

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF**

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052

2011

Department of the Treasury Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

Expenses (The lotal of amounts in columns (b) (c) and (d) may not necessing (cash dass)	For cal	lendar year 2011, or tax year beginning	, 2011,	, and ending	. ,	
RICHMOND, VA 23220-2645 G Check all that apply Instal return Anderesc change Annended return	LOUP	ASSI FOUNDATION				mber
G Check all that apply			В		instructions)	
Check type of organization Section 501(c/3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Fair make value of all assets at and dyear Accounting method Cash Cash Accounting method Cash C				c	If exemption application is	pending, check here ►
Check type of organization X Section	G Ch		⊣	mer public charity D	1 Foreign organizations, chec	ck here
Section 4947(a)(1) nonexempte chantable Irust Other taxable private foundation		Address change	Name change	auadation .		
Part Analysis of Revenue and Expenses (The lotal of amounts in account (spenses) Part Analysis of Revenue and Expenses (The lotal of amounts in account (spenses) Part Part Analysis of Revenue and Expenses (The lotal of amounts in account (spenses) Part		Section 4947(a)(1) nonexempt charitable tr	rust Other taxable p	private foundation E		
Part Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) 1 Contributions, giving, grants, etc., received (att sch) 366, 214. 3 1 1 1 1 1 1 1 1 1	I F	from Part II, column (c), line 16)	Other (specify)	F		
Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) (2 ck +			column (d) must be or	n cash basis)	under section 507(b)(1)(B)	, check here
Cash basis only Cash basis Cash basi	Part	Expenses (The total of amounts in				(d) Disbursements for charitable
2 Cx If the founds not rop to all schills		sarily equal the amounts in column (a)				
Interest on savings and temporary cash investments 44,122, 42,536, 44,122, 56 56 57 58 58 58 58 58 58 58		1 Contributions, gifts, grants, etc, received (att sch)	366,214.	₹)	٧	A
Cash investments Cash investment Ca		1 <u>-</u>				<u> </u>
4 Dividends and interest from securities 5 a Gross rents by legal momen B R E V C C C C C C C C C C C C C C C C C C						
Sa Gross rents Sa Net short-term capital gam Sa			44 122	42 536	44 122	
Contemporaries Cont		· · · · · · ·	11/100.	127000.	11,122.	» \
Content Cont		b Net rental income or (loss)	1. 1461.	* * * * * * * * * * * * * * * * * * * *	. * ?	^ * *
Total expenses and measurements See Star		, ,	3,599.		* ? **	% , .
7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10 a coss sales less 11 a coss sales less 12 Total - Add Intes 1 Through 11					4	3-* '
Part						,
10a Gross profit/(loss) (att sch) Company		· · ·	, ,	'' 	8,374.	* * * * * * * * * * * * * * * * * * *
10 10 10 10 10 10 10 10					2 %2	
Comparison Com	_	returns and				
Comparison Com		bus Esta EIVED		**		
Total Add Ines 2 through 11		goods solg		3		
13 Compress of Nages 10 10 10 10 10 10 10 1						
13 Compress of Nages 10 10 10 10 10 10 10 1		12 Fotal: Add Imes 1 through 11	413,935.	46,135.	52,496.	
The person plans, employee benefits 16 a Legal fees (attach schedule) b Accounting fees (attach sch) C Other prof fees (attach schedule) C Other prof		fl3 Compensation of officers, directors, trustees, etc				
16a Legal fees (attach schedule) b Accounting fees (attach sch) See St 1 2,500. 2,500. 2,500.		14 Other employee-seleries and Wages				
b Accounting fees (attach sch) See St 1 c Other prof fees (attach sch) 17 Interest 18 Taxes (attach schedule/see instrs) See Stm 2 19 Depreciation (attach sch) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 25 See Statement 3 26 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid Part XV 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0) 42, 409.		15 Pension plans, employee benefits				
C Other prof fees (attach sch) 17	A	· · · · · · · · · · · · · · · · · · ·	·			
17	M	I F	2,500.	2,500.	2,500.	
18 Tares (attach schedule)(see instrs) See Stm 2 236 2	? N	The state of the s		_		
Depreciation (attach sch) and depletion Coccupancy Travel, conferences, and meetings Printing and publications Cother expenses (attach schedule) See Statement 3 Contributions, gifts, grants paid Part XV Contributions, gifts, grants pai	PS					· · · · · · · · · · · · · · · · · · ·
Depreciation (attach sch) and depletion Cocupancy Travel, conferences, and meetings Printing and publications Other expenses (attach schedule) See Statement 3 990. 990. Total operating and administrative expenses. Add lines 13 through 23 Contributions, gifts, grants paid Part XV Contributions, gifts, grants paid Pa	E T	1	236.	236.	236.	
20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) See Statement 3 990. 990. 990. 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid Part XV 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0) 28 Description of the property of the part	, <u>A</u> A					
Travel, conferences, and meetings Printing and publications Other expenses (attach schedule) See Statement 3 Total operating and administrative expenses. Add lines 13 through 23 Contributions, gifts, grants paid Part XV Contributions, gifts, grants paid Part XV Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0) Travel, conferences, and meetings 990. 990. 990. 990. 3,726. 3,726. 3,726. 3,726. 3,726. 104,895. 42,409.	l i		-			
See Statement 3 990. 990. 990. 990.						
See Statement 3 990. 990. 990.	A E					
24 Total operating and administrative expenses. Add lines 13 through 23 3,726. 3,726. 3,726. 3,726. 25 Contributions, gifts, grants paid Part XV 104,895. 10	Ď ĝ		000	000	000	
25 Contributions, gifts, grants paid Part XV 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0) 28 104,895 104,895 104,895 3,726 3,726 3,726 3,726 42,409	N		990.	990.	990.	
25 Contributions, gifts, grants paid Part XV 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0) 28 104,895 104,895 104,895 3,726 3,726 3,726 3,726 42,409) E	expenses. Add lines 13 through 23	3.726	3.726	3.726	
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0) 28 108,621. 3,726. 3,726. 3,726. 3,726. 42,409.	/			3,,20.		104,895.
27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0) 42,409.	2	26 Total expenses and disbursements.				
a Excess of revenue over expenses and disbursements 305, 314. b Net investment income (if negative, enter -0) 42, 409.	J ———	Add lines 24 and 25	108,621.	3,726.	3,726.	104,895.
and disbursements 305, 314. b Net investment income (if negative, enter -0) 42, 409.	,					73 à 8 y
b Net investment income (if negative, enter -0.)		a Excess of revenue over expenses	305.314			* -
			303,314.	42 409	<u> </u>	
C Adjusted net income (if negative, enter -0-)		C Adjusted net income (if negative, enter -0-)		12, 103.	48,770.	

end-of-year figure reported on prior year's return) 1 1,685,874. Enter amount from Part I, line 27a 2 305,314. Other increases not included in line 2 (itemize) 3 3 Add lines 1, 2, and 3 4 1,991,188 5 Decreases not included in line 2 (itemize) 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 1,991,188.

