	End o	
<u>.</u>		column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	· · · · · · · · · · · · · · · · ·	49,867.	214,672,	214,672,
	2	Savings and temporary cash investments			
	3	Accounts receivable -	<del> </del>	<del></del>	
		Less: allowance for doubtful accounts			
	4	Pledges receivable			* - + + +
		Less; allowance for doubtful accounts ▶			
	1	Grants receivable	<del></del>		
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable	V . 1 . 1	<u> </u>	
		Less: allowance for doubtful accounts			
ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations			·····
	b	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis		·	
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment, basis ▶		, ,	
		Less accumulated depreciation			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers - see the			
_		instructions. Also, see page 1, item I)	49.867.	214 672	214 672
	17	Accounts payable and accrued expenses			1
	18	Grants payable			*
Se	19	Deferred revenue			j
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
jab	21	Mortgages and other notes payable			+
_	22	Other liabilities (describe )			,
					7
_	23	Total liabilities (add lines 17 through 22)	0.	0.	: !
		Foundations that follow FASB ASC 958, check here			}
es		and complete lines 24, 25, 29, and 30			į
anc	24	Net assets without donor restrictions			
<b>Fund Balances</b>	25	Net assets with donor restrictions			1
ğ		Foundations that do not follow FASB ASC 958, check here			
Ξ		and complete lines 26 through 30.			
ò	26	Capital stock, trust principal, or current funds	0.	0.	
ets	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Assets	28	Retained earnings, accumulated income, endowment, or other funds	49 867.	214,672.	
Net/	29	Total net assets or fund balances	49,867.	214,672.	
Z					
_	30	Total liabilities and net assets/fund balances	49 867	214 672	
P	art	III Analysis of Changes in Net Assets or Fund Ba	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 2			
•		st agree with end-of-year figure reported on prior year's return)	<del>.</del>	1	49.867.
2	•	amount from Part I, line 27a		2	
		r increases not included in line 2 (itemize)		3	164,805.
		lines 1, 2, and 3		4	214 672
		eases not included in line 2 (itemize)		5	214,672,
		net assets or fund balances at end of year (line 4 minus line 5) - Part II. co	lumn (h), line 29	6	214 672

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Part	VI Excise T	ax Based on Inve	estment Income	(Section 4940(	a), 4	l940(b), 4940(e)	, or 4	948 -	see ii	nstru	ictio	ns)
1a E:	xempt operating found	dations described in sect	tion 4940(d)(2), check he	re 🕨 📖 and ente	r "N/A	N" on line 1.	)					1
D	ate of ruling or detern	unation letter:	(attach c	opy of letter if neces	sary-	see instructions)						
<b>b</b> D	omestic foundations t	hat meet the section 494	10(e) requirements in Part	t V, check here 🕒 [	;	and enter 1%	<b>&gt;</b>	1				٥.
01	f Part I, line 27b											1
сΑ	II other domestic foun	dations enter 2% of line	27b. Exempt foreign orga	anizations, enter 4% o	f Part	t I. line 12. col. (b)	]					٠
			a)(1) trusts and taxable fo			. , ,		2				0.
	dd lines 1 and 2	,	/( -/	,,	, c, c	,		3	-			0.
		(domestic section 4947)	(a)(1) trusts and taxable f	oundations only othe	rs er	nter -N-1		4				0.
			e 4 from line 3. If zero or l		,	101 10 /1		5				0.
	redits/Payments:	, int intomic. Cabildat line	5 4 110111 11110 0: 11 2010 01 1	1033, 011(01 0								<u> </u>
	•	ments and 2018 overpay	ment credited to 2010	1	6a		•					
						"	0.					
		ations - tax withheld at s			6b		0.					1
		n for extension of time to	o file (Form 8868)		6c		0.					1
	ackup withholding err	=			6d		0.	_				1
		ents. Add lines 6a throug						7				0.
			d tax. Check here 🛄 ıf		ed			8				0.
			n line 7, enter <mark>amount ow</mark>				<b>&gt;</b>	9				0.
			lines 5 and 8, enter the ar	mount overpaid		1		10				
		e 10 to be: Credited to 20				Refund	ed 🖊	11				
		nents Regarding										
1a D	uring the tax year, did	the foundation attempt t	to influence any national,	state, or local legislati	on or	did it participate or in	itervene	ın			Yes	No
ar	ny political campaign?	ı								1a		х
<b>b</b> D	d it spend more than	\$100 during the year (er	ther directly or indirectly)	for political purposes	? See	the instructions for t	he defin	ition	Į	1b		Х
If	the answer is "Yes" to	1a or 1b, attach a deta	iled description of the act	ivities and copies of a	ny ma	aterials published or						
dı	stributed by the found	dation in connection with	the activities.									
c D	d the foundation file F	orm 1120-POL for this y	/ear?							1c		X
d Er	nter the amount (if any	y) of tax on political expe	enditures (section 4955) ii	mposed during the ye	ar:							
			0, (2) On fou				0.					•
			indation during the year fo									i
	anagers. ► \$								- 1			1
			t have not previously bee	n reported to the IBS	7				i	2		х
		d description of the activ		in reported to the mo					i			
		•	rously reported to the IRS	in ite anverning inet	ruma	nt articles of incorno	ration o	r				
			tach a conformed copy o		Juille	in, articles of incorpo	ialion, o	1				
-		· ·	ss income of \$1,000 or m	-					ŀ	3		<u> </u>
		<u>-</u>		iore during the year?					_	4a		<u> </u>
	•	return on Form 990-T fo	•					N/	A	4b	_	
			, or substantial contractio	on during the year?						5		<u> </u>
		ment required by Gener		40.455								
	· ·	, , , ,	to sections 4941 through	n 4945) satisfied eithe	r:							i
		overning instrument, or										1
			governing instrument so	that no mandatory d	irectio	ons that conflict with t	he state	law	ļ	-		ئــ ـ
	main in the governing	•							1	6	X	
<b>7</b> Di	d the foundation have	at least \$5,000 in assets	s at any time during the yi	ear? If "Yes," complete	e Part	: II, col. (c), and Part >	(V		ļ	7	Х	
									ĺ			}
8a Er	nter the states to whic	h the foundation reports	or with which it is registe	red. See instructions.	•	NONE						· ·
_				-								1
<b>b</b> If	the answer is "Yes" to	line 7, has the foundation	n furnished a copy of For	m 990-PF to the Attor	rney (	General (or designate)				_	_	
of	each state as require	d by General Instructio	n G? If "No," attach expla	ination		SEE STATEM	ENT 4			8b	- '	х
			erating foundation within		n 494			ndar				
			e the instructions for Par						ľ	_ g _ 1	-	x
	17		's during the tax year? if "				\$		ŀ	10		<u> </u>
				. so, amaon a suncolle li	Smild i	Harrios alta adai 8556						(2019)

