-	√ EXTENDED TO NOVEMBER	16, 2020		- ' ' ' ' '
7Form 990°T	Exempt Organization Business	Income Tax F	Return	OMB No 1545-0047
	(and proxy tax under secti		1912	
	For calendar year 2019 or other tax year beginning	, and ending	111/	2019
Department of the Treasury	► Go to www irs gov/Form990T for instructions	and the latest information		
Internal Revenue Service	Do not enter SSN numbers on this form as it may be made i	public if your organization is	<u> </u>	Open to Public Inspection for 501(c)(3) Organizations Only
A Check box if	Name of organization (	d see instructions )		loyer identification number ployees trust, see
address changed				uctions)
B Exempt under section	Print THE COMMUNITY FOUNDATION, I			3-7009135
X 501(c)(3 52	Number, street, and room or suite no. If a P.O. box, see instru	uctions.		lated business activity code instructions )
408(e)220(e)	3409 MOORE ST			
408A530(a)	City or town, state or province, country, and ZIP or foreign po	ostal code	F 0 0	000
529(a) C Book value of all assets	RICHMOND, VA 23230		<u> </u>	000
at end of year	F Group exemption number (See instructions)  36. G Check organization type   X 501(c) corporation	501(a) truet	401/0\ t===0	Other truet
	36. G Check organization type ► X 501(c) corporation organization's unrelated trades or businesses ► 1	501(c) trust	401(a) trust	Other trust
	SEE STATEMENT 1	·	(or first) unrelated	
	lank space at the end of the previous sentence, complete Parts I and II,	If only one, comple		
business, then complete		, complete a schedule ivi for e	acii auuiliollai liaul	; UI
	the corporation a subsidiary in an affiliated group or a parent-subsidiar	v controlled group?	► Y	es X No
	and identifying number of the parent corporation	y controlled group.	<b>,</b>	03 (11) 140
		& CEO Telephone num	nber ▶ (804	) 330-7400
	d Trade or Business Income		B) Expenses	(C) Net
1a Gross receipts or sale	us III		·· <del>-</del> ···	
b Less returns and allo	wances c Balance tc			
2 Cost of goods sold (S	Schedule A, line 7)			/
3 Gross profit. Subtrac	line 2 from line 1c		-	
4 a Capital gain net incor	ne (attach Schedule D)			
b Net gain (loss) (Form	4797, Part II, line 17) (attach Form 4797)			
c Capital loss deduction				
5 Income (loss) from a	· · · · · · · · · · · · · · · · · · ·	,511,165.	STMT 2	-1,511,165.
<ol><li>Rent income (Schedu</li></ol>	•			
	ed income (Schedule E)			
- '	valties, and rents from a controlled organization (Schedule F) 8	<del></del>		
	a section 501(c)(7), (9), or (17) organization (Schedule G)			
	vity income (Schedule I)			
<ul><li>11 Advertising income (</li><li>12 Other income (See in</li></ul>	Schedule J) structions, attach schedule)  11 12	/		
13 Total. Combine lines		,511,165.		-1,511,165.
ParMI Deduction	ns Not Taken Elsewhere (See instructions for limitation	na an daduations \		1/011/1000
(Deductions	must be directly connected with the unrelated businessimoon	(a)EIVED		
	icers, directors, and trustees (Schedule K)		14	
15 Salaries and wages			15	
16 Repairs and mainter	ance NOV	<b>17</b> 2020 [3]	16	
17 Bad debts		<u></u> <u>uř</u>	17	
18 Interest (attach sche	dule) (see instructions) OG	DEN, UT	18	
19 Taxes and licenses			19	
20 Depreciation (attach		20		
21 Less depreciation cl	aimed on Schedule A and elsewhere on return	21a	21b	
22 Depletion			22	
	erred compensation plans		_23	<u> </u>
24 Employee benefit pr	- /		24	
25 Excess exempt expe	•		25	
26 Excess readership c			26	
27 Other deductions (at	•		27	0.
	dd lines 14 through 27 axable income before net operating loss deduction. Subtract line 28 fro	m line 12	28	-1,511,165.
/	axable income before het operating foss deduction. Subtract line 28 fro erating loss arising in tax years beginning on or after January 1, 2018.	in inte 13	49-	1,311,103.
(see instructions)	erating 1055 arising in tax years beginning off or after January 1, 2018	SEE STATEMEN	VT 3 30	0.
	axable income Subtract line 30 from line 29	DIE DIVIDUE	31	-1,511,165.
	or Paperwork Reduction Act Notice, see instructions		<u>į usi</u>	Form <b>990-T</b> (2019)

