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Form 990-PF

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

OMB No 1545-0052

2015

► Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

For ca	len	dar	year 2015, or ta	ax year beginnir	ng O	ct 1 ,2015	and ending Se	p 3				
Name of								A	Employer identification n	umber		
East	V and	Ves:	t Foundati	LON if mail is not delivered	to street a	ddress)	Room/suite	В	54-1391171 Telephone number (see ins	tructions)		
1470	0	Vi.	llage Squa	are Place					(804) 739-38			
City or to	wn,	state	or province, country,	and ZIP or foreign pos	tal code			c	If examption application i	s pending, check here		
<u>Mıdl</u>	<u>ot</u>	<u>hi</u>	an	 -			23112		ii exemption application	s pending, check here.		
G Ch	ec	k all t	that apply	Initial return	-	Initial return of a forme	er public charity	D	1 Foreign organizations, ct	eck here		
			-	Final return		Amended return Name change			2 Foreign organizations me	eting the 85% test, check		
	_			Address chan	<u> </u>	_ 	Indation	┨	here and attach computa	tion ▶		
H Ch	ec		e of organization	n X Sec nonexempt chard			(3) exempt private foundation Other taxable private foundation E If private foundation status was terr					
I Cou			value of all assets a			ounting method X C		┪ ̄	under section 507(b)(1)(
			, column (c), line 16			Other (specify)		F	If the foundation is in a 6	O-month termination —		
> 9	\$		108	,266.	(Part I,	column (d) must be on o	ash basis)	1	under section 507(b)(1)(
Part	T	Ar	alysis of Re	evenue and		(a) Revenue and	(b) Net investmer	nt	(c) Adjusted net	(d) Disbursements		
		Ex	penses (The	total of amounts nd (d) may not ne	ın COS-	expenses per books	` income		income	for charitable purposes		
		sar	unins (b), (c), ai rily equal the am	nounts in column	(a)					(cash basis only)		
			e instructions))						, ,,,			
			. اسا	is etc, received (attach sch		33,758.			/ //	1		
		2	Ck ► if the fou	indation is not required to a	ITTACH SCH B							
		3	•	emporary cash investments		352.	3	<u>52.</u>	0			
		4		om secunites				_		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
		5 a Gross rents						, ""- 1				
	١		or (loss)	ale of assets not on line 10		-1 168	L-6a_Stmt		<i>I</i>			
R E			Gross sales price for	rall 15	,402.	1,100.	L-0a Still		5.	-		
V E N	١	7	assets on line 6a . Capital gain net inco	ome (from Part IV, line					,,	, ,		
		8		al gain · · · ·								
U		9	Income modification	s						, , , , , , , , , , , , , , , , , , ,		
E		10 a	Gross sales less returns and			l			,	1 200		
	-	b	allowances Less Cost of							- , 		
		_	goods sold	ach schedule)						 '		
		11		h schedule)						· · · · · · · · · · · · · · · · · · ·		
		••	`							. ,		
		12	Total Add lines 1	through 11 · · ·		32,942.	3	52.	0			
		13	•	ficers, directors, truste								
	1	14		alaries and wages loyee benefits								
	1	15		chedule)L-16a						-		
<i>f</i>) I			tach sch)L-16k			+ RE		EIVEU			
				ach sch) · · · ·			[2]	1	W 0017 00			
0 1	1	17					181 1/	<u> </u>	7 2017 9			
P S	5 [18	Taxes (attach schedule))(see instrs)	Taxes	·	100					
O I P S R F A A	R A T	19	Depreciation (attach	n etion • • • • •			1 0	3D	ĖN, UT	, ;		
i i	1	20	•				1 3					
G i	E	21		s, and meetings								
A E	Ę	22	· ·	ations		·	 	_				
βí	Ê	23	Other expenses (at		foor	35.						
į	EXPENSES	24	State re-	gistration	теез	33.						
Ì	Ĕ	24		es 13 through 23 · ·		930						
•	-	25	Contributions, gifts, grai	nts paid					ļ			
		26	Total expenses an Add lines 24 and 25	nd disbursements	<u> </u>	. 34,430						
	┪	27	Subtract line 26 from			AND MARKET OR OTHER WAS NO WASHINGTON THE PERSON.	-					
		á	Excess of revenue and disbursement			-1,488	. [•				
		ı		come (if negative, ent	er -0-)		3	52.				
				me (if negative, enter								

BAA For Paperwork Reduction Act Notice, see instructions.