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3b

4a

N/A

Schedule C, to determine if the foundation had excess business holdings in 2019.)

had not been removed from jeopardy before the first day of the tax year beginning in 2019?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

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Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (contin	ued)		
5a During the year, did the foundation pay or incur any amount to:				Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	es 💌 No		
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire	ectly,			
any voter registration drive?		Ye	es 🗓 No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	es 💌 No		
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section				
4945(d)(4)(A)? See instructions			es 🗓 No		{
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fe	or			{
the prevention of cruelty to children or animals?	,		es 💌 No	ŀ	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described in	n Regulations	·		
section 53.4945 or in a current notice regarding disaster assistance? See instri	uctions		N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check l	nere				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi	rom the tax because it maintai	ned			
expenditure responsibility for the grant?	N.	/A 🔲 Ye	s No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Ye	s 🗓 No 📙		]}
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	Х
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?	Ye	s 🗴 No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A **	7b	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration or				
excess parachute payment(s) during the year?			s 🗴 No		
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	/		
1 List all officers, directors, trustees, and foundation managers and t	heir compensation.	_			
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp account allowa	ense , other nces
ALICE T. GOODWIN	DIRECTOR				
800 E CANAL ST, STE 1900					
RICHMOND, VA 23219	0,10	0.	0.		0.
WILLIAM H. GOODWIN JR.	DIRECTOR, PRESIDENT	TREASURER			

WILLIAM H. GOODWIN, JR.	DIRECTOR, PRESIDENT.	TREASURER		
800 E CANAL ST, STE 1900				
RICHMOND, VA 23219	0,10	0.	0.	0.
JAMES A. JONES	ASSISTANT TREASURER			
800 E CANAL ST, STE 1900				
RICHMOND, VA 23219	0.10	0.	0.	0.
			.	
		<u> </u>		
2 Compensation of five highest-paid employees (other than those	included on line 1). If none,	enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
				-
· · · · · · · · · · · · · · · · · · ·			,	
		-	-	
Total number of other employees paid over \$50,000				0

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Part VIII Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<del></del>		
	<u> </u>	
Total number of others receiving over \$50,000 for professional services	<u>.</u>	<u> </u>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statist number of organizations and other beneficiaries served, conferences convened, research papers prod	ical information such as the	Expenses
	uceu, etc.	
1 <u>N/A</u>		
2		
2	<del></del>	
3	-	-
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2.	Amount
1N/A		
2		
All obligations are related associated for the state of t		
All other program-related investments. See instructions.		
3		

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Total. Add lines 1 through 3

For	m	990	PF	120.	191

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P	art X Minimum Investment Return (All domestic foundations must	complete this part. Foreign fou	ındatıo	ns, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, et	c purposes:		
a	Average monthly fair market value of securities	, , , , , , , , , , , , , , , , , , , ,	1a	0.
b			1b	67,914,
C	Fair market value of all other assets		1c	0,,311,
d	Total (add lines 1a, b, and c)		1d	67,914,
е	Reduction claimed for blockage or other factors reported on lines 1a and			3.,522,
	-1c (attach detailed explanation) _ 1e	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	<u>-</u>
3	Subtract line 2 from line 1d		3	67,914.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see	instructions)	4	1.019.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Pai	t V, line 4	5	66,895,
6	Minimum investment return Enter 5% of line 5		6	3 345.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)	(5) private operating foundations a	nd certa	
	foreign organizations, check here  and do not complete this part.)			
1	Minimum investment return from Part X, line 6		1	3,345,
2a	Tax on investment income for 2019 from Part VI, line 5		<u> </u>	•
b	Income tax for 2019. (This does not include the tax from Part VI.)			
C	Add lines 2a and 2b		2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	3,345.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4		5	3,345,
6	Deduction from distributable amount (see instructions)		6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	line 1	7	3 345
P	art XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpose	s:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	12,275,195.
b	Program-related investments - total from Part IX-B		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, e	tc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:			
а	Suitability test (prior IRS approval required)		3a	
b	Cash distribution test (attach the required schedule)		3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part V, line 8; an	art XIII, line 4	4	12,275,195.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	nt		•
	income. Enter 1% of Part I, line 27b		5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	12,275,195.
	Note: The amount on line 6 will be used in Part V. column (b), in subsequent years when	calculating whether the foundation	qualifies	s for the section

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4940(e) reduction of tax in those years.

### Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	( <b>d)</b> 2019
1 Distributable amount for 2019 from Part XI, line 7				2 245
2 Undistributed income, if any, as of the end of 2019				3,345,
a Enter amount for 2018 only			0.	
h Total for prior years:			<del></del>	,
		0.		
3 Excess distributions carryover, if any, to 2019:		· <del></del>		)
a From 2014				
<b>b</b> From 2015				ļ
<b>c</b> From 2016				
<b>d</b> From 2017				ļ
e From 2018				
f Total of lines 3a through e	0.		•	1
4 Qualifying distributions for 2019 from				
Part XII, line 4: ► \$ 12,275,195.				İ
a Applied to 2018, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior		•		!
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				<u> </u>
(Election required - see instructions) **	12,271,850.			
d Applied to 2019 distributable amount				3,345,
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:		-		
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	12,271,850,			
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		0.1		1
d Subtract line 6c from line 6b. Taxable				1
amount - see instructions		0 .		}
e Undistributed income for 2018. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				0.
7 Amounts treated as distributions out of	-		<del>- · · · · · · · · · · · · · · · · · · ·</del>	1
corpus to satisfy requirements imposed by				i
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	12,271,850.			
8 Excess distributions carryover from 2014				
not applied on line 5 or line 7	0.			1
9 Excess distributions carryover to 2020.				
Subtract lines 7 and 8 from line 6a	0.			) 
10 Analysis of line 9:			·	
a Excess from 2015				j
b Excess from 2016			_	,
c Excess from 2017			•	ı
d Excess from 2018				
e Excess from 2019				5 000 PE (0040)

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Part XIV Private Operating			II-A, question 9)	N/A	
1 a If the foundation has received a ruling	or determination letter tha	t it is a private operating			
foundation, and the ruling is effective t	or 2019, enter the date of	the ruling	<b>▶</b>	··	
b Check box to indicate whether the four	nd <u>ation is a private operatii</u>	ng foundation described	ın section	4942(J)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
investment return from Part X for					
each year listed					
- <b>b</b> 85% of line 2a				+/	-
				<del></del>	
c Qualifying distributions from Part XII,					
line 4, for each year listed			<del>                                     </del>		
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	ormation (Comple	te this part only	if the foundation	had \$5 000 or me	ore in assets
at any time during			ii tiic ioaliaatioi	111aa wo,000 of 1110	ore in assets
·		4011011011			
1 Information Regarding Foundati	-				
a List any managers of the foundation w year (but only if they have contributed			tributions received by the	e foundation before the clo	se of any tax
year (but only it they have contributed	more man \$5,000). (See S	ection 507(u)(2).)			
NONE					
<b>b</b> List any managers of the foundation w			(or an equally large port	ion of the ownership of a p	artnership or
other entity) of which the foundation h	as a 10% or greater interes	st.			
NONE					
2 Information Regarding Contribu	tion, Grant, Gift, Loan,	Scholarship, etc., P	rograms:		
Check here 🕨 🗓 if the foundation				not accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc					
a The name, address, and telephone nur	nber or email address of th	e person to whom apple	cations should be address	ssed.	
a monamo, addresso, and totophone nur	S. Simun addi 000 Of ti	.c poroun to miloin appli	samono sinodia de dadi 60		
h. The force or which and replaced a bould				<del></del>	
<b>b</b> The form in which applications should	ne zaniminea ana intorma	ion and materials they s	anoula include;		
			<del>_</del>		
c Any submission deadlines:					
d Any restrictions or limitations on award	ds, such as by geographica	ıl areas, çharıtable fields	, kınds of ınstitutions, or	other factors:	

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or contribution show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year AMERICAN DIABETES ASSOCIATION ÞС GENERAL SUPPORT 4335 COX ROAD GLEN ALLEN, VA 23060 2,500. AMERICAN HEART ASSOCIATION PC GENERAL SUPPORT 4217 PARK PLACE COURT GLEN ALLEN, VA 23060 5,000. ART ON WHEELS ÞC GENERAL SUPPORT 3108 WEST LEIGH STREET, #7 RICHMOND, VA 23230 1 000. ASK ÞС GENERAL SUPPORT 5211 WEST BROAD STREET RICHMOND, VA 23230 2,500. BETTY FORD ALPINE GARDENS PС GENERAL SUPPORT 183 GORE CREEK VAIL CO 81657 1 000. Total SEE CONTINUATION SHEET(S) **▶** 3a 12 260 446 b Approved for future payment NONE

**≥** 3b

Total

Part XV Supplementary Information Grants and Contributions Paid During the		<del></del>		
Recipient	If recipient is an individual,	<del> </del>	T	
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
BOLLING HAXALL HOUSE FOUNDATION		PC	GENERAL SUPPORT	
211 EAST FRANKLIN STREET				
RICHMOND, VA-23219				1,000
BSA TROOP 444		PC	GENERAL SUPPORT	
4200 CARY STREET RD RICHMOND VA 23221				1 000
AZCIMOND, VA 23221				1,000
CARITAS		PC	GENERAL SUPPORT	
P.O. BOX 25790				
RICHMOND, VA 23260				400,000
CHILDREN'S MUSEUM OF RICHMOND		PC	GENERAL SUPPORT	
2626 WEST BROAD STREET RICHMOND VA 23220				1
(ICHMOND, VA 23220				1,000
CHILDSAVERS		PC	GENERAL SUPPORT	
200 N. 22ND STREET				
RICHMOND, VA 23223		<del> </del>		3,000
CHRISTOPHER NEWPORT UNIVERSITY  1 AVENUE OF THE ARTS		₽C	GENERAL SUPPORT	
NEWPORT NEWS VA 23606-3072				50,000
COLLEGIATE SCHOOL		₽C	GENERAL SUPPORT	
NORTH MOORELAND ROAD				
RICHMOND, VA 23229				50,000
COMMUNITIES IN SCHOOLS OF RICHMOND		PC	GENERAL SUPPORT	
2922 WEST MARSHALL ST., STE 2			BENEFICIE BOTTORT	
RICHMOND, VA 23230				21,000
CRISTO REY RICHMOND HIGH SCHOOL		PC	GENERAL SUPPORT	
7800 CAROUSEL LANE				
RICHMOND, VA 23294				33,000
CROSS OVER HEALTH CARE MINISTRY		PC	GENERAL SUPPORT	
3600 QUIOCCASIN ROAD, STE 101			SEMERAL SUFFORT	
RICHMOND, VA 23229				1,500,
Total from continuation sheets				12 248 446

