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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

▶ Do not enter Social Security numbers on this form as it may be made public. Department of the Treasury Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Internal Revenue Service For calendar year 2013 or tax year beginning , and ending Name of foundation A Employer Identification number THE TAHIR FAMILY FOUNDATION INC 20-3780507 Number and street (or P O box number if mail is not delivered to street address) Room/suite Telephone number (see instructions) 1502 E Treasure Cove City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here GILBERT AZ 85234 G Check all that apply: Initial return Initial return of a former public charity 1. Foreign organizations, check here Amended return Final return 2. Foreign organizations meeting the Address change 85% test, check here and attach computation Name change H Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation J Accounting method: X Cash I Fair market value of all assets at Accrual If the foundation is in a 60-month termination under section 507(b)(1)(B), check here end of year (from Part II, col. (c), Other (specify) 0 line 16) ▶ \$ (Part I, column (d) must be on cash basis.) (d) Disbursements Part 1 Analysis of Revenue and Expenses (The total of (a) Revenue and (b) Net investment (c) Adjusted net for charitable expenses per amounts in columns (b), (c), and (d) may not necessarily equal purposes ıncome books the amounts in column (a) (see instructions) ) (cash basis only) 22,750 ္တိုလည္သြန္သေတာင္းေရမွာမွာကူလုိင္သြင္းမွာမွာ စီစက္ကာမရွိကုိ ပုိက္တိုရီမာနီး ႏိုင္ငံရွိရွိရီမာနီး માર્કા કહે. ૧૯૮૧માં કેટલા ક માર્કા કહે. Contributions, gifts, grants, etc., received (attach schedule) 2 Check | X | if the foundation is **not** required to attach Sch. B 3 Interest on savings and temporary cash investments Δ Dividends and interest from securities Gross rents Net rental income or (loss) 18 49 ch 20 ch 18 Tege ferming in in State of the week fermingen. and the second of the second Net gain or (loss) from sale of assets not on line 10 Salar Carried Control of Control - minger signing by is in see finding المُوالِّةُ أَنْ الْمُعَالِقُولُ الْمُعَالِقُولُ الْمُعَالِقُولُ الْمُعَالِقُولُ الْمُعَالِقُولُ الْمُعَالِقُ Gross sales price for all assets on line 6a रक्ष कर प्रदेशको अक्षत्रकार कर सन्द्रण सङ्ख्या है रक्षत्रक के नार्राण भी वस्ति कर सन्द्रण सङ्ख्या है ja malamini i ngiliman i isah giriyi. Ka malamini in nisis yaliki sinamana malami 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain ရွိလ<sup>ည်</sup>ယက်မြီးနည်းသို့ ရှိနော်နိုင်တွင် ၂၂ ၁၈၈၈ ရှိတွင်သို့ အော်အကို ကို ရေးသူ ရေးသို့သော် (၁၉၈၈ ા અર્જી કેટ જુર ભૂજી અને વેંદ્રો કહુમાનની ભાષા એ દેશ પાર્ટ કેમિય 9 Income modifications 10a Gross sales less returns and allowances gan is a confidence of the same of the confidence ~\_{{\bullet\_{\billet\_{\bullet\_{\bullet\_{\bullet\_{\bullet\_{\bullet\_{\bullet\_{\bullet\_{\bullet\_{\bullet\_{\bullet\_{\bullet\_{\bullet\_{\bullet\_{\bullet\_{\billet\_ b Less. Cost of goods sold an might beine Sammer and Company in an interest of the contract C Gross profit or (loss) (attach schedule) endergen und der geleichen der gestellte der gestellte der gestellte der gestellte gestellte der gestellte der 11 Other income (attach schedule) O a with the first war were a few to be 22,750 Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc. 13 Other employee salaries and wages 15 Pension plans, employee benefits Legal fees (attach schedule) 16a Accounting fees (attach schedule) Other professional fees (attach schedule) C JUN 17 17 Interest Taxes (attach schedule) (see instructions) eging rasmostic en ing paga an inaya man ag ng ra`n agamatan an ing paga an inaya man ing Depreciation (attach schedule) rand depiction 19 20 Occupancy 21 Travel, conferences, and meetings Printing and publications 72 23 Stmt 1 Other expenses (att. sch ) Total operating and administrative expenses. 72 0 Add lines 13 through 23 ----22,029 25 0 Contributions, gifts, grants paid 22,101 Total expenses and disbursements. Add lines 24 and 25 0 िर्देश विशेषा विश्वतिकारी कि विशेष विकास करिया कर्मा स्थापित करियों विकास करिया करिया क्षितिकारी करियों विकास करिया करियों क्षितिकारी करियों म् केन्द्र नार्थक के अध्यक्षित किन्द्र किन्द्र बहुद्र कर केन्द्र के बात कर्म का वर्ष के 27 Subtract line 26 from line 12. 649 Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)