TEEA0301 12/04/15

Page 2

1 Cash - non-interset-bearing	Part	II	Balance Sheets column should be for end-of-year amounts only	(a) Book Value	/L\ Dock \/olus	<u> </u>
2 Savings and temporary cash investments		_	(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
A Pledge sreamable Less allowance for doubtful accounts 4 Pledges receivable Constituted accounts 5 Grants receivable 6 Receivables due ten differs, disedes, studies, and sher 7 Other males and learn receivable (allush sub) Less allowance for doubtful accounts 1 Des allowance for doubtful accounts 1 Less allowance for doubtful accounts 1 Des allowance for doubtful accounts 1 Less allowance for doubtful accounts 1 Des allowance for doubtful accounts 2 Decreases for doubtful accounts 2 Decreases for doubtful accounts 3 Des allowance for doubtful accounts 3 Decreases for full belief full accounts 3 Des allowance for doubtful accounts 3 Des allowance for doubtful accounts 3 Des allowance for doubtful accounts 3 Des allowance for full belief full accounts 3 Des allowance for full belief full accounts 3 Des allowance for doubtful accounts 4 Des allowance for		_				
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28 Paid-in or capital surplus, or land, bldg, and equipment fund			Foundations that do not follow SFAS 117, check here			
S N C Paid-in or capital surplus, or land, bldg , and equipment fund	ELTA	27	•			
R S 30 Total net assets or fund balances (see instructions)	SN	28				
R S 30 Total net assets or fund balances (see instructions)		29	Retained earnings, accumulated income, endowment, or other funds	107,494.	106,006.	
(see instructions)		30	· · · · · · · · · · · · · · · · · · ·	107,494.	106,006.	
1 Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)		31	* * * * * * * * * * * * * * * * * * * *	107,494.	106,006.	
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2 Enter amount from Part I, line 27a	1	Tota	inet assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree w	vith	107.494.
3 Other increases not included in line 2 (itemize) ▶ 3 4 Add lines 1, 2, and 3	2					
4 Add lines 1, 2, and 3						T
5 Decreases not included in line 2 (itemize)	_	hhA	lines 1, 2, and 3			106-006
6 Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30 6 106,006.	-					
		Tota	I net assets or fund balances at end of year (line 4 minus line 5) – P	art II, column (b), line 30	6	106,006.

	(a) List and describe t 2-story brick warehouse	low acquired - Purchase - Donation	hase (mo,day,yr) (mo,day,yr)						
1 a	·····			- Donation					
b									
С									
d									
е									
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (e) plus (f) mi				
а									
b									
<u>c</u>									
d					· · · · · · · · · · · · · · · · · · ·				
е									
		g gain in column (h) and owned by the			(I) Gains (Co				
	(i) F M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (ı) over col. (ֈ), ıf any		jain minus col (k), b an -0-) or Losses (fr				
a					· · · · · · · · · · · · · · · · · · ·				
b					.				
d	<u> </u>		<u> </u>						
е		<u> </u>							
2	Capital gain net income or (net c	apıtal loss) If gaın, also e	enter in Part I, line 7 r -0- in Part I, line 7	2					
3	Net short-term capital gain or (lo	ss) as defined in sections 1222(5) and	I (6).						
		, column (c) (see instructions). If (loss		3					
Par	Qualification Under	Section 4940(e) for Reduce	d Tax on Net Investment	Income	<u> </u>				
Was	s, the foundation does not qualify	on 4942 tax on the distributable amou under section 4940(e) Do not complete.	ete this part		· · · · Tyes	No			
1	Enter the appropriate amount in	each column for each year, see the ir		tries					
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(col	(d) Distribution (b) divided by c				
	2014	36,100.	113,1	23.		0.319122			
	2013	26,700.	120,3	38.		0.221875			
	2012	12,800.	96,5	66.		0.132552			
	2011	16,650.	13,9	23.		1.195863			
	2010	74,250.	40,5	83.		1.829584			
2	Total of line 1, column (d)			2		3.698996			
3	Average distribution ratio for the number of years the foundation	5-year base period — divide the total has been in existence if less than 5 years.	on line 2 by 5, or by the ears	3		0.739799			
4	Enter the net value of noncharita		line 5	. 4		100,493.			
5	Multiply line 4 by line 3	able-use assets for 2015 from Part X,	5 Multiply line 4 by line 3						
				5	ļ	74,345.			
6	Enter 1% of net investment inco					74,345.			
6 7				6		_			
	Add lines 5 and 6	me (1% of Part I, line 27b)		6		4.			