3 Grants and Contributions Paid During the Yea		-		
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
DARDEN SCHOOL FOUNDATION P. O. BOX 7726 CHARLOTTESVILLE - VA-22906	or substantial contributor	recipient	GENERAL SUPPORT	770 .0
ELK HILL FARM P. O. BOX 99 GOOCHLAND, VA 23063		PC	GENERAL SUPPORT	30,0
FELLOWSHIP OF CHRISTIAN ATHLETES 308 CROWELL LANE LYNCHBURG, VA 24502		PC	GENERAL SUPPORT	1,0
FIRST TEE OF GREATER RICHMOND 9211 FOREST HILL ROAD, STE 104 RICHMOND, VA 23235		PC	GENERAL SUPPORT	146,0
FOCUSED ULTRASOUND FOUNDATION 1230 CEDARS COURT, SUITE 206 CHARLOTTESVILLE, VA 22903		PC	GENERAL SUPPORT	75,0
FRANKLIN-SOUTHAMPTON AREA UNITED WAY P. O. BOX 366 FRANKLIN, VA 23851		PC	GENERAL SUPPORT	1,0
GARDEN CLUB OF VIRGINIA L2 EAST FRANKLIN STREET RICHMOND, VA 23219		PC	GENERAL SUPPORT	1,00
HABITAT FOR HUMANITY, GREATER TETON AREA P. O. BOX 4194 UACKSON, WY 83001		₽C	GENERAL SUPPORT	47,00
HIGH STREET UNITED METHODIST CHURCH P. O. BOX 218 FRANKLIN, VA 23851		₽C	GENERAL SUPPORT	20,00
HOLLINGS CANCER CENTER 36 JONATHAN LUCAS STREET, MSC 955 CHARLESTON, SC 29425		₽C	GENERAL SUPPORT	15,00

Part XV Supplementary Information				,
3 Grants and Contributions Paid During the Y		· · · · · · · · · · · · · · · · · · ·		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	_
HUNTERS FOR THE HUNGRY		PC	GENERAL SUPPORT	
PO BOX 304				
BIG ISLAND, VA 24526				1,000
JEFFERSON SCHOLARS FOUNDATION 112 CLARKE COURT		PC	GENERAL SUPPORT	
CHARLOTTESVILLE VA 22903				52,000
•				
JR. BRD SHELTERING ARMS PHYS. REHAB HOSP.		PC	GENERAL SUPPORT	
P. O. BOX 8762		,		}
RICHMOND, VA 23226		•		1,000
JSR COMM. COLLEGE ED. FOUNDATION		PC	GENERAL SUPPORT	
P. O. BOX 26924 RICHMOND, VA 23261-6924				10.000
RICHMOND, VA 23201~0924			•	10,000
JUNIOR ACHIEVEMENT OF CENRAL VIRGINIA 7217 WEST BROAD STREET		PC	GENERAL SUPPORT	
RICHMOND, VA 23294				67,500
JUNIOR LEAGUE OF RICHMOND		₽C	GENERAL SUPPORT	
205 WEST FRANKLIN STREET				
RICHMOND, VA 23220				1,000
KENAN-FLAGLER BUSINESS SCHOOL		₽C	GENERAL SUPPORT	İ
FOUNDATION THE KENAN CENTER, CB 3440				
CHAPEL HILL, NC 27599-3440				260,000
KIAWAH ISLAND CONSERVANCY		₽C	GENERAL SUPPORT	
80 KESTREL COURT				
KIAWAH ISLAND, SC 29455				1,000
LEWIS GINTER BOTANICAL GARDEN		PC	GENERAL SUPPORT	
1800 LAKESIDE AVE HENRICO, VA 23228				1,502,000
MARY BALDWIN COLLEGE		PC	GENERAL SUPPORT	
318 PROSPECT ST			,	
STAUNTON, VA 24401 Total from continuation sheets			<u> </u>	10,000

н	FOUNDATIONS	46-5103846

3 Grants and Contributions Paid During the Ye	ar (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
AYMONT FOUNDATION		PC	GENERAL SUPPORT	
700 HAMPTON STREET				
ICHMOND, VA-23220				2,00
CV FOUNDATION		PC	GENERAL SUPPORT	
228 E BROAD ST,				
ICHMOND, VA 23298				60,00
ETRO RICHMOND SPORTS BACKERS		PC	GENERAL SUPPORT	
00 AVENUE OF CHAMPIONS, STE 300				
ICHMOND VA 23230				20,00
ILLER SCHOOL OF ALBEMARLE		PC	GENERAL SUPPORT	
000 SAMUEL MILLER LOOP				
HARLOTTESVILLE, VA 22903				2,50
ATIONAL MS SOCIETY		PC	GENERAL SUPPORT	
200 INNSLAKE DRIVE, STE 301			GENERAL SOFFORT	
LEN ALLEN, VA 23060		-		2,50
EXTUP		PC	GENERAL SUPPORT	
501 BOULDERS VIEW DRIVE, SUITE 110				
ICHMOND VA 23225				150,00
PERATION HEALING FORCES, INC.		₽C	GENERAL SUPPORT	
80 PARK PLACE BLVD, SUITE 175 LEARWATER FL 33759				50,00
AUL D. CAMP COMMUNITY COLLEGE		PC	GENERAL SUPPORT	
00 N COLLEGE DR				
RANKLIN, VA 23851				1,00
EABODY SCHOOL		PC	GENERAL SUPPORT	
232 STONEY RIDGE ROAD				
HARLOTTESVILLE, VA 22902		-		2,50
ICHMOND BALLET		PC	GENERAL SUPPORT	
07 EAST CANAL STREET				
ICHMOND VA 23219		1		2,50