nemmer best jeroprim in geleich Dan teile Tree ein melbe.

Adjusted net income (if negative, enter -0-)

SCANNED JUN 2

ig and Administrative Expenses

20-3780507 Form 990-PF (2013) THE TAHIR FAMILY FOUNDATION INC End of year Beginning of year Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.) Part II (a) Book Value (b) Book Value (c) Fair Market Value 1,535 1 Cash – non-interest-bearing ...... 886 Savings and temporary cash investments ...... 2 Accounts receivable ▶ ..... Less: allowance for doubtful accounts ▶ ...... Pledges receivable ▶ 4 Less: allowance for doubtful accounts ▶ Grants receivable ...... 5 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see ınstructions) Other notes and loans receivable (att. schedule) 7 Less: allowance for doubtful accounts ▶ \_\_\_\_\_\_0 Inventories for sale or use 8 Prepaid expenses and deferred charges ...... 10a Investments – U.S. and state government obligations (attach schedule) Investments – corporate stock (attach schedule) þ Investments – corporate bonds (attach schedule) C Investments – land, buildings, and equipment basis ▶ ..... 11 Less accumulated depreciation (attach sch.) 12 Investments – mortgage loans Investments – other (attach schedule) 13 Land, buildings, and equipment basis 14 Less accumulated depreciation (attach sch.) 15 Other assets (describe ▶ ) 16 Total assets (to be completed by all filers - see the 886 instructions. Also, see page 1, item I) .... Accounts payable and accrued expenses ..... .... 17 Grants payable ..... 18 Deferred revenue \_\_\_\_\_\_ 19 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) Other liabilities (describe ▶ \_\_\_\_\_\_) 22 Total liabilities (add lines 17 through 22) . . . . . Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Unrestricted Temporarily restricted ...... 25 Permanently restricted ....... Assets or Fund Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Capital stock, trust principal, or current funds 27 Paid-in or capital surplus, or land, bldg., and equipment fund 886 1,535 Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see instructions) 886 Total liabilities and net assets/fund balances (see 886 instructions) **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 agree with 886 end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 2 3 Other increases not included in line 2 (Itemize) ▶ 3 1,535 Add lines 1, 2, and 3 4 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 ...... 6

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

7

7 Add lines 5 and 6

Part VI instructions.

