

Form 990-PF

Department of the Treasury
Internal Revenue Service

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

2019

Open to Public
Inspection

For calendar year 2019, or tax year beginning 01-01-2019, and ending 12-31-2019

Name of foundation WILLIAMSBURG CHRISTADELPHIAN FOUNDATION		A Employer identification number 51-0211853	
Number and street (or P O box number if mail is not delivered to street address) PO BOX 264		B Telephone number (see instructions) (757) 679-4433	
City or town, state or province, country, and ZIP or foreign postal code VILLAS, NJ 08251		C If exemption application is pending, check here ► <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here ► <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ► <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ► <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ► \$ 1,280,612		J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis)</i>	

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		(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 (attach schedule)	947,878			
2	Check ► <input type="checkbox"/> if the foundation is not required to attach Sch B				
3	Interest on savings and temporary cash investments	371	371	371	
4	Dividends and interest from securities				
5a	Gross rents				
b	Net rental income or (loss)				
6a	Net gain or (loss) from sale of assets not on line 10				
b	Gross sales price for all assets on line 6a				
7	Capital gain net income (from Part IV, line 2)		0		
8	Net short-term capital gain			0	
9	Income modifications				
10a	Gross sales less returns and allowances	290			
b	Less Cost of goods sold				
c	Gross profit or (loss) (attach schedule)	290		290	
11	Other income (attach schedule)	16,638	0	0	
12	Total. Add lines 1 through 11	965,177	371	661	
13	Compensation of officers, directors, trustees, etc	0	0	0	0
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
16a	Legal fees (attach schedule)				
b	Accounting fees (attach schedule)	6,351	0	0	6,351
c	Other professional fees (attach schedule)				
17	Interest				
18	Taxes (attach schedule) (see instructions)	150	0	0	150
19	Depreciation (attach schedule) and depletion	2,930	0	0	
20	Occupancy				
21	Travel, conferences, and meetings	10,089	0	0	10,089
22	Printing and publications				
23	Other expenses (attach schedule)	156,142	0	0	156,142
24	Total operating and administrative expenses.				
	Add lines 13 through 23	175,662	0	0	172,732
25	Contributions, gifts, grants paid	958,501			958,501
26	Total expenses and disbursements. Add lines 24 and 25	1,134,163	0	0	1,131,233
27	Subtract line 26 from line 12				
a	Excess of revenue over expenses and disbursements	-168,986			
b	Net investment income (if negative, enter -0-)		371		
c	Adjusted net income (if negative, enter -0-)			661	

Assets	Part II Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash—non-interest-bearing	441,785	148,032	148,032
2	Savings and temporary cash investments	865,922	1,025,159	1,025,159
3	Accounts receivable ► _____			
	Less allowance for doubtful accounts ► _____			
4	Pledges receivable ► _____			
	Less allowance for doubtful accounts ► _____			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
7	Other notes and loans receivable (attach schedule) ► _____			
	Less allowance for doubtful accounts ► _____			
8	Inventories for sale or use			
9	Prepaid expenses and deferred charges			
10a	Investments—U S and state government obligations (attach schedule)			
b	Investments—corporate stock (attach schedule)			
c	Investments—corporate bonds (attach schedule)			
11	Investments—land, buildings, and equipment basis ► _____			
	Less accumulated depreciation (attach schedule) ► _____			
12	Investments—mortgage loans			
13	Investments—other (attach schedule)			
14	Land, buildings, and equipment basis ► 114,258			
	Less accumulated depreciation (attach schedule) ► 6,837			
15	Other assets (describe ► _____)	110,351	107,421	107,421
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	1,449,598	1,280,612	1,280,612
Liabilities				
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 (attach schedule)			
22	Other liabilities (describe ► _____)			
23	Total liabilities (add lines 17 through 22)	0	0	0
Net Assets or Fund Balances				
	Foundations that follow FASB ASC 958, check here ► <input type="checkbox"/> and complete lines 24, 25, 29 and 30.			
24	Net assets without donor restrictions			
25	Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ► <input checked="" type="checkbox"/> and complete lines 26 through 30.			
26	Capital stock, trust principal, or current funds	0	0	0
27	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	0
28	Retained earnings, accumulated income, endowment, or other funds	1,449,598	1,280,612	1,280,612
29	Total net assets or fund balances (see instructions)	1,449,598	1,280,612	1,280,612
30	Total liabilities and net assets/fund balances (see instructions)	1,449,598	1,280,612	1,280,612