Part		uctio	ns)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here b and enter 'N/A' on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary — see instrs)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V,	<u> </u>			7.
	check here . P and enter 1% of Part I, line 27b		-, -		
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0.
	Add lines 1 and 2	ــــــ			7.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	<u> </u>			7.
	Credits/Payments:				
	2015 estimated tax pmts and 2014 overpayment credited to 2015	1	. ,		
	Exempt foreign organizations — tax withheld at source	7.6~			
	Tax paid with application for extension of time to file (Form 8868) 6 c	1.	, -	•	
d	Backup withholding erroneously withheld		· · · · · · · · · · · · · · · · · · ·		
7	Total credits and payments. Add lines 6a through 6d	↓			
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached				
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed				7.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<u> </u>			0.
11	Enter the amount of line 10 to be Credited to 2016 estimated tax				
Par	t VII-A Statements Regarding Activities				
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?		1 a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?		. 1b	ļ <u> </u>	Х
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities				
c	Did the foundation file Form 1120-POL for this year?		. 1 c	<u> </u>	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation · · · ▶ \$ 0. (2) On foundation managers · · · ▶ \$	0	-		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$			<u></u>	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		. 2	<u> </u>	X
	If 'Yes,' attach a detailed description of the activities			1	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		. 3		Х
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		. 4a		Х
t	olf 'Yes,' has it filed a tax return on Form 990-T for this year?		. 4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		. 5		X
	If 'Yes,' attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or				1
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict				
	with the state law remain in the governing instrument?		. 6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col (c), and Part XV		. 7	X	
8 8	a Enter the states to which the foundation reports or with which it is registered (see instructions)		1		1
	VA - Virginia			1	
1	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation		. 8 b	X	-
		- 3	<u> </u>	 ^	†
9	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)? If 'Yes,' complete Part XIV		. 9		X
40	the top years the top years I Was a stack a cohedula listing their names				
10	and addresses	<u> </u>	. 10		X
BAA		F	Form 99	0-PF	(2015)