i		THE COMMUNITY FOUNDATION, INC.		23	- /009135 Page 2
1	Parl				
	32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instruct	ions)	\$2	-1,511,165.
	33	Amounts paid for disallowed fringes		33	
	34	Charitable contributions (see instructions for limitation rules)		34	0.
	35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 from	the sum of lines 32 and 332		-1,511,165.
	36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	STMT 4	36	0.
	37	Total of unrelated business taxable Income before specific deduction. Subtract line 36 from line 35			-1,511,165.
		Specific deduction (Constituted 1900 but and the 20 instituted of according to the constituted of the consti	· · · · · · · · · · · · · · · · · · ·		
	38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	<b></b>	38	1,000.
11	39	omerated business taxable modifie. Subtract time 36 from line 37, it line 36 is greater than line 37,	ų		4 -44 44-
, . I	D	enter the smaller of zero or line 37		39	-1,511,165.
	Pan	/IV Tax Computation	· · · · · · · · · · · · · · · · · · ·	'	····
	40	Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)	, <b>\</b>	40	0.
	41	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39	from:	99 <sup>1</sup> 10	
		Tax rate schedule or Schedule D (Form 1041)		41	
	42	Proxy tax. See instructions	<b>&gt;</b>	42	.,
	43	Alternative minimum tax (trusts only)		43	
١.	44	Tax on Noncompliant Facility Income. See Instructions	(*) ( * )***** (* **	44	
W	45	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies		45	0.
1		X: Tax and Payments	<del></del>	1741	···
		Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 46a	]	1 11	
	b	The state of the s	<del> </del>	1:3	
	_	1 1110010001111111111111111111111111111	<del></del>	1.00	
	C	General business credit. Attach Form 3800		155	
	ď	Credit for prior year minimum tax (attach Form 8801 or 8927)	<u> </u>	/s r sto	
		Total credits. Add lines 46a through 46d		46e	
	47	Subtract line 46e from line 45	<del></del>	47	0.
	48	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866		48	
	49	Total tax. Add lines 47 and 48 (see instructions)		49	0.
	50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	y - 1, 1912 1, 21.	50	0.
	51 a	Payments: A 2018 overpayment credited to 2019	146,870.		
	Ь	2019 estimated tax payments			
	C	The second of th			
	d				
	е	Backup withholding (see instructions) 51e		1. 30	
	f	Credit for small employer health insurance premiums (attach Form 8941)		V	
	a	Other credits, adjustments, and payments: Form 2439		11.	
	_	☐ Form 4136 ☐ Other Yolal ▶ 51g	L	17 J	
	52	Total payments. Add lines 51a through 51g		52	146,870.
	53	Estimated tax penalty (see instructions). Check If Form 2220 is attached		58	
	54	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed		54	
	55	Overpayment, If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	10 <b>&gt;</b>	55	146,870.
11	56.	Enter the amount of line-55 you want: Gredited to 2020 estimated tax 146,870	■ Refunded ►	56	0.
"	Par				
	57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other	<del></del>		Yes No
	37	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have			(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
		FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign c			
			ountry		X
		During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor	to a foreign truct?		X
	58		to, a toraign a ustr	•	· ···· · · · · · · · · · · · · · · · ·
		If "Yes," see instructions for other forms the organization may have to file.			44 ( 4
	59	Enter the amount of tax-exampt interest received or accrued during the tax year   S  Index penalties of porjury, I declare that I have examined this return, including accompanying echedules and etatements	and to the best of my knowle	doe and b	sellef. It is this.
	Sign		y knowledge		
	Here		7 7VD 0100	•	S discuss this return with
		Signature of officer Date			r shown below (see
		Print/Type preparer's name Preparer's signature Date		if PTI	I¥
	Paid		self- employed		00421964
		parer FIRSTING CONTROL OF CARY C CUPPAV			4-1631262
	Use	Only	CO, E FITTINS CIN		- 1001101
		· · · · · · · · · · · · · · · · · · ·	Phone no.	804	)747-0000
		Firm's address ► GLEN ALLEN, VA 23060	Lundis no.	<u> </u>	50cm 990-T (2010)

