	Forr	[ູ] 990-T∴ \ົັເ	کرر آ	∄xempt Orga	nization Bus	sine	ess Incom	e Tax Returr)	OMB No 1545-0047
	•	7 6		/ (a	nd proxy tax und	er se	ection 6033(e))		2040
		•,	For cal	lendar year 2019 or other tax ye			, and ending			ZU 19
	Depa	artment of the Treasury nal Revenue Service	•	► Go to www Do not enter SSN numbe	irs gov/Form990T for in rs on this form as it may).	Open to Public Inspection for 501(c)(3) Organizations Only
	A [Check box if address changed		Name of organization (_			(Em	ployer identification number aployees' trust, see tructions)
	<u> </u>	Exempt under section	Deina	FIRST BAPTI INCORPORATE		MDO	MWENT FOR	, עו	1	54-0858196
		501(c)(3)	Print or	Number, street, and room		V COO !!	netructions			elated business activity code
		408(e) 220(e)	Type	2709 MONUME		k, 500 ii	1150 0000115.		(See	e instructions)
	Γ	408A 530(a)		City or town, state or pro-		r foreig	n postal code		1	
		529(a)		RICHMOND, V	•		, p = =		52!	5990
	C B	ook value of all assets		Croup evernation averal	as (Caa matematicas)				15. 5.3	
		24,303,1	62.	G Check organization typ	e 🕨 🗓 501(c) corp	oratio	n 501(c) ti	rust 401(a)) trust	Other trust
	H E	nter the number of the c	organiza	tion's unrelated trades or t	ousinesses.	1	Des	cribe the only (or first) un	ırelate	d
	tra	ade or business here 🕨	SI	EE STATEMENT	1		If only	one, complete Parts I-V.	If mor	re than one,
	de	escribe the first in the bl	ank spa	ce at the end of the previou	us sentence, complete Pa	ırts I ar	nd II, complete a Sch	nedule M for each addition	nal trac	de or
	<u>b</u> ı	usiness, then complete l	Parts III	<u>-V</u>						
	I D	uring the tax year, was t	he corp	oration a subsidiary in an a	affiliated group or a parer	nt-subs	idiary controlled gro	oup? ► [Y	/es X No
				lifying number of the paren	t corporation.					
		he books are in care of						elephone number > 8		
	_			de or Business Inc	ome	ı	(A) Income	(B) Expenses	<u> </u>	(C) Net
		Gross receipts or sale:	_		.					· ·
Received in Batching Ogue		Less returns and allow		A line 7)	c Balance	10				
8 30	2	Cost of goods sold (S		• •		3				
₹8 ₹8	3	Gross profit. Subtract Capital gain net incom			,	4a				
0 T			•	art II, line 17) (attach Form	4707)	4a 4b				
الع ع		Capital loss deduction			4191)	40 4c				
	_	•		thip or an S corporation (at	tach statement)	5	29,44	7. STMT 2		29,447.
133 10S	6	Rent income (Schedul		onip or an o corporation (a	tach statement)	6	45, 43	DIMI 2		25, == 7.
ש סי	, ,	Unrelated debt-finance		ne (Schedule E)		7				
	8			nd rents from a controlled	organization (Schedule F)	8		1		
9 2	19			n 501(c)(7), (9), or (17) or	• •	9				
2020	40	Exploited exempt activ			3	10				
_ Z	1 1	Advertising income (S		·		11				
,=	511 512	Other income (See ins		•		12				
		Total. Combine lines	3 throu	gh 12		13	29,44	7.		29,447.
				t Taken Elsewher				ons)		
:	30.0# #	(Deductions	must b	e directly connected w	th the unrelated busin	iess in	icome)			
'è	#4	Compensation of offi	cers, dır	ectors, and trustees (Sche	dole K) DECEN	/r- r-			14_	
	15	Salaries and wages			RECEIN	/EU	,		15	<u> </u>
	16	Repairs and maintena	ance		6		တ္တ		_16	
	17	Bad debts			S JUL 20	2020	0		17	
	18	Interest (attach sched	lule) (se	ee instructions)					18	
	19	Taxes and licenses			OGDEN	117	r		19	
	20	Depreciation (attach f		•	***************************************	, 0				
	21		imed on	Schedule A and elsewher	e on return		21a		21b	
	22	Depletion							22	
	23	Contributions to defe		npensation plans					23	
	24	Employee benefit pro	-	ا ماناموا					24	
	25	Excess exempt exper	•	•					25	
	26 27	Excess readership co	-				CEE CT	ATEMENT 3	26 27	5,733.
	28	Other deductions (att		•			DEE SI	AIEMENI J	28	5,733.
	20 29			ra infough 27 scome before net operating	loss deduction. Subtrac	t line 2	8 from line 13		29	23,714.
	30			oss arising in tax years beg					-23	1-23/1120
		(see instructions)	, amy "	טייט אין	,mg on or and banda	٠, ١, ١	•		30	0.
	31		xable in	icome Subtract line 30 fro	m line 29				31	23,714.
				work Reduction Act Notice				^		Form 990-T (2019)