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 29 (must agree with end-of-year figure reported on prior year's return)	1	1,449,598
2	Enter amount from Part I, line 27a	2	-168,986
3	Other increases not included in line 2 (itemize) ► _____	3	0
4	Add lines 1, 2, and 3	4	1,280,612
5	Decreases not included in line 2 (itemize) ► _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29	6	1,280,612

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
a				
b				
c				
d				
e				
2 Capital gain net income or (net capital loss)		If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8			3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

 Yes No

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2018	899,956	1,094,797	0.822030
2017	1,184,428	929,706	1.273981
2016	651,261	2,174,392	0.299514
2015	767,679	1,042,637	0.736286
2014	1,447,124	1,649,351	0.877390
2 Total of line 1, column (d)			4.009201
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years			0.801840
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5			1,069,141
5 Multiply line 4 by line 3			857,280
6 Enter 1% of net investment income (1% of Part I, line 27b)			4
7 Add lines 5 and 6			857,284
8 Enter qualifying distributions from Part XIII, line 4			1,131,233

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)	1	4		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b				
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	0		
3	Add lines 1 and 2.	3	4		
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	4		
6	Credits/Payments				
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	500		
b	Exempt foreign organizations—tax withheld at source	6b			
c	Tax paid with application for extension of time to file (Form 8868)	6c	0		
d	Backup withholding erroneously withheld	6d	0		
7	Total credits and payments Add lines 6a through 6d.	7	500		
8	Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	8	0		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	496		
11	Enter the amount of line 10 to be Credited to 2020 estimated tax ►	496	Refunded ►	11	0

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 participate or intervene in any political campaign?	1a	Yes	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition).			
<i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>				
c	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ► \$ _____ 0 (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			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3	Yes	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ►			
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) of each state as required by General Instruction G? <i>If "No," attach explanation</i>	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the taxable year beginning in 2019? See the instructions for Part XIV <i>If "Yes," complete Part XIV</i>	9	Yes	
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	Yes	

Part 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	No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions.	12	No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► WWW.WCFOUNDATION.ORG	13	Yes
14	The books are in care of ► <u>VIRGINIA BRIERLY</u>	Telephone no	► (757) 679-4433
Located at ► <u>PO BOX 264 VILLAS NJ</u>		ZIP+4 ► <u>08251</u>	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here. and enter the amount of tax-exempt interest received or accrued during the year.	15	<input type="checkbox"/>
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►	16	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Part VII-B 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.

		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days).	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions. Organizations relying on a current notice regarding disaster assistance check here.	1b	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?	1c	No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? If "Yes," list the years ► 20____, 20____, 20____, 20____	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions)	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2019)	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

		Yes	No
5a	During the year did the foundation pay or incur any amount to		
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/>	<input checked="" type="checkbox"/> No
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/>	<input checked="" type="checkbox"/> No
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions		
	Organizations relying on a current notice regarding disaster assistance check here. ►	<input type="checkbox"/>	
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	<input type="checkbox"/>	<input type="checkbox"/> Yes
	<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>		<input type="checkbox"/> No
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
	<i>If "Yes" to 6b, file Form 8870</i>		
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?	<input type="checkbox"/>	<input checked="" type="checkbox"/> No
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 during the year?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes

Part VIII **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

ANSWER

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions

(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) Expense account, other allowances
See Additional Data Table				

