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OMB No 1545-0052

Open to Public

Department of the Treasury Internal Revenue Service

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. ► Information about Form 990-PF and its instructions is at <u>www.irs.gov/form990pf</u>.

**Return of Private Foundation** 

Inspection

For	caler	ndar year 2015, or tax year beginning 01-0	01-2015	, a	nd ending 1	2-31-2015	
	e of four	ndation OUNDATION			A Employer ide	entification numbe	er
LO	0FA331 T	OUNDATION			54-1947904		
		street (or P O box number if mail is not delivered to street address)	) Room/suite		<b>B</b> Telephone nun	nber (see instruction	s)
26	01 PARK	AVENUE			(804) 358-3191		
		state or province, country, and ZIP or foreign postal code VA 23220			<b>C</b> If exemption	application is pendin	g, check here
G C l	neck all	that apply Initial return Initial return of a	former public charity		<b>D 1.</b> Foreign or	ganizations, check he	ere <b>&gt;</b>
		Final return A mended return Address change Name change	,		2. Foreign or	ganizations meeting	the 85%
		pe of organization Section 501(c)(3) exempt priva 4947(a)(1) nonexempt charitable trust Other taxal		n	<b>E</b> If private fou	indation status was t n 507(b)(1)(A), chec	erminated
•		t value of all assets at end JAccounting method	✓ Cash Accru		<b>F</b> If the founda	tion is in a 60-montl	n termination
		om Part II, col (c),	be on cash basis )		under sectior	n 507(b)(1)(B), chec	k here 🕨 🦵
Pa	rt 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) (see instructions))	Revenue and expenses per (a) books	(b)	Net investment income	Adjusted net (c) income	Disbursements for charitable purposes (d) (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach					
		schedule)	325,000				
	2	Check ► ☐ If the foundation is <b>not</b> required to attach Sch B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	81,137		81,137	81,137	
	5a	Gross rents					
	ь	Net rental income or (loss)					
Revernie	6a	Net gain or (loss) from sale of assets not on line 10	44,163				
	ь	Gross sales price for all assets on line 6a 58,618					
Œ	7	Capital gain net income (from Part IV, line 2)			44,163		
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold					
	C	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)			737		
	12	<b>Total.</b> Add lines 1 through 11	450,300		126,037	81,137	
	13	Compensation of officers, directors, trustees, etc					
	14	Other employee salaries and wages					
es	15	Pension plans, employee benefits					
ens	16a	Legal fees (attach schedule)					
×	b	Accounting fees (attach schedule)					
tive	c 17	Other professional fees (attach schedule)  Interest	6,625		6,625		
Operating and Administrative Expenses	18 19	Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion	25		25		
Ξ	20	Occupancy					
Ă	21	Travel, conferences, and meetings	378		378		
Ē	22	Printing and publications					
<u>G</u>	23	Other expenses (attach schedule)	4,741		4,741		
atır	24	Total operating and administrative expenses.					
Ser.		Add lines 13 through 23	11,769		11,769		0
ŏ	25	Contributions, gifts, grants paid	194,500				194,500
	26	Total expenses and disbursements. Add lines 24 and 25	206,269		11,769		194,500
	27	Subtract line 26 from line 12			3-7. 33		
	а	Excess of revenue over expenses and disbursements	244,031				
	ь	Net investment income (if negative, enter -0-)			114,268		
	۱ ٫	Adjusted net income(if negative, enter -0-)				81,137	