Form	990-PF (2015) East West Foundation 54-13911	71	P	age 5
	t 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		Χ_
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)			x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	. 13	Х	
4.4	Website address N/A The books are in care of Christine Badura Telephone no. (804)	739	-380	- – - ·
14	Located at 14700 Village Square Place Midlothian VA ZIP+4 23113	'		: <u> </u>
15	Located at 14700 Village Square Place Midlothian VA ZIP+4 23113 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	 -	· ·	
	and enter the amount of tax-exempt interest received or accrued during the year			ш
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a		Yes	No
10	bank, securities, or other financial account in a foreign country?	. 16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country	<u> </u>		
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required		Yes	No
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Tes	NO
1 8	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? Yes X No			
	(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? Yes		`	
	(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' 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.)			
1	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)?	. 11	.	
	Organizations relying on a current notice regarding disaster assistance check here			
,	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 2015?	. 10	:	- X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	į		
	a 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?			
	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)	. 21	b	
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	► 20 , 20 , 20 <u>, 20 </u> .	ļ		
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	,		
	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 (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to	3	h	
	determine if the foundation had excess business holdings in 2015)	· -3	+	+
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4	a	X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4	b	X
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Form 990-PF (2015) East West Foundation	on		<u>54-139</u>	1171	Page 6
Part VII-B Statements Regarding Activitie	es for Which Form	4720 May Be Requ	uired (continued)		
5 a During the year did the foundation pay or incur an	y amount to				
(1) Carry on propaganda, or otherwise attempt to	influence legislation (se	ction 4945(e))?	Yes X	No	
(2) Influence the outcome of any specific public e	lection (see section 4955	5), or to carry	Yes X		
on, directly or indirectly, any voter registration	drive' · · · · · · · · · · · · · · · · · · ·		Yes X	No	, ,
(3) Provide a grant to an individual for travel, stud			L		,
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions).	a charitable, etc, organiz	ation described	Yes X	No	
(5) Provide for any purpose other than religious, educational purposes, or for the prevention o	charitable, scientific, liter f cruelty to children or an	rary, or ımals?	Yes X	No _	*
b If any answer is 'Yes' to 5a(1)-(5), did any of the t described in Regulations section 53.4945 or in a (see instructions)?	current notice regarding i	nisaster assistance		5 b	
Organizations relying on a current notice regarding	ng disaster assistance ch	eck here	▶ □	,	
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsible		f 4h-a		No	
If 'Yes,' attach the statement required by Regulat.	ing for the grant ions section 53 4945-5(d).			
				1	
6 a Did the foundation, during the year, receive any f on a personal benefit contract?	unas, directly or indirectly	y, to pay premiums	Yes X	No	
b Did the foundation, during the year, pay premium	s, directly or indirectly, o	n a personal benefit cont	tract?	6b	X
If 'Yes' to 6b, file Form 8870.				* 5.	
7 a At any time during the tax year, was the foundation	on a party to a prohibited	tax shelter transaction?	Yes X	No	
b If 'Yes.' did the foundation receive any proceeds	or have any net income a	attributable to the transac	ction?	7b	1
Part VIII Information About Officers, D	irectors, Trustees,	Foundation Manag	gers, Highly Paid E	Employee	ıs,
and Contractors					
1 List all officers, directors, trustees, foundatio		ompensation (see insti		(a) Eypana	se account,
	(b) Title, and average hours per week	(c)Compensation (If not paid,	(d)Contributions to employee benefit		allowances
(a) Name and address	devoted to position	enter -0-)	plans and deferred compensation		
			сотрепвалон		
Gary W. Fenchuk	Director				
13704 Beechwood Point Drive Midlothian VA 23112		0.	0.		0.
	1.00				
				Ĺ	
			<u> </u>		
2 Compensation of five highest-paid employed		luded on line 1 – see i	nstructions). If none, e	nter 'NONE	<u>.</u>
(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 plans and deferred compensation	(e) Expen	se account, allowances
Not Applicable				1	
	 		 	+	
				ļ	
			<u> </u>		
	<u> </u>		<u> </u>	-	3.7
Total number of other employees paid over \$50,000			<u> </u>	Form 0	Non
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(Fel	see instructions.)	yn ioun	dations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes	200 to	
	Average monthly fair market value of securities	1 a	18,958.
	Average of monthly cash balances	1 b	83,065.
	Fair market value of all other assets (see instructions)	1 c	100 000
	Total (add lines 1a, b, and c)	1 d	102,023.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d · · · · · · · · · · · · · · · · · ·	3	102,023.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3		102,023.
	(for greater amount, see instructions)		_1,530.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	100,493.
6_	Minimum investment return. Enter 5% of line 5	6	5,025.
Pai	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here and do not complete this part.)	found	ations
1	Minimum investment return from Part X, line 6	1	5,025.
2 a	Tax on investment income for 2015 from Part VI, line 5		
ì	Income tax for 2015 (This does not include the tax from Part VI.)		
•	Add lines 2a and 2b	2 c	7.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	5,018.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	5,018.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	5,018.
Pa	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes		
	Expenses, contributions, gifts, etc – total from Part I, column (d), line 26 · · · · · · · · · · · · · · · · · ·		
	Program-related investments — total from Part IX-B		0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes		
3	Amounts set aside for specific charitable projects that satisfy the	3 a	
	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	0.
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 (see instructions)	5	O.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the for qualifies for the section 4940(e) reduction of tax in those years.	undation	