COMMONWEALTH FOUNDATIONS 46-5103846 Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient RICHMOND SPCA PC GENERAL SUPPORT 2519 HERMITAGE RD 2,000. RICHMOND \_-VA - 23220 ----RICHMOND SYMPHONY PC GENERAL SUPPORT 612 EAST GRACE STREET, STE 401 RICHMOND, VA 23219 <u>2,500.</u> ROBERT E. LEE MEMORIAL ASSOCIATION PC GENERAL SUPPORT 483 GREAT HOUSE ROAD STRATFORD, VA 22558 7,300. SCIENCE MUSEUM OF VIRGINIA FOUNDATION PC GENERAL SUPPORT P. O. BOX 11624 RICHMOND VA 23230-0624 2,500. SPECIAL OLYMPICS VIRGINIA ÞС GENERAL SUPPORT 3212 SKIPWITH ROAD, SUITE 100 RICHMOND, VA 23294 5 000. SPORTABLE PC GENERAL SUPPORT 1365 OVERBROOK RD., ROOM 2 RICHMOND VA 23220 1,500. ST. ANDREW'S SCHOOL PС GENERAL SUPPORT 227 S. CHERRY STREET RICHMOND VA 23220 2 500. ST. STEPHEN'S EPISCOPAL CHURCH ÞС GENERAL SUPPORT 6000 GROVE AVENUE RICHMOND VA 23226 119,950. THE FAISON CENTER ÞС GENERAL SUPPORT 1701 BYRD AVENUE 2,000,000. RICHMOND VA 23230 THE NATURE CONSERVANCY OF VIRGINIA ÞC GENERAL SUPPORT 490 WESTFIELD ROAD

10,000.

CHARLOTTESVILLE VA 22901

Total from continuation sheets

3 Grants and Contributions Paid During the Ye	ar (Continuation)	- <sub>i</sub> -		
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
THE VIRGINIA HOME L101 HAMPTON STREET RICHMOND.—VA-23220———	or substantial contributor	recipient PC	GENERAL SUPPORT	59.20
PUCKAHOE VOLUNTEER RESCUE SQUAD 1101 HORSEPEN RD RICHMOND, VA 23229		₽C	GENERAL SUPPORT	50
J-TURN, INC. 2101 MAYWILL STREET RICHMOND, VA 23230		PC	GENERAL SUPPORT	1,00
UNITED WAY P. O. BOX 91706 RICHMOND, VA 23291-1706		₽C	GENERAL SUPPORT	25,00
UNITED WAY OF COASTAL GEORGIA P. O. BOX 877 BRUNSWICK, GA 31521		₽C	GENERAL SUPPORT	1,00
UNIVERSITY OF VIRGINIA P. O. BOX 400807 CHARLOTTESVILLE, VA 22904-4220		₽C •	GENERAL SUPPORT	20,00
UP RVA 4609 WYTHE AVENUE RICHMOND, VA 23226		₽C	GENERAL SUPPORT	280,00
JVA CENTER FOR POLITICS BOX 400806 CHARLOTTESVILLE, VA 22904		PC	GENERAL SUPPORT	2,50
IVA FUND PO BOX 400314 CHARLOTTESVILLE, VA 22904		₽C	GENERAL SUPPORT	2,50
JVA HEALTH FOUNDATION P. O. BOX 800773 CHARLOTTESVILLE VA 22908		PC	GENERAL SUPPORT	. 225,00

Part XV Supplementary Information				Т
3 Grants and Contributions Paid During the Y	<del></del>	<del></del>	<del>_</del>	
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
VA FOUNDATION FOR INDEPENDENT		PC	GENERAL SUPPORT	
COLLEGES				
8010 RIDGE ROAD, STE B				
RICHMOND - VA 23229				1,000
VIRGINIA ATHLETICS FOUNDATION		PC	GENERAL SUPPORT	
P. O. BOX 400883				90.000
CHARLOTTESVILLE, VA 22904-4833				80,000
W.D.C				
VIRGINIA BEACH SPCA 3040 HOLLAND ROAD		PC	GENERAL SUPPORT	
VIRGINIA BEACH, VA 23453				2,000
2101, 11 2010				2,000,
VIRGINIA BUSINESS HIGHER ED. COUNCIL		PC	GENERAL SUPPORT	
1108 E MAIN ST # 1100			GENERAL SOFFORT	
RICHMOND VA 23219				2,500
VIRGINIA CENTER FOR INCLUSIVE		PC	GENERAL SUPPORT	
COMMUNITIES 5511 STAPLES MILL RD., STE 202				
RICHMOND, VA 23228				1,500,
· VIRGINIA HISTORICAL SOCIETY		no.	CENEDAL GUDDODE	
P. O. BOX 7311		PC	GENERAL SUPPORT	
RICHMOND VA 23221				69,167,
VIRGINIA MUSEUM OF FINE ARTS		PC	GENERAL SUPPORT	
200 NORTH BOULEVARD				
RICHMOND, VA 23220-4007				3,192,
		,		
VIRGINIA TECH FOUNDATION		PC	GENERAL SUPPORT	
902 PRICES FORK RD SUITE 4500				
BLACKSBURG, VA 24060				2,510,000,
VIRGINIA WAR MEMORIAL EDUCATION		PC	GENERAL SUPPORT	
FNDTN.				
621 SOUTH BELVIDERE STREET				
RICHMOND, VA 23220				5,000.
WASHINGTON & LEE UNIVERSITY		PC	GENERAL SUPPORT	
204 w WASHINGTON ST. LEXINGTON, VA 24450				384,637,
Total from continuation sheets				

Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient WESTMINISTER CANTERBURY FOUNDATION GENERAL SUPPORT ÞC 1600 WESTBROOK AVE RICHMOND \_\_VA 23227\_ 5,000. WORLD GOLF FOUNDATION - THE FIRST TEE ÞC GENERAL SUPPORT 1 WORLD GOLF PLACE ST, AUGUSTINE, FL 32092 100,000. WORLD PEDIATRIC PROJECT GENERAL SUPPORT ÞC 7201 GLEN FOREST DRIVE, STE 304 RICHMOND, VA 23226 10,000. VCU SCHOOL OF ENGINEERING PC GENERAL SUPPORT P. O. BOX 843068 RICHMOND VA 23284 1,450,000. ANNA JULIA COOPER EPISCOPAL SCHOOL PC GENERAL SUPPORT 2124 N. 29TH STREET RICHMOND, VA 23223 575,000. FRIENDS OF THE MUNI, INC. ÞС GENERAL SUPPORT 2110 MAYBANK HIGHWAY CHARLESTON SC 29412 5,000. SHELTERING ARMS FOUNDATION ÞC GENERAL SUPPORT 140 EAST SHORE DRIVE, #200 GLEN ALLEN, VA 23059 360,000. AMANI MEDICAL FOUNDATION, INC. PC GENERAL SUPPORT **4012 VERDE MEADOWS** WILLIAMSBURG VA 23188 5,000. THE COMMUNITY FOUNDATION FOR A PC GENERAL SUPPORT GREATER RICHMOND 3409 W MOORE ST RICHMOND, VA 23230 1,000. HENRICO EDUCATION FOUNDATION ÞС GENERAL SUPPORT P. O. BOX 31413 HENRICO VA 23294 1,000. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient HISTORIC POLE GREEN CHURCH FOUNDATION PC GENERAL SUPPORT P. O. BOX 2111 MECHANICSVILLE - VA-23116----1,000. GO VIRGINIA FOUNDATION PC GENERAL SUPPORT 1108 EAST MAIN ST, STE 1100 RICHMOND, VA 23219 25,000. PEBBLE BEACH COMPANY FOUNDATION ЪС GENERAL SUPPORT P. O. BOX 222860 CARMEL CA 93922 15,000, POSITIVE VIBE FOUNDATION ÞС GENERAL SUPPORT 2825 HATHAWAY ROAD RICHMOND VA 23225 500. Total from continuation sheets

### Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		ided by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code		COUB		
a			-		· <u>-</u>
b					
c					
e					_
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other			_		
than inventory					
9 Net income or (loss) from special events			_		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a			<u> </u>		
			-		
<u> </u>			-		
			<u> </u>		
d			!		
e				_	
e		0.		0.	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e)		0.		<b>-</b>	0.
e		0.		<b>-</b>	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e)	o the Acce		emp	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 calculations.)  Part XVI-B Relationship of Activities to		omplishment of Ex		13 _ t Purposes	0,
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 calculations.)  Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incom	ne is reported	omplishment of Ex		13 _ t Purposes	0,
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 calculations.)  Part XVI-B Relationship of Activities to	ne is reported	omplishment of Ex		13 _ t Purposes	0,
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 calculations.)  Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incom	ne is reported	omplishment of Ex		13 _ t Purposes	0,
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 calculations.)  Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incom	ne is reported	omplishment of Ex		13 _ t Purposes	0,
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 calculations.)  Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incom	ne is reported	omplishment of Ex		13 _ t Purposes	0,
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 calculations.)  Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incom	ne is reported	omplishment of Ex		13 _ t Purposes	0,
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 calculations.)  Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incom	ne is reported	omplishment of Ex		13 _ t Purposes	0,
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 calculations.)  Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incom	ne is reported	omplishment of Ex		13 _ t Purposes	0,
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 calculations.)  Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incom	ne is reported	omplishment of Ex		13 _ t Purposes	0,
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 calculations.)  Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incom	ne is reported	omplishment of Ex		13 _ t Purposes	0,
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 calculations.)  Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incom	ne is reported	omplishment of Ex		13 _ t Purposes	0,
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 calculations.)  Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incom	ne is reported	omplishment of Ex		13 _ t Purposes	0,
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 calculations.)  Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incom	ne is reported	omplishment of Ex		13 _ t Purposes	0,
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 calculations.)  Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incom	ne is reported	omplishment of Ex		13 _ t Purposes	0,
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 calculations.)  Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incom	ne is reported	omplishment of Ex		13 _ t Purposes	0,
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 calculations.)  Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incom	ne is reported	omplishment of Ex		13 _ t Purposes	0,
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 calculations.)  Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incom	ne is reported	omplishment of Ex		13 _ t Purposes	0,
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 calculations.)  Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incom	ne is reported	omplishment of Ex		13 _ t Purposes	0,
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 calculations.)  Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incom	ne is reported	omplishment of Ex		13 _ t Purposes	0,
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 calculations.)  Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incom	ne is reported	omplishment of Ex		13 _ t Purposes	0,

