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# Form 990-PF

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

2012

OMB No 1545-0052

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

For cale	endar year 2012, or tax year beginning	, 2012,	and ending	<u> </u>	
LOUPASSI FOUNDATION 2601 PARK AVENUE RICHMOND, VA 23220-2645				## A Employer identification number	
				C If exemption application is pending, check here	
G Che	ck all that apply: Initial return	Initial return of a form	ner public charity	D 1 Foreign organizations, check here	<b>►</b>
	Address change	Name change		2 Foreign organizations meeting the 85% test, chec	.k
H CI		(c)(3) exempt private f		here and attach computation	
	Section 4947(a)(1) nonexempt charitable t			E If private foundation status was terminated under section 507(b)(1)(A), check here	►□
		ounting method: XC Other (specify)	<u> </u>		Ш
► \$	1 1	column (d) must be on		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here.	►
Part I	Analysis of Revenue and	(a) Revenue and	(b) Net investmen	t (c) Adjusted net (d) Disburseme	nts
	Expenses (The total of amounts in columns (b), (c), and (d) may not neces-	expenses per books	income	income for charital	ble
	sarily equal the amounts in column (a)			purposes (c basis only	
	(see instructions))  1 Contributions, gifts, grants, etc, received (att sch)	399,000.			<u> </u>
	2 Ck lifthe foundn is <b>not</b> req to att Sch B	000,000		-	
	Interest on savings and temporary cash investments				İ
	4 Dividends and interest from securities	59,278.	59,27	8. 59,278.	
	5 a Gross rents b Net rental income				
R	or (loss)  6 a Net gain/(loss) from sale of assets not on line 10	-472.			
Ë	b Gross sales price for all assets on line 6a 1,640.	1721			
E N	7 Capital gain net income (from Part IV, line 2)			0.	
N	Net short-term capital gain     Income modifications			0.	
Ě	10 a Gross sales less returns and		<del></del>		
	allowances h Less Cost of				
	goods sold c Gross profit/(loss) (att sch)				
	11 Other income (attach schedule)				
	Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc.	457,806. 0.	59,27	8. 59,278.	
	14 Other employee salaries and wages	<del></del>			
	15 Pension plans, employee benefits				
A D	16 a Legal fees (attach schedule) See 19451 b Accounting fees (attach sch) See 19451	500	50	500	
M	c Other prof fees (attach sch)	500.	50	0. 500.	
0 I	17 Interest [3] NOV I 8 201	3 0			
O S T R A	18 Taxes (attach schedule)(see instrs)	S			
ÄÄÄ	19 Depreciation (attach sch) and depletion 3000 11				
I NG	sch) and depletion SOEN, U	Ĭ <u> </u>			!
	<ul><li>21 Travel, conferences, and meetings</li><li>22 Printing and publications</li></ul>				
A E N X D P	23 Other expenses (attach schedule)			<del>-  </del>	
Ë	See Statement 2	1,001.	1,00	1. 1,001.	
S E	Total operating and administrative expenses. Add lines 13 through 23	1,501.	1,50	1. 1,501.	
3	25 Contributions, gifts, grants paid Part XV	120,522.	2,00	120,5	522.
	26 Total expenses and disbursements. Add lines 24 and 25	122,023.	1,50	1. 1,501. 120,5	522.
	27 Subtract line 26 from line 12 a Excess of revenue over expenses				
	and disbursements	_335,783.			
	<b>b</b> Net investment income (if negative, enter -0 )		57,77		
	C Adjusted net income (if negative, enter -0-)	l		57,777.	