8 Enter qualifying distributions from Part XII, line 4

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	990-PF (2013) THE TAHIR FAMILY FOUNDATION IN		780507		Page 6
<u> </u>	ift VII-B Statements Regarding Activities for Which Forn	n 4720 May Bo	e Required (c	ontinued)	88 83.5 V NA
5a	During the year did the foundation pay or incur any amount to:		_	_	
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	U \	'es 🔀 No	Committee visit to me to me to the committee of the commi
	(2) Influence the outcome of any specific public election (see section 4955); or	to carry on,			THE PARTY OF THE P
	directly or indirectly, any voter registration drive?		۱ 🗌 ،	'es 🗶 No	
	(3) Provide a grant to an individual for travel, study, or other similar purposes?		🗌 <b>١</b>	'es 🔀 No	
	(4) Provide a grant to an organization other than a charitable, etc., organization	n described in		_	
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)		🗍 <b>ነ</b>	'es X No	
	(5) Provide for any purpose other than religious, charitable, scientific, literary,			_	Cimerca Cibbi me dinamini Circle Cibb e dee Canibi di
	purposes or for the properties of excellents children or eximals?			'es 🛣 No	
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un				
	Regulations section 53.4945 or in a current notice regarding disaster assistance			N/A	5b
	Organizations relying on a current notice regarding disaster assistance check to				
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption f				နည်း မောက် က ထိမ ဆော်ကို ၆ မီးက မင်း ပန် ပည်း မော်ကိုမော်မှာ သက် ရပ
•			N/A 🗆	es No	ศัสด์วิธีที่ (ชี
	If "Yes," attach the statement required by Regulations section 53.4945–5(d).	*******			The state of the s
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to j	nav premiume			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
Vu				es 🔀 No	
b	on a personal benefit contract?	reonal banafit car		es II IIO	6b X
D		ersonal benefit cor	mract,		HAPPY 4 4 F 400 - 4 17 9
70	If "Yes" to 6b, file Form 8870.	haltar transaction	? \ \ \ \ \ \	es X No	で 200 mm ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )
7a	At any time during the tax year, was the foundation a party to a prohibited tax s				7b
	If "Yes," did the foundation receive any proceeds or have any net income attributed int VIII Information About Officers, Directors, Trustees, F				
	MANAGE TO ANGLE TO A STATE OF THE STATE OF T	oulidation wi	anayers, my	ily Palu Ellip	noyees,
<del>-</del> -	and Contractors  ist all officers, directors, trustees, foundation managers and their compe	naction (ago ins	tructions)	·	
	ist an officers, directors, trustees, foundation managers and their compe	insation (see ins	liuctions).	( D O - 1 - 1 1 -	<del></del>
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Sy	ed Zubair Tahir GILBERT	Dir/Presiden			
• •	02 E Treasure Cove AZ 85234	0.00	o	0	0
	eshan Syed Tahir GILBERT	Dir./Treasur			
•	02 E Treasure Cove AZ 85234	0.00	o	0	0
	hammad Aziz Shah Phoenix	Director	-		
	18 N 32nd Street AZ 85008	0.00	اه	O	
· .					
		d l' d	· 4 · > 16		<u> </u>
2	Compensation of five highest-paid employees (other than those include "NONE."	a on line 1 – see	instructions). It	none, enter	
		(b) Title, and average		(d) Contributions to	
	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit	(e) Expense account, other allowances
		devoted to position		plans and deferred compensation	other allowances
NC	NE.				
	NT	}			}
					<del> </del>
• • •		]			]
		<u> </u>		<del></del>	<del> </del>
		ļ		<del></del>	<del> </del>
		<b></b>			
	<del> </del>	L	L		<u> </u>
Tota	I number of other employees paid over \$50,000	<del></del>			. • 0
				Fo	rm 990-PF (2013)

Form 990-PF (2013) THE TAHIR FAMILY FOUNDATION INC		Page
Part VIII Information About Officers, Directors, Trustees, Fo and Contractors (continued)	undation Managers, Highly Pa	id Employees,
3 Five highest-paid independent contractors for professional services (see i	instructions). If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		-
		· <del></del> -
Total number of others receiving over \$50,000 for professional services	·	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical informorganizations and other beneficiaries served, conferences convened, research papers produced, etc.	nation such as the number of	Expenses
1 N/A	<u> </u>	
• •		
2		
3		<del> </del>
<b>4</b>		
Part IX-B Summary of Program-Related Investments (see in	structions)	·
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and	d 2	Amount
1 N/A		
	•	
<b>2</b>		
All other program-related investments. See instructions		
3		