	Losses for Tax on Investment		ex		74/5
(a) List and describ 2-story brick warehou	b) How acquir P — Purchas D — Donation	e (month, day, year)	(d) Date sold (month, day, year)		
1a 1096 SH DEL MONTE F	P	Various	3/09/11		
b 200 SH KING PHARMAC	EUTICALS		P	1/29/02	3/01/11
c FRACTIONAL SHARES			P	Various	Various
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	5	(h) Gain or (e) plus (f) m	
a 20,860.		12	,526.		8,334.
b 2,850.			,625.	-	-4,775.
c 40.	 				40.
d					
e					
	ring gain in column (h) and owned by	the foundation on 12/31/69		(I) Gains (Coli	umn (h)
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (over column (j), if any		gain minus column (I than -0-) or Losses (fr	<), but not less
a					8,334.
					-4,775.
c					40.
d					
e					
2 Capital gain net income or (ne	et capital loss) If gain, also on the lift (loss), enter (loss) as defined in sections 1222(5) and the lift (loss).	enter in Part I, line 7 er -0- in Part I, line 7		2	3,599.
n Part I, line 8 Part V Qualification Unde	e 8, column (c) (see instructions) If (left of the section 4940(e) for Reduced the foundations subject to the section 4940(e) for Reduced the foundations subject to the section 4940(e) for Reduced the foundations subject to the section 4940(e) for Reduced the foundations subject to the section 4940(e) for Reduced the foundations subject to the section 4940(e) for Reduced the foundations subject to the section 4940(e) for Reduced the foundations subject to the section 4940(e) for Reduced the foundations subject to the section 4940(e) for Reduced the foundations subject to the section 4940(e) for Reduced the foundations subject to the section 4940(e) for Reduced the foundations subject to the section 4940(e) for Reduced the foundations subject to the section 4940(e) for Reduced the foundations subject to the section 4940(e) for Reduced the foundations subject to the section 4940(e) for Reduced the foundations subject to the section 4940(e) for Reduced the foundations subject to the section 4940(e) for Reduced the foundations subject to the section 4940(e) for Reduced the foundations subject to the section 4940(e) for Reduced the foundations subject to the section 4940(e) for Reduced the foundations subject the foundation for Reduced the foundati	 I Tax on Net Investmer	nt Incom	3 e	8,374.
If 'Yes,' the foundation does not qua	this part blank ction 4942 tax on the distributable ame ilify under section 4940(e) Do not con in each column for each year, see the	nplete this part		Yes	X No
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asse		(d) Distribution column (b) divided	
2010	75,083.	1,640	,809.		0.045760
2009	48,395.	1,332		•	0.036322
2008	63,568.	1,324			0.047977
2007	51,518.	1,168			0.044107
2006	41,964.		,169.	·	0.051669
	12/30311		,	·	
2 Total of line 1, column (d)				2	0.225835
3 Average distribution ratio for t number of years the foundation	he 5-year base period — divide the tot n has been in existence if less than 5	al on line 2 by 5, or by the years.		3	0.045167
4 Enter the net value of nonchar	ritable-use assets for 2011 from Part)	K, line 5	_	4	1,762,874.
5 Multiply line 4 by line 3				5	79,624.
6 Enter 1% of net investment in	come (1% of Part I, line 27b)			6	424.
7 Add lines 5 and 6				7	80,048.
8 Enter qualifying distributions f	rom Part XII, line 4			8	108,674.
, , ,	than line 7, check the box in Part VI, I	ine 1b, and complete that pa	<u> </u>		
1 010 71 11 130 0000113					n 990-PF (2011)

 $R\Delta\Delta$

and addresses

10

Form 990-PF (2011)

Х

9

for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If 'Yes,' complete Part XIV

Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses.

See Statement 4

Par	t VII-A	Statements Regarding Activities (continued)					
11	At any tii within the	me during the year, did the foundation, directly or indirectly, own a controlled entity e meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)			11_		х
12	Did the for	oundation make a distribution to a donor advised fund over which the foundation or a disqual privileges? If 'Yes,' attach statement (see instructions)	ıfıed pers	on had	12		х
13	Did the fe	oundation comply with the public inspection requirements for its annual returns and exemption	n applica	tion?	13	Χ	
	Website			804 35			
14		ss are in care of ► FOUNDATION MANAGER Telephon at ► 2601 PARK AVENUE RICHMOND VA ZIP + 4 ►			20-3	000	
15		4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here			 A.\N	<u>-</u>	
13		r the amount of tax-exempt interest received or accrued during the year		15	,		N/A
16	At any tii	me during calendar year 2011, did the foundation have an interest in or a signature or other a curities, or other financial account in a foreign country?	authority	over a	16	Yes	No X
	See the foreign c	instructions for exceptions and filing requirements for Form TD F 90-22 1. If 'Yes,' enter the rountry.►	name of th	ne			inger (m.) Tankania
Par		Statements Regarding Activities for Which Form 4720 May Be Required					
		n 4720 if any item is checked in the 'Yes' column, unless an exception applies.			2.2	Yes	No
1 a	During th	ne year did the foundation (either directly or indirectly)	_			T - LANGE	
	(1) Enga	age in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			
	(2) Borro	ow money from, lend money to, or otherwise extend credit to (or accept it from) a ualified person?	Yes	XNo	81.5 % . 12. 2		
	•	ish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No	3.7		
		compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
						<u>, </u>	
	or th	sfer any income or assets to a disqualified person (or make any of either available ne benefit or use of a disqualified person)?	Yes	X No	1		
	found of go	e to pay money or property to a government official? (Exception. Check 'No' if the dation agreed to make a grant to or to employ the official for a period after termination overnment service, if terminating within 90 days)	Yes	XNo			
b	If any an Regulation	iswer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in ons section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		1 b	N	/A
	Organiza	ations relying on a current notice regarding disaster assistance check here	•	· 🔲			
c		oundation engage in a prior year in any of the acts described in 1a, other than excepted acts a not corrected before the first day of the tax year beginning in 2011?	•		1 c		X
2	Taxes or private o	n failure to distribute income (section 4942) (does not apply for years the foundation was a perating foundation defined in section 4942(j)(3) or 4942(j)(5))					
а	At the er and 6e, f	nd of tax year 2011, did the foundation have any undistributed income (lines 6d Part XIII) for tax year(s) beginning before 2011?	Yes	X No			
	If 'Yes,' I	list the years 20, 20, 20			- "		
h	Are there	e any years listed in 2a for which the foundation is not applying the provisions of section 4942	?(a)(2)		م در		
_	(relating	to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942 listed, answer 'No' and attach statement — see instructions)	(a)(2) to		2 b	N	<u>''</u>]
c	•	ovisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years	here			·	-(30 X 2
	•	, 20 , 20 , 20				, A	
3 a	Did the f	oundation hold more than a 2% direct or indirect interest in any business se at any time during the year?	Yes	X No			
b	or disqua	did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation alified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approve ommissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or	ed		. 3		
	determin	pse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to be if the foundation had excess business holdings in 2011)			3ь	N	/A
4 a		oundation invest during the year any amount in a manner that would jeopardize its					
		e purposes?			4a 	ý	X
b	Did the f	oundation make any investment in a prior year (but after December 31, 1969) that could			* * *		
	jeopardiz the tax y	ze its charitable purpose that had not been removed from jeopardy before the first day of ear beginning in 2011?			4b	1.34	X