Part II		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year		End of year		
			(a) Book Value	(b) Book		(c) Fair Market Value	
	1	Cash—non-interest-bearing	24,517		79,254	79,254	
	2	Savings and temporary cash investments					
	3	Accounts receivable ▶					
		Less allowance for doubtful accounts ▶					
	4	Pledges receivable ▶					
		Less allowance for doubtful accounts ▶					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons (attach schedule) (see instructions)					
	7	Other notes and loans receivable (attach schedule) ▶					
		Less allowance for doubtful accounts ▶					
S	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
As	10a	Investments —U S $$ and state government obligations (attach schedule)					
	b	Investments—corporate stock (attach schedule)	2,786,575		2,975,874	4,207,410	
	С	Investments—corporate bonds (attach schedule)					
	11	Investments—land, buildings, and equipment basis ▶					
		Less accumulated depreciation (attach schedule) ▶					
	12	Investments—mortgage loans					
	13	Investments—other (attach schedule)					
	14	Land, buildings, and equipment basis ▶					
		Less accumulated depreciation (attach schedule) ▶					
	15	Other assets (describe >)	<b>9</b> 5				
	16	<b>Total assets</b> (to be completed by all filers—see the					
		ınstructions Also, see page 1, item I)	2,811,097		3,055,128	4,286,664	
	17	Accounts payable and accrued expenses					
٠.	18	Grants payable					
Liabilities	19	Deferred revenue					
ᆵ	20	Loans from officers, directors, trustees, and other disqualified persons $% \left( 1\right) =\left( 1\right) \left( 1\right) \left$					
_1a	21	Mortgages and other notes payable (attach schedule)					
_	22	Other liabilities (describe ▶)					
	23	<b>Total liabilities</b> (add lines 17 through 22)			C	)	
S		Foundations that follow SFAS 117, check here ▶   √					
ce		and complete lines 24 through 26 and lines 30 and 31.					
lan	24	Unrestricted	2,811,097		3,055,128	3	
ဗ္ဗ	25	Temporarily restricted					
덛	26	Permanently restricted					
Fund Balance		Foundations that do not follow SFAS 117, check here ▶					
ŏ		and complete lines 27 through 31.					
	27	Capital stock, trust principal, or current funds					
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund					
Ă	29	Retained earnings, accumulated income, endowment, or other funds					
Net	30	Total net assets or fund balances(see instructions)	2,811,097		3,055,128	3	
	31	Total liabilities and net assets/fund balances (see instructions)  .  .	2,811,097		3,055,128	3	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances					
1		Total net assets or fund balances at beginning of year—Part II, column	(a), line 30 (must ag	ree			
		with end-of-year figure reported on prior year's return)			1	2,811,097	
2		Enter amount from Part I, line 27a			2	244,031	
3		Other increases not included in line 2 (itemize) ▶			3		
4		Add lines 1, 2, and 3			4	3,055,128	
5		Decreases not included in line 2 (itemize) ▶		_	5		
6		Total net assets or fund balances at end of year (line 4 minus line 5)—I	Part II, column (b), lii	ne 30 .	6	3,055,128	

		nd(s) of property sold (e g , re , or common stock, 200 shs	'	P—Purchase  (b) D—Donation	Date acquired	Date sold (d) (mo , day, yr )
1 a	MERRILL LYNCH STATEME	NT		Р	2014-12-29	2015-12-31
b						
с						
d					+	
е е						
		Depreciation allowed	d Cos	t or other basis	Gair	or (loss)
(e	) Gross sales price	(f) (or allowable)		expense of sale		(f) minus (g)
а	58,618	1		14,45	5	44,163
b						
С						
d						
e						
Col	mplete only for assets showing	gain in column (h) and owne	d by the foundatio	n on 12/31/69	Gains (Col	(h) gain minus
(i) F M V as of 12/31/69		A djusted basis (j) as of 12/31/69	Ex	cess of col (I)	col (k), but no	t less than -0-) <b>or</b> from col (h))
а						44,163
ь						
С						
d						_
e						
		1	If gain, also enter	ın Part I, line 7		
2	Capital gain net income or (		If (loss), enter -0		2	44,163
3	Net short-term capital dain	or (loss) as defined in section	ns 1222(5) and (6	.)		11/100
3	• •					
	ın Part I, line 8	line 8, column (c) (see instru		···i	3	
Part '	V Qualification Under	Section 4940(e) for R	educed Tax or	n Net Investm	ent Income	
	ional use by domestic private on 4940(d)(2) applies, leave t		ection 4940(a) tax	on net investment	income)	
	foundation liable for the secti		•	•	eriod?	┌ Yes 🗸 No
	the foundation does not qual	, , ,				
<b>1</b> Ent	er the appropriate amount in e	ach column for each year, se	ee instructions bef	ore making any en		
	(a) period years Calendar or tax year beginning in)  Adj	(b) justed qualifying distributions	(c) Net value of noncha		<b>(d)</b> Distributio (col (b) divided	n ratio
	2014	183,678		3,386,090		0 05425
	2013	131,690		2,727,447		0 04828
	2012	119,944		2,077,857		0 05773
	2011	104,895		1,966,193		0 05335
	2010	75,083		1,640,809		0 04576
2 3		or the 5-year base period—div	ıde the total on lır	' ' '	2	0 259362
	•	ndation has been in existence naritable-use assets for 2015	•	<b>—</b>	3	0 051872
4				<u> </u>	4	3,593,138
5				<b> </b>	5	186,383
6		income (1% of Part I, line 27	•		6	1,143
7				F	7	187,526
8		s from Part XII, line 4			8	194,500
	If line 8 is equal to or greate the Part VI instructions	er than line 7, check the box i	n Part VI, line 1b,	and complete that	part using a 1% ta	rate See