Form 98	90-T (2019	<u>FIRST BAPTIST CHURCH ENDOWMENT FUND, INCORPORAT</u>	ED	54-	0858196 Page 2
Par	t	Total Unrelated Business Taxable Income			
32	Total o	unrelated business taxable income computed from all unrelated trades or businesses (see instructions)		32	23,714.
33		ts paid for disallowed fringes		33	
34		ole contributions (see instructions for limitation rules) STMT 4		34	2,271.
35		orelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 from the sum o	f lines 32 and 33		21,443.
36		on for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)		36	
37		unrelated business taxable income before specific deduction. Subtract line 36 from line 35		37	21,443.
38		eduction (Generally \$1,000, but see line 38 instructions for exceptions)		38	1,000.
39		ed business taxable income Subtract line 38 from line 37. If line 38 is greater than line 37,		00	
•		e smaller of zero or line 37		39	20,443.
Par		Fax Computation		100	20,445
40		ations Taxable as Corporations. Multiply line 39 by 21% (0 21)		40	4,293.
41		Faxable at Trust Rates See instructions for tax computation. Income tax on the amount on line 39 from:	•	140	4,473.
71					
40				41	
42	-	x See instructions	•	42	
43		ive minimum tax (trusts only)		43	
44		Noncompliant Facility Income. See instructions		44	4 202
45		dd lines 42, 43, and 44 to line 40 or 41, whichever applies		45	4,293.
Par		Tax and Payments		<u> </u>	
		tax credit (corporations attach Form 1118; trusts attach Form 1116)		-	
		edits (see instructions)		-	
		business credit. Attach Form 3800		-	
		or prior year minimum tax (attach Form 8801 or 8827)			
e	Total c	edits Add lines 46a through 46d		46e	
47		t line 46e from line 45		47	<u>4,293.</u>
48	Other to	xes. Check if from. Form 4255 Form 8611 Form 8697 Form 8866 DOther i	attach schedule) 48	
49	Total ta	x Add lines 47 and 48 (see instructions)		49	<u>4,293.</u>
50	2019 n	et 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3		50	<u> </u>
51 a	Payme	ts: A 2018 overpayment credited to 2019	<u>8,800</u>	<u>).</u>	
b	2019 e	timated tax payments 51b			
C	Tax dep	osited with Form 8868			
d	Foreign	organizations Tax paid or withheld at source (see instructions) 51d			
е	Backup	withholding (see instructions) 51e			
f	Credit f	or small employer health insurance premiums (attach Form 8941) 51f			
g	Other c	edits, adjustments, and payments: Form 2439			
	F	rm 4136 ☐ Other Total ► 51g			
52	Total p	yments. Add lines 51a through 51g		52	8,800.
53	Estimat	ed tax penalty (see instructions). Check if Form 2220 is attached 🕨 🔲		53	
54	Tax du	If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	•	54	
55	Overpa	rment If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	•	55	4,507.
56	Enter th	e amount of line 55 you want: Credited to 2020 estimated tax 4,507. Rel	funded 🕨	56	0.
Part	VI :	Statements Regarding Certain Activities and Other Information (see instru	ctions)		
57	At any	me during the 2019 calendar year, did the organization have an interest in or a signature or other authority	-		Yes No
	-	nancial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file			
		Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country			1 1
	here	>			X
58		he tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign	an trust?		<u>x</u> _
•••	_	see instructions for other forms the organization may have to file.	3		
59		e amount of tax-exempt paterest received or accrued during the tax year > \$			1 1
			he best of my ki	nowledge and	belief, it is true,
Sign	cc	der penalties of perjury. Declare that I have examined this return, including accompanying schedules and statements, and to I rect, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowled	ige F		
Here		7/Y/20 TREASURER		•	liscuss this return with hown below (see
		Signature of officer Date Title		instructions)?	
				if PTIN	169 140
_	_		Check		
Paic		S71/1 / 4 / 12 / 2 / 3 / 1	self- employe		0361001
-	oarer	30000 3070	Francis FIN B		0361884
Use	Only	Firm's name LANE & ASSOCIATES, P.C.	Firm's EIN	54	-1216800
		2839 HATHAWAY ROAD	Dhoos so	/004\	272_7/21
		Firm's address ► RICHMOND, VA 23225	Phone no.		272-7421