Form 990-PF (2011) LOUP	ASSI FOUNDATI	ON		54-	194790	4 Page 6
Part VII-B Statements			1 4720 May Be Req	uired (continue	d)	
5a During the year did the						
(1) Carry on propagand	a, or otherwise attem	pt to influence legislation	on (section 4945(e))?	∐ Yes	X No	•
•	ectly, any voter registr	ation drive?		Yes	X No	¢
(3) Provide a grant to a	n individual for travel,	, study, or other similar	purposes /	Yes	X No	
	, (2), or (3), or section	n 4940(d)(2)? (see instri	uctions)	Yes	X No	^ .
• •	es, or for the prevention	on of cruelty to children	or animals?	Yes	X No	
b If any answer is 'Yes' to described in Regulations (see instructions)?	5a(1)-(5), did any of s section 53 4945 or ii	the transactions fail to n a current notice regar	qualify under the excep ding disaster assistance	tions :		5b N/A
Organizations relying or	a current notice rega	arding disaster assistan	ce check here	•	· [_]	
c If the answer is 'Yes' to tax because it maintained	ed expenditure respon	nsibility for the grant?		N/A Yes	No	
If 'Yes,' attach the state						
6a Did the foundation, during on a personal benefit comb Did the foundation, during	ontract?			Yes	XNo	6b X
If 'Yes' to 6b, file Form	8870			_	_	
7a At any time during the t	=				X No	
b If 'Yes,' did the foundation Part VIII Information		eds or have any net inco Pirectors, Trustees,			N/A	7b
and Contrac		irectors, Trustees,	roundation manaç	gers, migniy Fai	ia Empir	lyees,
1 List all officers, director	rs, trustees, foundation	on managers and their	compensation (see inst	ructions).		
(a) Name and a		(b) Title, and average hours per week devoted to position		(d) Contributions employee benef plans and deferre compensation	it oth	xpense account, ner allowances
MANUEL G. LOUPASSI	<u> </u>	Foundation M	0.	(0.	0.
2601 park avenue RICHMOND, VA 23220)	6.00				
CAROLYN HODGES - I 2601 PARK AVENUE RICHMOND, VA 23220		Foundation M 6.00	0.	(0.	0.
2 Compensation of five h	ighest-paid employe	es (other than those inc	luded on line 1- see ir	structions). If non-	e, enter 'N	ONE.'
(a) Name and address o paid more than	f each employee \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions employee benef plans and deferre compensation	ıt `oth	xpense account, ner allowances
None		-				
		-				
		-		i		
						
Total number of other employ	ees paid over \$50,00	0 TEEA0306L 1	12/05/11		For	0 rm 990-PF (2011)

<u>Part VIII</u> Information About Officers, Directors, Trustees, Foundation Managers and Contractors (continued)	, Highly Paid Employees,
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
Rart 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 rorganizations and other beneficiaries served, conferences convened, research papers produced, etc.	number of Expenses
1 N/A	
2	
3	
4	
Part X-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on li	ines 1 and 2 Amount
1	
N/A	i i
2	
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3	▶ 0.
BAA	Form 990-PF (2011)

54-1947904

Page 7

Form 990-PF (2011) LOUPASSI FOUNDATION

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 1,754,416. 1 a 1 b 35,304. **b** Average of monthly cash balances c Fair market value of all other assets (see instructions) 1 c 1 d 789,720 d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c 0. 1 e (attach detailed explanation) 0. 2 2 Acquisition indebtedness applicable to line 1 assets 1,789,720. Subtract line 2 from line 1d 3 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions) 4 26,846. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 5 762,874. Minimum investment return. Enter 5% of line 5 88,144. 6 Part:XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations check here and do not complete this part.) Minimum investment return from Part X, line 6 88,144. 2a Tax on investment income for 2011 from Part VI, line 5 2a 424 588 2b b Income tax for 2011 (This does not include the tax from Part VI) 2 c c Add lines 2a and 2h 1,012. Distributable amount before adjustments. Subtract line 2c from line 1 3 87,132. 4 Recoveries of amounts treated as qualifying distributions 4 5 87,132. Deduction from distributable amount (see instructions). 6 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 87,132. 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. 1 a 108,674. **b** Program-related investments - total from Part IX-B 1 b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. purposes 2 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) За **b** Cash distribution test (attach the required schedule) 3b 108,674 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V. line 8, and Part XIII, line 4 4 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) 5 424. Adjusted qualifying distributions. Subtract line 5 from line 4 6 108,250.