Schedule A - Cost of Goods Sold. Ent	er method of inver	tory valuation N/A				
1 Inventory at beginning of year 1		6 Inventory at end of year	ar	6		
2 Purchases 2		7 Cost of goods sold S	ubtract line 6			
3 Cost of labor 3		from line 5. Enter here	and in Part I,		ļ	
4 a Additional section 263A costs		line 2		7		
(attach schedule) 4a		8 Do the rules of section	n 263A (with respect to	'	Yes	No
b Other costs (attach schedule) 4b		property produced or a	acquired for resale) apply to			
5 Total Add lines 1 through 4b 5		the organization?	***************************************			
Schedule C - Rent Income (From Rea (see instructions)	Il Property and	Personal Property L	_eased With Real P	roperty)	<u>-</u>	
1. Description of property						
(1)						
(2)						
(3)	•					
(4)		-				
2 Rent rec	eived or accrued					
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	of rent for p	and personal property (if the percental personal property exceeds 50% or if at is based on profit or income)	age 3(a) Deductions of columns	irectly connec 2(a) and 2(b) (	ted with the income in attach schedule)	n
(1)						
(2)						
(3)						
(4)			-			
Total 0.	Total		0.			
(c) Total income Add totals of columns 2(a) and 2(b) here and on page 1, Part 1, line 6, column (A)	<b>&gt;</b>		(b) Total deduction Enter here and on page Part I, line 6, column (	e 1,		0.
Schedule E - Unrelated Debt-Finance	d Income (see	instructions)				
		2 Gross income from	3 Deductions direct to debt	ly connected of financed prop		
Description of debt-financed property		or allocable to debt- financed property	(a) Straight line depreciate (attach schedule)	on	(b) Other deduction (attach schedule)	ns
(1)		-				
(2)						
(3)					<u> </u>	
(4)						
4 Amount of average acquisition 5 Avera debt on or allocable to debt-financed of property (attach schedule) debt-f	age adjusted basis or allocable to inanced property (ach schedule)	6 Column 4 divided by column 5	7 Gross income reportable (column 2 x column 6)	,	8 Allocable deducti column 6 x total of co 3(a) and 3(b))	
(1)		%				
(2)		%				
(3)		%	<u> </u>		_	
(4)		%				
			Enter here and on page 1 Part I, line 7, column (A)		Enter here and on pag Part I, line 7, column (	
			i ·	ı		^
Totals		_		0.		0.

Form 990-T (2019)

Form 990-T (2019)

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 ) 4 Advertising gain or (loss) (col 2 minus 7 Excess readership 2 Gross 3 Direct 5 Circulation 6. Readership costs (column 6 minus column 5, but not more advertising income 1 Name of periodical col 3) If a gain, compute cols 5 through 7 income costs advertising costs than column 4) (1) (2) (3) (4) 0. Totals from Part I 0. 0. Enter here and on page 1 Part I, line 11, col (A) Enter here and on page 1, Part I, line 11, col (B) Enter here and Totals, Part II (lines 1-5) 0 0 0. Schedule K - Compensation of Officers, Directors, and Trustees (see instructions) 3 Percent of 4 Compensation attributable time devoted to business 1 Name 2 Title to unrelated business (1) % (2) % (3) % (4) % Total Enter here and on page 1, Part II, line 14 ▶ 0.

Form 990-T (2019)

,	23-7009135				
FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED BUSINESS ACTIVITY				STATEMENT 1	
INCOME FRO	OM PARTNERSHIP PASS	STHROUGH ENTITY			
TO FORM 99	0-T, PAGE 1				
FORM 990-T	INCON	ME (LOSS) FROM PA	RTNERSHIPS	STATEMENT 2	
DESCRIPTION	N			NET INCOME OR (LOSS)	
THE RICHMOND FUND, LP - ORDINARY BUSINESS INCOME (LOSS)				-1,511,165.	
TOTAL INCLUDED ON FORM 990-T, PAGE 1, LINE 5				-1,511,165.	
FORM 990-T	NET	OPERATING LOSS D	EDUCTION	STATEMENT 3	
<del></del>	NET LOSS SUSTAINED	OPERATING LOSS D  LOSS PREVIOUSLY APPLIED	EDUCTION  LOSS REMAINING	STATEMENT 3  AVAILABLE THIS YEAR	
FORM 990-T		LOSS PREVIOUSLY	LOSS	AVAILABLE	

FORM 990-T	NET	NET OPERATING LOSS DEDUCTION		STATEMENT 4	
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR	
12/31/16	2,450,470.	0.	2,450,470.	2,450,470.	
NOL CARRYOV	ER AVAILABLE THIS	YEAR	2,450,470.	2,450,470.	