Page 2

Day		Balanaa Chaata	Attached schedules and amounts in the description	Beginning of year		na o	t year
Par		Balance Sheets	column should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	;	(c) Fair Market Value
	1	Cash - non-interest	-bearing	24,995.	31,28	32.	31,282.
	2		ary cash investments		+=/-		
		Accounts receivable	•				
		Less allowance for					
	4	Pledges receivable	·		-		
	ļ .	Less allowance for	doubtful accounts ►	-			
	5	Grants receivable				_	
	6		cers, directors, trustees, and other				
	"	disqualified persons (atta	ch schedule) (see instructions)				
	7	Other notes and loans red	ewable (attach sch) ►				
A		Less allowance for	doubtful accounts		-		
S	8	Inventories for sale	or use				
A S E T	9	Prepaid expenses a	nd deferred charges				
S	10 a	Investments – US obligations (attach s	and state government				-
	١.	Investments — corporate	, and the second	1 066 103	2 205 60	-	2 604 104
	l	•		1,966,193.	2,295,68	99.	2,684,184.
		: Investments — corporate	;				
	11	Investments – land, equipment basis					
		Less accumulated depred (attach schedule)	elation •				
	12	Investments - mort	gage loans				
	13	Investments - other	(attach schedule)				
	14	Land, buildings, and	l equipment. basis ►				
		Less accumulated depred (attach schedule)	elation				
	15	Other assets (descri	be ► )				
	16	Total assets (to be a see the instructions	completed by all filers – Also, see page 1, item I)	1,991,188.	2,326,9	71.	2,715,466.
Ļ	17	Accounts payable a	nd accrued expenses				
Å	18	Grants payable					
B	19	Deferred revenue					
Ľ	20	Loans from officers, direc	tors, trustees, & other disqualified persons				
Ţ	21	Mortgages and other note	s payable (attach schedule)				
- i	22	Other liabilities (des	cribe • )				
E S	22	Total liabilities (add	lines 17 through 22)	0		0.	
	23	Foundations that fo	llow SFAS 117, check here ► X	0.		<del>"</del>	
		and complete lines	24 through 26 and lines 30 and 31.				
NF	24	Unrestricted.		1,991,188.	2,326,9	71.	
E U	25	Temporarily restricted					
ΔD	26	Permanently restrict					
A S S A E T A		Foundations that do and complete lines	o not follow SFAS 117, check here 27 through 31.				
E L T A	27	Capital stock, trust j	orincipal, or current funds				
SΜ	28	Paid-in or capital surplus	, or land, building, and equipment fund				
O E	29	Retained earnings, accum	ulated income, endowment, or other funds				
R S	30		fund balances(see instructions)	1,991,188.	<u>2</u> ,326,9	71.	
	31	Total liabilities and (see instructions)	net assets/fund balances	1,991,188.	2,326,9	71	
Par	  -	•	ges in Net Assets or Fund Balanc		2,320,3	<u>/ 1 · ]</u>	<u></u>
			<u> </u>				
1			alances at beginning of year– Part II, colur d on prior year's return)	mn (a), line 30 (must agi	ree with	1	1,991,188.
2	Ente	r amount from Part I,	line 27a			2	335,783.
3		increases not included in li				3	3337,733.
4		lines 1, 2, and 3		<b></b>	+	4	2,326,971.
5	Decrea	ases not included in line 2	(Itemize)		ŀ	5	
_ 6	Total	net assets or fund b	alances at end of year (line 4 minus line 5)	⊢ Part II, column (b), Iın	e 30	6	2,326,971.

1 41	(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company)  (b) How acq P - Purcha D - Donate D -			se	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)	
1 a	41 SHS MOTOROLA MOB	ILITY		D		Various	5/22/12
Ŀ							
- 0	<b>:</b>						
c	1						
•						- <u>·</u>	
	(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	1,640.		2	,112.			-472.
Ŀ							
	1						
E							
	Complete only for assets showing	ng gain in column (h) and owned by	the foundation on 12/31/69			(I) Gains (Colu	
	(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	1)		ain minus column (k in -0-) <b>or</b> Losses (fro	
a	1						-472.
Ŀ	)						
	• · · · · · · · · · · · · · · · · · · ·						
-	1						
•	•						
2	Capital gain net income or (net		enter in Part I, line 7 ter -0- in Part I, line 7		2		-472.
3	Net short-term capital gain or (le	oss) as defined in sections 1222(5) a	and (6)				
	If gain, also enter in Part I, line	8, column (c) (see instructions) If (	loss), enter -0-				
	ın Part I, line 8				3		-472.
Pai	t V Qualification Under	Section 4940(e) for Reduced	Tax on Net Investmen	t Incom	e		
	es,' the foundation does not quali	ion 4942 tax on the distributable among the first section 4940(e). Do not continue and column for each year, see the	nplete this part.			Yes	X No
		(b)	(c)	ing chares		(d)	
	(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use asse	ts	(colu	Distribution imn (b) divided t	
	2011	104,895.	1,966	,193.			0.053349
	2010	75,083.	1,640				0.045760
	2009	48,395.	1,332	,394.			0.036322
	2008	63,568.	1,324	,957.			0.047977
	2007	51,518.	1,168	,033.			0.044107
	<u></u>						<del></del>
2	Total of line 1, column (d)				2		0.227515
3		e 5-year base period— divide the tota has been in existence if less than 5			3		0.045503
4	Enter the net value of noncharit	able-use assets for 2012 from Part >	K, line 5		4		2,077,857.
5	Multiply line 4 by line 3				5		94,549.
6	Enter 1% of net investment inco	ome (1% of Part I, line 27b)			6		578.
7	Add lines 5 and 6				7		95,127.
8	Enter qualifying distributions fro	om Part XII, line 4			8		120,522.
	If line 8 is equal to or greater the Part VI instructions	an line 7, check the box in Part VI,	line 1b, and complete that pa	rt using a	1%	tax rate. See the	