FIRST BAPTIST CHURCH ENDOWMENT FUND, 54-0858196 Form 990-T (2019) INCORPORATED Schedule A - Cost of Goods Sold. Enter method of inventory valuation Inventory at beginning of year 6 Inventory at end of year 2 Purchases 2 7 Cost of goods sold Subtract line 6 Cost of labor 3 from line 5. Enter here and in Part I, 4a Additional section 263A costs Yes No (attach schedule) Do the rules of section 263A (with respect to 4a b Other costs (attach schedule) 4b property produced or acquired for resale) apply to Total Add lines 1 through 4b the organization? 5 Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) 1. Description of property _(1) (2) (3) (4) 2 Rent received or accrued 3(a) Deductions directly connected with the income in (b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if (a) From personal property (if the percentage of columns 2(a) and 2(b) (attach schedule) rent for personal property is more than 10% but not more than 50%) the rent is based on profit or income) _(1) (2)(3) (4) Total Total 0 0 (b) Total deductions (c) Total income Add totals of columns 2(a) and 2(b). Enter Enter here and on page 1, Part I, line 6, column (B) here and on page 1, Part I, line 6, column (A) 0. Schedule E - Unrelated Debt-Financed Income (see instructions) 3 Deductions directly connected with or allocable to debt-financed property Gross income from or allocable to debt-(a) Straight line depreciation (b) Other deductions 1 Description of debt-financed property financed property (attach schedule) _(1) (2) _(3) (4) 5 Average adjusted basis of or allocable to debt-financed property 4 Amount of average acquisition debt on or allocable to debt-financed Column 4 divided 8 Allocable deductions Gross income reportable (column by column 5 (column 6 x total of columns property (attach schedule) 2 x column 6) 3(a) and 3(b)) (attach schedule) STATEMENT 6

764,614

STATEMENT 5

Part I, line 7, column (A) Part I, line 7, column (B) 0. 0

Form 990-T (2019)

0.

Enter here and on page 1,

(1)

(2)

(3)

(4)

Totals

%

%

%

%

508,563

460,584

Total dividends-received deductions included in column 8

Enter here and on page 1,

Form 990-T (2019) INCOR	PORATED						54-0	<u>85819</u>	6 Page
Schedule F - Interest,	Annuities, Roy						ations (see II	nstruction	s)
•		L	Exempt	Controlled O	rganızatı	ons			·
Name of controlled organization	iden	mployer tification umber	3 Net un (loss) (see	related income e instructions)	4. Tot payr	al of specified ments made	Part of column included in the co organization's gros	ntrolling	Deductions directly connected with income in column 5
(1)									
(1)					 				
(2)									
<u>(3)</u> <u>(4)</u>				 ,					
Nonexempt Controlled Organ									
7 Taxable Income	8. Net unrelated inc	ome (loss)	O Total	of specified pay	ments	10 Part of colum	nn 9 that is included	11 00	ductions directly connected
, Taxasic income	(see instruction		g rota	made	nems	in the controlling	ng organization's income		income in column 10
(1)									
(2)									
(3)								<u> </u>	
(4)				·					
						Enter here and	ns 5 and 10 on page 1, Part I, olumn (A)	Enter h	d columns 6 and 11 ere and on page 1, Part I, line 8, column (B)
Totals							0.		0.
Schedule G - Investme		Section !	501(c)((7), (9), or	(17) Or	ganization			
(see inst	tructions)								T =
	cription of income			2 Amount of	income	3 Deduction directly connect (attach schedu	ted 4 Se	t-asides schedule)	5 Total deductions and set-asides (col 3 plus col 4)
<u>(1)</u>									
(2)									
(3)							_		
(4)									15
				Enter here and Part 1, line 9, co	lumn (A)	,	•	٤.	Enter here and on page 1, Part I, line 9, column (B)
Totals				<u> </u>	0.				0.
Schedule I - Exploited (see instri	•	ty Income	, Othe	r Than Ad	vertisi	ng Income			
(366 1130)	T T	T		T 4		 _			
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Experior directly con with produced of unrelated business in	nnected uction ated	4 Net incomfrom unrelated business (cominus columi gain, compute through	trade or lumn 2 n 3) If a e cols 5	5 Gross incon from activity th is not unrelate business incon	attribu	openses utable to umn 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)									
(2)									
(3)									
(4)									
	Enter here and on page 1, Part I, line 10, col (A)	Enter here : page 1, F line 10, co	Part I,	,	;	•			Enter here and on page 1, Part II, line 25
Totals >	0.		0.			<u> </u>	·		0.
Schedule J - Advertisi				1: -1	0				·
Part I Income From	Periodicals Re	ported on	a Con	isolidated	Basis				
1 Name of periodical	2. Gross advertising income		Direct sing costs	4 Advert or (toss) (co col 3) if a ga cols 5 th	ol 2 minus iin, comput	5. Circulation income	on 6 Read		7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						`			
(2)				, , ,	,]	
(3)				`]	
(4)								1	
· -			-	· -					
Totals (carry to Part II, line (5))	>	0.	0	.1					0. Form 990-T (2019)
									(2013)