art XIII Undistributed Income (see instruction	(a)	(b) Years prior to 2014	(c) 2014	(d) 2015
	Corpus	, care pro-		5 010
Distributable amount for 2015 from Part XI,				5,018.
ling 7				
Landictributed income, if any, as of the end of 2015				0.
a Enter amount for 2014 only · · · · · · · · · · · · · · · · · · ·				
b Total for prior years 20 , 20, 20			T	
3 Excess distributions carryover, if any, to 2015				
a From 2010				1
h 5rom 2011				
5 From 2012				-
4 From 2013				
24,591.	152,392			
T-4-1 of lines 3a through e	152,392	·		
4 Qualifying distributions for 2015 from Part				
4 B C U. 1				
a Applied to 2014, but not more than line 2a				l l
of prior years		1		
b Applied to undistributed income of prior years (Election required — see instructions)				
the second of cornus			<u> </u>	
- Complete amount distributed out of corpus		0.		
annied to 2015 · · · · 1				
5 Excess distributions callyover applies (if an amount appears in column (d), the (if an amount appears in column (a).)			Ì	
(If an amount appears in column (u), and same amount must be shown in column (a).)			1	Ì
6 Enter the net total of each column as	processor that the state of the			
indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5	152,39	92.		
a Corpus Add lines 31, 40, and 40 Seems			0.	
b Prior years' undistributed income. Subtract				
line 4b from line 2b undistributed				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has under the section 4942(a)				İ
income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
tax has been previously assessed				
d Subtract line 6c from line 6b Taxable			0.	
amount - see instructions				0.
e Undistributed income for 2014 Subtract line 4a from				9:
e Undistributed income for 2014 Subtract into Advisors line 2a Taxable amount — see instructions				}
f Undistributed income for 2015. Subtract lines		\		5,01
f Undistributed income to 2015. 4d and 5 from line 1. This amount must be	1			
distributed in 2010	`\		}	
7 Amounts treated as distributions out of				1
corpus to satisfy regain 40.40(a) (Election				
may be required — see months	-			
distributions carryover from 2010 not	72	324.		
8 Excess distributions can 7 (see instructions) . applied on line 5 or line 7 (see instructions) .	12,	<u> </u>		
2016	l	068.		
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a		~~~		
40 Analysis of line 9	ţ		1	
5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5				
h Evenes from 2012 · · 12,80				
26, 70		1	}	
d Excess from 2014	7.			
	0.			Form 990-PF (2

Form 990-PF (2015) East West Foundat				54-1391171	Page 10
Part XIV Private Operating Foundat			<u>-</u>		N/A
1 a If the foundation has received a ruling or dete is effective for 2015, enter the date of the ruli	ing			<u></u> • [
b Check box to indicate whether the foundation		ing foundation descri		4942(J)(3) or	4942(J)(5)
2 a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	1	
investment return from Part X for each year listed	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
b 85% of line 2a			<u> </u>		
Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					<u></u>
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		ļ			
(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()(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information	(Complete this	part only if the	foundation ha	d \$5,000 or more	in
assets at any time during th	 	istructions.)			
Information Regarding Foundation Managa a List any managers of the foundation who have close of any tax year (but only if they have compared to the compa	ve contributed more	than 2% of the total	contributions receiv	ed by the foundation b	efore the
N/A	ontributed more tha	n \$5,000). (See Sect	ion 507(d)(2))		
b List any managers of the foundation who ow	n 10% or more of th	e stock of a cornora	tion (or an equally la	rge portion of the own	arehin of
a partnership or other entity) of which the foundation Wild SW	undation has a 10%	or greater interest	non to an equally la	igo portion of the own	sidilip of
2 Information Regarding Contribution, Gran Check here X if the foundation only ma requests for funds. If the foundation makes g complete items 2a, b, c, and d	akes contributions to	preselected charita	ble organizations an	d does not accept uns ons under other condit	olicited ions,
a The name, address, and telephone number	or e-mail address of	the person to whom	applications should	be addressed:	
N/A					
	<u> </u>				
$\mbox{\bf b}$ The form in which applications should be su N/A	bmitted and informa	tion and materials th	ey should include:		
c Any submission deadlines				-	
N/A					
d Any restrictions or limitations on awards, suc	ch as by geographic	al areas, charitable f	fields, kinds of institu	tions, or other factors	
N/A	7 0 1 m	•			
	·				