Par	VI 🚉 Excise Tax Based on Investment Income (Section 4940(a), 49			instruction	1s)	
1 a	Exempt operating foundations described in section 4940(d)(2), check here					
	Date of ruling or determination letter: (attach copy of letter if necessar	y- see	e instrs)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V,		Γ	1	578.	
	check here ► X and enter 1% of Part I, line 27b	10			A A	
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, I	line 12, c	olumn (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			2	0.	
3	Add lines 1 and 2			3	578.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundation	ns only	y. Others enter -0-)	4	0.	
5	Tax based on investment incomeSubtract line 4 from line 3 If zero or less, ente	er -0-		5	578.	
6	Credits/Payments					
	2012 estimated tax pmts and 2011 overpayment credited to 2012	6 a	576.		125 15	
	Exempt foreign organizations – tax withheld at source	6 b				
	Tax paid with application for extension of time to file (Form 8868)	6 c				
	Backup withholding erroneously withheld	6 d				
7	Total credits and payments. Add lines 6a through 6d			7	576.	
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 22	220 is a	attached	8		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		•	9	2.	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter theamount overpaid		•	10		
11	Enter the amount of line 10 to be: Credited to 2013 estimated tax		Refunded <b>&gt;</b>	11	<del></del>	
Par	t VII-A   Statements Regarding Activities					
1 a	During the tax year, did the foundation attempt to influence any national, state, or participate or intervene in any political campaign?	or local	legislation or did it		Yes No	
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?						
If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities						
	Did the foundation file Form 1120-POL for this year?				1 c X	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed			•		
е	(1) On the foundation    Solution    Solut		►\$ penditure tax imposed	on 0	-	
2	Has the foundation engaged in any activities that have not previously been repor	ted to	the IRS?		2 X	
-	If 'Yes,' attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conform	govern	ning instrument, article	s	3 X	
Λa	Did the foundation have unrelated business gross income of \$1,000 or more during				4a X	
	If 'Yes,' has it filed a tax return on Form 990-T for this year?		, , , ,		4.1 32/2	
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5 N/A	
•	If 'Yes,' attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) s	satisfie	d either:			
_	By language in the governing instrument, or					
<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?</li> </ul>						
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, o				6 X	
	Enter the states to which the foundation reports or with which it is registered (se					
	N/A		<i>'</i> –			
ь	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gen (or designate) of each state as required by General Instruction G? If 'No,' attach explanation	ieral	· · · · · · · · · · · · · · · · · · ·		8b X	
9	Is the foundation claiming status as a private operating foundation within the me for calendar year 2012 or the taxable year beginning in 2012 (see instructions for	anıng	of section 4942(j)(3) o	4942())(5)		
10	Did any persons become substantial contributors during the tax year? If 'Yes,' att				9 X	
BAA	and addresses .				10 X Form 990-PF (2012)	

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charitable purposes?

the tax year beginning in 2012?

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3ь

4 a

4 b

N/A

X

b If 'Yes,' did it have excess business holdings in 2012 as a result o(1) any purchase by the foundation or disqualified persons after May 26, 1969,(2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period?(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012.).

4a Did the foundation invest during the year any amount in a manner that would jeopardize its

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of

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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: 1 a a Average monthly fair market value of securities 2,081,360. 1 b **b** Average of monthly cash balances 28,139. 1 c c Fair market value of all other assets (see instructions). 1 d 2,109,499. d Total (add lines 1a, b, and c). e Reduction claimed for blockage or other factors reported on lines 1a and 1c 1 e 0. (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets 2 0. 3 2,109,499. Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions) 4 31,642. Net value of noncharitable-use assetsSubtract line 4 from line 3 Enter here and on Part V, line 4 5 2,077,857. 5 Minimum investment return Enter 5% of line 5 6 103,893. Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.) 1 Minimum investment return from Part X, line 6 1 103,893. 2a Tax on investment income for 2012 from Part VI, line 5 2 a 578 b Income tax for 2012. (This does not include the tax from Part VI) 2 b c Add lines 2a and 2b 2 c 578. 3 103,315. 3 Distributable amount before adjustments. Subtract line 2c from line 1 4 4 Recoveries of amounts treated as qualifying distributions 5 103,315. 6 Deduction from distributable amount (see instructions) Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 103,315. Part XII Qualifying Distributions (see instructions) 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 120,522. **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) 3 a 3 b **b** Cash distribution test (attach the required schedule) Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 120,522. Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. 5 Enter 1% of Part I, line 27b (see instructions) 578. 6 Adjusted qualifying distributions Subtract line 5 from line 4 119,944.

