|      | 1. |
|------|----|
|      | 3  |
| 770/ | l  |
| ٠,   | 5  |
| \$   | 3  |
| 7    | :  |

**Return of Private Foundation** Form **990-PF** 

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public.

2949104300801

|  | ocial security numbers on<br>n 990-PF and its separate i |                           |  | Open to Public Inspection   |
|--|--|---------------------------|--|---|
| For calendar year 2014 or tax year beginning   |  | , and ending              | goviioniisoop.   | T open to t date inspector  |
| Name of foundation   | ST   | ATUTE UNIT                | A Employer identification                              | number  |
|  | R  | ECEIVED                   |  |   |
| THE AL STROOBANTS FOUNDATION   | )N   |                           | 20-5860939   |   |
| Number and street (or P O box number if mail is not delivered to street at   |  | AR 31-2 Proom/suite       | B Telephone number<br>434-525-32                       | 10  |
| 3831 OLD FOREST ROAD, STE 6  |  | D PHONOLI                 |  |   |
| EYNCHBURG, VA 24501  | ostal code   F   | R BRANCH<br>OGDEN         | C If exemption application is p                        | ending, check here  |
| G Check all that apply: Initial return   |  | ormer public charity      | D 1. Foreign organizations                             | s, check here   |
| Final return  Address change   | Amended return   |                           | Foreign organizations me<br>check here and attach co   | neting the 85% test,  |
|  | Name change  |                           | check here and attach co                               | mputation   |
| His Check type of organization: X Section 501(c)(3) ex   | empt private foundation<br>Other taxable private founda  | ition $bullet$            | E If private foundation sta<br>under section 507(b)(1) | . —   |
| Fair market value of all assets at end of year   J Accounting  |  | Accrual                   | F If the foundation is in a                            | 60-month termination  |
|  | her (specify)  |                           | under section 507(b)(1                                 |   |
| ▶\$ 1,783,639 (Part I, colui   | mn (d) must be on cash b                                 | asis.)                    |  | T 70  |
| Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)   | (a) Revenue and expenses per books                       | (b) Net investment income | (c) Adjusted net income                                | (d) Disbursements<br>for charitable purposes<br>(cash basis only) |
| 1 Contributions, gifts, grants, etc., received   |  |                           | N/A  |   |
| 2 Check X if the foundation is not required to attach Sch. B   |  |                           |  | <u> </u>  |
| 3 Interest on savings and temporary cash investments   | 24,045.  | 24,045.                   |  |   |
| 4 Dividends and interest from securities   | 27,660.  | 27,660.                   |  |   |
| 5a Gross rents   |  |                           |  |   |
| h Net rental income or (loss)  | <56,934.>  |                           |  | <del> </del>  |
| 6a Net gain or (loss) from sale of assets not on line 10<br>Gross sales price for all 91,631.  | (30,334.2  |                           |  |   |
| 7 Capital gain net income the property of the Capital gain net income the capital gain gain gain gain gain gain gain gain  |  | 0.                        |  | 1   |
| 8 Net short-term capital gain OSC - 17   |  |                           | -  |   |
| 9 Income modifications   |  |                           |  |   |
| 10a Gross sales less feturns MAR 25 2021   |  |                           |  |   |
| b Less Cost of goods sold  |  | `                         |  |   |
| c Gross profit or (loss) OGDEN, UTAH   |  |                           |  |   |
| 11 Other income 12 Total, Add lines 1 through 11   | <5,229.>   | 51,705.                   |  |   |
| 13 Compensation of officers, directors, trustees, etc  | 0.   | 0.                        | · · · · · · · · · · · · · · · · · · ·                  | 0.  |
| 14 Other employee salaries and wages   |  |                           |  |   |
| 15 Pension plans employee benefits   |  |                           |  |   |
| 3 16a Legal fees STMT 1  | 175.   | 0.                        |  | 175.  |
| b Accepting fees STMT 2  | 2,800.   | 0.                        |  | 2,800.  |
| c Other professional less STMT 3   | 4,106.   | 4,106.                    |  | 0.  |
| b Acecond find fees STMT 1  or of the professional less STMT 3  interest STMT 3  interest STMT 4  interest STMT 3  interest STMT 4  interest STMT 3  interest S | 1,101.   | 0.                        |  | 0.  |
| 18 Tales STMT 4  | -,101.   | <u> </u>                  | <del></del>  | † · · · · · · · · · · · · · · · · · · ·                           |
| 20 Occupance   |  |                           |  |   |
| 21 Travel, conferences, and megicine   |  |                           |  |   |
|  |  |                           |  |   |
| 23 Other expenses STMT 5   | 75.  | 0.                        |  | 25.   |
| 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23   | 0 257  | 4 100                     |  | 3 000   |
| expenses. Add lines 13 through 23  | 8,257.<br>88,500.  | 4,106.                    |  | 3,000.<br>88,500.   |
| 25 Contributions, girls, grants paid   | 00,500.  |                           |  | 00,300.   |
| 26 Total expenses and disbursements. Add lines 24 and 25   | 96,757.  | 4,106.                    |  | 91,500.   |
| 27 Subtract line 26 from line 12   |  | -,                        |  |   |
| Subtract line 20 from fine 12     Recess of revenue over expenses and disbursements  | <101,986.>   |                           |  |   |
| b Net investment income (if negative, enter -0-)   |  | 47,599.                   |  |   |
| c Adjusted net income (if negative, enter -0-)   |  |                           | N/A  | 1 222.55  |
| 423501<br>11-24-14 LHA For Paperwork Reduction Act Notice, see   | instructions.  |                           |  | Form <b>990-PF</b> (2014)   |

| ᇛ                           | art  | Balance Sheets Attached schedules and amounts in the description                 | Beginning of year   | End of              | year                      |
|-----------------------------|------|--|---------------------|---------------------|---------------------------|
|                             | art  | column should be for end-of-year amounts only                                    | (a) Book Value      | (b) Book Value      | (c) Fair Market Value     |
|                             | 1    | Cash - non-interest-bearing  | 8,726.              | 10,403.             |                           |
|                             | 2    | Savings and temporary cash investments   | 34,744.             | 44,139.             | 44,139.                   |
|                             | 3    | Accounts receivable ►  |                     |                     |                           |
|                             |      | Less allowance for doubtful accounts ▶   |                     |                     | <u> </u>                  |
|                             | 4    | Pledges receivable ►   |                     |                     |                           |
|                             |      | Less, allowance for doubtful accounts  |                     |                     | <del> </del>              |
|                             | 5    | Grants receivable  |                     |                     | <del></del>               |
|                             | 6    | Receivables due from officers, directors, trustees, and other                    |                     |                     |                           |
|                             |      | disqualified persons   |                     |                     |                           |
|                             | 7    | Other notes and loans receivable   | 06.004              |                     |                           |
|                             |      | Less: allowance for doubtful accounts  | 96,824.             | 0.                  | 0.                        |
| şţs                         | 8    | Inventories for sale or use  |                     |                     | <del></del>               |
| Assets                      | 9    | Prepaid expenses and deferred charges  | F2 062              | E2 062              | 56,320.                   |
| •                           | 1    | Investments - U.S. and state government obligations STMT 6                       | 53,063.<br>755,725. | 53,063.<br>739,491. | 1,067,810.                |
|                             |      | Investments - corporate stock STMT 7   | 603,225.            | 603,225.            | 604,967.                  |
|                             | 1    | Investments - corporate bonds STMT 8   | 003,223.            | 003,223.            | 004,307.                  |
|                             | 11   | Investments - land, buildings, and equipment basis                               | <u></u>             |                     |                           |
|                             | 40   | Less accumulated depreciation  |                     |                     |                           |
|                             |      | investments - mortgage loans   |                     |                     |                           |
|                             | 13   | Investments - other Land, buildings, and equipment: basis                        |                     |                     | 1                         |
|                             | 14   | Less accumulated depreciation  |                     |                     | ·····                     |
|                             | 15   | Other assets (describe   |                     |                     |                           |
|                             |      | Total assets (to be completed by all filers - see the                            |                     |                     | <del></del>               |
|                             | , "  | instructions. Also, see page 1, item I)  | 1,552,307.          | 1,450,321.          | 1,783,639.                |
| _                           | 17   |  |                     |                     |                           |
|                             | 18   | Grants payable   |                     |                     |                           |
| "                           | 19   | Deferred revenue   |                     |                     |                           |
| abilities                   | 20   | Loans from officers, directors, trustees, and other disqualified persons         |                     |                     |                           |
| Ē                           | 21   | Mortgages and other notes payable  |                     |                     |                           |
| ڐ                           | 22   | · · · · · · · · · · · · · · · · · · ·  |                     |                     |                           |
|                             |      |  |                     |                     |                           |
|                             | 23   | Total liabilities (add lines 17 through 22)                                      | 0.                  | 0.                  |                           |
|                             |      | Foundations that follow SFAS 117, check here                                     |                     |                     |                           |
|                             |      | and complete lines 24 through 26 and lines 30 and 31.                            |                     |                     |                           |
| ces                         | 24   | Unrestricted   |                     |                     |                           |
| lan                         | 25   | Temporarily restricted   |                     |                     |                           |
| 89                          | 26   | Permanently restricted   |                     |                     |                           |
| n n                         |      | Foundations that do not follow SFAS 117, check here                              |                     |                     |                           |
| F                           | l    | and complete lines 27 through 31.  | 0.                  | 0.                  |                           |
| Net Assets or Fund Balances | 27   | Capital stock, trust principal, or current funds                                 | 0.                  | 0.                  |                           |
| SSe                         | 28   | Paid-in or capital surplus, or land, bldg., and equipment fund                   | 1,552,307.          | 1,450,321.          |                           |
| Ϋ́                          | 129  | Retained earnings, accumulated income, endowment, or other funds                 | 1,552,307.          | 1,450,321.          |                           |
| ž                           | 30   | Total net assets or fund balances  | 1,332,307.          | 1,430,321.          |                           |
| 7                           |      | Total lightities and not assets/fund halaness                                    | 1,552,307.          | 1,450,321.          |                           |
| _                           | 13/1 | Total liabilities and net assets/fund balances                                   |                     | <u> </u>            | <del></del>               |
| LP                          | art  | Analysis of Changes in Net Assets or Fund Ba                                     | liances             |                     |                           |
| 1                           | Tota | I net assets or fund balances at beginning of year - Part II, column (a), line   | 30                  |                     |                           |
|                             | (mu  | st agree with end-of-year figure reported on prior year's return)                |                     | 1                   | 1,552,307.                |
| 2                           | Ente | r amount from Part I, line 27a   |                     | 2                   | <101,986.>                |
| 3                           | Othe | r increases not included in line 2 (itemize)                                     |                     | 3                   | 0.                        |
| 4                           |      | lines 1, 2, and 3  |                     | 4                   | 1,450,321.                |
| -                           |      | eases not included in line 2 (itemize)   | <del></del>         | 5                   | 0.                        |
| <u>6</u>                    | Tota | I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co | olumn (b), line 30  | 6                   | 1,450,321.                |
|                             |      |  |                     |                     | Form <b>990-PF</b> (2014) |