Part XVII	Information Regarding Exempt Organizations	Fransfers to	and Transactions a	and Relations	hips With Noncha	ritable		
1 Did the oi	rganization directly or indirectly engage	n any of the follow	no with any other organizat	ion described in sec	tion 501(c)	Ţ-Ţ	Yes	No
	an section 501(c)(3) organizations) or in	=	-					
	from the reporting foundation to a nonc							1
(1) Cash						1a(1)		х
(2) Othe						1a(2)		х
— <b>b</b> -Other trai	nsactions							
(1) Sales	s of assets to a noncharitable exempt or	janization			<del></del> -	- 1b(1)		x
(2) Purc	hases of assets from a noncharitable ex	empt organization				1b(2)		х
(3) Rent	al of facilities, equipment, or other asset	3				1b(3)		х
(4) Reim	nbursement arrangements					1b(4)		Х
(5) Loan	is or loan guarantees					1b(5)		х
( <b>6</b> ) Perfo	ormance of services or membership or f	ındraısıng solicitatı	ons			1b(6)		х
c Sharing o	of facilities, equipment, mailing lists, othe	r assets, or paid er	nployees			1c		Х
	wer to any of the above is "Yes," completes grown by the reporting foundation. If the	~	• •	•	• •		ts,	
	d) the value of the goods, other assets, o							
(a)Line no	(b) Amount involved (c) Na	<del></del>	le exempt organization	(0) Description	n of transfers, transactions, and	sharing arra	ngeme	nts
		N/A						
<del></del>								
<del></del>				<del>-   · · · · · · · · · · · · · · · · · · </del>				
<del></del>	<del></del>							
		<del></del>						
	<del>_</del>							
				<del>-  </del>				
				<del> </del>				
		<del></del>		<del>-  </del>	<del></del>	_		
			···					
					<del></del>			
			<del> </del>					
ın section	ndation directly or indirectly affiliated will 501(c) (other than section 501(c)(3)) o	•	e or more tax-exempt organ	izations described		Yes	x	] No
b if Yes," c	omplete the following schedule.  (a) Name of organization	<del></del>	(b) Type of organization	1	(c) Description of relations	hin		
			(a) Type of Organization	<del> </del>	(e) Description of relations:	h		—
	N/A			<del> </del>				
				<del> </del>				
				<del>                                     </del>				—
Sign and be	penalties of perjury, I declare that I have exami elief, it is true correct, and complete Declaration		taxpayer) is based on all inform	mation of which prepare	r has any knowledge retu	the IHS die rn with the wn below?	prepare	er
Here	C/2		11/11/2020		T TREASURER	Yes		No
Sign	nature of officer or trustee		<u> </u>	Title	Chook Day			
	Print/Type preparer's name	Preparer's	signature	Date	Check if PTIN			
Doid					self- employed			
Paid					1			
Preparer Use Only	Firm's name				Firm's EIN			
OSE OINS	Firm's address >				<del> </del>			
	I iiii s audiess				Phone no			
		<del></del>		<del></del>	Phone no.	rm <b>990</b> -	·PF /	20191

## Schedule B

(Form 990, 990-E**Z**, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

### **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.
➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

2019

CO1	MMONWEALTH FOUNDATIONS	46-5103846
Organization type (check o	one)·	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	ation
	527 political organization	
Form 990-PF	x 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	n
	501(c)(3) taxable private foundation	
General Rule	)(7), (8), or (10) organization can check boxes for both the General Rule and a n filing Form 990, 990-EZ, or 990-PF that received, during the year, contribution	
property) from any	one contributor. Complete Parts I and II See instructions for determining a c	contributor's total contributions
Special Rules		
sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/39 and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, Iir or, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of line 1 Complete Parts I and II	ne 13, 16a, or 16b, and that received from
year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rece utions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, literal lity to children or animals Complete Parts I, II, and III	
year, contributions is checked, enter h purpose Don't cor	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that recess exclusively for religious, charitable, etc., purposes, but no such contributions there the total contributions that were received during the year for an exclusive implete any of the parts unless the <b>General Rule</b> applies to this organization be, etc., contributions totaling \$5,000 or more during the year	s totaled more than \$1,000 If this box ely religious, charitable, etc.,
out it <b>must</b> answer "No" on	nat isn't covered by the General Rule and/or the Special Rules doesn't file Sch i Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	

 $\ \ \, \text{LHA} \ \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$ 

Name of o	rganization	En	nployer identification number
COMMONWE	CALTH FOUNDATIONS		46-5103846
Part I	Contributors (see instructions) Use duplicate copies of Part I if additi	onal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> </u>	COMMONWEALTH-FOUNDATION-I-(EIN: 62-1668516)  800 E CANAL ST, STE 1900  RICHMOND, VA 23219	\$ 3,110,00	Person X Payroll O. (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	COMMONWEALTH FOUNDATION III (EIN: 62-1668518)  800 E CANAL ST, STE 1900  RICHMOND, VA 23219	\$3,110,00	Person x Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	COMMONWEALTH FOUNDATION IV (EIN: 62-1668519)  800 E CANAL ST, STE 1900  RICHMOND, VA 23219	_ \$3,110,000	Person x Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	COMMONWEALTH FOUNDATION V (EIN: 62-1668521)  800 E CANAL ST, STE 1900  RICHMOND, VA 23219	_ \$3,110,000	Person x Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

	ALTH FOUNDATIONS	-	5103846
Part II	Noncash Property (see instructions) Use duplicate copies of Part II	ıf addıtıonal space ıs needed	,
(a) No. from - Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		- - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		- - - - - - - -	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		-	

Name of org	ganization		Employer identification number
Part III	from any one contributor. Complete columns (a) t	through <b>(e) and</b> the following line en aritable, etc., contributions of <b>\$1,000 or</b>	section 501(c)(7), (8), or (10) that total more than \$1,000 for the year ntry For organizations r less for the year (Enter this info once)
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I			
	Transferee's name, address, and	(e) Transfer of gif	Relationship of transferor to transferee
	Transferee 3 hame, address, and		Treationship of datisteror to datisteree
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	ft
	Transferee's name, address, and	d ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	1	(e) Transfer of gif	ft
	Transferee's name, address, and	3 ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_	Transferee's name, address, and	(e) Transfer of gif	Relationship of transferor to transferee

Commonwealth Foundations

EIN: 46-5103846

2019 Form 990-PF, Part XIII-Undistributed Income, Line 4(c) & Line 7

Out of Corpus (OOC) Election Statement

Pursuant to Internal Revenue Code §4942(g)(3) and Treasury Regulations §53:4942(a)-3(d)(2), the Foundation hereby elects to treat \$12,271,850 of current year (2019) qualifying distributions (in excess of immediately preceding year's undistributed income) as being made out of corpus (OOC).