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

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## Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	<b>(c)</b> 2011	<b>(d)</b> 2012
Distributable amount for 2012 from Part XI, line 7				102 215
2 Undistributed income, if any, as of the end of 2012				103,315.
a Enter amount for 2011 only			0.	
<b>b</b> Total for prior years 20 , 20 , 20		0.		
3 Excess distributions carryover, if any, to 2012.				
<b>a</b> From 2007				
<b>b</b> From 2008				
c From 2009				
<b>d</b> From 2010				,
<b>e</b> From 2011 14,568.	<del></del>			
f Total of lines 3a through e	14,568.			
4 Qualifying distributions for 2012 from Part				
XII, line 4: ► \$ 120, 522.				
a Applied to 2011, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior years (Election required – see instructions)		0.		
c Treated as distributions out of corpus				
(Election required – see instructions)	0.			
d Applied to 2012 distributable amount				<u>103,31</u> 5.
e Remaining amount distributed out of corpus	17,207.			<del></del>
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the	0.			0.
same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	31,775.			
	31,773.			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b		0.1		
c Enter the amount of prior years' undistribut-	······································	0.		
ed 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				
amount - see instructions		0.		
e Undistributed income for 2011 Subtract line 4a from				
line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2012. Subtract lines				
4d and 5 from line 1. This amount must be				
distributed in 2013				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0			
, ,	0.			
8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	31,775.			
10 Analysis of line 9	31,773.			
a Excess from 2008				
<b>b</b> Excess from 2009				
c Excess from 2010				
<b>d</b> Excess from 2011 14,568.				!
e Excess from 2012 . 17, 207.	<u></u>	<u> </u>		
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Form 990-PF (2012) LOUPASSI FOUNDAT		waters and Dar	t VII A guastia	54-1947904			
Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)  N/A  1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling							
is effective for 2012, enter the date of the ruling							
b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or							
2 a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	4.20011	Prior 3 years	(4) 2000	/-> <b>T</b> - <b>i</b> - 1		
investment return from Part X for each year listed	(a) 2012	<b>(b)</b> 2011	(c) 2010	(d) 2009	(e) Total		
<b>b</b> 85% of line 2a							
c Qualifying distributions from Part XII, line 4 for each year listed							
d Amounts included in line 2c not used directly for active conduct of exempt activities							
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c							
3 Complete 3a, b, or c for the alternative test relied upon							
a 'Assets' alternative test – enter							
<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying under</li></ul>	-	+					
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:							
<ol> <li>Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)</li> </ol>							
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)							
<ul><li>(3) Largest amount of support from an exempt organization</li></ul>							
(4) Gross investment income		1	<u> </u>				
Part XV Supplementary Information assets at any time during the	(Complete this e year — see i	s part only if the nstructions.)	foundation had	d \$5,000 or more	in		
Information Regarding Foundation Managers a List any managers of the foundation who close of any tax year (but only if they have MANUEL G. LOUPASSI	gers: nave contributed m	nore than 2% of the	total contributions e section 507(d)(2).)	received by the found	dation before the		
<b>b</b> List any managers of the foundation who a partnership or other entity) of which the None	own 10% or more foundation has a	of the stock of a coi 10% or greater inter	rporation (or an equ est	ually large portion of	the ownership of		
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs:  Check here ► X if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d							
a The name, address, and telephone number	er or e-mail of the	person to whom app	plications should be	addressed			
<b>b</b> The form in which applications should be	submitted and info	rmation and materi	als they should incl	ude:			
c Any submission deadlines							
d Any restrictions or limitations on awards,	such as by geogra	phical areas, charita	able fields, kinds of	institutions, or other	factors:		

Form 990-PF (2012) LOUPASSI FOUNDATION 54-1947904 Page 11 Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution status of recipient Amount Name and address (home or business) a Paid during the year See Statement 3 ► 3a 120,522. Total **b** Approved for future payment

