Form 990-T	l E	xempt Orgai	nization Bus				ax Re	turn	L	OMB N	io 1545-068	J7
· · · · · · · · · · · · · · · · · · ·	(and proxy tax under section 6033(e))											•
ببرت	For cal	endar year 2018 or other tax yea	r beginning		, and endi	ng		_	_	Z	018	j
Department of the Treasury Internal Revenue Service	 	► Go to www. Do not enter SSN number	irs gov/Form990T for in rs on this form as it may					1(c)(3)	5	pen to P 01(c)(3) C	ublic Inspect	tion for Only
A X Check box if address changed		Name of organization (Check box if name c				-			yees' tru	fication numb st, see	ber
B Exempt under section	Print	THE COMMUNIT	ry FOUNDATIO	ON.	INC.				l	•	09135	5
X 501(c)(3())	or	Number, street, and room							E Unrela		ess activity of	
408(e)220(e)	Type	3409 MOORE							(368 111	su dettori.	•,	
408A 530(a) 529(a)		City or town, state or prov RICHMOND, V	·	r foreigr	postal code				523(000		, ,
		F Group exemption numb		>								\Box
C Book value of all assets at end of year 529,939,0	97.	G Check organization type	E ► X 501(c) corp	oration	501(0	c) trust		401(a)	trust		Other tr	rust
H Enter the number of the	organiza	tion's unrelated trades or b	usinesses.	1	{		the only (or	•				
		EE STATEMENT					complete Pa				3,	
		ce at the end of the previou	is sentence, complete Pa	rts I and	I II, complete a S	Schedule	M for each	additiona	al trade	or		
business, then complete I			Whated arous or a serve		diami application					Ī	No	
-		oration a subsidiary in an a failt and a f	_	it-SubSii	nary controlled	group			Yes	; <u>LA</u>	NO	
J The books are in care of				IDEN	T & CEO	Telepho	ne number	▶ (804	33	0-740	00
Part Unrelated	d Trac	le or Business Inc	ome		(A) Incom	16	(B) E	xpenses			(C) Net	
1a Gross receipts or sale	es.					ľ		•	1			
b Less returns and allow			c Balance	1c		į		,			-	
2 Cost of goods sold (S				2			minuminum			-		<u></u>
3 Gross profit. Subtract				3								
4a Capital gain net incom	•	•	4707)	4a			,					
c Capital loss deduction		art II, line 17) (attach Form	4/9/)	4b 4c			-					
•		hip or an S corporation (at	tach statement)	5	-459,9	966.	ST	MT 2	·	- 4	59,96	56.
6 Rent income (Schedul		inp or an o corporation (at	taon statement)	6								
7 Unrelated debt-finance		ne (Schedule E)		7								
		nd rents from a controlled o	rganization (Schedule F)	8							-	
9 Investment income of	a sectio	n 501(c)(7), (9), or (17) or	ganization (Schedule G)	9								
10 Exploited exempt activ	vity inco	me (Schedule I)		10	<u>.</u>		_					
11 Advertising income (S	Schedule	J)		11								
12 Other income (See ins				12	450 (266	·		-		<u> </u>	
13 Total. Combine lines Part II Deduction	3 throu	gh 12 • Takon Eleawher	2 (2	13	-459,9					<u> </u>	59,96	<u> </u>
		t Taken Elsewhere itions, deductions must					income)					
							,		14			
15 Salaries and wages	10013, un	ectors, and trustees (Sche							15			—
16 Repairs and mainten	ance	(0)	Ϋ́						16			
17 Bad debts		8 NOV 20 2	019 Og						17			
18 Interest (attach sche	dule) (se	einstructions)	O						18			
19 Taxes and licenses		OGDEN,	UI J						19			
		instructions=for-limitation	rules)						20			
21 Depreciation (attach		·			2							
•	aimed or	Schedule A and elsewhere	e on return		22	2a]			22b			
23 Depletion		manantina alama							23			
Contributions to defeEmployee benefit pro		npensation plans							24			
26 Excess exempt exper	-	hedule I)							26			
27 Excess readership co									27			
28 Other deductions (at									28			
29 Total deductions Ad									29			0.
		come before net operating	loss deduction. Subtract	line 29	from line 13				30	- 4	59,96	56.
31 Deduction for net op:	erating I	oss arısıng in tax years beç	inning on or after Januar	y 1, 20	18 (see instruction	ons)			31			لــِــِ
32 Unrelated business to	axable ir	come. Subtract line 31 fro	m line 30						32		59,96	
	- D	arante Danierakan Ank Make -								1		(-)() 4 O \

GARY & SHREAVES, P Film's EIN

Phone no.

54-1631262

Form 990-T (2018)