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

Total number of other employees paid over \$50,000. ►

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services. ► 0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 SUPPORT SERVICES FOR TEACHING PROGRAMS, FAITH BUILDING PROGRAMS, AND YOUTH PROGRAMS FOR CHRISTADELPHIAN CHURCHES IN NORTH AMERICA INCLUDING ONSITE SEMINARS, VIDEO PRESENTATIONS, AND YOUTH INTERNSHIP PROGRAMS APPROXIMATELY 6500 PEOPLE SERVED	76,037
2 REFUGEE ASSISTANCE AND HUMANITARIAN AID IN NORTH AMERICA, TURKEY, JAMAICA, AND KENYA FOR CHRISTADELPHIAN MEMBERS APPROXIMATELY 85 PEOPLE SERVED	122,462
3 ASSISTANCE TO VOLUNTEER MISSIONARIES FOR TRAVEL AND OTHER EXPENSES IN ASIA, AFRICA, AND NORTH AMERICA APPROXIMATELY 10 PEOPLE SERVED	75,302
4 TECHNICAL ASSISTANCE AND HOSTING ASSISTANCE FOR ECCLESIAL WEBSITES PROVIDED TO CHRISTADELPHIAN CHURCHES APPROXIMATELY 35 CHURCHES SERVED	3,300

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	0

Part X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations, see instructions)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	0
b	Average of monthly cash balances.	1b	978,001
c	Fair market value of all other assets (see instructions).	1c	107,421
d	Total (add lines 1a, b, and c).	1d	1,085,422
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	1,085,422
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	16,281
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,069,141
6	Minimum investment return. Enter 5% of line 5.	6	53,457

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign**Part XI** organizations check here ► and do not complete this part)

1	Minimum investment return from Part X, line 6.	1	
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	
b	Income tax for 2019 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	1,131,233
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, etc , purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	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 XIII, line 4	4	1,131,233
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b See instructions.	5	4
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	1,131,229
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years			

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only.				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2019				
a From 2014.				
b From 2015.				
c From 2016.				
d From 2017.				
e From 2018.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2019 from Part XII, line 4 ► \$ _____				
a Applied to 2018, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2019 distributable amount.				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b.				
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.				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2019 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2020				
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)				
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2015.				
b Excess from 2016.				
c Excess from 2017.				
d Excess from 2018.				
e Excess from 2019.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a	If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling. ►				
b	Check box to indicate whether the organization is a private operating foundation described in section <input checked="" type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)				
2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed				
b	85% of line 2a				
c	Qualifying distributions from Part XII, line 4 for each year listed				
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 Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)**1 Information Regarding Foundation Managers:**

- a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))
- b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ► if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

- a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

VIRGINIA BRIERLY
PO BOX 264
VILLAS, NJ 08251
(757) 679-4433

- b The form in which applications should be submitted and information and materials they should include

WRITTEN REQUEST SHOULD BE SUBMITTED TO ORGANIZATION

- c Any submission deadlines

ONGOING SUBMISSIONS ACCEPTED

- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

AT THE DISCRETION OF THE ORGANIZATION

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
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.				14	371
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				01	290
11 Other revenue					
a GRANT REFUNDS					7,051
b IRS REFUND					9,581
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e).		0		661	16,638
13 Total. Add line 12, columns (b), (d), and (e).					17,299

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions.)
11A	GRANT REFUNDS
11B	IRS REFUNDS

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their 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) Expense account, other allowances
CAM BEELER	DIRECTOR 15 00	0	0	0
PO BOX 264 VILLAS, NJ 08251				
GREG WIECHERT	DIRECTOR 10 00	0	0	0
PO BOX 264 VILLAS, NJ 08251				
ALAN GHENT	SECRETARY 10 00	0	0	0
PO BOX 264 VILLAS, NJ 08251				
MARK DRABENSTOTT	CHAIRMAN 10 00	0	0	0
PO BOX 264 VILLAS, NJ 08251				
VIRGINIA BRIERLY	TREASURER 15 00	0	0	0
PO BOX 264 VILLAS, NJ 08251				
PAUL ELLIOTT	DIRECTOR 15 00	0	0	0
PO BOX 264 VILLAS, NJ 08251				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
ALL PAKISTAN CHRISTADELPHIAN CHURCH APCC OFFICE YMCA SADDAR KARACHI PK	NONE	NC	MISSIONARY WORK IN PAKISTAN	12,000
BARTIMAEUS RESOURCE CENTRE 170 DRUIDS WALK CHARD CHARD IN	NONE	NC	WELFARE WORK IN INDIA	15,200
BIWALI FAMILY (PAID TO AND TO VARIOUS VENDORS FBO) 110 E LAPORTE, IN 46350	NONE	NC	WELFARE WORK IN NORTH AMERICA	60,285
Total			► 3a	958,501