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)?

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

If "Yes," complete Part XIV

and addresses

No

No

9

10

Form	990-PF (2015)		Р	age <b>5</b>
Pai	rt VII-A Statements Regarding Activities (continued)			_
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		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►N/A			
14	The books are in care of ▶CAROL LOUPASSI Telephone no ▶(804	) 358-	3808	
	Located at ►2601 PARK AVENUE RICHMOND VA ZIP+4 ►23220			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here		▶	-
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over		Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ▶			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			I
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
<b>1</b> a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	İ	İ	İ
	if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days ) Yes Vo			
ь	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations	İ	İ	İ
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		No
	Organizations relying on a current notice regarding disaster assistance check here			
	Γ			
С	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 2015?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
а	operating foundation defined in section 4942(j)(3) or 4942(j)(5))  At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
_	and 6e, Part XIII) for tax year(s) beginning before 2015?			
	If "Yes," list the years ▶ 20, 20, 20	i	İ	İ
ь	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		No
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			
	▶ 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?		[ 	<u> </u>
b	If "Yes," did it have excess business holdings in 2015 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 <b>(3)</b> the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	If the foundation had excess business holdings in 2015)	3b		No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	<u> </u>		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No

	990-PF (2		al ! -	a Activities for	. 14/6	ich Form 4730	Mari	Do Dogwined (Cons	•:	۵,	Р	age (
						iich Form 4/20	мау	Be Required (Cont	inue	<i>a)</i> □ □		
5a	<del>-</del>	e year did the foundation		•			45/-	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	_			
		on propaganda, or othe		•	_	•	· ·	1 100 1	✓ No			
	` .	nce the outcome of any	•	•	•	, ,		·	_			
		ectly or indirectly, any		_			•	· · · · · TYes	✓ No			
	(3) Provid	le a grant to an individ	ual foi	travel, study, or ot	hers	ımılar purposes?		Yes	✓ No	!!		
		le a grant to an organiz tion 4945(d)(4)(A)? (s						ed · · · · · ☐ Yes [	√ No			
	` .	le for any purpose othe tional purposes, or for		- '				· · · Tyes [	√ No			
b	If any ans	wer is "Yes" to 5a(1)-	(5). d	ıd <b>anv</b> of the transac	tions	fail to qualify under	the	exceptions described in	•	i i	į	
_		, ,		-				•		5b		No
	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				•	_						
С	If the ans	wer is "Yes" to questic	n 5a(	4), does the foundat	ion c	laım exemption from	the					
	tax becau	se it maintained exper	diture	responsibility for t	he gr	ant?		· · · · · T Yes	√ No			
		ttach the statement req						, ,	•	i i	j	
<b>6</b> a	•	undation, during the ye		· -		` ,	pren	niums on				
		benefit contract?		•		,, , ,		· · · Tyes [	. No			
b	•							penefit contract?	•	6ь	i	No
		6b, file Form 8870	ат, ре	y premiums, unecer	, 01 1	nuncecity, on a perse	)	rememe contract : : :	•			-110
7a		ne during the tax year,	was t	he foundation a part	v to a	a prohibited tax shel	ter tr	ansaction? <b>Yes</b>	_ No			
	•	-		•	•	•		he transaction?	•	   7b	! 	No
								n Managers, Highly			love	
Pai		and Contractors	01	incers, Directors	3, II	ustees, i ouilua	itioi	i Managers, inginy	Fait	Lilip	ioye	cs,
1		icers, directors, truste	es, fo	undation managers	and t	heir compensation (	see ii	nstructions).				
	<b>(a)</b> Nar	ne and address	(b)	Title, and average hours per week		(c) Compensation(If not paid, enter -0-)		(d) Contributions to employee benefit plans and deferred compensation		Expense ac		
MANU	EL G LOUPAS	SI	FOU	ndation Mgr	0		anu	deletted compensation				
	L park aver		6 0	_	U							
	MOND, V											
CARO	LYN HODGES	- LOUPASSI	Fou	ndation Mgr	0							
	L PARK AV HMOND, V		6 0 0	)								
_2	Compensat	ion of five highest-pai	d em	oloyees (other than	thos	e included on line 1-	-see	instructions). If none, e	nter "	NO NE."		
Nan		<b>(a)</b> ress of each employee re than \$50,000	paıd	Title, and aver hours per we ( <b>b)</b> devoted to pos	ek	(c) Compensatio	ın	Contributions to employee benefit plans and deferred (d) compensation		Expens other a		
NON	Е											
									<u></u>			
				1								
				]								
Tota	l number of	other employees paid	over	\$50,000								