Total. Add lines 1 through 3

Forn	1 990-PF (2013) THE TAHIR FAMILY FOUNDATION INC 20-3780507		Page 8
P	Minimum Investment Return (All domestic foundations must complete this part	Foreign foundations,	
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	alad 101 = 1: 	
	purposes:		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	0
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	0
е	Reduction claimed for blockage or other factors reported on lines 1a and	1 mg	
	1c (attach detailed explanation)	0	
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	0
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	
6	Minimum investment return. Enter 5% of line 5	6	0
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating		
	foundations and certain foreign organizations check here		
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2013 from Part VI, line 5	7 6 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
b	Income tax for 2013. (This does not include the tax from Part VI.)	**************************************	
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
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	0
~ n.	*ATTION OF THE PLANT AND A CONTRACT OF THE PARTY OF THE P		
Pi	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	4, 80 \$2.5, 1 \$45.5 \$ \$4.5	
а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	0
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the.	er vind Prince	
а	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	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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	foundation	

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

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Гс	art xiii.	15)	<del></del>		
	Distributable amount for 2010 from Rod VI	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
•	Distributable amount for 2013 from Part XI, line 7		Treats phot to 2012		2013
,					
•	Undistributed income, if any, as of the end of 2013: Enter amount for 2012 only			rieser Piessisisisistans sc	
a h	Total for prior years: 20 , 20 , 20		30-10 (-8a8-0 - 1 (-41-as1		
1	Excess distributions carryover, if any, to 2013:		Balthanaga in		
, a	From 2008				
h	From 2009				
c	From 2010				
d	From 2011				
e	From 2012				
f	Total of lines 3a through e				
1	Qualifying distributions for 2013 from Part XII,				
	line 4: ▶ \$				
а	Applied to 2012, but not more than line 2a			Afficiency was seen body and apply permanent finds field body was bedreadly found page.	
b	Applied to undistributed income of prior years				
	(Election required – see instructions)				
C	Treated as distributions out of corpus (Election			200 00 00 00 00 00 00 00 00 00 00 00 00	
	required – see instructions)		**************************************	(\$1) ( )	
d	Applied to 2013 distributable amount				
е	Remaining amount distributed out of corpus				Mighkas w
5	Excess distributions carryover applied to 2013			To Grand And Control of the Control	
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)		1. The state of th	te versiones il consideration del la consideration	[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
5	Enter the net total of each column as				
	Indicated below:				20 25 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	v 44" 5" 4" 14" 00 558 " V +	The state of the s	THE TO THE CONTROL OF	
b	Prior years' undistributed income. Subtract		{		
	line 4b from line 2b	AND SECTION OF THE CONTRACTOR			Althorophike diele skelling
С	Enter the amount of prior years' undistributed	gringe state of the state of th			
	income for which a notice of deficiency has	1 2 4 5 4 5 5 5 5 5 6 5 6 5 6 5 6 5 6 5 6 6 6 6			
	been issued, or on which the section 4942(a)		ļ		
_	tax has been previously assessed				
a	Subtract line 6c from line 6b. Taxable	(4.78 ( 1343) ( 1 ( 1 ( 1 4 ( 1 ) 2 ) )			
_	amount – see instructions		eth trains white the section is	C 6 68 "4 "4"   \$4 \$4 66 62 1 47 6 \$5 7 7 8 54 5	
e	Undistributed income for 2012. Subtract line 4a from line 2a. Taxable amount – see				
	Instructions				
f	Undistributed income for 2013. Subtract lines	les Catablica			
•	4d and 5 from line 1. This amount must be				
	distributed in 2014				0
7	Amounts treated as distributions out of corpus		tic year security of terms.		
	to satisfy requirements imposed by section			\$ 1   \$ 20 00 00 000 00 000 000 000 000 000 0	
	170(b)(1)(F) or 4942(g)(3) (see instructions)		efficielations to expense sugar many on office to expense sugar	िक्यों किस्तुविक्यों किस्तुविद्योग अस्ति । अस्ति । स्थान पुरुष अपूर्वे स्थान । अस्तु । अस्त	
3	Excess distributions carryover from 2008 not		न्युक्त र कणका अन्तरसारक रक्षेत्रक र च स्थापित रहा,	At 1 2 mep 1 4 mem 111 2 4 4 1 1 4 5 5 1 m m 9 4 (20 5) prost 2	
	applied on line 5 or line 7 (see instructions)			e e ga seers s e s	
9	Excess distributions carryover to 2014.		3	, 1	* 1 1 5 <sub>2</sub> 1
	Subtract lines 7 and 8 from line 6a				
0	Analysis of line 9:			* * * * * * * * * * * * * * * * * * * *	Ī
а	Excess from 2009	<b>.</b>			,
b	Excess from 2010			10 2 10	,
С	Excess from 2011	· · · ·	<u> </u>		
d	Excess from 2012	4	,	* *	,
Δ.	Excess from 2013	I	i	I	1