Cash grant payments received by the Foundation totaled \$10,260,000 in 2018 and \$12,440,000 in 2019 from the following foundations:

			Distributions	Distributions
		Grants Rec'd	made OOC	made OOC
	<u>EIN</u>	during 2018	<u>in 2018</u>	<u>in 2019</u>
Commonwealth Fdn I	62-1668516	2,565,000	2,547,873	17,127
Commonwealth Fdn III	62-1668518	2,565,000	2,547,873	17,127
Commonwealth Fdn IV	62-1668519	2,565,000	2,547,873	17,127
Commonwealth Fdn V	62-1668521	2,565,000	2,547,873	17,127
Total		10,260,000	10,191,491	68,509
			Distributions	Distributions
		Grants Rec'd	Distributions made OOC	Distributions made OOC
	<u> </u>	Grants Rec'd during 2019		
Commonwealth Fdn I	<u>EIN</u> 62-1668516	-	made OOC	made OOC
Commonwealth Fdn I Commonwealth Fdn III	<del></del>	during 2019	made OOC <u>in 2019</u>	made OOC <u>in 2020</u>
	62-1668516	during 2019 3,110,000	made OOC <u>in 2019</u> 3,050,835	made OOC <u>in 2020</u> 59,165
Commonwealth Fdn III	62-1668516 62-1668518	during 2019 3,110,000 3,110,000	made OOC <u>in 2019</u> 3,050,835 3,050,835	made OOC <u>in 2020</u> 59,165 59,165

Declaration by: C

James A. Jones, Assistant Treasurer

FORM 990-PF	LEGAL	FEES	S	TATEMENT
DESCRIPTION		(B) NET INVEST- MENT INCOME	ADJUSTED	(D) CHARITABLI PURPOSES
LEGAL FEES	936,	0.		936
TO FM 990-PF, PG 1, LN 16A =	936.	0.		936
FORM 990-PF	ACCOUNTI	NG FEES	S'	TATEMENT 2
DESCRIPTION		(B) NET INVEST- MENT INCOME		
ACCOUNTING FEES	13,385.	0.		13,385
TO FORM 990-PF, PG 1, LN 16B	13,385.	0.		13,385
10 FORM 990-FF, FG 1, IN 10B	,			
<del></del>	OTHER E		S'	FATEMENT 3
FORM 990-PF  DESCRIPTION	,	XPENSES  (B)  NET INVEST-	(C) ADJUSTED	PATEMENT (
FORM 990-PF	OTHER E	XPENSES  (B)  NET INVEST-	(C) ADJUSTED	(D) CHARITABLE

#### EXPLANATION

VA CODE 57-49 REQUIRES NONPROFIT REGISTRATION/ANNUAL FILING WITH THE ATTORNEY GENERAL ONLY IF THE NONPROFIT WILL SOLICIT CONTRIBUTIONS IN VIRGINIA. COMMONWEALTH FOUNDATIONS DOES NOT SOLICIT CONTRIBUTIONS BY ANY MEANS IN ANY STATE, AND IS NOT REQUIRED TO FILE ITS FORM 990-PF WITH THE VA ATTORNEY GENERAL'S OFFICE.

SEE ATTACHED ELECTION STATEMENT

FORM 990-PF	ELECTION UNDER REGULATIONS SECTION	STATEMENT	Ę
	53.4942(A)-3(D)(2) TO TREAT		
	EXCESS QUALIFYING DISTRIBUTIONS		
	AS DISTRIBUTIONS OUT OF CORPUS		

#### GENERAL EXPLANATION

STATEMENT

#### FORM/LINE IDENTIFIER AND DESCRIPTION/RETURN REFERENCE

FORM 990-PF, PART XIII, LINE 4(C) & LINE 7 - OUT OF CORPUS ELECTION STMT

#### EXPLANATION:

#### COMMONWEALTH FOUNDATIONS

EIN: 46-5103846

2019 FORM 990-PF, PART XIII-UNDISTRIBUTED INCOME, LINE 4(C) & LINE 7 OUT OF CORPUS (OOC) ELECTION STATEMENT

PURSUANT TO INTERNAL REVENUE CODE 4942(G)(3) AND TREASURY REGULATIONS 53.4942(A)-3(D)(2), THE FOUNDATION HEREBY ELECTS TO TREAT \$12,271,850 OF CURRENT YEAR (2019) QUALIFYING DISTRIBUTIONS (IN EXCESS OF IMMEDIATELY PRECEDING YEAR'S UNDISTRIBUTED INCOME) AS BEING MADE OUT OF CORPUS (OOC).

CASH GRANT PAYMENTS RECEIVED BY THE FOUNDATION TOTALED \$10,260,000 IN 2018 AND \$12,440,000 IN 2019 FROM THE FOLLOWING FOUNDATIONS:

COMMONWEALTH COMMONWEALTH COMMONWEALTH COMMONWEALTH TOTAL	FDN	III IV	EIN 62-1668516 62-1668518 62-1668519 62-1668521	GRANTS REC'D DURING 2018 2,565,000 2,565,000 2,565,000 2,565,000 10,260,000	DISTRIB. MADE OOC IN 2018 2,547,873 2,547,873 2,547,873 2,547,873 10,191,491	DISTRIB. MADE OOC IN 2019 17,127 17,127 17,127 17,127 68,509
COMMONWEALTH COMMONWEALTH COMMONWEALTH COMMONWEALTH TOTAL	FDN FDN	III IV	EIN 62-1668516 62-1668518 62-1668519 62-1668521	GRANTS REC'D DURING 2019 3,110,000 3,110,000 3,110,000 3,110,000 12,440,000	DISTRIB. MADE OOC IN 2019 3,050,835 3,050,835 3,050,835 3,050,835 12,203,341	DISTRIB. MADE OOC IN 2020 59,165 59,165 59,165 59,165 236,659