2

3

5

1

2a

3

4

5

6

7

1

2

5

Part XII

Part XI

56,214

3,647,856

3,647,856

3,593,138

179,657

179,657

1,143

178,514

178.514

178,514

194,500

194,500

1,143

193,357

Form **990-PF** (2015)

54,718

1b

1c 1d

> 2 3

> 4

5

1

2c

3

4

5

6

7

1a

1b

2

3а

3b

4

5

1,143

## Part X Minimum Investment Return

Fair market value of all other assets (see instructions). . . . . .

Reduction claimed for blockage or other factors reported on lines 1a and

check here ► and do not complete this part.)

Tax on investment income for 2015 from Part VI, line 5. . . . . .

Income tax for 2015 (This does not include the tax from Part VI). . .

Recoveries of amounts treated as qualifying distributions. . . . . .

Deduction from distributable amount (see instructions). . . . . . . .

**Qualifying Distributions** (see instructions)

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

1c (attach detailed explanation). . . . . . . . . .

Subtract line 2 from line 1d. . . . . .

Distributable Amount

(All domestic	foundations	must complete	this part.	Foreign	foundations,	see	ınstruc
			discount and the con-		and the second of the		

- tions.)
- Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,
- 1
- purposes
- 1a

Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4

Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . .

Expenses, contributions, qifts, etc —total from Part I, column (d), line 26. . . . . . . . . . . . .

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Distributable amount before adjustments Subtract line 2c from line 1. . . . . .

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see

- 3,591,642

1e

2a

2b

(see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations

Part XIII Undistributed Income (see instructions)

		(a)	(b)	(c)	(d)
1	Distributable amount for 2015 from Part XI, line 7	Corpus	Years prior to 2014	2014	2015
	·				170,511
	Undistributed income, if any, as of the end of 2015 Enter amount for 2014 only				
	Total for prior years 20, 20, 20				
	Excess distributions carryover, if any, to 2015				
	From 2010				
b	14.500				
	From 2012				
	From 2013				
	From 2014				
	Total of lines 3a through e	75,873			
	Qualifying distributions for 2015 from Part				
	XII, line 4  \$ 194,500				
а	Applied to 2014, but not more than line 2a				
	Applied to undistributed income of prior years				
	(Election required—see instructions)				
c	Treated as distributions out of corpus (Election	0			
	required—see instructions)				
d	Applied to 2015 distributable amount				178,514
е	Remaining amount distributed out of corpus	15,986			
5	Excess distributions carryover applied to 2015				
	(If an amount appears in column (d), the same amount must be shown in column (a) )				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	91,859			
b	Prior years' undistributed income Subtract line 4b from line 2b				
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				
d	Subtract line 6c from line 6b Taxable amount —see instructions				
е	Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions				
f	Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				0
7	A mounts 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)				
8	Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	91,859			
10	Analysis of line 9				
а	Excess from 2011 14,568				
b	Excess from 2012 17,207				
c	Excess from 2013 28,341				
d	Excess from 2014 15,757				
е	Excess from 2015 15,986				
c d	Excess from 2013 28,341 Excess from 2014 15,757			1	Form <b>990-PF</b>