| Part IV Capital Gains a  | and Losses for Tax o   | n Investment  | Income                               |               |                             |                         |             |                                |                                    |
|--|--|---|--------------------------------------|---------------|-----------------------------|-------------------------|-------------|--------------------------------|------------------------------------|
|  | ribe the kind(s) of property sol<br>rehouse; or common stock, 20 |   |                                      | ( <b>b</b> )  | How ac<br>- Purch<br>- Dona | quired<br>nase<br>ition |             | acquired<br>lay, yr.)          | (d) Date sold<br>(mo., day, yr.)   |
| 1a PUBLICLY-TRADEI   | SECURITIES   |   |                                      |               |                             |                         |             |                                |                                    |
| b MEDICAL CAPITAL  |  | TE RECEIV   | ABLE                                 |               |                             | P                       |             |                                |                                    |
| c CAPITAL GAINS I  | DIVIDENDS  |   |                                      |               |                             |                         |             |                                |                                    |
| d  |  |   |                                      | <u> </u>      |                             |                         |             |                                |                                    |
| <u>e</u>   |  | <del></del>   |                                      | Ĺ.,           |                             |                         |             |                                |                                    |
| (e) Gross sales price  | (f) Depreciation allowed<br>(or allowable)                       |   | st or other basis<br>expense of sale |               |                             |                         |             | iain or (loss<br>s (f) minus i |                                    |
| a 74,349.  |  |   | 51,74                                | _             |                             |                         |             |                                | 22,608.                            |
| ь 318.   | <del></del>  |   | 96,82                                | 4.            |                             |                         | _           |                                | <96,506.>                          |
| c 16,964.  |  | <del></del> -                                       | _                                    |               |                             | •                       |             |                                | 16,964.                            |
| <u>d</u>   |  | <del></del>   |                                      |               |                             |                         |             |                                |                                    |
| Complete and for exacts the  | in column (b) and awar   | d butba farmdation                                  | 10/01/00                             | -             |                             |                         |             |                                | <del></del>                        |
| Complete only for assets showin  |  | <del></del>   |                                      |               |                             | (I)<br>col              | (k) hut i   | Col. (h) gain<br>not less thai | minus<br>n -0-) <b>or</b>          |
| (i) F.M.V. as of 12/31/69  | (j) Adjusted basis<br>as of 12/31/69                             |   | cess of col. (1)<br>col. (1), if any |               |                             |                         | Losses      | (from col. (                   | h))                                |
| <u>a</u>   |  |   |                                      |               |                             |                         |             |                                | 22,608.                            |
| <u>b</u>   |  |   |                                      |               |                             |                         |             |                                | <96,506.>                          |
| <u>c</u>   | <del></del>  |   |                                      | $\rightarrow$ |                             | _                       |             |                                | 16,964.                            |
| <u>d</u>   |  |   |                                      |               |                             |                         |             |                                |                                    |
| e  |  |   |                                      | ↽┤            | T                           |                         | <del></del> |                                |                                    |
| 2 Capital gain net income or (net ca                                   |  | o enter in Part I, line<br>nter -0- in Part I, line |                                      | <u>}</u>      | 2                           |                         |             | - <del> </del>                 | <56,934.>                          |
| 3 Net short-term capital gain or (los                                  | s) as defined in sections 1222                                   | (5) and (6):  |                                      |               | - 1                         |                         |             |                                |                                    |
| If gain, also enter in Part I, line 8,                                 |  | V , V - y -   |                                      | <b>.</b>      |                             |                         |             | •-                             |                                    |
| If (loss), enter -0- in Part I, line 8                                 | 1 6 6 6 7  | 7 6 1   | <u> </u>                             | Ш             | 3                           |                         |             | N/A                            |                                    |
| Part V Qualification U   | ·····  |   |                                      |               |                             | ent inco                | me          |                                |                                    |
| (For optional use by domestic private                                  | foundations subject to the sec                                   | ction 4940(a) tax on                                | net investment in                    | come.         | .)                          |                         |             |                                |                                    |
| If section 4940(d)(2) applies, leave th                                | us part blank.   |   |                                      |               |                             |                         |             |                                |                                    |
|  |  |   |                                      |               |                             |                         |             |                                |                                    |
| Was the foundation liable for the sect                                 |  | • •   | •                                    | 100,          |                             |                         |             |                                | Yes X No                           |
| 1 Enter the appropriate amount in e                                    |  |   |                                      | ntries        |                             |                         |             |                                |                                    |
| (a)  | <del></del>  |   | ore making any cr                    |               |                             |                         | Т           | <del>-</del>                   | (d)                                |
| Base period years<br>Calendar year (or tax year beginnir               | (b)<br>Adjusted qualifyii  |   | Net value of no                      | (c)<br>nchar  | ritable-i                   | use assets              | ŀ           | Distrit                        | pution ratio<br>rided by col. (c)) |
| 2013   | ig iii)  | 87,842.   |                                      |               |                             | 3,292                   |             | (401. (6) 410                  | .051724                            |
| 2012   |  | 49,500.   |                                      | 1,588,035.    |                             | :1                      |             | .031171                        |                                    |
| 2011   |  | 47,720.   |                                      |               |                             | 5,269                   |             | <del></del>                    | .049386                            |
| 2010   | · · · · · · · · · · · · · · · · · · ·                            | 30,757.   |                                      |               |                             | 4,899                   |             | <del></del>                    | .059734                            |
| 2009   |  | 39,739.   |                                      |               |                             | 9,214                   |             |                                | .075091                            |
|  | <del></del>  |   |                                      |               |                             | <u> </u>                |             |                                | ·-·-                               |
| 2 Total of line 1, column (d)  |  |   |                                      |               |                             |                         | 2           |                                | .267106                            |
| 3 Average distribution ratio for the 5                                 | 5-vear base period - divide the                                  | total on line 2 by 5.                               | or by the number                     | of yea        | ars                         |                         |             |                                |                                    |
| the foundation has been in exister                                     | •  |   | •                                    | _             |                             |                         | 3 _         | L                              | .053421                            |
|  | •  |   |                                      |               |                             |                         |             |                                |                                    |
| 4 Enter the net value of noncharitable                                 | le-use assets for 2014 from Pa                                   | art X, line 5                                       |                                      |               |                             |                         | 4           |                                | 1,787,164.                         |
|  |  |   |                                      |               |                             |                         |             |                                |                                    |
| 5 Multiply line 4 by line 3  |  |   |                                      |               |                             |                         | 5           |                                | 95,472.                            |
|  |  |   |                                      |               |                             |                         |             |                                |                                    |
| 6 Enter 1% of net investment incom                                     | e (1% of Part I, line 27b)                                       |   |                                      |               |                             |                         | 6           |                                | 476.                               |
|  |  |   |                                      |               |                             |                         |             |                                |                                    |
| 7 Add lines 5 and 6  |  |   |                                      |               |                             |                         | 7           |                                | <u>95,948.</u>                     |
|  |  |   |                                      |               |                             |                         |             |                                | 01 500                             |
| 8 Enter qualifying distributions from                                  | ·  | /  line 1h and sa                                   | alata that aget ware                 | a a 10        | K tav ra                    | nto                     | 8           | L                              | 91,500.                            |
| If line 8 is equal to or greater than<br>See the Part VI instructions. | ime 7, check the box in Part V                                   | i, inte to, and comp                                | nete that part using                 | ya 17         | ο ιαλίδ                     | 11 <b></b>              |             |                                |                                    |

|          | 990-PF (2014) THE AL STROOBANTS FOUNDATION rt VI   Excise Tax Based on Investment Income (Section 4940(  | a). 49                                  | 940(k     | o). 4940     | (e), or 49      | 20-<br>948 - | 5860<br>see ir | ) 9 3 9<br>1 <b>struc</b> | tion                    | Page 4                                  |   |
|----------|--|---|-----------|--------------|-----------------|--------------|----------------|---------------------------|-------------------------|---|---|
|          | Exempt operating foundations described in section 4940(d)(2), check here and and entities  |   |           |              | )               |              |                |                           |                         | <del>-,</del>                           |   |
|          | Date of ruling or determination letter: (attach copy of letter if neces  |   |           |              | ,               | <u> </u>     |                |                           |                         | ]                                       |   |
| b        | Domestic foundations that meet the section 4940(e) requirements in Part V, check here  |   |           |              | }               | 1            |                |                           | 9                       | 52.                                     |   |
|          | of Part I, line 27b  |   |           |              |                 | ,            | ,              |                           | •                       |   |   |
| C        | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of  | f Part I,                               | , line 1  | 2, col. (b)  | . )             |              | <u> </u>       |                           |                         |   |   |
| 2        | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Other  | ers ente                                | er -0-)   |              |                 | 2            |                |                           |                         | 0.                                      |   |
| 3        | Add lines 1 and 2  |   |           |              |                 | 3            |                |                           | <u> </u>                | <u>52.</u>                              |   |
| 4        | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Other  | ers ent                                 | er -0-)   |              |                 | 4            | ļ              |                           |                         | 0.                                      |   |
| 5        | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-  |   |           |              |                 | 5            | ļ              |                           | <u> </u>                | 52.                                     |   |
|          | Credits/Payments:  | 1                                       |           |              |                 | <b>1</b>     |                |                           |                         |   |   |
|          | 2014 estimated tax payments and 2013 overpayment credited to 2014  | <u>6a</u>                               |           |              |                 |              |                |                           |                         | 1                                       |   |
|          | Exempt foreign organizations - tax withheld at source  | <u>6b</u>                               |           | -            | <del></del>     | <b> </b> .   |                |                           |                         | , }                                     |   |
|          | Tax paid with application for extension of time to file (Form 8868)  | 6c                                      |           |              | <del></del>     | ' ,          | ·              |                           |                         | 1                                       |   |
|          | Backup withholding erroneously withheld  | 6d                                      |           |              |                 |              | <del></del>    |                           |                         |   |   |
|          | Total credits and payments. Add lines 6a through 6d  |   |           |              |                 | 7            | <del> </del>   |                           |                         | <del></del>                             |   |
|          | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attach Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed   | neu                                     |           |              |                 | 8_9          | <del> </del>   |                           | ۵                       | 52.                                     |   |
|          | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  |   |           |              |                 | 10           | <del> </del>   |                           |                         | <u> </u>                                |   |
| 10<br>11 | Enter the amount of line 10 to be: Credited to 2015 estimated tax  |   |           | اما          | efunded >       | 11           | <del> </del>   |                           |                         |   |   |
|          | rt VII-A Statements Regarding Activities   |   |           | 177          | siuliucu -      |              | L              |                           |                         |   |   |
|          | During the tax year, did the foundation attempt to influence any national, state, or local legislat  | tion or                                 | did it r  | participate  | or intervene    | ın           |                | T                         | Yes                     | No                                      |   |
|          | any political campaign?  |   |           | ou. tro.puto | 0               |              |                | 1a                        |                         | X                                       |   |
| ь        | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes  | s (see i                                | ınstruc   | tions for    | he definition   | )?           |                | 1b                        |                         | X                                       |   |
|          | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and of   | •                                       |           |              | ·               |              |                |                           |                         | 1                                       |   |
|          | distributed by the foundation in connection with the activities  | ,                                       |           | ,            | , ,             |              |                |                           |                         |   |   |
| C        | Did the foundation file Form 1120-POL for this year?   |   |           |              |                 |              |                | 10                        |                         | X                                       |   |
| d        | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  | ear:                                    |           |              |                 |              |                |                           |                         |   |   |
|          | (1) On the foundation. $\blacktriangleright$ \$ (2) On foundation managers.  | ▶ \$_                                   |           |              | 0.              |              |                |                           |                         |   |   |
| е        | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure  | re tax II                               | mpose     | d on four    | dation          |              |                |                           |                         |   |   |
|          | managers. ► \$ 0 .   |   |           |              |                 |              |                |                           |                         |   |   |
| 2        | Has the foundation engaged in any activities that have not previously been reported to the IRS   | 3?                                      |           |              |                 |              |                | 2                         |                         | <u>X</u>                                |   |
|          | If "Yes," attach a detailed description of the activities  |   |           |              |                 |              |                |                           | •                       |   |   |
| 3        | Has the foundation made any changes, not previously reported to the IRS, in its governing insi   |   | nt, artic | cles of inc  | orporation, o   | r            |                |                           |                         |   |   |
|          | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes   |   |           |              |                 |              |                | 3                         |                         | X                                       |   |
|          | Did the foundation have unrelated business gross income of \$1,000 or more during the year?  |   |           |              |                 | 3.           | 7 / 3          | 4a                        |                         | X                                       |   |
|          | If "Yes," has it filed a tax return on Form 990-T for this year?   |   |           |              |                 | 1/           | I/A            | 4b                        |                         | X                                       |   |
| 5        | Was there a liquidation, termination, dissolution, or substantial contraction during the year?   |   |           |              |                 |              |                | 5                         |                         |   |   |
| 6        | If "Yes," attach the statement required by General Instruction T  Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either   | or.                                     |           |              |                 |              |                |                           |                         |   |   |
| U        | <ul> <li>By language in the governing instrument, or</li> </ul>  | UI.                                     |           |              |                 |              |                |                           |                         |   |   |
|          | <ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory of</li> </ul>  | directio                                | ns tha    | t conflict i | with the state  | law          |                |                           | j                       |   |   |
|          | remain in the governing instrument?  | un 00010                                | (110      | Commot       | THE CHO STORE   | lutt         |                | 6                         | $\overline{\mathbf{x}}$ |   |   |
| 7        | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comp   | nlete P                                 | Part II   | col (c)      | and Part XV     |              |                | 7                         | X                       |   |   |
|          | 2.0 mo 10.0 mg me 10.0 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | u, e 11,  | 001. (0), 1  | and runt XV     |              |                |                           |                         | • [                                     |   |
| 8a       | Enter the states to which the foundation reports or with which it is registered (see instructions  | s) 🕨 _                                  |           |              | <del></del> .   |              |                |                           | <b>a</b>                |   |   |
|          | VA   |   |           | <del></del>  |                 |              |                |                           |                         |   |   |
| b        | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Atto   | orney G                                 | ieneral   | (or desig    | nate)           |              |                |                           | <del></del>             | ئــــــــــــــــــــــــــــــــــــــ |   |
| _        | of each state as required by General Instruction G? If "No," attach explanation  | 40.                                     | 101.310   | 10101        | .VEV 4 1        |              |                | 8b                        | <u>X</u>                |   |   |
| 9        | Is the foundation claiming status as a private operating foundation within the meaning of sections 2014 or the bright has because in 2014 (see graduations for Bord VIII/22) and the second of the sec |   |           |              | JJ(5) TOT Caler | ıdar         |                | <del>-</del>              |                         | <u></u>                                 | 1 |
| 10       | year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," cor   |   |           |              |                 |              |                | 10                        |                         | X                                       | U |
| 10       | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule!  | listing th                              | eir nam   | es and add   | esses           |              | Eor            | m <b>990</b> -            | -PF                     |   |   |
|          |  |   |           |              |                 |              | For            | 111 220.                  | -1-1-(                  | ZU 14)                                  |   |