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

BAA

Form 990-PF (2011)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI, line 7				87,132.
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			6,974.	
b Total for prior years 20 , 20 , 20		0.		
3 Excess distributions carryover, if any, to 2011				
a From 2006				
b From 2007				
c From 2008				
d From 2009		ļ		
e From 2010		<u> </u>		
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2011 from Part				
XII, line 4 ► \$ 108,674.			6,974.	
a Applied to 2010, but not more than line 2a			0,3/4.	
 Applied to undistributed income of prior years (Election required — see instructions) 		0.		
 Treated as distributions out of corpus (Election required — see instructions) 	0.			
d Applied to 2011 distributable amount				87,132.
e Remaining amount distributed out of corpus	14,568.			
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the	0.	. 42	·	0.
same amount must be shown in column (a))	> <u>}</u>			,
		`		
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	14,568.			
	21,000.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency				
has been issued, or on which the section				
4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable		0.		
amount — see instructions		U.		
 Undistributed income for 2010. Subtract line 4a from line 2a Taxable amount — see instructions. 			0.	`
THE 24 TANABLE WHITEHER SEE HIST GOLDING				
f Undistributed income for 2011 Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2012.				0.
7 Amounts treated as distributions out of			~	
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)			٠,	4
(see instructions)	0.			
8 Excess distributions carryover from 2006 not				
applied on line 5 or line 7 (see instructions).	0.			
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	14,568.		100	
10 Analysis of line 9	=			
a Excess from 2007]			
b Excess from 2008				
c Excess from 2009				
d Excess from 2010	-			
e Excess from 2011 14, 568.	<u> </u>			

Form 990-PF (2011) LOUPASSI FOUNDAT				54-1947904			
Part XIV Private Operating Foundation					N/A		
1a If the foundation has received a ruling or is effective for 2011, enter the date of the	ruling			_	7 1010		
b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)							
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	(b) 2010	Prior 3 years	(d) 2008	(a) Total		
investment return from Part X for each year listed	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total		
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							
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, 		ļ					
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	organization ha	nd \$5,000 or mor	e in		
assets at any time during th		istructions.)		.			
1 Information Regarding Foundation Managers of the foundation who		ore than 2% of the	total contributions r	eceived by the found	lation before the		
close of any tax year (but only if they have	e contributed more	than \$5,000) (See	section 507(d)(2))		201010 1110		
MANUEL G. LOUPASSI							
b List any managers of the foundation who	own 10% or more	of the stock of a cor	rporation (or an equ	ally large portion of t	he ownership of		
a partnership or other entity) of which the	foundation has a	10% or greater inter	est	any large pertient or t	no ownersing or		
None							
2 Information Regarding Contribution, Gra	nt Gift Loan Sch	olarchin etc Progr					
Check here In the foundation only r				s and does not acce	ot unsolicited		
requests for funds. If the foundation make							
complete items 2a, b, c, and d a The name, address, and telephone number	or of the person to	whom applications	should be addresse.	d			
a The flame, address, and telephone flamb	er or the person to	Whom applications	silould be addresse	u			
b The form in which applications should be	submitted and info	rmation and materia	als they should inclu	ide:			
c Any submission deadlines							
d Any restrictions or limitations on awards,	such as by geogra	phical areas, charita	able fields, kinds of i	nstitutions, or other	factors		
PAA					rm 000 PF (2011)		

3 Grants and Contributions Paid During the Recipient		Foundation status of recipient		Amount
Name and address (home or business)	substantial contributor	recipient		
Name and address (home or business) a Paid during the year See Statement 5	substantial contributor	recipient		
Total		T	<u>►</u> 3a	104,895.
b Approved for future payment				
Total			► 3b	

		ed business income		by section 512, 513, or 514	(e)
	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (See instructions)
1 Program service revenue a			code		
ab					
С					
d					
e				· ·	
g Fees and contracts from government agencies		<u></u>	 		
2 Membership dues and assessments.					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities					44,122
5 Net rental income or (loss) from real estate			· 'a 1 - 1 - 1		
a Debt-financed property					
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		<u> </u>			3,599
9 Net income or (loss) from special events					0,055
10 Gross profit or (loss) from sales of inventory					
11 Other revenue	137			- C	· 2000年1月期
a					
b					
c					
d					
e	* *, *, *		47.5 th;		47,721
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>	<u></u>		13	47,721
See worksheet in line 13 instructions to verify calcula	ations)				
Part XVI-B Relationship of Activities to t	he Accompl	ishment of Exer	npt Purp	oses	
Line No. Explain below how each activity for which accomplishment of the foundation's exem	n income is rep	orted in column (e) of their than by providing	of Part XVI-	A contributed importan	tly to the
4 INVESTMENT INCOME	.p., p.a., p.a.a. (a				
8 INVESTMENT INCOME					
		1.00			
					
				······································	
				·	

Part XVII	Information Regarding	g Transfers To an	d Transactions and	d Relationships Wit	h Noncharitable
	Fremnt Organization	Š			

							1	. 1	-
describe	ed in section 501(c) o	of the Code (otl	ngage in any of the ner than section 50	following wit	h any other organizati lizations) or in section	on 527,	:	Yes	No
relating	to political organizati	ions?							
a Transfer (1) Cas	rs from the reporting	touridation to a	a nonchantable ext	empt organiza	ation of		1 a (1)		X
` '	er assets						1a (2)		$\frac{x}{X}$
` ,	ansactions						14(2)	-	
	es of assets to a none	charitable ever	nnt organization				1 b (1)		X
	chases of assets from			ration			1 b (2)		X
	tal of facilities, equip		. •	ation			1 b (3)		X
	nbursement arranger		233613				1 b (4)		X
• •	ns or loan guarantee:						1 b (5)		$\frac{x}{X}$
• •	formance of services		n or fundraising so	dicitations			1 b (6)		$\frac{x}{X}$
• • •	of facilities, equipme				205		1c		$\frac{x}{X}$
C Snanny	or racinties, equipme	ent, maining no	s, other assets, or	paid employ	563		10		
the goo	ds otherassets ors	ervices aiven b	ov the reporting fou	undation If th	Column (b) should all e foundation received be goods, other assets	less than fair marke	t value in	ue of	
(a) Line no	(b) Amount involved		noncharitable exempt of			nsfers, transactions, and s		naement	<u></u>
N/A	(4)		,	<u> </u>					
			····					_	
					* ''	·			
					· ·	· ·			
	-		,						
			•						
						- "			
2a Is the fo	oundation directly or i ed in section 501(c) o	indirectly affilia of the Code (otl	ted with, or related ner than section 50	d to, one or m 01(c)(3)) or in	nore tax-exempt organ section 527?	zations	Yes	X	No
	complete the follows								
·) Name of organization	on	(b) Type of	organization		c) Description of rela	itionship		
N/A									
								-	
	<u> </u>							_	
111111		- 15-11 5-11	and the real real real real real			a the best of an inventories	and belief of		
Sign Here	and complete Declaration	of preparer (other th	nan taxpayer) is based or	n all information o	nedules and statements, and to f which preparer has any known	o the best of my knowledge viedge	May the I this return	RS discu	uss le lelow
I —	ature of officer or trustee		Dat	le ,	Title	•	(see instr	Yes	Ĺν•
—. !	Print/Type preparer's nam	ne	Prenader siona	ature 11.0	Date	Check X if	PTIN		
Paid	STEWART C. M	CINNES	STANDED VICE	K SHA	1/1/1/	self-employed	P00423	894	
Preparer		TEWART MC		1111	11 110	Firm's EIN ▶			
Use Only		O Box 640							
USC OIIIY		echanicsv	ille, VA 231	.11		Phone no (804)	730-	7455	
ВАА							Form 99		