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
CAMBODIA BEC SANGKAT PHSAR DAEUM KOR PHNOM PENH CB	NONE	NC	MISSIONARY WORK IN ASIA	3,100
CAMBODIA BETHEZER DORM SANGKAT PHSAR DAEUM KOR PHNOM PENH CB	NONE	NC	MISSIONARY WORK IN ASIA	23,470
CAMBODIA CHRISTADELPHIAN ECCLESIA 17 ST 212 PHSAR DERMTHKOV PHUMI 1 PHNOM PENH CB	NONE	NC	MISSIONARY WORK IN CAMBODIA	66,000
Total			► 3a	958,501

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
CHRISTADELPHIAN ASSEMBLY 12 MADRAS PLACE BRAMPTON, ONTARIO L6S 2Z2 CA	NONE	NC	PREACHING WORK IN NORTH AMERICA	1,660
CHRISTADELPHIAN INDIAN CHILDRENS WELFARE 5-54 PANCHAYAT RD MOINABAD RR DIST IN	NONE	NC	WELFARE WORK IN INDIA	52,500
CHRISTADELPHIAN INDIAN REHABILITATION INC OLIVET FLATS RUPERT STREET RINGWOOD, VICTORIA 3134 AS	NONE	NC	WELFARE WORK IN ASIA	40,000
Total			► 3a	958,501

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
CHRISTADELPHIAN SHUNEM HOME UK C/O MICHAEL H PAGE 5 HILLVIEW LN TWYNING TEWKESBURY UK	NONE	NC	SUPPORT ORPHAN CHILDREN'S HOME IN INDIA	50,100
CHRISTADELPHIANS GRANITE STATE ECCLESIA 18 N MAST ST GOFFSTOWN, NH 03045	NONE	NC	REFUGEE ASSISTANCE	8,000
CHRISTINE BERG 291 GREEN RIDGE DR WICKLIFFE, OH 44092	NONE	I	MISSIONARY WORK IN HAITI	5,900
Total			► 3a	958,501

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
CHRISTOPHER NUTTER 4444 O RADA ST TURMNOB PHNOM PENH CB	NONE	I	MISSIONARY WORK IN CAMBODIA	12,000
COPT6 LANGFORD ROAD WESTVILLE SF	NONE	NC	MISSIONARY WORK IN AFRICA	66,200
CUDDLE TRUSTKEMPTON PARK ASTON MANOR SF	NONE	NC	MISSIONARY WORK IN AFRICA	66,200
Total			► 3a	958,501

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
DEBORAH GRIFFITHS 17 212 PSAR DOEMKOR TOUL KORK PHNOM PENH CB	NONE	I	MISSIONARY WORK IN CAMBODIA	7,780
GLO'S ADULT CARE4 LOUISVILLE RD KINGSTON JM	NONE	NC	WELFARE WORK IN JAMAICA	14,040
HAITI CONFERENCES FAITH WAGON 19731 CHENEYS GROVE RD BLOOMINGTON, IL 61705	NONE	NC	MISSIONARY WORK IN HAITI	6,000
Total			► 3a	958,501

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
INDIA CHILD NUTRITION PROGRAMME PO BOX 2110 RINGWOOD NORTH, VICTORIA 3134 AS	NONE	NC	WELFARE WORK IN ASIA	30,000
KINSHASANONE CG	NONE	NC	FUND SCHOOL TUITION GRANTS IN CONGO DRC	1,025
LABETTE HEALTHPO BOX 827 PARSONS, KS 67357	NONE	NC	WELFARE IN US	5,000
Total			► 3a	958,501