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment										
Recipient	If recipient is an individual, show any relationship to any foundation manager or	Foundation status of recipient	Purpose of grant or contribution	Amount						
Name and address (home or business) a Paid during the year	substantial contributor									
Capital Region Land Conservance	17									
PO Box 17306										
Richmond VA 232	26	501(c)	Continue program funding	1,000.						
Gerard's House 3204 Mercantile Court										
Santa Fe NM 875		501(c)	Continue program funding	25,000.						
Children's Hospital Foundation 2924 Brook Road										
Richmond VA 232	20	501(c)	Continue program funding	300.						
Virginia Home										
1101 Hampton Street Richmond VA 232	20	501(c)	Continue program funding	5,000.						
Kevin Pouley	20	301 (0)	Financial Assistance	5,000.						
Midlothian Turnpıke										
Midlothian VA 231	13			200.						
Hampdon Sydney -scholarship J. Tries.	er		College Scholarship							
80 College Road										
Hampden Sydney VA 239	43	1	}	2,000.						
			1							
			1							
Total	<u></u>		3a	33 500						
b Approved for future payment		' 	34	33,500.						
b Approved for fature payment			1							
			1							
		}								
	1									
		İ								
	l.		1							
Total			3b							

Part XVI-A Analysis of Income-Producing Activities

Enter	inter gross amounts unless otherwise indicated.		Unrelate	ed business income	Excluded by	y section 512, 513, or 514			
1	Progra	am service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)		
а	Ū				-				
b					 		· · · · · · · · · · · · · · · · · · ·		
C					†		- ·- <u>-</u> -		
đ									
e									
f									
g	Fees a	and contracts from government agencies							
2	Memb	ership dues and assessments							
		on savings and temporary cash investments			14	352.			
4	Dıvide	ends and interest from securities					• • • • • • • • • • • • • • • • • • • •		
		ntal income or (loss) from real estate			<u> </u>	` -			
		inanced property			_		· · · · · · · · · · · · · · · · · · ·		
		ebt-financed property			<u> </u>				
		tal income or (loss) from personal property			_				
7		investment income							
		(loss) from sales of assets other than inventory			19	<u>-1,</u> 168.			
9		come or (loss) from special events							
10		profit or (loss) from sales of inventory			 				
11		revenue			 		<u></u> ł		
a					 				
b					 				
C					+				
d					 				
e 12	Culsta	And And and improve (b) (d) and (n)	<u> </u>		 	01.6			
		tal Add columns (b), (d), and (e)				-816.	04.6		
						13	-816.		
		neet in line 13 instructions to verify calculations							
Par	t XVI	-B Relationship of Activities to the	Accomp	lishment of Exem	pt Purpo:	ses			
Line	e No.	Explain below how each activity for which inco	ome is report	ted in column (e) of Part	: XVI-A conti	ributed importantly to t	he		
	▼	accomplishment of the foundation's exempt p	urposes (oth	er than by providing fund	ds for such	purposes). (See instru	ctions)		
		Not applicable							
				<u></u>					
									
									
									