Total

3 b

Ente	gross amounts unles	ss amounts unless otherwise indicated.		Unrelated business income		section 512, 513, or 514	(e)
	Program convers rove	onuo.	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	<b>(d)</b> Amount	Related or exempt function income (See instructions.)
	Program service reve				code		
a b							
C			<del>                                     </del>				
d			<del> </del>				_
6			+	_			
f			1	·	<u> </u>		
	Fees and contracts fr	rom government agencies					_
2	Membership dues an	•					
3	Interest on savings and ter	nporary cash investments					
4	Dividends and interes	st from securities					59,278
5	Net rental income or	(loss) from real estate:					
а	Debt-financed proper	ty					
b	Not debt-financed pro	operty					
6	Net rental income or (loss)	from personal property					
7	Other investment inc	ome					
8	Gain or (loss) from sales of	f assets other than inventory					-472
9	Net income or (loss)	•				<del></del>	
10	Gross profit or (loss)	from sales of inventory		<del></del>			
11	Other revenue.			<del></del>			
а					<u> </u>	_	
Ŀ	·				_		
C							
•	·					•	
12		as (b) (d) and (a)					50 006
12	Subtotal. Add long 12 a	columns (b), (d), and (e).				13	58,806 58,806
	•	nstructions to verify calculati	ons )				30,000
					_ <del></del>		
Pa	t XVI₌B   Relation	ship of Activities to th	e Accomplish	ment of Exem <sub>l</sub>	pt Purpose	S	
Lin	e No. Explain below accomplishme	how each activity for which i	ncome is reported t purposes (other	d in column (e) of than by providing	Part XVI-A co	ontributed importantly h purposes). (See ins	to the structions.)
	4 INVESTMEN	T INCOME					
	8 INVESTMEN						
	O THAFOTHEM	1 INCOME	<u> </u>				

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

# Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

de re a Tr (1) (2) b Of (1) (2) (3) (4) (5) (6) c Sf	d the organization direction of the organization of the cash of the reports of th	c) of the Code (oth zations? ing foundation to a moncharitable exemply from a noncharitably inpment, or other ingements tees be or membership or ment, mailing listing e above is 'Yes,' cor services given be	ner than section a noncharitable apt organization ale exempt orga assets o or fundraising s, other assets, omplete the foll by the reporting	exempt organize exempt organize exempt organizen nuzation solicitations or paid employ lowing schedule foundation. If the second in the second expension of the second expension or paid employ lowing schedule foundation.	ees . Column	<b>b)</b> should alw	ays show the less than fair	fair market va	1 a (1) 1 a (2) 1 b (1) 1 b (2) 1 b (3) 1 b (4) 1 b (5) 1 b (6) 1 c	X X X X X X X
	ny transaction or sharing				·					
(a) Line	no (b) Amount involved	(c) Name of	noncharitable exem	pt organization	(b)	Description of trai	nsters, transactio	ons, and shar	ing arrange	ments
N/A										
					ļ					
								-		
	<del></del>									
							-			
			<del></del>	<del></del>	<del> </del>					
		-								
	_									
		_	_		<del> </del>					
	- <u>-</u>									
			·							
		<del></del>			<del> </del>					
					-					
de	the foundation directly escribed in section 501( 'Yes,' complete the following the following the following the following the section of the following the fo	c) of the Code (oth	ted with, or rela ner than section	ated to, one or r i 501(c)(3)) or in	nore tax-e section !	exempt organi 527?	zations		Yes	XNo
	(a) Name of organiz	ation	(b) Type	of organization		(6	) Description	of relation	 nship	
N/A	<u> </u>		<u> </u>	<del> </del>		<u> </u>				
								-		
										_
				-						
	Under penalties of perjury, I decl	are that I have examined t	his return, including a	ccompanying schedule	s and statem	ents, and to the bes	t of my knowledge	and belief, it i	s true,	
Sign	correct, and complete Declara	tion of preparer (other th	ian taxpayer) is base			arer has any know	/ledge	. [	May the IRS	3 discuss with the
Here	_ way	pane	_	11/14/1		hee - /	of dom		preparer sh (see :nstruc	
	Signature of officer or trustee	<del>)</del>		Date	Titl		,		X	
	Print/Type preparer's	name	Preparey's s	SIONAL COM		Date	Check	X if PT	N _	
Paid	STEWART C.		\$280 Kg	XXXIII VIXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	WES	11-14-1	3 self-emplo	yed P(	004238	194
Prepa	rer Firm's name	RUE & ASSO					Firm's EIN ►	54-147	4442	
Use O	nly Firm's address	7264 HANOVI		)R						
		MECHANICSVI	ILLE, VA 2	3111-1706			Phone no	804-73	<u>0-7</u> 45!	5
BAA	<del></del>									PF (2012)