	m 990-PF (2015)					Page <b>10</b>
	Part XIV Private Operating Founda				1 9)	
La	If the foundation has received a ruling or deter foundation, and the ruling is effective for 2015					
b	Check box to indicate whether the organization	n <u>is a private operat</u>	ing foundation de	scribed in section	Г 4942(J)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(0) 1010.
	year listed					
b	85% of line 2a					
	Qualifying distributions from Part XII, line 4 for each year listed					
d	A mounts included in line 2c not used directly for active conduct of exempt activities					
е	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					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in					
	Part X, line 6 for each year listed					
c	"Support" alternative test—enter					
	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments					
	on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii).					
	(3) Largest amount of support					
	from an exempt organization					
	(4) Gross investment income					
Pā	art XV Supplementary Information (			ie organizatio	n had \$5,000 o	r more in
_	assets at any time during the	e year—see inst	ructions.)			
a	Information Regarding Foundation Managers: List any managers of the foundation who have before the close of any tax year (but only if the				,	atıon
_	MANUEL G LOUPASSI					
b	List any managers of the foundation who own 1 ownership of a partnership or other entity) of w				large portion of the	e
2	Information Regarding Contribution, Grant, Gi	ft, Loan, Scholarshi	p, etc., Programs:	1		
	Check here ▶ ✓ If the foundation only makes unsolicited requests for funds If the foundation other conditions, complete items 2a, b, c, and	n makes gifts, grant				
	outer conditions, complete items 24, b, c, and					
ā	The name, address, and telephone number or	email address of the	e person to whom	applications shou	ld be addressed	
Ŀ	The form in which applications should be subn	nitted and information	on and materials	they should includ	e	
c	Any submission deadlines					
C	d Any restrictions or limitations on awards, suc factors	h as by geographica	al areas, charitabl	le fields, kinds of i	nstitutions, or othe	-

101111 220 1	1 (2013)	r
Part XV	Supplementary Information(continued)	

3 Grants and Contributions Paid	During the Year or App	proved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year See Additional Data Table	or substantial contributor	recipient		
Total	<u> </u>		▶ 3a	194,500
<b>b</b> Approved for future payment		T		131,300
Total		1	<u> </u>	

Enter gross	s amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by section	512, 513, or 514	(e) Related or exempt
<b>1</b> Progran	n service revenue	(a) Business code	(b) A mount	(c) Exclusion code	<b>(d)</b> A mount	function income (See instructions)
a						macrae crons y
	<u> </u>					
g Fees 2 Membe	and contracts from government agencies rship dues and assessments					
	st on savings and temporary cash ments					
	nds and interest from securities ntal income or (loss) from real estate					81,137
	financed property					
6 Net rer	ebt-financed property ntal income or (loss) from personal ty					
	nvestment income					
	r (loss) from sales of assets other than ory					44,163
	ome or (loss) from special events profit or (loss) from sales of inventory					
	, ,					
	revenue a					
с						
	al Add columns (b), (d), and (e)					125,300
13 Total.A	dd line 12, columns (b), (d), and (e)			1	3	125,300
	orksheet in line 13 instructions to verify -B Relationship of Activities to		alishment of	Evemnt Burnos		
Line No. ▼	Explain below how each activity for wh the accomplishment of the foundation's	ıch ıncome ıs rej	oorted in column	(e) of Part XVI-A co	ntributed import	
4	INVESTMENT INCOME					
8	INVESTMENT INCOME					
	<u> </u>					