|    | 606 TT (E011)   | <u>-5860939</u>  |                | Page 5      |
|----|---|------------------|----------------|-------------|
| Pa | rt VII-A Statements Regarding Activities (continued)  |                  | , <sub>+</sub> |             |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of                    |                  |                |             |
|    | section 512(b)(13)? If "Yes," attach schedule (see instructions)  | 11               |                | <u>X</u>    |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privilege  | :s?              |                |             |
|    | If "Yes," attach statement (see instructions)   | 12_              |                | <u>X</u>    |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?                       | 13               | X              |             |
|    | Website address ► N/A   |                  |                |             |
| 14 | The books are in care of ▶ JANE SPROUSE  Telephone no. ▶ 43   | <u> 14-525-3</u> | 219            |             |
|    |   | 4 <b>≥</b> 24501 |                |             |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here                                       |                  | <b>&gt;</b>    |             |
|    | and enter the amount of tax-exempt interest received or accrued during the year   | N                | /A             |             |
| 16 | At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,              |                  | Yes            | No          |
|    | securities, or other financial account in a foreign country?  | 16               |                | <u> </u>    |
|    | See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the | <b>,</b>         |                | : 1         |
|    | foreign country   |                  |                |             |
| Pa | rt VII-B   Statements Regarding Activities for Which Form 4720 May Be Required  |                  |                |             |
|    | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.   |                  | Yes            | No          |
| 1a | During the year did the foundation (either directly or indirectly):   | _                |                | 1           |
|    | (1) Engage in the sale or exchange, or leasing of property with a disqualified person?  | 【 No             | ,              | - 1         |
|    | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)   |                  |                | •           |
|    | a disqualified person?  | ∑ No             |                | ŀ           |
|    | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  | ☐ No             |                |             |
|    | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  | ☐ No             | ,              | 1           |
|    | (5) Transfer any income or assets to a disqualified person (or make any of either available   |                  |                |             |
|    | for the benefit or use of a disqualified person)?   | ∑No              |                |             |
|    | (6) Agree to pay money or property to a government official? (Exception. Check "No"   |                  |                |             |
|    | if the foundation agreed to make a grant to or to employ the official for a period after  |                  |                | 1           |
|    | termination of government service, if terminating within 90 days.)  | ☑No              |                | ļ           |
| b  | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations                    |                  |                |             |
|    | section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?   | 1b               |                | X           |
|    | Organizations relying on a current notice regarding disaster assistance check here  | <b>▶</b> □   .   |                |             |
| C  | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected           |                  |                |             |
|    | before the first day of the tax year beginning in 2014?   | 1c               |                | X           |
| 2  | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation          |                  |                | - 1         |
|    | defined in section 4942(j)(3) or 4942(j)(5)):   | ļ                |                |             |
| 8  | At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning      | _ 1              |                | •           |
|    | before 2014?  | ∑ No             |                | ŀ           |
|    | If "Yes," list the years $\blacktriangleright$ ,,,,,  |                  |                | .           |
| b  | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect     |                  |                | ·           |
|    | valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach      |                  |                |             |
|    | statement - see instructions.)  | N/A 2b           |                |             |
| C  | : If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.                 |                  |                | **          |
|    | <b>&gt;</b>   |                  |                |             |
| 38 | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time                                 | <u> </u>         |                |             |
|    | during the year?  | <u> </u>         |                |             |
| t  | olf "Yes," did it have excess business holdings in 2014 as a result of (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,        | _ /_             |                | <u> </u>    |
|    | 1 offit 4720, to determine if the roundation had excess business holdings in 2011.  | N/A 3b           |                | <del></del> |
|    | a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?                         | 4a_              | $\vdash$       | X           |
| t  | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that    |                  |                | لببا        |
|    | had not been removed from jeopardy before the first day of the tax year beginning in 2014?  |                  |                | X           |
|    |   | Form <b>99</b> 0 | リーピト           | (2014)      |