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 pe	riodical		2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)									-
(2)									
(3) •									
(4)	_								
Totals from Pa	rt I		ightharpoonup	0.	0.	13 / 3 3	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	45 17 45 C	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 on page 1, Part II, line 26
Totals, Part II (lines 1-5)	,	▶	. 0.	0.	N. W. J. W. J.		S. W. 483	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 (2019)

				==
FORM 990-T	DESCRIPTION OF ORGANIZATION'S	PRIMARY UNRELATED	STATEMENT	1
	BUSINESS ACTIVI	TY		

INVESTMENT IN PARTNERSHIP WITH DEBT FINANCED RENTAL AND INVESTMENT INCOME TO FORM 990-T, PAGE 1

FORM 990-T	INCOME (LOSS) FROM PARTNERSHIPS	STATE	EMENT	2
DESCRIPTION			INCOME	
	- NET RENTAL REAL ESTATE INCOME - NET RENTAL REAL ESTATE INCOME		16,32 13,12	
TOTAL INCLUDED ON	FORM 990-T, PAGE 1, LINE 5		29,44	47
TOTAL INCLUDED ON	FORM 990-1, PAGE 1, LINE 3			± / • ===
FORM 990-T	OTHER DEDUCTIONS	STATE	EMENT	3
FORM 990-T				
	OTHER DEDUCTIONS		EMENT	3

FORM 990-T C	CONTRIBUTIONS SUMMARY		STATEMENT	4
QUALIFIED CONTRIBUTIONS SUB- QUALIFIED CONTRIBUTIONS SUB-				
CARRYOVER OF PRIOR YEARS UNFOR TAX YEAR 2014 FOR TAX YEAR 2015 FOR TAX YEAR 2016 FOR TAX YEAR 2017 FOR TAX YEAR 2018	USED CONTRIBUTIONS 1,027,518			
TOTAL CARRYOVER TOTAL CURRENT YEAR 10% CONT	RIBUTIONS	1,027,518		
TOTAL CONTRIBUTIONS AVAILAB TAXABLE INCOME LIMITATION A		1,027,518 2,271		
EXCESS CONTRIBUTIONS EXCESS 100% CONTRIBUTIONS TOTAL EXCESS CONTRIBUTIONS		1,025,247 0 1,025,247		
ALLOWABLE CONTRIBUTIONS DED	OUCTION —		2,	271
TOTAL CONTRIBUTION DEDUCTION	N		2,	271

ORM 990-T SCHEDULE E - UNRELATED DEBT-FINANCED IN AVERAGE ADJUSTED BASIS	COME	STATEMENT
ESCRIPTION OF DEBT-FINANCED PROPERTY	ACTIVITY NUMBER	
	1	AMOUNT
VERAGE ADJUSTED BASIS OF PROPERTY FIRST DAY OF YEAR VERAGE ADJUSTED BASIS OF PROPERTY LAST DAY OF YEAR		741,47 787,75
VERAGE ADJUSTED BASIS OF PROPERTY FOR THE YEAR		764,61
ORM 990-T AVERAGE ACQUISITION DEBT ON OR ALLOCABLE TO DEBT-FINANCED PROPERTY		STATEMENT
ACTIVITY DESCRIPTION NUMBER A	MOUNT	TOTAL
VERAGE ACQUISITION DEBT VERAGE ACQUISITION DEBT - SUBTOTAL - 2 VERAGE ACQUISITION DEBT - SUBTOTAL - 3	0. 508,563. 460,584.	508,56
		460,58