ì

(804)747-0000

Preparer

Use Only

Firm's name KEITER, STEPHENS, HURST

Firm's address > GLEN ALLEN, VA 23.060

4401 DOMINION BLVD

Schedule A - Cost of Goods Sold. Enter	method of invent	ory valuation N	'A				
1 Inventory at beginning of year 1		6 Inventory at end of	year		6		
2 Purchases 2		7 Cost of goods sold	Subtract	line 6			
3 Cost of labor 3		from line 5. Enter h	ere and in l	Part I,	,		
4 a Additional section 263A costs		line 2		[7		
(attach schedule) 4a		8 Do the rules of sect	ion 263A (with respect to		Yes	No
b Other costs (attach schedule) 4b		property produced	or acquired	d for resale) apply to		1	
5 Total. Add lines 1 through 4b 5		the organization?					
Schedule C - Rent Income (From Real (see instructions)	Property and	Personal Property	Lease	d With Real Prop	erty)	,	
1 Description of property							
(1)							
(2)	 :						
(3)							
(4)							
2 Rent receiv	ed or accrued						
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	i of rent for pe	nd personal property (if the perce ersonal property exceeds 50% or is based on profit or income)	entage If	3(a) Deductions directly columns 2(a) an	connected d 2(b) (atta	with the income ii ch schedule)	n
(1)							
(2)							
(3)							
(4)							
Total 0.	Total		0.				
(c) Total income. Add totals of columns 2(a) and 2(b). En here and on page 1, Part I, line 6, column (A)			0.	(b) Total deductions Enter here and on page 1, Part I, line 6, column (B)	•		0.
Schedule E - Unrelated Debt-Financed	income (see)	nstructions)					
		2 Gross income from		3 Deductions directly conr to debt-finance			
Description of debt-financed property		or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	(1) Other deduction (attach schedule)	ns
(1)					1		
(2)							
(3)							
(4)							
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 5. Average of or a	adjusted basis allocable to nced property n schedule)	6. Column 4 divided by column 5		7 Gross income reportable (column 2 x column 6)		Allocable deduct umn 6 x total of co 3(a) and 3(b))	
(1)		9/			1		
(2)		9/					
(3)		9/	5				
(4)	-	%	5				
				inter here and on page 1, Part I, line 7, column (A)		er here and on pag t I, line 7, column	
Totals		İ		0 .	.		0.
Total dividends-received deductions included in column	18	·		>			0.

Schedule F - Interest,	Annuitie	s, Royalt	ies, an	·	From Co Controlled O			tions	(see ins	truction	s)	
1. Name of controlled organization		2 Emp identific numb	ation	3 Net unr	elated income	4 Tot	otal of specified prents made 5. Part of column 4 that is included in the controlling organization's gross income			olling	6 Deductions directly connected with income in column 5	
(1)					 							
(2)												
(3)				 						-	·-	
(4)		_										
Nonexempt Controlled Organi	zations											
7. Taxable Income	8. Net u. (s	nrelated income ee instructions)	(loss)	9 Total	of specified payr made	nents	10. Part of coluin the controllingross	mn 9 that ing organi s income	ıs ıncluded zatıon's		ductions directly connected n income in column 10	
(1)												
(2)												
(3)			_					_,				
(4)												
	•						Add colun Enter here and Ine 8, c		1, Part I,		dd columns 6 and 11 here and on page 1, Part I, line 8, column (B)	
Totals									0.		0.	
Schedule G - Investme		ne of a S	ection	501(c)(7	'), (9), or (17) Org	anization	-				
1. Desc	cription of inco	me			2. Amount of	ıncome	3. Deduction directly connect (attach scheduction)	cted	4. Set-a		5 Total deductions and set-asides (col 3 plus col 4)	
(1)												
(2)												
(3)												
(4)												
Totals				•	Enter here and o Part I, line 9, co				- •		Enter here and on page 1, Part I, line 9, column (B)	
Schedule I - Exploited (see instru	-	Activity I	ncome	e, Other	Than Adv	ertisin	g Income					
Description of exploited activity	2 G unrelated income trade or t	e from	directly of with pro of uni	penses connected oduction related s income	4. Net incom from unrelated business (co minus columi gain, compute through	trade or lumn 2 n 3) If a e cols 5	5 Gross inco from activity t is not unrelat business inco	hat ed	6 Exp attributa colun	able to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)					··							
(2)		-			 					-	<u> </u>	
(3)					l						 	
(4)	† · · · · · · · · · · · · · · · · · · ·				 							
Totals -	Enter her page 1, line 10,	, Part I,		re and on I, Part I, col (B)					-		Enter here and on page 1, Part II, line 26	
Schedule J - Advertision	ng Incon		struction		L				-			
Part I Income From				•	solidated	Basis		-				
1 Name of periodical		2 Gross advertising income		3 Direct ertising costs	4 Advert or (loss) (co col 3) If a ga cols 5 th	ol 2 minus iin, compute	5 Circulat		6 Reade costs		7 Excess readership costs (column 6 minus column 5 but not more than column 4)	
(1)											,	
(2) (3) (4)					miste	, 11,,,,,	11				1444, 11 3 45 4 (1 5 5 - 1 b)	
Totals (carry to Part II, line (5))	>	. 0		0	•						0 . Form 990-T (2018	

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1. Name of periodical	2 Gross advertising income	3. Direct advertising costs	Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals from Part I	0.	0.	4.71		77,777 1,7 - 7	0.
	Enter here and on page 1, Part I, line 11 col (A)	Enter here and on page 1, Part I, line 11, col (8)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	0.	0.	3 3 5	The special		0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		•	0.

Form 990-T (2018)

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED STATEMENT 1
BUSINESS ACTIVITY

INCOME FROM PARTNERSHIP PASSTHROUGH ENTITY

TO FORM 990-T, PAGE 1

FORM 990-T INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 2
DESCRIPTION	NET INCOME OR (LOSS)
THE RICHMOND FUND, LP - ORDINARY BUSINESS INCOME (LOSS)	-459,966.
TOTAL INCLUDED ON FORM 990-T, PAGE 1, LINE 5	-459,966.

TAX YEAR LOSS SUSTAINED APPLIED 12/31/16 2,450,470.			
12/31/16 2,450,470.		LOSS REMAINING	AVAILABLE THIS YEAR
	0.	2,450,470.	2,450,470.
NOL CARRYOVER AVAILABLE THIS YEAR	_	2,450,470.	2,450,470.