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
LANCASTER CHRISTADELPHIANS 60 BUCH AVE LANCASTER, PA 17601	NONE	NC	REFUGEE ASSISTANCE	2,123
LT - REFUGEE IN TURKEYANTALYA TU	NONE	NC	REFUGEE ASSISTANCE	2,798
MARTIN SHIRLEYPO BOX 709 KINGSTON, WEST INDIES JM	NONE	I	MISSIONARY WORK IN NORTH AMERICA	19,220
Total			► 3a	958,501

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
MICHAEL ROSS 15002 CALVANO DR CYPRESS, TX 77429	NONE	I	FUND MISSIONARY EXPENSES IN SOUTH AFRICA	1,458
MUMBAI INDIA MUMBAI IN	NONE	NC	WELFARE WORK IN INDIA	9,900
N T PHUNG NONE VM	NONE	NC	MISSIONARY AND WELFARE WORK IN VIETNAM	22,400
Total			► 3a	958,501

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
PHILIPPINE BEC BIBLE EDUCATION CENTER CAGAYAN DE ORO INC ST PAUL ST ZONE 9 PATAG CAGAYAN DE ORO CITY 9000 RP	NONE	NC	FUND PREACHING WORK IN THE PHILIPPINES	27,920
PHOENIX CHRISTADELPHIANS 3324 W LATHAM ST PHOENIX, AZ 85009	NONE	NC	REFUGEE ASSISTANCE	490
RA - REFUGEE IN TURKEY TU	NONE	NC	REFUGEE ASSISTANCE	5,600
Total			► 3a	958,501

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
RAJU DEVIS33 ELLESMORE CLOSE WATTLE GROVE NSW 2173 AS	NONE	I	WELFARE WORK IN AUSTRALIA	5,000
RVA LIGHT504 BROAD ST RICHMOND, VA 23220	NONE	NC	MISSIONARY WORK IN US	15,000
SARAH F CHANN151 BEACH RD CHRISTCHURCH NZ	NONE	I	MISSIONARY WORK IN CAMBODIA	6,535
Total			► 3a	958,501

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
SIMON GIBBS 1/37 SOI 4 CHANG PUAK RD SRIPOOM CHIANG MAI TH	NONE	I	MISSIONARY WORK IN THAILAND	6,105
STEPHANIE KEATING 54 GLENERYE ST ST JOHNS, NEW FOUNDLAND & L A1A5E8 CA	NONE	I	MISSIONARY WORK IN ASIA	9,072
STEVE JOHNSON 19731 CHENEYS GROVE RD BLOOMINGTON, IL 61705	NONE	I	MISSIONARY WORK IN HAITI	1,000
Total			► 3a	958,501

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
TANNA PROJECTS LIMITED 172 COBBITTY RD COBBITTY, NSW 2570 AS	NONE	NC	ASSIST WITH HUMANITARIAN PROJECTS IN TANNA	6,000
THAILAND KASIKORN BANK 1/37 SOI 4 CHANG PUAK RD SRIPOOM CHIANG MAI TH	NONE	NC	MISSIONARY WORK IN THAILAND	7,500
TIM GALBRAITH 18 EDNA STREET HEATHMONT, VICTORIA AS	NONE	I	WELFARE AND MISSIONARY WORK IN ASIA	137,300
Total			► 3a	958,501

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
VIETNAM USD ACCOUNT 64-166 PHAN DINH PHUNG ST HO CHI MINH CITY VM	NONE	NC	MISSIONARY WORK IN ASIA	112,950
WESTERN UNION BUSINESS SOLUTIONS PO BOX 1528 WEST CALDWELL, NJ 07007	NONE	NC	WELFARE WORK IN EUROPE	10,670
ZACHARY FORBES 10 NGATARUA RD PUTIKI WHANGANUI NZ	NONE	I	MISSIONARY WORK IN INDIA	3,000
Total			► 3a	958,501

TY 2019 Accounting Fees Schedule

Name: WILLIAMSBURG CHRISTADELPHIAN FOUNDATION**EIN:** 51-0211853

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING SERVICES	6,351	0	0	6,351

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2019 Depreciation Schedule

Name: WILLIAMSBURG CHRISTADELPHIAN FOUNDATION

EIN: 51-0211853

Depreciation Schedule

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
HOUSE	2017-08-29	114,258	3,907	SL	39 000000000000	2,930	0	2,930	