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF

OMB No 1545-0047

2011

Name of the organization		Employer identification number				
LOUPASSI FOUNDATION		54-1947904				
Organization type (check one)						
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organizatio					
	4947(a)(1) nonexempt charitable trust not 527 political organization	treated as a private foundation				
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust trea	ated as a private foundation				
	501(c)(3) taxable private foundation					
Check if your organization is covered Note. Only a section 501(c)(7), (8), o	by the General Rule or a Special Rule r (10) organization can check boxes for both the General	Rule and a Special Rule See instructions				
General Rule X For an organization filing Form 99 contributor (Complete Parts I and	90, 990-EZ, or 990-PF that received, during the year, \$5,0d II)	000 or more (in money or property) from any one				
Special Rules						
509(a)(1) and $170(b)(1)(A)(vi)$ and	on filing Form 990 or 990-EZ that met the 33-1/3% support of received from any one contributor, during the year, a c 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Compl	contribution of the greater of (1) \$5.000 or				
total contributions of more than \$	0) organization filing Form 990 or 990-EZ that received fr 1,000 for use <i>exclusively</i> for religious, charitable, scientif en or animals Complete Parts I, II, and III	rom any one contributor, during the year, fic, literary, or educational purposes, or				
contributions for use <i>exclusively</i> f If this box is checked, enter here purpose Do not complete any of	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use <i>exclusively</i> for religious, charitable, etc, purposes, but these contributions did not total to more than \$1,000 lf this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc, purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively					
religious, charitable, etc, contribu	tions of \$5,000 or more during the year	▶ \$				
990-PE) but it must answer 'No' on P	covered by the General Rule and/or the Special Rules do Part IV, line 2, of its Form 990, or check the box on line F ot meet the filing requirements of Schedule B (Form 990	I of its Form 990-EZ or on Part I, line 2, of its				
BAA For Paperwork Reduction Act 990EZ, or 990-PF.	Notice, see the Instructions for Form 990,	Schedule B (Form 990, 990-EZ, or 990-PF) (2011)				

Schedule Name of org	B (Form 990, 990-EZ, or 990-PF) (2011)	Page	1 of 1 of Part 1
	SSI FOUNDATION	i ' '	947904
	Contributors (see instructions) Use duplicate copies of Part I if additional s		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MANUEL G. LOUPASSI	-	Person X Payroll
	2601 PARK AVEENUE RICHMOND , VA 23220	\$ <u>366,214.</u> -	Noncash X (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

1 to

of Part II

Name of organization

Employer identification number

LOUPASSI FOUNDATION 54-1947904

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
LI	ISTED SECURTIES			
1				
		= \$	241,214.	12/10/11
(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) lo. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
		_ _\$_		
		 	■ B (Form 990, 990-EZ,	000 ==:

1 to

of Part III

Name of organization
LOUPASSI FOUNDATION

Employer identification number 54-1947904

zart III] <i>Exclusively</i> religious, charitable, e organizations that total more than	\$1,000 for the year.Complete	cols (a) thre	ough (e) and the following line entry
	For organizations completing Part III, enter contributions of \$1,000 or less for the year Use duplicate copies of Part III if additional	(Enter this information once See	itable, etc, instructions	\$) \ \$N/
(a)	(b)	(c)		(d)
No. from	Purpose of gift	Use of gift		Description of how gift is held
Part I	N/A			
	N/A			
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relati	onship of transferor to transferee
(a)	(b)	(c)		(d)
No. from	Purpose of gift	Use of gift		Description of how gift is held
Part I	. u.poso si g.i.			
		(e) Transfer of gift		
	Transferee's name, addres		Relati	onship of transferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
Part I				
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relati	ionship of transferor to transferee
(a)	(b)	(c)	<u> </u>	(d)
No. from Part I	Purpose of gift	Use of gift		Description of how gift is held
				
		(e) Transfer of gift		
	Transferee's name, addres	ss, and ZIP + 4	Relati	onship of transferor to transferee
		į.		

011 ·	Fe	deral '	Staten	nents	r				Page '
·	LO	UPASSI	FOUND	ATION				!	54-194790
Statement 1 Form 990-PF, Part I, Line 16b Accounting Fees									
		Expe	a) enses <u>Books</u>	Inves	Net stment come		(c) ljusted : Income	Char	(d) itable poses
ACCOUNTING FEES	Total	\$	2,500. 2,500.	\$	2,500. 2,500.	\$ \$	2,500. 2,500.	\$	0.
Statement 2 Form 990-PF, Part I, Line 18 Taxes									
		Expe	a) enses Books	Inves	Net stment come	Ad <u>Net</u>	(c) ljusted : Income	Char	(d) itable poses
TAXES ON INCOME	Total	\$	236. 236.	\$	236. 236.	\$	236. 236.	\$	0
Statement 3 Form 990-PF, Part I, Line 23 Other Expenses									
			(a) enses Books	Inves	Net stment ncome	A <u>Net</u>	(c) djusted Income		(d) ritable rposes
BANK FEES LICENSES TAXES ON FOREIGN INCOME	_ _+ _1	\$	18. 25. 947. 990.		18. 25. 947. 990.		18. 25. 947. 990.		0
	Total	<u> </u>	770.	<u>\$</u>	<u> </u>	<u> </u>		<u>\$</u>	
Statement 4 Form 990-PF, Part VII-A, Line 10 Substantial Contributors During t									

MANUEL G. LOUPASSI

2601 PARK AVENUE RICHMOND, VA 23220

2011 '	Federal Stat	ements		Page 2
·	LOUPASSI FOUI	NDATION		54-1947904
Statement 5 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year		Farm d		
Name and Address	Donee <u>Relationship</u>	Found- ation <u>Status</u>	Purpose of Grant	 Amount
CROSS OVER MINISTRY RICHMOND, VA	NONE		MEDICAL	\$ 2,000.
LEWIS GINTER BOTANICAL GARDEN RICHMOLND, VA	NONE		EDUCATIONAL	2,500.
MASSEY CANCER CENTER RICHMOND, VA	NONE		MEDICAL	5,000.
SCIENCE MUSEUM OF VIRGINIA RICHMOND, VA	NONE		EDUCATIONAL	3,000.
ST CATHERINE'S SCHOOL	NONE		EDUCATIONAL	21,000.