| Part VIII -   Statements Regarding Activities for Which Form 4720 May Be Required   Continued  | Form 990-PF (2014) THE AL STROOBANTS FOUNDAY  |   |                             | <u>20-58609</u>              | 39 Page 6                             |
|--|---|---|-----------------------------|------------------------------|---------------------------------------|
| (1) Carry on prospagand, or otherwise attempt to influence legislation (section 4945(s)?  (2) Influence the outcome of any spacedic public election (see section 4955); or 10 carry on, directly or indirectly, any voter argetization drive?  (3) Provide a grant to an individual for travel, study, or other similar purposes?  (4) Provide a grant to an individual for travel, study, or other similar purposes?  (3) Provide for any purpose other than religious, charitable, etc., organization described in section 4945(s)(4)(A)? (see instructions)  (5) Provide for any purpose other than religious, charitable, scentific, literary, or educational purposes, or for the prevention of crucity to children or animals?  (5) Provide for any purpose other than religious, charitable, scentific, literary, or educational purposes, or for the prevention of crucity to children or animals?  (5) Provide for any purpose other than religious, charitable, scentific, literary, or educational purposes, or for the prevention of crucity to children or animals?  (6) It any animals in Section 53.49, does the foundation chain exemption from the tax because it maintained object of the translations of the prevention of crucity or directly or indirectly, or pay premiums on a personal benefit contract?  (6) It west of 65, the Form 827.  (7) It west of 65, the Form 827.  (8) It west of 65, the Form 827.  (9) It was a fine foundation, during the year, pay premiums, directly or indirectly, or a personal benefit contract?  (9) It was a fine foundation of the foundation a party of promitted tax electrications?  (9) It was a fine foundation of the foundation aparty of promitted tax electrications.  (1) It was a fine foundation of the foundat   | Part VII-B   Statements Regarding Activities for Which F                                | orm 4720 May Be R                       | equired (contin             | ued)                         |                                       |
| (1) Carry on prospagand, or otherwise attempt to influence legislation (section 4945(s)?  (2) Influence the outcome of any spacedic public election (see section 4955); or 10 carry on, directly or indirectly, any voter argetization drive?  (3) Provide a grant to an individual for travel, study, or other similar purposes?  (4) Provide a grant to an individual for travel, study, or other similar purposes?  (3) Provide for any purpose other than religious, charitable, etc., organization described in section 4945(s)(4)(A)? (see instructions)  (5) Provide for any purpose other than religious, charitable, scentific, literary, or educational purposes, or for the prevention of crucity to children or animals?  (5) Provide for any purpose other than religious, charitable, scentific, literary, or educational purposes, or for the prevention of crucity to children or animals?  (5) Provide for any purpose other than religious, charitable, scentific, literary, or educational purposes, or for the prevention of crucity to children or animals?  (6) It any animals in Section 53.49, does the foundation chain exemption from the tax because it maintained object of the translations of the prevention of crucity or directly or indirectly, or pay premiums on a personal benefit contract?  (6) It west of 65, the Form 827.  (7) It west of 65, the Form 827.  (8) It west of 65, the Form 827.  (9) It was a fine foundation, during the year, pay premiums, directly or indirectly, or a personal benefit contract?  (9) It was a fine foundation of the foundation a party of promitted tax electrications?  (9) It was a fine foundation of the foundation aparty of promitted tax electrications.  (1) It was a fine foundation of the foundat   | 5a During the year did the foundation pay or incur any amount to:                       |   |                             |                              |                                       |
| (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter reputation driver?  (3) Provide a grant to an individual for travel, study, or other similar purposes?  (4) Provide a grant to an organization other than a charitable, etc., organization described in section  945(c)(4)/(4)/(2) res instruction of crustly to differ on animals?  (5) Provide for any purpose other than religious, charitable, scentific, literary, or educational purposes, or for the prevention of crustly to differ on animals?  1) If any answer is "Ves to \$61(1-6), did any of the fransactions fall to qualify under the exceptions described in Regulations section \$3.495 or in a current notice regarding disaster assistance check here of the satisfaction of the search of the satisfaction of the foundation charm than the satisfaction of the foundation  | (1) Carry on propaganda, or otherwise attempt to influence legislation (section         | 4945(e))?                               | □ Y                         | es X No                      |                                       |
| any voter registration drive?  (3) Provide a grant to an individual for travel, study, or other similar purposes?  (4) Provide a grant to an individual for travel, study, or other similar purposes?  (5) Provide for any purpose other than a charitable, etc., organization described in section  (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelly to children or animals?  I li any snaves "Yes" to SqL(Yo, did any of the transactions fall to quality under the exceptions described in Regulstions section 53.4945 or in a current notice regarding diseaster assistance (see instructions)?  Organizations religion on current notice regarding diseaster assistance (see instructions)?  Organizations religion on current notice regarding diseaster assistance (see instructions)?  Organizations religion on current notice regarding diseaster assistance (see instructions)?  N/A 5b  N/A 7b  I reserved to question 54.494. does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  I reserved expenditure responsibility for the grant?  I lest all officers, directors, trustees, foundation managers and their compensation.  I lest all officers, directors, trustees, foundation managers and their compensation.  I lest all officers, directors, trustees, foundation managers and their compensation.  I lest all officers, directors, trustees, foundation managers and their compensation.  I lest all officers, directors, trustees, foundation managers and their compensation.  I lest all officers, directors, trustees, foundation managers and   |   | , , , ,                                 |                             |                              |                                       |
| (4) Provide a grant to an organization other than a charitable, etc., organization described in section  445(0)(4)(A)* (see instructions)  (5) Provide for any pulpose other than ellaplus, charitable, etc., organization described in section  445(0)(4)(A)* (see instructions)  (6) Frovide for any pulpose other than reliaplus, charitable, etc., organization described in section  445(0)(4)(A)* (see instructions)  (7) Experiment of cuelly to divide or a number  (8) It was answer is "Yes" to Question 54(3), does the foundation claim exemption from the exceptions described in Regulations  (9) Organizations relying on a current notice regarding disaster assistance check here  (9) If the answer is "Yes" to question 54(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  (1) "Yes," attach the statement required by Regulations section 53.4945-5(c)  (2) But the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  (3) At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  (4) If "Yes" to 6b, the Form 8870  (5) If "Yes" to 6b, the Form 8870  (6) If "Yes" to 6b, the Form 8870  (7) At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  (a) If "Yes" to 6b, the Form 8870  (b) If "Yes" to 6b, the Form 8870  (c) Compensation  (a) Name and address  (b) If "It and average hours great and the state of the properties of the   |   | , |                             | es X No                      |                                       |
| (4) Provide a grant to an organization ofter than a charitable, etc., organization described in section  4945()(4)(A)? (see instructions)  (5) Provide for any purpose other than religious, chantable, scentific, literary, or educational purposes, or for the prevention of crushly or individe or animals?  10 I any answers "ve't to 54(1)(5), did any of the transactions fall to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding dissater assistance (see instructions)?  10 Pransactions religing on acurrent notice regarding dissater assistance scheck here 1 If the answer is "ve't to question 54(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  1 If "Yes' catach the statement required by Regulations section 53.4945-5(c)  8 a Dd the foundation, during the year, receive any funds, directly or inducetly, to pay premiums on a gersonal benefit contract?  1 If "Yes' to 6, the Form 89", receive any funds, directly or inducetly, to pay premiums on 3 personal benefit contract?  1 If "Yes' to 6, the Form 89", receive any proceeds or have any net income attributable to the transaction?  1 If "Yes' to 6, the Form 89", any premiums, directly or inducetly, and pay premiums on 3 personal benefit contract?  1 It at all officers, directors, trustees, foundation aparty to a prohibited as heller transaction?  1 It at all officers, directors, trustees, foundation managers and their compensation.  1 (a) Name and address  1 It at all officers, directors, trustees, foundation managers and their compensation.  1 (a) Name and address  1 It as all officers, directors, trustees, foundation managers and their compensation.  1 (b) Tits, and average (c) Compensation and the pay of the properties of the   | •   |   |                             |                              |                                       |
| 4945(d)(4)(A) (See Instructions)   |   |   |                             |                              |                                       |
| (6) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  b If any answer is Yes' to Set(1)-(1)-(5), did any of the fransactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding desaster assistance (see instructions)?  Organizations relying on a current notice regarding desaster assistance check here cit the answer is Yes' to Question 53(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If Yes's, attach the statement required by Regulations section 53.4945-5(d)  8a Did the foundation, during the year, reserve any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If Yes's Co. for Form 8870  7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction?  Yes X No  8b X  If Yes's Co. for Form 8870  7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part Claim Information About Officers, Directors, Trustees, Foundation Managers, Highly Part Claim Information About Officers, Directors, Trustees, Foundation Managers, Highly Part Claim Information About Officers, Directors, Trustees, Foundation Managers, Highly Part Claim Information About Officers, Directors, Trustees, Foundation Managers, Highly Part Claim Information About Officers, Directors, Trustees, Foundation Managers, Highly Part Claim Information About Officers, Directors, Trustees, Foundation Managers, Highly Part Claim Information About Officers, Directors, Trustees, Foundation Managers, Highly Part Claim Information About Officers, Directors, Trustees, Foundation Managers, Highly Part Claim Information About Officers, Directors, Trustees, Foundation Managers, Highly Claim Information About Officers, Directors, Di   | •   | r described in section                  |                             | ac X No                      |                                       |
| b If any answer is "Yes" to Sa(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section SA(4)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section SA(4)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section of SA(4)-(5). The prairies of the foundation of the regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance check here  If the answer is "Yes" to guide the section SA(4)-(5) on the foundation of the grant?  If "Yes," attach the statement required by Regulations section SA(4)-(5)-(6)  30 Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes" to SD, (file Form 8870  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  1 Life and officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Titlis, and average hours per week devoted for position of tive highest-paid employees (other than those included on line 1). If none, enter "NONE."  (b) Titlis, and average hours per week devoted for the highest-paid employees tother than those included on line 1). If none, enter "NONE."  (c) Compensation of tive highest-paid employees (other than those included on line 1). If none, enter "NONE."  (d) Isosebases by the properties of the properties   |   | or advantional purposes or f            |                             | 55 <u>21</u> NU              |                                       |
| b If any answer is Yes' to Sat' I - (5), did any of the transactions fall to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance check here  of the answer is Yes' to question 54(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If Yes, "attach the statement required by Regulations section 53.4945-5(c)  Sa Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If Yes, "attach the statement required by Regulations section 53.4945-5(c)  Sa Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If Yes, "attach the statement required by Regulations section 53.4945-5(c)  Sa Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If Yes, "attach the statement required by Regulations aparty to a prohibited tax shelter transaction?  If Yes Too, the Form 887.  If Y   | •   | or educational purposes, or i           |                             | 🔻                            |                                       |
| section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance check here  of if the answer is Yes' to question 53.4), does the foundation claim examption from the tax because it maintained expenditure responsibility for the grant?  If Yes, Tatach the statement required by Regulations section 53.4945-5(d)  5a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If Yes' to 6b, file Form 8270  The    | •   | d                                       |                             | ES TY NO                     |                                       |
| Organizations relying on a current notice regarding disaster assistance check here  c If the answer is Yes' to question 53(4), does the foundation dam exemption from the tax because it maintained expenditure responsibility for the grant?  If Yes, "attach the statement required by Regulations section 53.4945-5(d) 5a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If Yes To 50, the Form 8270 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Title, and average hours per week devoted for the position of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (c) Compensation (If not paid, enter-0-) and the property to the position of five highest-paid employees and more than \$50,000  (b) Title, and average hours per week devoted for the position of the highest-paid employees (other than those included on line 1). If none, enter "NONE."  (c) Compensation (If not paid, enter-0-) and the property to the position of the highest-paid employees (other than those included on line 1). If none, enter "NONE."  (c) Compensation (If not paid, enter-0-) and the position of the highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee gaid more than \$50,000  (b) Title, and average hours per week devoted to position of the position of the highest paid employees (other than those included on line 1). If none, enter "NONE."  (c) Compensation (If not paid, enter-0-) and the property to the position of the position  | •   |   | n Regulations               | NT / N   -                   |                                       |
| c If the answer is "Yes' to question Sa(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53.4945-5(d)  8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes" to 6b, the Form 8870  A Ra any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes X No  By X  If "Yes" to 6b, the Form 8870  Information About Officers, Directors, Trustees, Foundation Managers, Highly  Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Tile, and average hours pay and enter the position of five highest-paid employee grant more than \$50,000  O.  Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Tile, and average hours per week devoted to position  (c) Compensation ( |   |   |                             | N/A                          | 50                                    |
| expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53.494-5(d)  B Did the foundation, during the year, peave any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes is to 6b, like Form 8870  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  A If "Yes is no individual to the foundation of the party of the foundation of the tax year, was the foundation aparty to a prohibited tax shelter transaction?  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  8 If "Yes is the foundation centre and the foundation of the tax year, was the foundation aparty to a prohibited tax shelter transaction?  9 If "Yes is the foundation of the foundation of the tax year, was the foundation aparty to a prohibited tax shelter transaction?  1 List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Title, and average foundation during the year developed of the position of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000 (b) Title, and average devoted to position (c) Compensation (d) Compensation (d  |   |   |                             |                              |                                       |
| ## "Yes," attach the statement required by Regulations section 53.4945-5(d)  \$ Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  ## "Yes" to 6b, file Form 8870  ## "Yes" to 8b, file file file file file file file file   | c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr      |   |                             |                              | 1                                     |
| Sa Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes" to 6b, file Form 8870  If Yes, did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes" to 6b, file Form 8870  If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Pald Employees, and Contractors  List all officers, directors, trustees, foundation managers and their compensation  (a) Name and address  (b) Title, and average hours per week devoked to position  (file not paid, enter "0-):  SEE STATEMENT 9  O. O. O.  Compensation of five highest-paid employees (other than those included on line 1), if none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  Compensation of five highest-paid employees (other than those included on line 1), if none, enter "NONE."  (b) Title, and average hours per week devoked to position  (c) Compensation of five highest-paid employees (other than those included on line 1), if none, enter "NONE."  (c) Compensation of five highest-paid employees (other than those included on line 1), if none, enter "NONE."  (c) Expense and address of each employee paid more than \$50,000  NONE  | expenditure responsibility for the grant?   | N                                       | I/A Y                       | es L No                      |                                       |
| a personal benefit contract?  b Ot the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes" to 6b, the Form 8870  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  (a) Name and address  (a) Name and address  (b) Title, and average hours give well with the foundation and address to position  (b) Title, and average hours give well with the foundation and address to position  (c) Compensation  (d) Compensation  (d) Compensation  (d) Compensation  (d) Compensation  (e) Expense and their compensation  (for position)  (g) Expense the foundation and average hours give well with the foundation and address and their compensation to position  (a) Name and address of each employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (b) Title, and average hours give are "NONE."  (c) Compensation  (d) Compensation  (e) Compensation  (d) Compensation  (e) Compensation  (d) Compensation  (e) Compensation  (e) Compensation  (d) Compensation  (e) Compensation  (e) Compensation  (e) Compensation  (e) Compensation  (d) Compensation  (e) Compensation  (e) Compensation  (e) Compensation  (e) Compensation  (e) Compensation  (for paid the foundation and paid the foundation and paid to the foundation and paid the foundatio  | If "Yes," attach the statement required by Regulations section 53.4945                  | -5(d)                                   |                             |                              |                                       |
| b Did the foundation, during the year, pay premiums, directly, or indirectly, on a personal benefit contract?  If "Yes" to 6b, file Form 8870 7 At At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction?  If Is a file form and the foundation receive any proceeds or have any net income attributable to the transaction?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Titls, and average hours per week devoked to position  2 Compensation of five highest-paid employees (other than those included on line 1), If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Titls, and average hours per week devoked devoked to position  (c) Compensation  (d) Combenses to language account, other allowances  (e) Expanse account, other allowances  (b) Titls, and average hours per week devoked devoked to position  (c) Compensation  (d) Compensation  (e) Compensation  (d) Combenses to language account, other allowances  (e) Expanse account, other allowances  NONE   | 6a Did the foundation, during the year, receive any funds, directly or indirectly, to p | pay premiums on                         |                             |                              |                                       |
| If "Yes" to 6b, file Form 8870   Ta At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction?   Yes X No  | a personal benefit contract?  |   | Y                           | es X No _                    |                                       |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  b. If Yes, du the foundation receive any proceeds or have any net income attributable to the transaction?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1. List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Title, and average hours per week devoted to position  (c) Compensation (d) Combination to the framework of the first of paid, either the compensation (first of paid, either the compensation).  SEE STATEMENT 9  2. Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Combination to the paid of the paid  | b Did the foundation, during the year, pay premiums, directly or indirectly, on a p     | ersonal benefit contract?               |                             | f                            | 6b X                                  |
| Directors   Trustees, did the foundation receive any proceeds or have any net income attributable to the transaction?   N/A   7b   Part VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation.   (b) Title, and average hours per week devoted to position   (if not paid, enter -0-)   (if not paid, enter -0-     | If "Yes" to 6b. file Form 8870  |   |                             |                              |                                       |
| Description        | 7a At any time during the tax year, was the foundation a party to a prohibited tax s    | helter transaction?                     | Y                           | es X No                      |                                       |
| Part VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address   (b) Tille, and average hours per week devoted to position   (f) to paid, enter -0-)   (f) to paid,   |   |   |                             | N/A                          | 7b                                    |
| Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation.  (b) Title, and average hours per week devoted to position  (f) to position  (c) Compensation (If not paid, enter -0-)  (d) Controlled to position  (e) Expense account, other allowances  (a) Name and address  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Controlled to position  (d) Controlled to position  (d) Controlled to position  (d) Controlled to position  (e) Expense account, other allowances  (d) Controlled to position  (e) Expense to position po   |   |   | nagers, Highly              |                              | •                                     |
| (a) Name and address (b) Title, and average hours per week devoted in position (c) Compensation (c) Compensa   | Paid Employees, and Contractors   | •                                       |                             |                              |                                       |
| SEE STATEMENT 9 0. 0. 0.  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (c) Com  | 1 List all officers, directors, trustees, foundation managers and their of              | compensation.                           |                             |                              |                                       |
| SEE STATEMENT 9 0. 0. 0.  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (c) Com  |   | (b) Title, and average                  |                             | (d) Contributions to         | (e) Expense                           |
| 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position  NONE  (c) Compensation (d) Contributions to employee the proper benefit plans and deterred compensation allowances   | (a) Name and address  | nours per week devoted<br>to position   | (if not paid,<br>enter -0-) | and deterred<br>compensation |                                       |
| 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plats account, other allowances   |   |   |                             |                              |                                       |
| 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plats account, other allowances   |   |   |                             |                              |                                       |
| 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plats account, other allowances   | SEE STATEMENT 9   |   | 0.                          | ا ، ا                        | 0.                                    |
| (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee healt plans account, other allowances  (e) Expense account, other allowances   |   |   |                             |                              |                                       |
| (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee healt plans account, other allowances  (e) Expense account, other allowances   |   |   |                             |                              |                                       |
| (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee healt plans account, other allowances  (e) Expense account, other allowances   |   |   |                             |                              |                                       |
| (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee healt plans account, other allowances  (e) Expense account, other allowances   |   |   | <del></del>                 |                              |                                       |
| (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee healt plans account, other allowances  (e) Expense account, other allowances   |   |   |                             |                              |                                       |
| (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee healt plans account, other allowances  (e) Expense account, other allowances   |   |   |                             |                              |                                       |
| (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee healt plans account, other allowances  (e) Expense account, other allowances   |   |   |                             |                              |                                       |
| (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee herelit plans and celerate account, other allowances   |   |   |                             | ,                            |                                       |
| (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee entire than account, other allowances  (e) Expense account, other allowances   |   |   |                             |                              |                                       |
| (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee healt plans account, other allowances  (e) Expense account, other allowances   | O Commendation of the shape and a series and a series of the shape the series of        | uded en line 4). If nene                | onton IINONE II             | <u> </u>                     | · · · · · · · · · · · · · · · · · · · |
| NONE  Devoted to position  compensation  allowances  | 2 Compensation of five nignest-paid employees (other than those incl                    |   | enter NONE.                 | (d) Contributions to         | (a) Evnance                           |
| NONE  Devoted to position compensation allowances  | (a) Name and address of each employee paid more than \$50,000                           | hours per week                          | (c) Compensation            | employee benefit plans       | account, other                        |
|  |   | devoted to position                     |                             | compensation                 | allowances                            |
| Total number of other employees paid over \$50,000   | NONE  |   |                             |                              |                                       |
| Total number of other employees paid over \$50,000   |   |   |                             |                              |                                       |
| Total number of other employees paid over \$50,000   |   |   |                             |                              |                                       |
| Total number of other employees paid over \$50,000   |   |   |                             |                              |                                       |
| Total number of other employees paid over \$50,000   |   |   |                             | }                            |                                       |
| Total number of other employees paid over \$50,000   |   |   | <u> </u>                    |                              |                                       |
| Total number of other employees paid over \$50,000 ▶ 0   |   |   |                             |                              |                                       |
| Total number of other employees paid over \$50,000 ▶ 0   |   |   |                             |                              |                                       |
| Total number of other employees paid over \$50,000 ▶ 0   |   |   |                             |                              |                                       |
| Total number of other employees paid over \$50,000 ▶ 0   |   |   | <u> </u>                    |                              |                                       |
|  | Total number of other employees paid over \$50,000                                      |   |                             |                              | 0                                     |