Part	XVII	Information Re Noncharitable				actions and	Relationships With			
		rganızatıon dırectly or ı	ndırectly e	engage in any of	the following witl				Yes	No
	anızat	01(c) of the Code (othe	er than sec	ction 501(c)(3) (	organizations ) or	in section 527	, relating to political			
-		from the reporting four	ndation to	a noncharitable	exempt organiza	tion of				
(1)	Cash	1						1a(1)		No
(2)	Othe	rassets						1a(2)		No
<b>b</b> Oth	ner tra	nsactions								
(1)	Sale	s of assets to a noncha	rıtable exe	empt organizatio	n			1b(1)		No
		hases of assets from a		, ,				1b(2)		No
		al of facilities , equipme						1b(3)		No
		bursement arrangemer						1b(4)		No
		s or loan guarantees.						1b(5)		No
		mance of services or m						1b(6)		No
	_		_	·			ould always show the fair n	1c		No
of t	he goo iny tra	ods, other assets, or se	rvices giv angement	en by the reporti	ng foundation If (d) the value of	the foundation the goods, othe	received less than fair mar er assets, or services recei n of transfers, transactions, and s	ket value ved	<u>:</u>	
(a) Line	FINO	(b) Amount involved	(C) Name	от попспаптаріе ехі	empt organization	(u) Descriptio	ii oi cialisiers, cialisaccions, and s	naming arra	ngemei	11.5
des <b>√</b>	cribed No	, ,	ne Code (d	· ·	· ·		t organizations	[_Y	es	
<b>b</b> If "	Yes,"	complete the following: (a) Name of organization		1 0	<b>)</b> Type of organizat	ion I	(c) Description of rela	tionchin		
		(a) Name of organization		(,	5) Type of organizat		(c) Description of real	шоныпр		
	Und	lor nonalties of normer	I doclaro	that I have evan	mined this return	uncluding acco	ompanying schedules and s	tatomont	s and	+0
Sign	the		ind belief,	it is true, correc			preparer (other than taxpay		sed on	all
Here		*****			2016-11-15	****	* retu			
	<b>P</b>	Signature of officer or t	rustee		Date	Title	belo		_	
		Print/Type preparer's Stewart C McInnes	name	Preparer's Sıgr	nature	Date	Check if self- employed ► ✓	P00423	394	
Paid Prep	arer	Firm's name ▶ RUE & ASSOCIATES		I		I	Firm's EIN ▶			
Use Only		Firm's address ▶ 7264 HANOVER GRE 231111706	Phone no (804) 730-7-	455						

orm 990PF Part XV Line 3 - G	rants and Contributions	Paid During	the Year or Approved for	Future Payment
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	A mount
Paid during the year	0.0222			
ROSS OVER MINISTRY 600 QUIOCCASIN ROAD STE 102 ICHMOND,VA 23229	NONE		MEDICAL	1,000
IASSEY CANCER CENTER 01 COLLEGE STREET ICHMOND,VA 23298	NONE		MEDICAL	10,000
CIENCE MUSEUM OF VIRGINIA 500 WEST BROAD STREET ICHMOND,VA 23220	NONE		EDUCATIONAL	10,000
T CHRISTOPHERS SCHOOL 11 ST CHRISTOPHERS ROAD ICHMOND,VA 23226	NONE		EDUCATIONAL	10,000
TS CONSTANTINE AND HELEN REEK CHU 0 MALVERN AVENUE ICHMOND,VA 23221	NONE		CHURCH	11,250
HE HEALING PLACE 00 DINWIDDIE AVENUE ICHMOND,VA 23224	NONE		MEDICAL	10,000
A HOME FOR BOYS AND GIRLS 716 WEST BROAD STREET ICHMOND,VA 23294	NONE		EDUCATIONAL	5,000
IRGINIA MUSEUM OF FINE ARTS 00 NORTH BOULEVARD ICHMOND,VA 23220	NONE		EDUCATIONAL	10,000
THER CHARITIES VARIOUS ICHMOND,VA 23219	NONE		CHARITY & EDUCATION	2,150
ETTER HOUSING COALITION 3 WEST BROAD STREET 100 ICHMOND,VA 23241	NONE		CHARITY	5,000
IRGINIA COMMONWEALTH NIVERSITY 21 WEST FRANKLIN STREET ICHMOND,VA 23284	NONE		EDUCATION	10,000
IG BROTHERS - BIG SISTERS 707 SUMMIT AVENUE STE 200 ICHMOND,VA 23230	NONE		CHARITY	1,000
ARITAS PO BOX 25790 ICHMOND,VA 23260	NONE		CHARITY	10,000
HILDRENS MUSEUM OF ICHMOND 500 W BROAD STREET ICHMOND,VA 23220	NONE		EDUCATION	1,000
PCA 2519 HERMITAGE ROAD ICHMOND, VA 23220	NONE		CHARITY	5,000
Total			▶ 3a	194,500