#### 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

2012

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) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a	private foundation				
	501(c)(3) taxable private foundation					
	301(c)(3) taxable private foundation					
Check if your organization is covered by the	General Rule or a Special Rule					
, ,	•					
<b>Note.</b> Only a section 501(c)(7), (8), or (10) or	rganization can check boxes for both the General Rule and	a Special Rule. See instructions.				
General Rule						
X For an organization filing Form 990, 990-contributor. (Complete Parts I and II)	EZ, or 990-PF that received, during the year, \$5,000 or mo	re (in money or property) from any one				
Special Rules						
509(a)(1) and 170(b)(1)(A)(vi) and receiv	g Form 990 or 990-EZ that met the 33-1/3% support test of red from any one contributor, during the year, a contribution art VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts	n of the greater ofl) \$5,000 or				
For a section 501(c)(7), (8), or (10) organ total contributions of more than \$1,000 for the prevention of cruelty to children or an	nization filing Form 990 or 990-EZ that received from any oor use <i>exclusively</i> for religious, charitable, scientific, literary, nimals. Complete Parts I, II, and III.	ne contributor, during the year, , or educational purposes, or				
If this box is checked, enter here the total purpose. Do not complete any of the par	nization filing Form 990 or 990-EZ that received from any oous, charitable, etc, purposes, but these contributions did rad contributions that were received during the year for arexots unless the <b>General Rule</b> applies to this organization beca	not total to more than \$1,000. clusively religious, charitable, etc, ause it received nonexclusively				
religious, charitable, etc, contributions of	\$5,000 or more during the year	<b>►</b> \$				
answer 'No' on Part IV, line 2, of its Form 990, or che	Caution: An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it must answer 'No' on Part IV, line 2, of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					
BAA For Paperwork Reduction Act Notice, or 990-PF.	see the Instructions for Form 990, 990EZ, Schedule	e <b>B</b> (Form 990, 990-EZ, or 990-PF) (2012				

•						
Schedule B (Form 990	, 990-EZ, or 990-PF) (2012)	Page	1 of	1 of Part		
Name of organization		Emplo	Employer identification number			
LOUPASSI FOUNDATION		54-	1947904			
Part I Contribute	<b>Prs</b> (see instructions). Use duplicate copies of Part I if additional space is	needed				
(a) Number	(b) Name address and 7IP + 4	(c) Total	Type of	(d) contribution		

(a) Number	(b)	(c) Total	(d) Type of contribution
Number	Name, address, and ZIP + 4	l otal contributions	Type of contribution
1	MANUEL G. LOUPASSI		Person X
	2601 PARK AVEENUE	\$399,000.	Payroll X
	RICHMOND, VA 23220		(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 Oncash 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 Complete Part II if there is a noncash contribution Part II if there is
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II if there is a noncash contribution.)

Page

1 to

1 of Part II

Name of organization

LOUPASSI FOUNDATION

Employer identification number

54-1947904

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional	spac	e is needed.	
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
	NYSE LISTED SECURITIES			
1				
		<b> </b> \$.	249,000.	12/11/12
(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
		_		
		<b>=</b>  \$.		
(a) No. from Part I	(b)  Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
		_		
		<u>\$</u>		
		·-		

Name of organization

Employer identification number

	SI FOUNDATION		54-194/904
Part III	Exclusively religious, charitable, etc	, individual contributions to s	section 501(c)(7), (8) or (10)
	For organizations completing Part III, enter contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional	total ofexclusively religious, charita (Enter this information once. See if	columns (a) through (e) and the following line entry.  ble, etc, nstructions.)  > \$ N/A
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		
	Transferee's name, addre	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(0)	
	Transferee's name, addre	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, addre	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e)	

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

2012	Federal Stat	ements	Page 1
	LOUPASSI FOU	54-1947904	
Statement 1 Form 990-PF, Part I, Line 16b Accounting Fees			
	(a) Expenses per Books  \$ 50  Total \$ 50		•
Statement 2 Form 990-PF, Part I, Line 23 Other Expenses			
BANK FEES LICENSES TAXES ON FOREIGN INCOME		s         Income         Net Income           8. \$         18. \$         18           5. 25. 25         25           8. 958. 958         958	•
Statement 3 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year			
Name and Address	Donee <u>Relationship</u>	Found- ation Purpose of <u>Status</u> <u>Grant</u>	Amount
CROSS OVER MINISTRY 8600 QUIOCCASIN ROAD, STE 102 RICHMOND, VA 23229	NONE	MEDICAL	\$ 2,500.
LEWIS GINTER BOTANICAL GARDEN 1800 LAKESIDE AVENUE RICHMOLND, VA 23228	NONE	EDUCATIONAL	3,000.
MASSEY CANCER CENTER 401 COLLEGE STREET RICHMOND, VA 23298	NONE	MEDICAL	5,000.
	NONE	EDUCATIONAL	5,000.
SCIENCE MUSEUM OF VIRGINIA 2500 WEST BROAD STREET RICHMOND, VA 23220			