FOUNDATION RICHMOND, VA ST CHRISTOPHERS SCHOOL RICHMOND, VA NONE EDUCATIONAL 7,000. STS CONSTANTINE AND HELEN NONE CHURCH 3,630. GREEK CHURCH RICHMOND, VA THE HEALING PLACE RICHMOND, VA MEDICAL NONE 5,000. VA HOME FOR BOYS AND GIRLS EDUCATIONAL 5,000. NONE RICHMOND, VA VA HOLOCAUST MUSEUM NONE EDUCATIONAL 5,000. RICHMOND, VA VA MUSEUM OF FINE ARTS NONE EDUCATIONAL 5,000. RICHMOND, VA WASHINGTON & LEE UNIVERSITY NONE EDUCATIONAL 2,500. LEXINGTON, VA OTHER CHARITIES RICHMOND, VA NONE CHARITY & 38,265. **EDUCATION**

Total \$ 104,895.

LOUPASSI FOUNDATION

Transaction Detail By Account

10/15/12 Cash Basis

10:27 AM

January through December 2011

Type Date	Num	Name	Мето	Class	ច់	Split	Original Amount	A Pico
American Heart Association Check 2/14/2011	1523	American Heart Ass			1			
Total American Heart Association						BANKUFAME	100 00	100 00
Annunciation Greek Church Check 11/20/2011		Annunciation Greek				7		100 00
Total Annunciation Greek Church						BANKUFAME.	25 00	25 00
AVON WALK FOR BREAST CANCER Check 3/9/2011	1534	AVON WALK FOR						25 00
Total AVON WALK FOR BREAST CANCER	ER					BANKOFAME .	200 00	200 00
Big Brothers Big Sisters Check 12/27/2011	2110	Ric Brothers Dis Co.						200 00
3rothers Big Sist) : :	oly vivileis vig ols.				BANKOFAME.	1,000 00	1,000 00
Bon Secours Richmond Health Foundation Check 12/27/2011 211	tion 2111	Bon Secours Richm				L ()	ļ	1,000 00
Total Bon Secours Richmond Health Foundation	ndation					BANKOFAME.	200 00	200 00
Boys and Girls Clubs Check 12/27/2011	2120	Bovs and Girle Clube						200 00
Total Boys and Girls Clubs						BANKOFAME	1,000 00	1,000 00
CARITAS Check 12/27/2011	2097	CARITAS						1,000 00
Total CARITAS		2				BANKOFAME	1,000.00	1,000 00
Cross Over Ministry, Inc. Check 12/27/2011	2105	Cross Over Ministry	i memory of					1,000 00
Total Cross Over Ministry, Inc						BANKOFAME	2,000 00	2,000 00
ELK HILL FARM 12/27/2011 Check	2101	ELK HILL FARM						2,000 00
Total ELK HILL FARM						BANKOFAME	1,000 00	1,000 00
Friends of Hollywood Cemetery Check 12/27/2011	2112	Friends of Hollywoo						1,000 00
Total Friends of Hollywood Cemetery						BANKOFAME.	100 00	100 00
HOUSE OF TEMPLE HISTORIC PRESERVATION Check 7/18/2011 1545	WATION 1545	HOUSE OF TEMPL				L		100 00
Total HOUSE OF TEMPLE HISTORIC PRESERVATION	ESERVAT					BANKOFAME	15 00	15 00
LEWIS GINTER BOTANICAL GARDEN Check 12/27/2011	2106	LEWIS GINTER BO						15 00
IICAL GARDI	i N					BANKOFAME .	2,500 00	2,500 00
MASSEY CANCER CENTER								2,500 00

Transaction Detail By Account January through December 2011 **LOUPASSI FOUNDATION**

10/15/12 Cash Basis

10:27 AM

Original Amount Paid Amount	5,000 00 5,000 00	5,000 00	500.00	200 00	20 00 20 20 00	20 00	3,000.00	3,000 00	100 00 100.00 100.00	200 00	1,000 00 1,000 00		100 00 100 00	100 00	200 00 200 200 00	200 00	20,000 00	2	00 000,7 00 000,7		20 00 20 00 20 00
Split	BANKOFAME		BANKOFAME.		BANKOFAME.		BANKOFAME		BANKOFAME BANKOFAME		BANKOFAME		BANKOFAME		BANKOFAME .		BANKOFAME. BANKOFAME.		BANKOFAME		BANKOFAME.
Class Clr																					ST CON
Мето									in memory of . in memory of				in memory of						bal on pledge		
Name	MASSEY CANCER		McShin Foundation		NAACP		SCIENCE MUSEU.	NOI	Scottish Rite Childh		SPCA		ST BENEDICT'S C.		St Benedict Catholic.		ST CATHERINE'S ST CATHERINE'S		ST CHRISTOPHER		Sts Constantine & H Sts Constantine & H
Num	2091		2102		2098		NDATION 2100	FOUNDAT	n ter 1526 1526	Center	1540		1522	ЗСН	1390		10N 1550 2118	NDATION	1539		Ð
Date	12/27/2011	ER CENTER	12/27/2011	uo	12/27/2011		JE VIRGINIA FOUN 12/27/2011	UM OF VIRGINIA	od Language Cer 2/14/2011 2/18/2011	Idhood Language	5/3/2011		HOLIC CHURCH 1/5/2011	CATHOLIC CHUI	School 12/15/2011	olic School	:HOOL FOUNDAT 11/3/2011 12/27/2011	S SCHOOL FOUR	SCHOOL 5/3/2011	IERS SCHOOL	elen Building Fun 6/28/2011 7/6/2011
Туре	Check	Total MASSEY CANCER CENTER	Check	Total McShin Foundation	NAACP Check	Total NAACP	SCIENCE MUSEUM OF VIRGINIA FOUNDATION Check 12/27/2011 2100	Total SCIENCE MUSEUM OF VIRGINIA FOUNDATION	Scottish Rite Childhood Language Center Check 2/14/2011 15 Check 2/18/2011 15	Total Scottish Rite Childhood Language Center	SPCA Check	Total SPCA	ST BENEDICT'S CATHOLIC CHURCH Check 1/5/2011	Total ST BENEDICT'S CATHOLIC CHURCH	St Benedict Catholic School Check 12/1	Total St Benedict Catholic School	ST CATHERINE'S SCHOOL FOUNDATION Check 11/3/2011 1: Check 12/27/2011 2:	Total ST CATHERINE'S SCHOOL FOUNDATION	ST CHRISTOPHERS SCHOOL Check 5/3/2/	Total ST CHRISTOPHERS SCHOOL	Sts Constantine & Helen Building Fund Check 6/28/2011 Check 7/6/2011