						·			
									
						 -			
						 			
						······································			

Dart Y		Information Rec	arding Tran		nd Transa	ction	e and	Relationer	ine V		1391		га	ige 13
raitz		Exempt Organiz	ations	31613 10 0	iliu IIalisa	CLIOII	is allu	i (Ciationsi	iipa t	VICII INC	110116	liilabie		
											_		Yes	No
1 D	d the o	rganization directly o f in section 501(c) of	r indirectly enga	ge in any of t	he following w	ith any	other or	ganization					,	
re	lating to	political organization	ns?	man section	301(c)(3) org	arnzan	5/15 <i>)</i> 0/ 11	3 6 00011 327,						3
a Tr	ansfers	from the reporting for	oundation to a n	oncharitable (exempt organi	zation	of							
(1) Cash											1 a (1)		X
(2) Othe	r assets										1 a (2)		Х
b O	ther tra	nsactions												
(1) Sales	s of assets to a nonc	haritable exemp	t organization								1 b (1)		Х
(2) Purc	hases of assets from	a noncharitable	exempt orga	nızatıon							1 b (2)		Х
•	•	al of facilities, equipr										1 b (3)		X
(4) Reim	bursement arrangen	nents									1 b (4)		X
•	•	s or loan guarantees										1 b (5)		X
		ormance of services										1 b (6)		X
c S	haring o	of facilities, equipmen	nt, mailing lists, o	other assets,	or paid emplo	yees.						1 c		Х
d If th	the ans le good: ny trans	wer to any of the abo s, other assets, or se action or sharing arr	ove is 'Yes,' com ervices given by t angement, show	iplete the folio the reporting vin column (d	owing schedul foundation If I) the value of	e Colu the fou the go	ımn (b) s ındatıon r ods. othe	hould always eceived less t erassets, or s	show t than fa ervices	the fair m ir market s received	arket v value I	alue of in		
(a) Line		(b) Amount involved			xempt organizati			Description of tra					gement	 S
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d	escribe 'Yes,' c	indation directly or in d in section 501(c) of complete the following	f the Code (other g schedule	l with, or relat r than section	ed to, one or 501(c)(3)) or	more ta ın sect	ax-exemption 527?					. Yes	s [X]	No
	(a)	Name of organization	on	(b) T	ype of organiz	ation			(c) De	scription (of relat	ionship		
		<u> </u>												
														
							l							
	Under po	enaities of perjury, i declare and complete Declara <u>tion o</u>	that I have examined of preparer (other than	i this return, includ n taxpayer) is bas	ting accompanying ad on all information	g schedul on of whic	es and state h preparer	ements, and to the has any knowledg	ibestoff e	ny knowledg	e and be	elief, it is true,		
Sign Here	/	3 5	}	<u>lel</u>	7/7	117	*	Pres	زز	ant		May the this retur preparer (see instr	n with the shown b	e elow
	Signa				Date		Tit						Yes	No
		Print/Type preparer's nan	ne	Prepare	er's signature			Date	ļ	Check	lf	PTIN		
Paid		Timothy G. I	Benusa, CP	A	<u> </u>	<u> </u>		06/26/1	7	self-employe	ed	P00581	L123	
Prepa	arer	Firm's name	Timothy G.	Benusa	& Associ	ates	, CPA		Firm	's EIN ► (4-3	837411		
Use C		Firm's address	590 Huquen	ot Trail					_					

Midlothian

BAA

23113

(804) 897-4583

Schedule B

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

Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.
► Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Name of the organization		Employer identification number
East West Foundation	54-1391171	
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organi	ization
	4947(a)(1) nonexempt charitable trust	not treated as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust	treated as a private foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the	e General Rule or a Special Rule.	
Note. Only a section 501(c)(7), (8), or (10)	organization can check boxes for both the Genera	al Rule and a Special Rule. See instructions
General Rule		
For an organization filing Form 990, 99 property) from any one contributor. Co	0-EZ, or 990-PF that received, during the year, coi mplete Parts I and II. See instructions for determin	ntributions totaling \$5,000 or more (in money or ing a contributor's total contributions.
Special Rules		
under sections 509(a)(1) and 170(b)(1 received from any one contributor, dur	on 501(c)(3) filing Form 990 or 990-EZ that met the)(A)(vi), that checked Schedule A (Form 990 or 990 ing the year, total contributions of the greater of (1) in 990-EZ, line 1 Complete Parts I and II	0-EZ), Part II, line 13, 16a, or 16b, and that
during the year, total contributions of n	on 501(c)(7), (8), or (10) filing Form 990 or 990-EZ hore than \$1,000 <i>exclusively</i> for religious, charitabl ity to children or animals Complete Parts I, II, and	e, scientific, literary, or educational
during the year, contributions exclusives \$1,000. If this box is checked, enter he charitable, etc., purpose. Do not comp	on 501(c)(7), (8), or (10) filing Form 990 or 990-EZ ely for religious, charitable, etc., purposes, but no sere the total contributions that were received during lete any of the parts unless the General Rule appliantable, etc., contributions totaling \$5,000 or more	such contributions totaled more than If the year for an <i>exclusively</i> religious, Iles to this organization because
990-PF), but it must answer 'No' on Part I	ed by the General Rule and/or the Special Rules d V, line 2, of its Form 990, or check the box on line b t the filing requirements of Schedule B (Form 990.	H of its Form 990-EZ or on its Form 990-PF,