**TY 2019 Land, Etc.
Schedule****Name:** WILLIAMSBURG CHRISTADELPHIAN FOUNDATION**EIN:** 51-0211853

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
HOUSE	114,258	6,837	107,421	

TY 2019 Other Expenses Schedule

Name: WILLIAMSBURG CHRISTADELPHIAN FOUNDATION
EIN: 51-0211853

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADVERTISING	56	0	0	56
BAD DEBT	25,540	0	0	25,540
BANK FEES	2,001	0	0	2,001
BUILDUP PROGRAMS	71,764	0	0	71,764
CONTRACT	41,250	0	0	41,250
FREELANCE OUTSOURCING	4,385	0	0	4,385
INSURANCE	1,621	0	0	1,621
OFFICE EXPENSE	5,899	0	0	5,899
REPAIRS AND MAINTENANCE	511	0	0	511
WEB-SITE	3,115	0	0	3,115

TY 2019 Other Income Schedule

Name: WILLIAMSBURG CHRISTADELPHIAN FOUNDATION

EIN: 51-0211853

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
GRANT REFUNDS	7,057		7,057
IRS REFUND	9,581		9,581

TY 2019 Substantial Contributors

Schedule

Name: WILLIAMSBURG CHRISTADELPHIAN FOUNDATION

EIN: 51-0211853

Name	Address
DAN RICHARD	1057 PARKVIEW CIRCLE CAROL STREAM, IL 60188

TY 2019 Taxes Schedule

Name: WILLIAMSBURG CHRISTADELPHIAN FOUNDATION**EIN:** 51-0211853

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAXES AND LICENSES	150	0	0	150

Schedule B
(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

OMB No 1545-0047

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

2019

Name of the organization

WILLIAMSBURG CHRISTADELPHIAN FOUNDATION

Employer identification number

51-0211853

Organization type (check one)**Filers of:****Section:**

Form 990 or 990-EZ

- 501(c)() (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions**General Rule**

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹ 3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc. purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc. purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc. contributions totaling \$5,000 or more during the year. ► \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

WILLIAMSBURG CHRISTADELPHIAN FOUNDATION

Employer identification number

51-0211853

Part I **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	See Additional Data Table	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

Name of organization

WILLIAMSBURG CHRISTADELPHIAN FOUNDATION

Employer identification number

51-0211853

Part II		Noncash Property		
		(see instructions) Use duplicate copies of Part II if additional space is needed		
		(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I			\$	
			\$	
(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 organization

NAME OF ORGANIZATION
WILLIAMSBURG CHRISTADELPHIAN FOUNDATION

Employer identification number

51-0211853

Part III

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns **(a)** through **(e)** and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ► \$ _____
Use duplicate copies of Part III if additional space is needed

Use duplicate copies of Part III if additional space is needed

Additional Data

Software ID:

Software Version:

EIN: 51-0211853

Name: WILLIAMSBURG CHRISTADELPHIAN FOUNDATION

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NOW FOODS 244 KNOLLWOOD DRIVE BLOOMINGDALE, IL 60108	\$ 234,844	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
2	RANDALL MORRISSETTE 5717 WOODBURN RD RICHMOND, VA 23225	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
3	BETTE WINFREE 3930 PROVIDENCE PLACE FAIRFAX, VA 220313407	\$ 40,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
4	DAN RICHARD 1057 PARKVIEW CIRCLE CAROL STREAM, IL 60188	\$ 500,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
5	NATHAN RICHARD 19504 NORTHEASE 19TH AVE RIDGEFIELD, WA 98642	\$ 19,200	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
6	STUART AND SHARON MOORE 15 SOUTHRIDGE TRAIL CALEDON, ONTARIO CA	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	RICHARD BENEVOLENT FOUNDATION 1057 PARKVIEW CIRCLE CAROL STREAM, IL 60188	\$ 100,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
8	ROBERT W AND NANCY DAVIS 504 VERANDA WAY APT B201 NAPLES, FL 34104	\$ 20,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)