| Form 990-PF (2014) THE AL STROOBANTS FOUNDATION   | 20-58                                 | 60939 Page 7     |
|---|---------------------------------------|------------------|
| Part VIII Information About Officers, Directors, Trustees, Foundation Management Paid Employees, and Contractors (continued)  | inagers, Highly                       |                  |
| 3 Five highest-paid independent contractors for professional services. If none, enter "NONE.  | 11                                    |                  |
| (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  Part IX-A   Summary of Direct Charitable Activities   |                                       | ▶ 0              |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical inforr number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | nation such as the                    | Expenses         |
| 1 N/A   |                                       |                  |
| 1N/A  | · · · · · · · · · · · · · · · · · · · |                  |
|   |                                       |                  |
| 2   |                                       |                  |
|   |                                       |                  |
|   |                                       |                  |
| 3   |                                       |                  |
|   |                                       |                  |
| 4   | ·                                     |                  |
|   |                                       |                  |
|   |                                       |                  |
| Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and  | 10                                    | Amount           |
| 1 N/A   | 12.                                   | Amount           |
|   |                                       |                  |
|   |                                       |                  |
| 2   |                                       |                  |
|   |                                       |                  |
| All other program-related investments. See instructions.  |                                       |                  |
| 3   |                                       |                  |
|   |                                       |                  |

Total. Add lines 1 through 3

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THE AL STROOBANTS FOUNDATION

| <u>۔</u> | (All domestic foundations must complete this part. Foreign four   | idations, 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   | 1a               | 1,300,686.     |
| b        | Average of monthly cash balances  | 1b               | 113,694.       |
| С        | Fair market value of all other assets   | 1c               | 400,000.       |
| d        | Total (add lines 1a, b, and c)  | 1d               | 1,814,380.     |
| e        | Reduction claimed for blockage or other factors reported on lines 1a and  |                  |                |
|          | 1c (attach detailed explanation) 1e 0.  |                  |                |
| 2        | Acquisition indebtedness applicable to line 1 assets  | 2                | 0.             |
| 3        | Subtract line 2 from line 1d  | 3                | 1,814,380.     |
| 4        | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)                     | 4                | 27,216.        |
| 5        | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4                          | 5                | 1,787,164.     |
| 6        | Minimum investment return. Enter 5% of line 5   | 6                | 89,358.        |
|          | artXII Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations ar                | d certain        |                |
|          | foreign organizations check here   and do not complete this part.)  |                  |                |
| 1        | Minimum investment return from Part X, line 6   | 1                | 89,358.        |
| 2a       | Tax on investment income for 2014 from Part VI, line 5  |                  |                |
| b        | Income tax for 2014. (This does not include the tax from Part VI.)  |                  |                |
| C        | Add lines 2a and 2b   | 2c               | 952.           |
| 3        | Distributable amount before adjustments. Subtract line 2c from line 1   | 3                | 88,406.        |
| 4        | Recoveries of amounts treated as qualifying distributions   | 4                | 0.             |
| 5        | Add lines 3 and 4   | 5                | 88,406.        |
| 6        | Deduction from distributable amount (see instructions)  | 6                | 0.             |
| 7        | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1                            | 7                | 88,406.        |
| ·P       | art:XII Qualifying Distributions (see instructions)   |                  |                |
| _        |   |                  | <u> </u>       |
| 1        | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:                                    |                  | 04 500         |
| a        | Expenses, contributions, gifts, etc total from Part I, column (d), line 26  | 1a               | 91,500.        |
| b        | Program-related investments - total from Part IX-B  | 1b               | 0.             |
| 2        | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes                     | 2                | <del></del>    |
| 3        | Amounts set aside for specific charitable projects that satisfy the:  |                  |                |
| a        | Suitability test (prior IRS approval required)  | 3a               |                |
| b        | Cash distribution test (attach the required schedule)   | 3b               |                |
| 4        | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4                    | 4                | 91,500.        |
| 5        | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment                                  |                  | _              |
|          | income. Enter 1% of Part I, line 27b  | 5                | 0.             |
| 6        | Adjusted qualifying distributions. Subtract line 5 from line 4  | 6                | 91,500.        |
|          | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of | ualifies for the | section        |

4940(e) reduction of tax in those years.