	B (Form 990, 990-EZ, or 990-PF) (2015)	Page	1 of 1 of Part
Name of orth	Jest Foundation	1 ' '	r Identification number 391171
	Contributors (see instructions) Use duplicate copies of Part I if additional space	e is needed.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Gary Fenchuck 13704 Beechwood Point Drive	\$ <u>33,140.</u>	Person Payroll Noncash X
	MidlothianVA _23112	-	(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ -	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - \$	Person

(Complete Part II for noncash contributions)

Page

1 to

of Part II

1

Name of organization .

East West Foundation

Employer identification number

54-1391171

PartU	Noncash Property (see instructions) Use duplicate copies of Part II if additional space	s needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	2000 of LPX stock		
		\$33,140.	12/15/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - -	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ - -	
BAA	Sch	 	Z. or 990-PF) (201

ne		Employer Identification Number		
ast West Foundation		54-1391171		
Asset Information:				
Description of Property]	000 Shares of Louisiana Pacific			
Date Acquired .				
Date Sold 03/21/16				
	, 402. Cost or other basis (do not reduce by depreciation) 16,570.			
	Valuation Method			
Total Gain (Loss)	1,168. Accumulation Depreciation			
Description of Property				
Date Acquired	How Acquired			
Date Sold	Name of Buyer:			
Sales Price.	Cost or other basis (do not reduce by depreciation) .			
Sales Expense:	Valuation Method			
Total Gain (Loss)	Accumulation Depreciation			
Description of Property				
Date Acquired .	How Acquired			
Date Sold:	How Acquired Name of Buyer	·····		
Date Sold:				
Sales Price	Cost or other basis (do not reduce by depreciation)			
Sales Expense				
Total Gain (Loss):	Accumulation Depreciation:			
Description of Property:	Have Approved.			
Date Acquired:	How Acquired			
Date Sold	Name of Buyer	····		
Sales Price	Cost or other basis (do not reduce by depreciation) .	• •		
Sales Expense .				
Total Gain (Loss)	Accumulation Depreciation			
Description of Property				
Date Acquired:	How Acquired:			
Date Sold	Name of Buyer			
Sales Price	Cost or other basis (do not reduce by depreciation) .	· · ·		
Sales Expense	Valuation Method			
Total Gain (Loss)	Accumulation Depreciation:			
Description of Property				
Date Acquired .	How Acquired:			
Date Sold:	Name of Buyer:			
Sales Price:	Cost or other basis (do not reduce by depreciation) .	• •		
Sales Expense	Valuation Method:			
Total Gain (Loss):	Accumulation Depreciation:			
Description of Property				
Date Acquired: .	How Acquired			
Date Sold:	Name of Buyer			
Sales Price	Cost or other basis (do not reduce by depreciation) .			
Sales Expense	Valuation Method:	·		
Total Gain (Loss)	Accumulation Depreciation:			
Description of Property				
Date Acquired: .	How Acquired.			
Date Sold	Name of Buyer			
Sales Price	Cost or other basis (do not reduce by depreciation) .			
Sales Expense	Valuation Method			
Total Gain (Loss)	Accumulation Depreciation			

' Form 990-PF, Page 1, Part I Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Thomas E. Carr	Registration	263.			

Total

263.

Form 990-PF, Page 1, Part I Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Timothy G. Benusa, CPA	Compliance	625.			

Total

625.