Transaction Detail By Account January through December 2011 **LOUPASSI FOUNDATION**

10:27 AM 10/15/12 Cash Basis

1/16/2011 1513 513 CONSTANTIN. In memory of a BANKGPAME 1000	246	Date	N E	Name	Memo	Class	ភ	Split	Original Amount	Paid Amount
NSTANTIN. BANKOFAME. SO 00 SO 00 NSTANTIN. BANKOFAME. SO 00 SO 00 NSTANTIN. BANKOFAME. SO 00 NSTANTIN. BANKOFAME. SO 00 SO	Check	1/16/2011	1513	STS CONSTANTIN.			ļ	DANIVOLANI		
NSTANTIN NT memory of NSTANTIN NSTANTIN NT memory of NSTANTIN N	Check	2/3/2011	1505	STS CONSTANTIN				BANKOFAME	100 00	100 00
MSTANTIN	Check	2/11/2011	1506	STS CONSTANTIN.				BANKOFAME.	100.00	100 001
NSTANTIN In memory of BANKOFAME 50.00	Check	3/6/2011	1530	STS CONSTANTIN				BANKOFAME.	100.00	00 001
NSTANTIN. NSTANTIN. NSTANTIN. NSTANTIN. IN memory of BANKOFAME. BANKOFAME. BANKOFAME. 100 00 BANKOFAME. 50 00 10 0	check Check	3/7/2011	1533	STS CONSTANTIN	in memory of			BANKOFAME	00 00	00 001
NSTANTIN. In memory of BANKOFAME. 100 00 NSTANTIN. In memory of BANKOFAME. 50 00 NSTANTIN. In memory of BANKOFAME. 50 00 NSTANTIN. In memory of BANKOFAME. 50 00 NSTANTIN. BANKOFAME. 100 00 NSTANTIN. BANKOFAME. 50 00 NSTANTIN. BANKOFAME. 100 00 ALING PLA. BANKOFAME. 50 00 ALING PLA. BANKOFAME. 50 00 BANKOFAME. 1,000 00 1,0 COTTISH RI. In Memory of BANKOFAME. 1,000 00 1,0 BANKOFAME. 1,000 00 1,0 1,0 BANKOFAME. 1,000 00 1,0 1,0 1,0 1,0 1,0 1,0	oneck Proof:	3/21/2011	1527	STS CONSTANTIN.				BANKOFAME	00.00	30,00
NSTANTIN IN memory of BANKOFAME. 100 00 NSTANTIN. IN memory of BANKOFAME. 50 00 NSTANTIN. IN memory of BANKOFAME. 50 00 NSTANTIN. BANKOFAME. 50 00 BANKOFAME. 100 00 INSTANTIN. BANK	J. Heck	4/5/2011	1535	STS CONSTANTIN	in memory of			BANKOFAME	100 00	100 00
NSTANTIN. in memory of BANKOFAME 5000 NSTANTIN. In memory of BANKOFAME 5000 NSTANTIN. BANKOFAME 10000 NSTANTIN. BANKOFAME 500000 SANKOFAME 10000 BANKOFAME 500000 SANKOFAME 100000 SANKOFAME 100000 10000 SANKOFAME 100000 100000 SANKOFAME 100000 100000000000000000000000000000	Shock Shock	4/26/2011	1529	STS CONSTANTIN	in memory of			BANKOFAME	1000	100 00
MSTANTIN In memory of BANKOFAME 50 00 MSTANTIN BANKOFAME 50 00 MSTANTIN BANKOFAME 50 00 MSTANTIN BANKOFAME 50 00 MSTANTIN BANKOFAME 50 00 BANKOFAME 50 00 BANKOFAME 50 00 BANKOFAME 100 00 MSTANTIN BANKOFAME 2,000.00 2,0 MSTANTIN BANKOFAME 2,000.00 2,0 MSTANTIN BANKOFAME 2,000.00 1,0 MSTANTIN BANKOFAME 2,000.00 2,0 MSTANTIN BANKOFAME 2,000.00 1,0 MSTANTIN BANKOFAME 1,000 00 MSTAN	hook	4/28/2011	1528	STS CONSTANTIN.	in memory of			BANKOFAME	50 05	88
Mary Nation Bank Of Fame So 00 Mary Stantin Memory of Bank Of Fame 1,000 Mary Stantin Mary Of Bank Of Fame 1,000 Mary Stantin Mary School 1,00 Mary Stantin Mary Stantin 1,000 Mary Stantin 1,000 1,00 Mary Stantin	hock	1102/21/0	1543	STS CONSTANTIN	in memory of			BANKOFAME	20 05	20.00
NSTANTIN BANKOFAME 50.00	hook	L102/11/1		STS CONSTANTIN				BANKOFAME	0005	30.00
NSTANTIN	rieck hoof	8///2011		STS CONSTANTIN				BANKOFAME		2
NSTANTIN	, leck	8/14/2011		STS CONSTANTIN.				BANKOFAME.	30.00	50.00
Mard School BankOFAME 50.00 10	, neck	9/27/2011	1555	STS CONSTANTIN				BANKOFAME	00 06	00 00
BANKOFAME 100 00	heck	10/2/2011	1541	STS CONSTANTIN.				BANKOFAME.	90.00	20
BANKOFAME 25 00 1	heck	10/30/2011	1546	STS CONSTANTIN					90.00	20 00
BANKOFAME	heck	10/30/2011	1554	STS CONSTANTIN				DAINNOFAIME	25 00	25 (
NSTANTIN	heck	11/27/2011	1549	STS CONSTANTIN				BANKOFAME.	2 00	5 00
BANKOFAME 100.00 2	heck	12/11/2011	1548	STS CONSTANTIN				BANKOFAME.	100.00	100 00
BANKOFAME	Sheck	12/18/2011	2089	STS CONSTANTIN				BANKOFAME.	100.00	100 00
BANKOFAME	heck	12/25/2011	1385	STS CONSTANTIN				BANKOFAME	100 00	100 00
BANKOFAME	heck	12/27/2011	2107	STS CONSTANTIN				BANKOFAME.	100 00	100 00
Idren's Mus BANKOFAME 500 00	TO CONTO			· NILINGISMOODIO				BANKOFAME	2,000.00	2,000 00
Ind Lodge of . BANKOFAME. 500 00 Ind Lodge of . BANKOFAME . 25 00 ALING PLA. BANKOFAME . 5,000.00 LVATION A BANKOFAME . 1,000 00 ward School BANKOFAME . 1,000 00	I O I O CONSTANT	NE AND HELEN	GREEK OF	*THODOX						, 000 0
Idren's Mus BANKOFAME 500 00 Ind Lodge of BANKOFAME 25 00 ALING PLA. BANKOFAME 5,000.00 LVATION A BANKOFAME 1,000 00 OTTISH RI In Memory of BANKOFAME 1,000 00 ward School BANKOFAME 1,000.00	Children's Museu									Osa's
ALING PLA. BANKOFAME 25 00 CALING PLA. BANKOFAME 5,000.00 COTTISH RI. In Memory of BANKOFAME 1,000 00 Ward School BANKOFAME 1,000.00	heck	12/27/2011	2096	The Children's Mus				BANKOFAME	000	
Ind Lodge of . BANKOFAME . 25 00 SALING PLA. BANKOFAME . 5,000.00 LVATION A BANKOFAME . 1,000 00 OTTISH RI In Memory of . BANKOFAME . 1,000 00 ward School BANKOFAME . 1,000.00	l The Children's Mu	seum							00 006	00 009
Ind Lodge of . BANKOFAME . 25 00 ALING PLA. BANKOFAME . 5,000.00 LVATION A BANKOFAME . 1,000 00 COTTISH RI In Memory of . BANKOFAME . 1,000 00 ward School BANKOFAME . 1,000.00	Grand Lodge of V									200 00
"ALING PLA. BANKOFAME 25 00 "ALING PLA. BANKOFAME 5,000.00 "LVATION A BANKOFAME. 1,000 00 "OTTISH R! In Memory of BANKOFAME 1,000 00 "ward School BANKOFAME 1,000 00	heck		2104	The Grand Lades						
ALING PLA. BANKOFAME 5,000.00 LVATION A BANKOFAME. 1,000 00 COTTISH RI In Memory of BANKOFAME . 1,000 00 ward School 1,000.00	The Great Lader		5	ille Grand Lodge of .				BANKOFAME.	25 00	25 00
ALING PLA. BANKOFAME 5,000.00 LVATION A BANKOFAME 1,000 00 COTTISH RI In Memory of BANKOFAME 1,000 00 ward School BANKOFAME 1,000.00	i ile Gialla Loage	or væ								
LVATION A BANKOFAME. 1,000 00 1,000 00 1,000 00 1,000 00 1,000 00 1,000 00 1,000 00 1,000 00	HEALING PLACE theck	12/27/2011	2099	THE HEALING PLA.				7000		75 00
LVATION A BANKOFAME 1,000 00 COTTISH RI In Memory of BANKOFAME . 1,000 00 ward School 1,000.00	THE HEALING PL	ACE						DANACIAME	5,000.00	5,000 00
LVATION A BANKOFAME 1,000 00 OTTISH RI In Memory of BANKOFAME . 1,000 00 ward School 1,000.00	SALVATION ARM	>								5,000 00
1,000 00 1,000 00	heck	•	2094	THE SALVATION A						
OTTISH RI. In Memory of . BANKOFAME . 1,000 00	I THE SALVATION	ARMY						BANKOFAME	1,000 00	1,000 00
OTTISH RI. In Memory of . BANKOFAME . 1,000 00	SCOTTISH RITE (HILDHOOD LAI	NGUAGE CI	į						1,000 00
ward School 1,000.00 1	5	1102/12/21	7607		In Memory of .			BANKOFAME	1 000 00	
12/27/2011 2113 The Steward School BANKOFAME. 1,000.00	THE SCOTTISH F	ITE CHILDHOO	D LANGUA	SE CENT	•				00 000'1	1,000 00
12/27/2011 2113 The Steward School 1,000.00 1,000.00	Steward School									1,000 00
5ANKOFAME. 1,000.00	heck	12/27/2011	2113	The Steward School						
	The Steward Scho	7						BANKOLAME.	1,000.00	1,000 00
		5								