2012	Federal Stat	ements			Page 2
	LOUPASSI FOUI	NDATION			54-1947904
Statement 3 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year					
Name_and Address	Donee <u>Relationship</u>	Found- ation <u>Status</u>	Purpose (	of 	Amount
ST CHRISTOPHERS SCHOOL 711 ST CHRISTOPHER'S ROAD RICHMOND, VA 23226	NONE		EDUCATIONAL	\$	7,000.
STS CONSTANTINE AND HELEN GREEK CHURCH 30 MALVERN AVENUE RICHMOND, VA 23221	NONE		CHURCH		4,400.
THE HEALING PLACE 700 DINWIDDIE AVENUE RICHMOND, VA 23224	NONE		MEDICAL		6,000.
VA HOME FOR BOYS AND GIRLS 8716 WEST BROAD STREET RICHMOND, VA 23294	NONE		EDUCATIONAL		5,000.
VA HOLOCAUST MUSEUM 2000 EAST CARY STREET RICHMOND, VA 23223	NONE		EDUCATIONAL		5,000.
VIRGINIA MUSEUM OF FINE ARTS 200 NORTH BOULEVARD RICHMOND, VA 23220	NONE		EDUCATIONAL		5,000.
WASHINGTON & LEE UNIVERSITY 204 WEST WASHINGTON STREET LEXINGTON, VA 24450	Y NONE		EDUCATIONAL		2,500.
OTHER CHARITIES RICHMOND, VA	NONE		CHARITY & EDUCATION		25,622.
BETTER HOUSING COALITION 23 WEST BROAD STREET, # 100 RICHMOND, VA 23241	NONE )		CHARITY		2,500.
SAARA (SUBSTANCE ABUSE AND ADDICITION RE 306 TURNER ROAD, SUITE L RICHMOND, VA 23225	NONE		DRUG ABUSE		3,000.
SPORTS CHARITIES, INC 3 COUNTRY SQUIRE LANE RICHMOND, VA 23229	NONE		CHARITY FOR CHILDREN		3,000.
VIRGINIA COMMONWEALTH UNIVERSITY 821 WEST FRANKLIN STREET RICHMOND, VA 23284	NONE		EDUCATION		5,000.
				Total <u>\$</u>	120,522.

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# (Rev January 2013)

# Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the		►File a sepa	arate applic	cation for each return.				
If you are	e filing for an	Automatic 3-Month Extension, com	plete only	Part and check this box			<u>► X</u>	
• If you ar	e filing for an	Additional (Not Automatic) 3-Month	Extension	, <b>complete only Part to</b> n page 2 of this t	orm).			
Do not com	plete Part II un	lessyou have already been granted	an automa	itic 3-month extention on a previously file	ed For	m 8868		
request an e	required to file extension of tin With Certain Pi	Form 990-T), or an additional (not ne to file any of the forms listed in l	automatic) Part I or Pa ust be sent	a 3-month automatic extension of time 3-month extension of time You can eleart II with the exception of Form 8870, In to the IRS in paper format (see instructional Charities & Nonprofits	ctronic	cally file Forn tion Return fo	n 8868 to or Transfers	
Part I	Automatic	3-Month Extension of Time. $\circ$	nly subm	it original (no copies needed).				
A corporatio	n required to f	ile Form 990-T and requesting an a	utomatic 6	month extension- check this box and co	mplet	e Part I only	▶ □	
All other cor income tax i		luding 1120-C filers), partnerships, l	REMICs, ar	nd trusts must use Form 7004 to request Enter filer's identif				
	Name of exempt	organization or other filer, see instructions		Enter mer 3 taerun		yer identification		
Type or	,	•						
print	T.OTIPASST	FOUNDATION			54-1	54-1947904		
File by the		and room or suite number If a P O box, see in:	structions			ocial security nur	nber (SSN)	
due date for filing your	2601 PAR	K AVENUE						
return See	City, town or pos	t office, state, and ZIP code. For a foreign addr	ess, see instru	ctions				
	RICHMOND	, VA 23220-2645						
Enter the Re	eturn code for	the return that this application is foi	r (file a sep	parate application for each return)			04	
Application Is For	<u></u>		Return Code	Application Is For			Return Code	
Form 990 or	Form 990-EZ		01	Form 990-T (corporation)			07	
Form 990-Bl	Ĺ		02	Form 1041-A			08	
Form 4720 (	<u> </u>		03	Form 4720			09	
Form 990-Pf			04	Form 5227			10	
	<u> </u>	) or 408(a) trust)	05	Form 6069			11	
Form 990-1	(trust other th	an above)	06	Form 8870			12	
Telephor  If the ord  If this is check the	ne No 804 ganization doe for a Group R ils box nsion is for.	s not have an office or place of bus eturn, enter the organization's four . If it is for part of the group, c	FAX No siness in the digit Group heck this b	e United States, check this box Exemption Number (GEN) . If		s for the whol nd EINs of al	5 ,,	
until The ex  ► X  ► If the t	8/15_ ktension is for calendar yea tax year beg	, 20 <u>13</u> , to file the exempt orgathe organization's return for: r 20 <u>12</u> or nning, 20	nization re	turn for the organization named above	al retu	ırn		
		for Form 990-BL, 990-PF, 990-T, 47 s. See instructions	20, or 6069	enter the tentative tax, less any	3 a	\$	578.	
		for Form 990-PF, 990-T, 4720, or 60 lude any prior year overpayment all		any refundable credits and estimated tax credit	3 b	\$	576.	
c Baland EFTPS	<b>ce due.</b> Subtra 6 (Electronic F	ct line 3b from line 3a. Include your ederal Tax Payment System) See	payment w instructions	with this form, if required, by using	3 с	\$	2.	
Caution. If y payment ins		o make an electronic fund withdraw	val with this	Form 8868, see Form 8453-EO and For	m 887	9-EO for		