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Part XIII Undistributed Income (see instructions)

|   | (a)<br>Corpus | (b)<br>Years prior to 2013 | (c)<br>2013 | ( <b>d)</b><br>2014                   |
|---|---------------|----------------------------|-------------|---------------------------------------|
| Distributable amount for 2014 from Part XI, line 7  |               |                            |             | 88,406.                               |
| 2 Undistributed income, if any, as of the end of 2014   |               |                            |             | 00/100:                               |
| a Enter amount for 2013 only  |               |                            | 0.          |                                       |
| b Total for prior years:  |               | 0                          |             |                                       |
| 3 Excess distributions carryover, if any, to 2014:  |               | 0.                         |             |                                       |
| a From 2009   |               | `                          |             |                                       |
| <b>b</b> From 2010  |               |                            |             |                                       |
| c From 2011 3,223.  |               |                            |             |                                       |
| d From 2012   |               |                            |             |                                       |
| e From 2013 3,924.  |               |                            | -           |                                       |
| f Total of lines 3a through e   | 7,147.        |                            |             |                                       |
| 4 Qualifying distributions for 2014 from  | ,,,,,,,,,     |                            |             | <del>-</del>                          |
| Part XII, line 4. ► \$ 91,500.  |               |                            |             | ļ                                     |
| a Applied to 2013, but not more than line 2a  |               |                            | <u></u>     |                                       |
| 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.            |                            |             | 1                                     |
| d Applied to 2014 distributable amount  |               |                            |             | 88,406.                               |
| e Remaining amount distributed out of corpus  | 3,094.        |                            |             |                                       |
| 5 Excess distributions carryover applied to 2014 (if an amount appears in column (d), the same amount | 0.            |                            |             | 0.                                    |
| friust be shown in column (a) )  6 Enter the net total of each column as                              |               |                            |             |                                       |
| indicated below:  |               | 4 -                        |             |                                       |
| 2 Corpus Add lines 3f, 4c, and 4e Subtract line 5   | 10,241.       |                            | •           |                                       |
| 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  |               | _                          |             |                                       |
| amount - see instructions   |               | 0.                         |             |                                       |
| e Undistributed income for 2013. Subtract line  |               |                            | _           |                                       |
| 4a from line 2a. Taxable amount - see instr.  |               | . <u>.</u>                 | 0.          | · · · · · · · · · · · · · · · · · · · |
| f Undistributed income for 2014. Subtract   |               |                            |             |                                       |
| lines 4d and 5 from line 1. This amount must  |               |                            |             | _                                     |
| be distributed in 2015  |               |                            |             |                                       |
| 7 Amounts treated as distributions out of   |               |                            |             |                                       |
| corpus to satisfy requirements imposed by   |               |                            |             |                                       |
| section 170(b)(1)(F) or 4942(g)(3) (Election  |               | ,                          |             |                                       |
| may be required - see instructions)   | 0.            |                            |             |                                       |
| 8 Excess distributions carryover from 2009  |               |                            |             |                                       |
| not applied on line 5 or line 7   | 0.            |                            |             |                                       |
| 9 Excess distributions carryover to 2015.   | 10 044        |                            |             | •                                     |
| Subtract lines 7 and 8 from line 6a   | 10,241.       |                            | <del></del> |                                       |
| 10 Analysis of line 9:  |               |                            |             | į                                     |
| a Excess from 2010  |               |                            | 1           |                                       |
| b Excess from 2011 3,223.   |               |                            |             | Ì                                     |
| c Excess from 2012  |               |                            |             | ļ                                     |
| d Excess from 2013<br>e Excess from 2014<br>3,924.  |               |                            |             |                                       |
| e Excess from 2014 3,094.   | L             |                            |             | Form <b>990-PF</b> (2014)             |

|   | STROOBANTS                            |                             |                             | 20-58                         | 60939 Page 10      |
|---|---------------------------------------|-----------------------------|-----------------------------|-------------------------------|--------------------|
| Part XIV   Private Operating F  | oundations (see in                    | structions and Part V       | II-A, question 9)           | N/A                           |                    |
| 1 a If the foundation has received a ruling o                             |                                       |                             |                             |                               |                    |
| foundation, and the ruling is effective fo                                | ·                                     | -                           | ▶ ∟                         |                               |                    |
| <b>b</b> Check box to indicate whether the found                          |                                       | ng foundation described     |                             | 4942(j)(3) or 49              | 942(j)(5)          |
| 2 a Enter the lesser of the adjusted net                                  | Tax year                              | 41,0040                     | Prior 3 years               | (4) 2044                      | (a) Takal          |
| income from Part I or the minimum   | (a) 2014                              | (b) 2013                    | (c) 2012                    | (d) 2011                      | (e) Total          |
| investment return from Part X for   |                                       |                             |                             |                               |                    |
| each year listed  |                                       |                             |                             |                               |                    |
| <b>b</b> 85% of line 2a   |                                       |                             | <u> </u>                    |                               |                    |
| 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                                       | 1                                     |                             |                             |                               |                    |
| exempt activities   |                                       | ļ                           |                             |                               |                    |
| 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:        |                                       |                             |                             |                               |                    |
| (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<br>shown in Part X, line 6 for each year |                                       | /                           |                             |                               |                    |
| listed  |                                       | <i>Y</i>                    |                             |                               |                    |
| c "Support" alternative test - enter:                                     |                                       |                             |                             |                               |                    |
| (1) Total support other than gross  |                                       |                             |                             | İ                             |                    |
| investment income (interest,  |                                       |                             |                             |                               |                    |
| dividends, rents, payments on<br>securities loans (section                |                                       |                             |                             |                               |                    |
| 512(a)(5)), or royalties)   |                                       |                             |                             |                               |                    |
| (2) Support from general public '   |                                       |                             |                             |                               |                    |
| and 5 or more exempt  | /                                     |                             |                             |                               |                    |
| organizations as provided in<br>section 4942(j)(3)(B)(iii)                | /                                     |                             |                             |                               |                    |
| (3) Largest amount of support from  |                                       |                             |                             |                               |                    |
| an exempt organization  |                                       |                             |                             |                               |                    |
| (4) Gross investment income   | /                                     |                             |                             |                               |                    |
| Part XV   Supplementary Info  |                                       |                             | if the foundation           | n had \$5,000 or mo           | re in assets       |
| at any time during t  | he year-see instr                     | uctions.)                   |                             |                               |                    |
| 1 Information Regarding Foundation  | on Managers:                          |                             | <u> </u>                    |                               |                    |
| a List any managers of the foundation wh                                  | -                                     | than 2% of the total con    | tributions received by th   | e foundation before the clos  | e of any tax       |
| year (but only if they have contributed i                                 |                                       |                             | ·                           |                               |                    |
| NONE  |                                       |                             |                             |                               |                    |
| b List any managers of the foundation wh                                  | o own 10% or more of th               | e stock of a corporation    | (or an equally large por    | tion of the ownership of a pa | artnership or      |
| other entity) of which the foundation ha                                  |                                       |                             | , , , , , , , ,             |                               |                    |
| NONE  |                                       |                             |                             |                               |                    |
| 2 Information Regarding Contribut   | ion, Grant, Gıft, Loan,               | Scholarship, etc., P        | rograms:                    |                               |                    |
| Check here ► X if the foundation of                                       |                                       |                             |                             | not accept unsolicited requ   | ests for funds. If |
| the foundation makes gifts, grants, etc.                                  |                                       |                             |                             |                               |                    |
| a The name, address, and telephone num                                    | ber or e-mail address of t            | the person to whom app      | lications should be addre   | essed:                        | -                  |
| <b>3</b> , <b>222</b> , 222   |                                       | , , ,                       |                             |                               |                    |
|   |                                       |                             |                             |                               |                    |
| b The form in which applications should t                                 | be submitted and informa              | tion and materials they     | should include:             |                               |                    |
|   |                                       |                             |                             |                               |                    |
| c Any submission deadlines:   | · · · · · · · · · · · · · · · · · · · |                             |                             |                               |                    |
|   |                                       |                             | <u> </u>                    |                               |                    |
| d Any restrictions or limitations on award                                | ls, such as by geographic             | al areas, charitable fields | s, kinds of institutions, o | r other factors:              |                    |
| •   | · · · ·                               |                             |                             |                               |                    |

Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year AMERICAN RED CROSS - HISTORIC VA N/A DISASTER RELIEF ₽C CHAPTER 1007 SHEFFIELD DR LYNCHBURG, VA 24502 2,000. PROGRAM SUPPORT BEACON OF HOPE N/A ÞС 915 COURT ST LYNCHBURG, VA 24504 2,500. BEDFORD COMMUNITY HEALTH FOUNDATION, N/A ÞС COMMUNITY HEALTH PROGRAMS INC. PO BOX 1104 BEDFORD, VA 24523 2,000. BIG BROTHER BIG SISTER OF CENTRAL PROGRAM SUPPORT N/A ÞС VIRGINIA 2901 LANGHORNE RD LYNCHBURG, VA 24501 3,000. CHILDREN'S PROGRAM ÞС BOYS & GIRLS CLUB OF GREATER N/A LYNCHBURG SUPPORT 1101 MADISON STREE5 LYNCHBURG, VA 24504 2,000. SEE CONTINUATION SHEET(S) 88,500. ▶ 3a Total b Approved for future payment NONE ➤ 3b Total

Form 990-PF (2014)

| Part XVI-A | Analysis of Income-Producing Activ | vities |
|------------|------------------------------------|--------|
|------------|------------------------------------|--------|

| Enter gross amounts unless otherwise indicated.                 | Unrelated         | business income                        | Exclud                        | led by section 512, 513, or 514 | (a)                                   |
|---|-------------------|--|-------------------------------|---------------------------------|---------------------------------------|
|   | (a)<br>Business   | (b)<br>Amount                          | (C)<br>Exclu-<br>sion<br>code | (d)<br>Amount                   | (e) Related or exempt function income |
| 1 Program service revenue:                                      | code              | ······································ | Code                          |                                 | Tanonan moonio                        |
| a   | <del></del>       |  | <del>  </del>                 |                                 |                                       |
| b   |                   |  | $\vdash$                      |                                 | <del></del>                           |
| C   | <b>-</b>          | <del></del>                            | $\vdash$                      |                                 | ·                                     |
| d   | ļ                 |  |                               |                                 |                                       |
| e   | ļ                 |  | $\vdash$                      |                                 |                                       |
| f   |                   |  | L                             |                                 |                                       |
| g Fees and contracts from government agencies                   |                   |  |                               |                                 | ·····                                 |
| 2 Membership dues and assessments                               |                   |  |                               |                                 |                                       |
| 3 Interest on savings and temporary cash                        |                   |  |                               |                                 |                                       |
| investments   | L                 |  | 14                            | 24,045.<br>27,660.              |                                       |
| 4 Dividends and interest from securities                        |                   |  | 14                            | 27,660.                         |                                       |
| 5 Net rental income or (loss) from real estate:                 |                   |  |                               |                                 |                                       |
| 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  | 1 1               |  | 18                            | <56,934.>                       |                                       |
| 9 Net income or (loss) from special events                      |                   |  |                               |                                 |                                       |
| 10 Gross profit or (loss) from sales of inventory               |                   |  |                               |                                 |                                       |
| 11 Other revenue:   |                   |  |                               |                                 |                                       |
| a   | L l.              |  |                               |                                 |                                       |
| b   |                   |  |                               |                                 |                                       |
| c   |                   |  |                               |                                 |                                       |
| d   |                   |  |                               |                                 |                                       |
| e   |                   |  |                               |                                 |                                       |
| 12 Subtotal. Add columns (b), (d), and (e)                      |                   | 0.                                     |                               | <5,229.>                        | 0.                                    |
| 13 Total. Add line 12, columns (b), (d), and (e)                |                   |  |                               | 13                              | <5,229.>                              |
| (See worksheet in line 13 instructions to verify calculations.) |                   |  |                               |                                 |                                       |
| Part XVI-B Relationship of Activities to                        | the Accon         | nnlishment of Exe                      | empt                          | Purnoses                        |                                       |
| Tiolationomp of Addivises to                                    |                   |  |                               |                                 |                                       |
| Line No. Explain below how each activity for which incom        | ne is reported in | column (e) of Part XVI-A               | contribi                      | ited importantly to the accomp  | lishment of                           |
| the foundation's exempt purposes (other than b                  | y providing fund  | is for such purposes).                 |                               |                                 |                                       |
|   |                   |  |                               |                                 |                                       |
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|                | Exempt Organizat | ions                                  |                                      |        |
|----------------|------------------|---------------------------------------|--------------------------------------|--------|
| Part XVII      | 4                | — — — — — — — — — — — — — — — — — — — | and Relationships With Noncharitable | •      |
| Form 990-PF (2 | 2014) THE AL :   | STROOBANTS FOUNDATION                 | <u>20-5860939</u>                    | Page 1 |