104,895.00

LOUPASSI FOUNDATION Transaction Detail By Account January through December 2011

10:27 AM 10/15/12 Cash Basis

	Paid Am	1,000 00 1,000 00	1,000 00 1,000 00	5,000 00 5,000 00	5,000 00	5,000 00	500 00 500 00	1,000 00 1,000 00	1,000 00 1,000 00	1,200 00 1,200 00 800.00 800 00	2,500 00 2,500 00	500 00 500 00
ii C	RANIK	BANKOFAME.	BANKOFAME	BANKOFAME	BANKOFAME	BANKOFAME	BANKOFAME .	BANKOFAME	BANKOFAME	BANKOFAME BANKOFAME	BANKOFAME	BANKOFAME.
Class Clr	1											
Memo				elevator								
Name	THE VA HOME		UNIVERSITY OF RI.	Va Holocaust Muse	VA HOME FOR BO .	VA MUSEUM OF FI	Va Supportive Hous.	Valentine Richmond	VIRGINIA HISTORI	Virginia Squash Virginia Squash	WASHINGTON & L	william byrd commu
Ncm	2103		2116	1524	1538	2109	2115	2095	2093	1547 2119	2117 Y	2114
Туре	Check 12/27/2011	Total THE VA HOME	UNIVERSITY OF RICHMOND Check 12/27/2011 Total UNIVERSITY OF RICHMOND	Va Holocaust Museum Check 2/14/2011 Total Va Holocaust Museum	 VA HOME FOR BOYS AND GIRLS Check 5/3/2011 Total VA HOME FOR BOYS AND GIRLS 	VA MUSEUM OF FINE ARTS Check Total VA MUSEUM OF FINE ARTS	Va Supportive Housing Check Total Va Supportive Housing	Valentine Richmond History Center Check Total Valentine Richmond History Center	VIRGINIA HISTORICAL SOCIETY Check Total VIRGINIA HISTORICAL SOCIETY	Virginia Squash Check 9/23/2011 Check 12/27/2011 Total Virginia Squash	WASHINGTON & LEE UNIVERSITY Check Total WASHINGTON & LEE UNIVERSITY	william byrd community home Check Total william byrd community home