Form <b>8868</b>	Rev 1-2013)					Page <b>2</b>	
• If you a	are filing for an Additional (Not Automatic) 3-Mon	th Extension	, complete only Part Lind check this	box		► X	
Note. Only	complete Part II if you have already been grante	ed an automa	tic 3-month extension on a previous	sly filed Form	n 8868.		
-	are filing for an Automatic 3-Month Extension, co						
Part II	Additional (Not Automatic) 3-Month Ex			o copies r	eeded).		
	/ tuantonar (tot) tutomano, o mente					e instructions	
	Name of exempt organization or other filer, see instructions		Zitto: mei o	Employer ident			
	Trains of example organization or other many one measurement					,,	
Type or print	LOUPASSI FOUNDATION				54-1947904 Social security number (SSN)		
File by the	Number, street, and room or suite number. If a P.O. box, see ii	nstructions		Jocial Security	namber (0014)		
extended due date for filing your return See	RUE & ASSOCIATES 7264 HANOVER GREEN DR						
return See Instructions	City, town or post office, state, and ZIP code For a foreign add	lress, see instructi	ons	•			
	MECHANICSVILLE, VA 23111-1706						
Enter the	Return code for the return that this application is	for (file a sep	parate application for each return)			04	
Application	on	Return Code	Application Is For			Return Code	
					¥ v		
	or Form 990-EZ	01	5-rm 1041 A		·	1 00	
Form 990-		02	Form 1041-A		-	08	
	) (individual)	03	Form 4720			09	
Form 990-		04	Form 5227			10	
	T (section 401(a) or 408(a) trust)	05	Form 6069			11	
Form 990-	T (trust other than above)	06	Form 8870			12	
<ul><li>If the second</li><li>If this whole gro</li></ul>	none No. ► <u>804</u> <u>358</u> – <u>3808</u> organization does not have an office or place of the state of the state of the organization's founce of the state of the extension is for	ur digit Group		th the name		Is is for the	
members	the extension is for						
5 For 6 If the 7 Stat	S OPTHALMOLOGIST DUE TO INCREAS	onths, check r	, 20, and ending _ eason	SED ON T	THE PRE		
8a If th	TENSION IS REQUESTED.  Is application is for Form 990-BL, 990-PF, 990-T, refundable credits. See instructions.	4720, or 606	9, enter the tentative tax, less any	8 a	<u> </u>	578.	
<b>b</b> If the	is application is for Form 990-PF, 990-T, 4720, or ments made. Include any prior year overpayment Form 8868			d tax	·	576.	
c Bala EFT	nce due. Subtract line 8b from line 8a Include yo PS (Electronic Federal Tax Payment System). Se	our payment vee instructions	with this form, if required, by using	8 c		2.	
	Signature and Verifi	ication mu	st be completed for Part II or		-		
Under penaltie correct, and o	es of perjury, I declare that I have examined this form, including accom- complete, and that I am authonzed to prepare this form		•	-	ue,		
Signature >	Title	<b>&gt;</b>		Da	te 🕨		
BAA		FIFZ0502L	. 01/21/13		Form <b>8868</b>	(Rev 1-2013)	