|  |  |   |                   | g with any other organization       |                         | ion 501(c) of   |                                   | Yes      | NO       |
|--|--|---|-------------------|-------------------------------------|-------------------------|---|-----------------------------------|----------|----------|
|  | •          |   |                   | 7, relating to political organi     | izations?               |   |                                   |          |          |
|  | s from the reporting founda                      | ition to a noncharitab                  | ile exempt org    | janization of:                      |                         |   |                                   |          | 7,       |
| (1) Cas  |  |   |                   |                                     |                         |   | 1a(1)                             |          | X        |
|  | er assets  |   |                   |                                     |                         |   | 1a(2)                             |          | Х        |
| <b>b</b> Other tra                               |  | hl                                      |                   |                                     |                         |   |                                   |          | v        |
|  | es of assets to a noncharital                    |   |                   |                                     |                         |   | 1b(1)                             |          | <u>X</u> |
| • •  | chases of assets from a nor                      | •                                       | ganization        |                                     |                         |   | 1b(2)                             |          | X        |
|  | ital of facilities, equipment,                   | or other assets                         |                   |                                     |                         |   | 1b(3)<br>1b(4)                    |          | X        |
|  | mbursement arrangements<br>ns or loan guarantees |   |                   |                                     |                         |   | 1b(4)                             |          | X        |
|  | formance of services or me                       | mharchin or fundrais                    | ina colicitatio   | ne                                  |                         |   | 1b(6)                             |          | X        |
|  | of facilities, equipment, ma                     | •                                       | -                 |                                     |                         |   | 10(0)                             |          | X        |
| _  |  | •                                       |                   | dule. Column ( <b>b)</b> should alv | ways show the fair i    | market value of the good  |                                   | ets      |          |
|  |  |   |                   | ed less than fair market valu       |                         |   |                                   | J.O,     |          |
|  | (d) the value of the goods,                      |   |                   |                                     | ·,                      | or original angular ang | ,                                 |          |          |
| (a) Line no                                      | (b) Amount involved                              | <del></del>                             |                   | exempt organization                 | (d) Description         | n of transfers, transactions, a   | nd sharing arra                   | ngemen   | its      |
| <del>`                                    </del> |  | ` · · · · · · · · · · · · · · · · · · · | N/A               |                                     |                         | <u> </u>  | -                                 |          |          |
| <u>-</u>   |  |   |                   |                                     | 1                       |   |                                   |          |          |
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|  | •  | •                                       | =                 | or more tax-exempt organiz          | zations described       |   |                                   |          | _        |
|  | n 501(c) of the Code (other                      | •                                       | (3)) or in secti  | ion 527?                            |                         |   | Yes                               | X        | No       |
| b If "Yes,"                                      | complete the following sche                      |   |                   | /h \ T. ra = of a comment of        | T                       | (-) Description of volation   |                                   |          |          |
|  | (a) Name of org                                  | anization                               |                   | (b) Type of organization            |                         | (c) Description of relation   | nsnip                             |          |          |
|  | N/A  |   |                   |                                     |                         |   |                                   |          |          |
|  |  |   |                   |                                     |                         |   |                                   |          |          |
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|  |  |   |                   |                                     |                         | <del> </del>  |                                   |          |          |
| Und  | er penalties of perjury, I declare to            | hat I have examined this                | return, including | accompanying schedules and str      | atements, and to the be | st of my knowledge  |                                   |          |          |
|  |  |   |                   | taxpayer) is based on all informat  |                         | as any knowledge  | May the IRS of<br>return with the | prepare  | *        |
| Here   | Mann   | · tarby                                 | _                 | 13/19/21                            | PRESI                   |   | shown below<br>X Yes              | see inst | No No    |
| Si   | gnature of officer or trustee                    | , , , , , , ,                           |                   | Date                                | Title                   |   | 163                               |          | 140      |
|  | Print/Type preparer's na                         | •                                       | Preparer's si     |                                     | Date                    | Check if PTI  | N                                 |          |          |
|  | . 20 - Francis - 10                              |   |                   |                                     |                         | self- employed  |                                   |          |          |
| Paid   | AMANDA ADAI                                      | MS                                      | Amoul             | L Aleman                            | 3/19/2021               | P   | 00748                             | 038      |          |
| Preparer   |  |   | RT LLP            | ·                                   | <u> </u>                | Firm's EIN ► 56-  |                                   |          |          |
| Use Only   |  |   |                   |                                     |                         |   |                                   |          |          |
|  | Firm's address ► 20                              | 0 SOUTH 1                               | OTH ST            | ., STE. 900                         |                         |   |                                   |          |          |
|  |  | CHMOND, V                               |                   |                                     |                         | Phone no. 804-  | 673-5                             | 700      |          |
|  |  |   |                   |                                     |                         |   | Form <b>990</b>                   |          | (2014)   |

| 3 Grants and Contributions Paid During the Y             | <del>,</del>   | Т                    |                                  |  |
|--|--|----------------------|----------------------------------|--|
| Recipient  Name and address (home or business)           | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount                                 |
| Traine and address (nome of Paginess)                    | or substantial contributor   | recipient            |                                  | ·                                      |
| BROOKVILLE/TIMBERLAKE LIONS CLUB                         | N/A  | ₽C                   | DISADVANTAGED CHILDREN           |  |
| 439 JEFFERSON DR   | N/A  |                      | SUPPORT                          |  |
| LYNCHBURG, VA 24502                                      |  |                      |                                  | 1,500                                  |
|  |  |                      |                                  |  |
| CENTRA FOUNDATION  | N/A  | PC                   | NURSING SCHOLARSHIPS             |  |
| 1920 ATHERHOLT RD  |  |                      |                                  |  |
| LYNCHBURG, VA 24501                                      |  |                      |                                  | 10,000                                 |
|  |  |                      |                                  |  |
| CENTRAL VIRGINIA AREA AGENCY ON AGING                    | N/A  | PC                   | SENIOR CITIZEN PROGRAM           |  |
| 501 12TH STREET  |  |                      | SUPPORT                          |  |
| LYNCHBURG, VA 24504                                      |  | <u></u>              | <del> </del>                     | 1,000                                  |
|  |  |                      |                                  |  |
| CENTRAL VIRGINIA UNITED SOCCER                           | N/A  | PC                   | CHILDREN'S PROGRAM               |  |
| 222901 TIMBERLAKE RD                                     |  |                      | SUPPORT                          | E 000                                  |
| LYNCHBURG, VA 24502                                      |  |                      |                                  | 5,000                                  |
|  |  |                      |                                  |  |
| CHALLENGED SPORTS EXCHANGES, INC.<br>21104 TIMBERLAKE RD | N/A  | PC                   | HANDICAPPED CHILDREN<br>SUPPORT  |  |
| LYNCHBURG, VA 24502                                      |  |                      | 50110                            | 3,000                                  |
|  |  |                      |                                  | ······································ |
| EXCHANGE CLUB OF LYNCHBURG                               | N/A  | ₽C                   | VETERANS' PROGRAM                |  |
| PO BOX 774   |  |                      | SUPPORT                          |  |
| LYNCHBURG, VA 24505                                      |  | ļ                    |                                  | 2,000                                  |
|  |  |                      |                                  |  |
| FREE CLINIC OF CENTRAL VIRGINIA                          | N/A  | PC                   | COMMUNITY HEALTH                 |  |
| 1016 MAIN STREET   |  |                      | PROGRAMS                         | 2 222                                  |
| LYNCHBURG, VA 24504                                      | <u> </u>   | <u> </u>             |                                  | 3,000                                  |
|  |  |                      |                                  |  |
| HOLY CROSS REGIONAL CATHOLIC SCHOOL 2125 LANGHORNE ROAD  | N/A  | PC                   | EDUCATIONAL PROGRAM<br>SUPPORT   |  |
| LYNCHBURG, VA 24501                                      |  |                      | BOFFORT                          | 25,000                                 |
|  |  | <del> </del>         |                                  |  |
| KIDS' HAVEN  | N/A  | ₽C                   | PROGRAM SUPPORT                  |  |
| 325 12TH STREET  | [  |                      |                                  |  |
| LYNCHBURG, VA 24504                                      |  |                      |                                  | 1,500                                  |
|  |  |                      |                                  |  |
| LEBANON UNITED METHODIST CHURCH                          | N/A  | PC                   | COMMUNITY SUPPORT                |  |
| NEW LONDON RD  |  |                      |                                  | 1 000                                  |
| LYNCHBURG, VA 24551  Total from continuation sheets      | <u> </u>   | 1                    |                                  | 1,000<br>77,000                        |

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or show any relationship to Foundation **Amount** any foundation manager or substantial contributor status of contribution Name and address (home or business) recipient CHILDREN'S PROGRAM LIBERTY GODPARENT FOUNDATION N/A ₽C SUPPORT 1 MOUNTAIN VIEW ROAD LYNCHBURG, VA 24502 1,000. РC PROGRAM SUPPORT LYNCHBURG GROWS N/A PO BOX 12039 3,000. LYNCHBURG, VA 24506 PROGRAM SUPPORT N/A ÞС LYNCHBURG SHELTERED INDUSTRIES, INC. PO BOX 105905 1,500. LYNCHBURG, VA 24506 РC PROGRAM SUPPORT LYNCHBURG CITY SCHOOLS EDUCATION N/A FOUNDATION 915 COURT ST 2,000. LYNCHBURG, VA 24504 PROGRAM SUPPORT ÞС MEALS ON WHEELS, INC N/A PO BOX 1388 3,000. LYNCHBURG, VA 24505 EDUCATIONAL PROGRAM N/A ÞС NEW VISTAS SCHOOL SUPPORT 520 ELDON STREET 2,000. LYNCHBURG, VA 24501 PATRICK HENRY BOYS & GIRLS PLANTATION N/A РÇ CHILDREN'S PROGRAM SUPPORT PO BOX 1398 3,000. BROOKNEAL, VA 24528 PROGRAM SUPPORT SALVATION ARMY LYNCHBURG CORP N/A ÞС 2201 PARK AVE 2,000. LYNCHBURG, VA 24501 PROGRAM SUPPORT BLUE RIDGE AUTISM AND ACHIEVEMENT N/A ÞС CENTER 150 LINDEN AVENUE 2,500. LYNCHBURG, VA 24503 ÞC PROGRAM SUPPORT N/A VETERAN SERVICES FOUNDATION, VWWP 900 EAST MAIN STREET 6TH FLOOR WEST 3,000. WING RICHMOND, VA 23219 Total from continuation sheets