Forn	990-PF (2013) THE TAHIR F.	AMILY FOUND	DATION INC	20-3780	507	Page <b>10</b>
	art XIV Private Operating Fo					
1a	If the foundation has received a ruling of					
	foundation, and the ruling is effective fo	r 2013, enter the date	of the ruling	•	Ĺ	
b	Check box to indicate whether the found	dation is a private ope	rating foundation des	cribed in section 4	942(j)(3) or 494	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	<u> </u>	Prior 3 years		(e) Total
	income from Part I or the minimum	(a) 2013	(b) 2012	(c) 2011	(d) 2010_	(6) 10(2)
	investment return from Part X for		J	]	]	
	each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII,			ĺ		
	line 4 for each year listed					
d	Amounts 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		<u> </u>	Ĺ	<u> </u>	
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)	<u></u>				
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			}	ľ	
	investment income (interest,					
	dividends, rents, payments on				j	
	securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public				<del></del>	
	and 5 or more exempt	Ì	l	ľ		
	organizations as provided in					
	section 4942(J)(3)(B)(III)	<u></u>	ļ. <u> </u>	ļ	<u> </u>	
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income	_ <del></del>	<u> </u>		<u> </u>	Ĺ <u>.</u>
i R	Supplementary Infor	•	•	if the foundatio	n had \$5,000 or r	nore in assets at
	any time during the		ictions.)		· · · · · · · · · · · · · · · · · · ·	
1	Information Regarding Foundation	-				
а	List any managers of the foundation wh					
	before the close of any tax year (but on	ly if they have contribu	uted more than \$5,000	)). (See section 507(d	)(2).)	
	N/A		f.), . 1 f			
ь	List any managers of the foundation wh				rge portion of the	
	ownership of a partnership or other enti	ty) of which the found	ation has a 10% or gre	eater interest.		
	N/A	0	Nahadayahin ata Da			
2	Information Regarding Contribution			_	d dage was assess	
			to preselected charit	-		
	unsolicited requests for funds. If the fou		grants, etc. (see instru	ictions) to maividuals	or organizations under	
	other conditions, complete items 2a, b,		of the person to who	m applications should	l bo addrosand:	
а	The name, address, and telephone nun <b>N/A</b>	nber or e-mail address	s of the person to who	m applications should	be addressed:	
	N/A					
	The farm in which controlled by			thou should include		
D	The form in which applications should be <b>N/A</b>	e submitted and infor	mation and materials i	iney should include.		
¢	Any submission deadlines: N/A					
	Any restrictions or limitations on awards	cuch so by coorse	hical areas, charitable	fields kinds of install	tions or other	
ч	factors:	, such as by geograp	inoai aicas, chantable	moido, Rindo Di Illollil	mons, or other	
	N/A					
DAA	. <del></del>			<del></del>		Form 990-PF (2013)

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Part  Note: Part	on (cor	Year or Approved fo	r Future Payment		
Recipient		If recipient is an individual,	Foundation	i i	
		show any relationship to any foundation manager	status of recipient	Purpose of grant or contribution	Amount
Name and address (home or busines	s)	or substantial contributor	roopora		
a Paid during the year					
N/A					
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Total			<u>L </u>	<b>▶</b> 3a	₹.
Approved for future payment	<u>' '</u>				<u>-</u>
N/A					
Total .				▶ 3b	
<u> </u>					Form <b>990-PF</b>