Form 990PF Part XV Line 3 - Gr	ants and Contributions	Paid During	the Year or Approved for	Future Payment
Recipient  Name and address (home or	If recipient is an individual, show any relationship to	status of	Purpose of grant or contribution	A mount
business)	any foundation manager or substantial contributor	recipient		
<b>a</b> Paid during the year				
ST BENEDICT CATHOLIC CHURCH 3100 GROVE AVENUE RICHMOND,VA 23220	NONE		EDUCATION	1,100
THE NEW COMMUNITY SCHOOL 4211 HERMITAG ROAD RICHMOND,VA 23227	NONE		EDUCATION	53,000
VALENTINE RICHMOND HISTORY CENTER 1015 EAST CLAY STREET RICHMOND,VA 23219	NONE		EDUCATION	5,000
VIRGINIA HISTORIAL SOCIETY 428 N BOULEVARD RICHMOND,VA 23221	NONE		EDUCATION	5,000
SALVATION ARMY 2 W GRACE STREET RICHMOND,VA 23241	NONE		CHARITY	1,000
ELK HILL FARM POBOX 99 GOOCHLAND, VA 23063	NONE		CHARITY	2,000
FIRST BAPTIST ENDOWMENT FUND 2700 MONUMENT AVENUE RICHMOND,VA 23220	NONE		CHARITY	2,000
DRIVE TO WORK P O BOX 14526 RICHMOND, VA 23221	NONE		CHARITY	2,500
FRIENDS OF HOLLYWOOD CEMETERY 412 SOUTH CHERRY STREET RICHMOND,VA 23220	NONE		CHARITY	2,500
HELLENIC COLLEGE AND HOLY CROSS 50 GODDARD AVENUE BROOKLINE,MA 02445	NONE		EDUCATIONAL	1,000
MAYMOUNT FOUNDATION 1700 HAMPTON STREET RICHMOND,VA 23220	NONE		EDUCATIONAL	1,000
MCSHIN FOUNDATION 2300 DUNBARTON ROAD RICHMOND,VA 23228	NONE		CHARITY	1,000
NATIONAL HELLENIC MUSEUM 333 SOUTH HALSTED STREET CHICAGO,IL 60661	NONE		DUCATIONAL	1,000
RICHMOND BEHAVIORAL HEALTH FOUNDATI 107 SOUTH FIFTH STREET RICHMOND,VA 23219	NONE		CHARITY	3,000
THE STEWARD SCHOOL 11600 GAYTON ROAD RICHMOND,VA 23238	NONE		EDUCATION	1,000
Total			▶ 3a	194,500

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
<b>a</b> Paid during the year				
THE VA HOME 1101 HAMPTON STREET RICHMOND,VA 23220	NONE		CHARITY	2,500
VA SUPPORTIVE HOUSING 5008 MONUMENT AVENUE RICHMOND,VA 23230	NONE		CHARITY	1,000
VIRGINIA BAR FOUNDATION 701 E FRANKLIN STREET STE 1120 RICHMOND,VA 23219	NONE		CHARITY	1,500
VA COUNCIL OF CHURCHES 1214 WEST GRAHAM ROAD RICHMOND,VA 23220	NONE		RELIGIOUS	1,000
VISUAL ARTS CENTER OF RICHMOND 1812 WEST MAIN STREET RICHMOND,VA 23220	NONE		CHARITY	5,000