THE AL STROOBANTS FOUNDATION

| Part XV   Supplementary Information           | <u> </u>   | <del></del>         |                                  |             |
|---|--|---------------------|----------------------------------|-------------|
| 3 Grants and Contributions Paid During the Ye | ar (Continuation)  | <u>,</u>            | <del></del>                      | <u> </u>    |
| Recipient                                     | If recipient is an individual, show any relationship to  | Foundation          | Purpose of grant or              |             |
| Name and address (home or business)           | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | status of recipient | Purpose of grant or contribution | Amount      |
|   |  |                     |                                  |             |
| PAVE IT FORWARD                               | N/A  | PC                  | PROGRAM SUPPORT                  |             |
| PO BOX 561                                    | N/A  |                     | PROGRAM SOFFORT                  |             |
| BEAVER DAM, WI 53916                          |  |                     |                                  | 1,000.      |
|   |  |                     |                                  |             |
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|   | <u></u>  | <u> </u>            |                                  |             |
| Total from continuation sheets                |  |                     |                                  |             |

| FORM 990-PF                  | LEGAL                        | FEES                              | S                             | TATEMENT 1                           |
|------------------------------|------------------------------|-----------------------------------|-------------------------------|--------------------------------------|
| DESCRIPTION                  | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES        |
| LEGAL FEES                   | 175.                         | 0.                                |                               | 175.                                 |
| TO FM 990-PF, PG 1, LN 16A = | 175.                         | 0.                                |                               | 175.                                 |
| FORM 990-PF                  | ACCOUNTI                     | NG FEES                           | S                             | TATEMENT 2                           |
| DESCRIPTION                  | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES        |
| ACCOUNTING FEES              | 2,800.                       | 0.                                |                               | 2,800.                               |
| TO FORM 990-PF, PG 1, LN 16B | 2,800.                       | 0.                                |                               | 2,800.                               |
| DESCRIPTION                  | (A) EXPENSES PER BOOKS       | (B) NET INVEST- MENT INCOME       | (C)                           | TATEMENT 3  (D)  CHARITABLE PURPOSES |
| BANK & INVESTMENT FEES       | 4,106.                       | 4,106.                            |                               | 0.                                   |
| TO FORM 990-PF, PG 1, LN 16C | 4,106.                       | 4,106.                            |                               | 0.                                   |
| FORM 990-PF                  | TAX                          | ES                                | S                             | TATEMENT 4                           |
| DESCRIPTION                  | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES        |
| EXCISE TAX                   | 1,101.                       | 0.                                | <del></del>                   | 0.                                   |
| TO FORM 990-PF, PG 1, LN 18  | 1,101.                       | 0.                                |                               | 0.                                   |
| =                            | <del></del>                  |                                   |                               | <del></del>                          |

| FORM 990-PF                                 | OTHER EXPENSES               |                                   |                               | STATEMENT 5                   |  |  |
|---|------------------------------|-----------------------------------|-------------------------------|-------------------------------|--|--|
| DESCRIPTION                                 | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |  |  |
| STATE CORPORATION FEE MISCELLANEOUS EXPENSE | 25.<br>50.                   | 0.                                |                               | 25.                           |  |  |
| TO FORM 990-PF, PG 1, LN 23                 | 75.                          | 0.                                |                               | 25.                           |  |  |

| FORM 990-PF                              | U.S. AND    | STATE/CITY  | GOVERNI | ENT   | OBLIGATIONS        | STATEMENT 6          |
|--|-------------|-------------|---------|-------|--------------------|----------------------|
| DESCRIPTION                              |             | U.<br>GOV   |         |       | BOOK VALUE         | FAIR MARKET<br>VALUE |
| STATE AND MUNICIPA<br>US GOVERNMENT BONI | =           | x           |         | <br>: | 27,094.<br>25,969. | 29,398.<br>26,922.   |
| TOTAL U.S. GOVERNI                       | MENT OBLIGA | ATIONS      |         | •     | 25,969.            | 26,922.              |
| TOTAL STATE AND M                        | UNICIPAL GO | VERNMENT OB | LIGATIO | ons . | 27,094.            | 29,398.              |
| TOTAL TO FORM 990                        | -PF, PART 1 | I, LINE 10A |         | •     | 53,063.            | 56,320.              |

| FORM 990-PF CORPORATE STOCK                  | · · · · · · · · · · · · · · · · · · · | STATEMENT 7          |
|--|---------------------------------------|----------------------|
| DESCRIPTION                                  | BOOK VALUE                            | FAIR MARKET<br>VALUE |
| ALLIANZ NFJ DIVIDEND VALUE FUND              | 30,000.                               | 47,078.              |
| AMCAP FUND CLASS F-1                         | 33,279.                               | 47,161.              |
| ABERDEEN TOTAL RETURN BOND FD                | 33,115.                               | 31,765.              |
| ABERDEEN GLOBAL HIGH INCOME FUND             | 3,584.                                | 3,310.               |
| BLACKROCK INFLATION PROTECTED BOND PORTFOLIO |                                       |                      |
| CLASS A                                      | 10,478.                               | 9,644.               |
| BLACKROCK INFLATION PROTECTED BOND PORTFOLIO |                                       |                      |
| CLASS I                                      | 3,593.                                | 3,513.               |
| DELAWARE EMERGING MARKETS FUND CLASS A       | 5,186.                                | 5,208.               |
| DIAMOND HILL LARGE CAP FUND CLASS I          | 33,394.                               | 48,517.              |
| DODGE & COX INTERNATIONAL FUND               | 16,564.                               | 24,412.              |
| FIRST EAGLE OVERSEAS FUND                    | 22,005.                               | 21,251               |
| JP MORGAN MID-CAP VALUE FUND SELECT          | 8,884.                                | 9,424.               |
| LATEEF FUND CLASS I                          | 37,479.                               | 51,491.              |
| HARBOR INTERNATIONAL FUND INVESTOR CLASS     | 11,316.                               | 13,417.              |
| JP MORGAN LARGE-CAP GROWTH FUND CLASS A      | 30,877.                               | 49,755.              |
| JP MORGAN LARGE-CAP GROWTH FUND SELECT       | 8,181.                                | 10,266               |
| MFS EMERGING MARKET DEBT FUND CLASS I        | 5,076.                                | 5,000                |
| MFS VALUE FUND CLASS I                       | 40,539.                               | 65,343               |
| T ROWE PRICE SHORT-TERM BOND                 | 49,812.                               | 48,876               |
| TEMPLETON GLOBAL BOND FUND CLASS A           | 15,328.                               | 14,744               |
| THORNBURG INTERNATIONAL VALUE                | 0.                                    | 0 .                  |
| THE DELAFIELD FUND                           | 19,698.                               | 24,843               |
| ISHARES TR S&P 100 ETF                       | 55,699.                               | 90,940               |
| ISHARES TR S&P 500 GROWTH ETF                | 63,381.                               | 106,020              |
| ISHARES TR S&P 500 VALUE ETF                 | 56,862.                               | 98,459               |
| ISHARES TR RUSSELL 1000 VALUE ETF            | 55,404.                               | 99,180               |
| ISHARES TR RUSSELL 1000 GROWTH ETF           | 51,947.                               | 90,830               |
| ISHARES TR CORE S&P SMALL-CAP ETF            | 9,264.                                | 17,109               |
| ISHARES TR IBOXX \$ HIGH YIELD CORP BD       | 13,521.                               | 14,246               |
| VANGUARD INTL EQUITY INDEX FDS MSCI          | 15,025.                               | 16,008               |
| TOTAL TO FORM 990-PF, PART II, LINE 10B      | 739,491.                              | 1,067,810            |

| FORM 990-PF CORPORATE BONDS             |            | STATEMENT 8          |
|---|------------|----------------------|
| DESCRIPTION                             | BOOK VALUE | FAIR MARKET<br>VALUE |
| BLACKROCK INC FIXED RT                  | 29,055.    | 29,395.              |
| CISCO SYS INC FIXED RT SR NT            | 27,477.    | 27,523.              |
| DU PONT E I DE NEMOURS & CO FIXED       | 27,662.    | 27,324.              |
| AMGEN INC SR NT 4.100% 06/15/21 B/E     | 26,995.    | 26,831.              |
| BERKSHIRE HATHAWAY INC DEL SR FIXED RT  | 26,130.    | 26,743.              |
| INTEL CORP SR NT                        | 25,455.    | 26,216.              |
| BELLSOUTH TELECOMMUNICATIONS            | 18,002.    | 18,296.              |
| MERCK & CO INC DEB 6.300% 01/01/26 B/E  | 22,449.    | 22,639.              |
| BANK OF THE JAMES FINANCIAL GROUP 6%    | 400,000.   | 400,000.             |
| TOTAL TO FORM 990-PF, PART II, LINE 10C | 603,225.   | 604,967.             |

|  | ST OF OFFICERS, I<br>D FOUNDATION MANA |          | STAT                            | EMENT 9 |
|--|--|----------|---------------------------------|---------|
| NAME AND ADDRESS   | TITLE AND<br>AVRG HRS/WK               |          | EMPLOYEE<br>BEN PLAN<br>CONTRIB | EXPENSE |
| RODGER FAUBER<br>1423 TRENTS FERRY ROAD<br>LYNCHBURG, VA 24503         | PRESIDENT/DIRE 2.00                    | ECTOR 0. | 0.                              | 0.      |
| MARIA HANACKOVA STROOBANTS<br>4998 NEW LONDON ROAD<br>FOREST, VA 24551 | TREASURER/DIRE<br>2.00                 | CCTOR 0. | 0.                              | 0.      |
| MATTHEW COX<br>157 ASHMONT DRIVE<br>MADISON HEIGHTS, VA 24572          | SECRETARY<br>1.00                      | 0.       | 0.                              | 0.      |
| CARL MILKO<br>6155 COPPER CIRCLE<br>ROANOKE, VA 24019                  | DIRECTOR<br>1.00                       | 0.       | 0.                              | 0.      |
| MICHAEL SPENCER<br>108 BROOK RIDGE PLACE<br>FOREST, VA 24551           | DIRECTOR<br>1.00                       | 0.       | 0.                              | 0.      |
| MICHAEL THORNTON<br>3417 IVYLINK PLACE<br>LYNCHBURG, VA 24503          | DIRECTOR<br>1.00                       | 0.       | 0.                              | 0.      |
| C. MICHAEL VALENTINE<br>1487 LANGHORNE ROAD<br>LYNCHBURG, VA 24503     | DIRECTOR<br>1.00                       | 0.       | 0.                              | 0.      |
| ·  |  |          |                                 |         |
| TOTALS INCLUDED ON 990-PF, PAGE  | 6, PART VIII                           | 0.       | 0.                              | 0.      |