-intel gloss al	mounts unless otherwise indicated.	ctivities	d business income	Eveludo	by section 512, 513, or 514	
	nounts unless otherwise indicated.	(a) Business code	(b) Amount	(c) Exclusion code	(d)	(e) Related or exempt function income
	service revenue:					(See instructions )
a		-		<u> </u>		
°		·	<del></del>	<del>                                     </del>	<del></del>	
d						
e						<del></del>
f						
g Fees a	and contracts from government agencies					
2 Membersh	nip dues and assessments					
3 Interest or	savings and temporary cash investments				<del></del> ,	
4 Dividends	and interest from securities .					
	income or (loss) from real estate:					regation (playing (
	nanced property		-	ļ		
	ebt-financed property					
	income or (loss) from personal property				· <del></del>	
	estment income	<b>——</b>		<del> </del>		
-	oss) from sales of assets other than inventory	<u> </u>		<del> </del>		ļ. <del></del>
	e or (loss) from special events fit or (loss) from sales of inventory	<del></del>	<del></del>	-		
	enue: a				<u>.</u>	
		<u> </u>		<del></del>	<del> </del>	
c		<del></del>	<del></del>			<del></del>
				i		
е						
2 Subtotal.	Add columns (b), (d), and (e)	and the state of t	0		0	
3 Total. Add	d line 12, columns (b), (d), and (e)				13 _	0
	et in line 13 instructions to verify calculations.)					
Part XVI-	<del></del>					<del></del>
Line No.						
▼	Explain below how each activity for which incon accomplishment of the foundation's exempt pur					

"Part XVII	Information Req Exempt Organiz	-	o and Transact	ions and Relationship	s With Noncharitat	ole
1 Did the o			he following with any	other organization described		Yes No
		•		section 527, relating to politica	10° 970	
organizat		101 111411 30011011 001(0)(0)	organizations) or in	realing to politice	•	
-		ndation to a noncharitable	evernt organization	of		
(1) Cash		idation to a nonchamable i	exempt organization	oi.		(1) X
(2) Other		•			1a(	
b Other trai		•			14	
	•	itable avamet arganization				
		itable exempt organization	•		1b(	
• •		noncharitable exempt orga	inization .	•	1b(	
	al of facilities, equipmen				1b(	
	bursement arrangemen	is .			<u> 1b(</u>	
	s or loan guarantees		1		[1b(	
		nembership or fundraising			1b(	
_	• •	mailing lists, other assets,	• •		<u>10</u>	X
	-	· ·	-	umn (b) should always show		
				If the foundation received less		
				of the goods, other assets, or		<del></del>
(a) Line no	(b) Amount involved	(c) Name of noncharitable	exempt organization	(d) Description of transfers	, transactions, and sharing arrang	ements
N/A		<u> </u>		<u> </u>		
				<u> </u>		
			- <u>-</u> -			
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described	d in section 501(c) of the complete the following s		501(c)(3)) or in sect	tion 527?		Yes X No
3T / B	(a) Name of organization	(b) 1yp	e of organization	(c) Desi	cription of relationship	
N/A			<del></del> .	<u> </u>	<del></del>	
	<del></del>	<del></del>			<del></del>	
		<del></del>				<del></del>
Under	penalties of periury. I declare t	that I have examined this return i	ncluding accompanying si	L chedules and statements, and to the b	pest of my knowledge and belief.	it is true.
				of which preparer has any knowledge	·	
Sian		4			May the IRS discuss t with the preparer show	
Sign   Here	100	(10 A)	. 4	. 1	(see instructions)?	Yes No
nere	Allu-	<i>(                                      </i>	16/	11/14		
<del> </del>	veneture of efficer or trustee	<del></del>	Data	Title	ficer	
<del></del> _	ignature of officer or trustee		Date		_ <del></del>	<del></del>
Print	t/Type preparer's name		Preparer's signatu	ire	Date	Check if
Paid	T/L			<b></b>		self-employed
reparer ALK	Khan, CPA		AK Khan,		D6/11/1	
Jse Only	r's name ► Khan			PA LLC		50522
Firm		0 N Northsigh		2 C105	Firm's EIN ▶ 20-81	
	Scot	<u>tsdale, AZ 8</u>	5260			48-8500
					(	200-PF (2012)