DLN: 93491320032266

**EIN:** 54-1947904

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

TAXES ON FOREIGN INCOME

**Software ID:** 15000324

1,006

1,006

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491320032266
TY 2015 Other Professional Fe	es Schedule	
Name:	LOUPASSI FOUNDA	PATION
EIN:	54-1947904	
Software ID:	15000324	

Software	<b>Version:</b> 2015v2.	0		
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

6,625

6,625

DIRECTORS FEES

efile GRAPHIC print - DO NOT PROCESS	S As File	ed Data -	DL	N: 93491320032266
TY 2015 Taxes Schedule				
Name <sup>.</sup>	: LOUPAS!	SI FOUNDATION		
EIN:	: 54-1947	904		
Software ID:	: 1500032	<u>'</u> 4		
Software Version:	<b>:</b> 2015v2.0	0		
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

25

REGISTRATION AND FRANCHISE

efile GRAPHIC print -	DO NOT PROCESS	As Filed Data -			DLN: 934913	20032266
Schedule B		Schedu	le of Contributors		OMB No 15	545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Information ab	out Schedule B (Fo	Form 990, 990-EZ, or 990-Pl orm 990, 990-EZ, or 990-PF) ow irs gov/form990		, at <b>20</b> 1	15
Name of the organizati				Empl	oyer identification n	umber
	101			54-1	.947904	
Organization type (ch	eck one)					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)(_)	(enter number) org	janization			
	4947(a)(1	) nonexempt charit	able trust <b>not</b> treated as a p	rivate foundation		
	527 politic	al organization				
Form 990-PF	<b>√</b> 501(c)(3)	exempt private fou	ndation			
	- 4947(a)(1	) nonexempt charit	able trust treated as a privat	te foundation		
	501(c)(3)	taxable private fou	ndation			
other property  Special Rules  For an organizate under sections 5	) from any one contrib tion described in section 509(a)(1) and 170(b)(	outor Complete Par on 501(c)(3) filing F 1)(A)(vi), that chec	that received, during the yea ts I and II See instructions for Form 990 or 990-EZ that met ked Schedule A (Form 990 of contributions of the greater of	or determining a contril the 33 <sup>1</sup> /3% support te or 990-EZ), Part II, line	outor's total contributions ast of the regulations 13, 16a, or 16b, and t	ons
For an organizated for the formula for the for		on 501(c)(7), (8), c more than \$1,000 e	r (10) filing Form 990 or 990 xclusively for religious, chai			
during the year, this box is check purpose Do not	contributions <i>exclusit</i> ked, enter here the tot complete any of the p	vely for religious, cl al contributions tha parts unless the <b>Ge</b>	or (10) filing Form 990 or 990 naritable, etc., purposes, but twere received during the y neral Rule applies to this o more during the year	t no such contributions /ear for an <i>exclusivel</i> / rganization because it	totaled more than \$1 religious, charitable, received <i>nonexclusi</i> i	,000 If etc , <i>vely</i>
990-EZ, or 990-PF), but	ıt <b>m ust</b> answ er "No"	on Part IV, line 2, o	e and/or the Special Rules do fits Form 990, or check the loes not meet the filing requil	box on line H of its		

Name of organization LOUPASSI FOUNDATION Employer identification number 54-1947904

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional spa	ce is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1			Person 🗸
	MANUEL G LOUPASSI 2601 PARK AVEENUE		Payroll
	RICHMOND, VA 23220	\$ 325,000	Noncash —
	NICHTOND, VA 23220		(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
		\$	Payroll
		-	Noncash
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
		_     \$	Payroll
		-	Noncash
			(Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
			Payroll
		-	Noncash
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
		_ _ _ s	Payroll
			Noncash
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
		_	Payroll
		<u> </u>	Noncash
			(Complete Part II for noncash contributions )

Employer identification number

LOUPASSI FOUNDATION		54-1947904		
Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed			
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
(a) (b) No.from Part I Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received	
		(c) s		
(a) No.from Part I	(b) Description of noncash property given	FMV (or estimate) (see instructions)	(d) Date received	
		<u> </u>		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		s		
		Schedule B (Form 9	90, 990-EZ, or 990-PF)	

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)