## **Two Year Comparison Report**

For calendar year 2013, or tax year beginning

2012 & 2013

Taxpayer Identification Number 20–3780507

				FOUNDATION	013		0-3780507
	$\vdash$	Revenue and expenses	2012	Revenue and expenses		Revenue and expenses	ences
		per books	Net investment income	per books	Net investment income	per books	Net investment income
amounts receive	11.	27,495	1 2 4 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	22,750	. 2, 2, 12, 12, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2	-4,745	2.12 (2) 1.12 (2) 2.12 (2) 1.22 (2) 1.23 (2) 2.13 (2) 2.14 (2) 2.15 (2) 2.1
investments	2,						
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•	4.						
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	8.						
	9.	27,495	0	22,750	0	-4,745	<del></del>
tees, etc.	10.						
	11						
	12.						
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	14.						
	15.					_	
	16.						
	17.						
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•	19.	29,367		22,029		-7,338	
nes 10 through 1	20.	29,472		22,101		-7,371	
ctivity, enter -0	21.	-1,977	0	649	0	2,626	
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	23.	14 (15.400)		Turka Mariba Ma		d Mark Baltica	
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Form **990T** 

## **Two Year Comparison Report**

For calendar year 2013, or tax year beginning

, ending

2012 & 2013

Name

Taxpayer Identification Number

_1	HE TAHIR FAMILY FOUNDATION INC			20-3	20-3780507			
			2012	2013	Differences			
	1. Gross profit/loss on business activities	1.						
	2. Capital gains/losses	2.						
n e	3. Income/loss from partnerships and S corporations	3.	T.		<u> </u>			
e	4. Rental income (net of expense)	4.			<del></del>			
e v	5. Unrelated debt-financed income (net of expense)	5.						
æ	6. Interest, and other income from controlled organizations (net of expense	6.						
_	7. Investment income of specific organizations (net of expense)	7.						
	8. Exploited exempt activity income (net of expense)	8.						
	9. Advertising income (net of expense)	9.						
	10. Other income	10.						
	11. Total trade or business income. Combine lines 1 through 10	11.	i					
	12. Compensation of officers, directors, and trustees	12.		-				
	13. Other salaries and wages	13.						
	14. Repairs and maintenance	14.			·			
	15. Bad debts	15.			<del></del>			
s	16. Interest	16.						
se	17. Taxes and licenses	17.			· · · · · · · · · · · · · · · · · · ·			
Ë	18. Charitable contributions	18.						
w	19. Depreciation and Depletion	19.						
_	20. Contributions to deferred compensation plans	20.						
_	21. Employee benefit programs	21.						
	22. Other deductions	22.	<del>-</del> -					
	23. Total deductions. Add lines 12 through 22	23.						
	24. Taxable income before NOL. Subtract line 23 from 11	24.	<u> </u>					
	25. Net operating loss deduction	25.						
	26. Specific deduction	26.	1,000	1,000				
	27. Unrelated business taxable Income.	27.	-1,000	-1,000				
	28. Income tax (corporate or trust)	28.						
Ξ	29. Proxy tax	29.						
e d	30. Alternative mınımum tax	30.		· · · · · · · · · · · · · · · · · · ·				
_	31. Total taxes	31.						
න න	32. Other credits	32.						
_	33. General business credit	33.						
~	34. Credit for prior year minimum tax	34.						
-	35. Total credits	35.						
	36. Net tax after credits	36.						
	37. Recapture taxes	37.						
	38. Total Taxes	38.						
	39. Prior year overpayment and estimated tax payments	39.						
	40. Payment made with extension	40.						
_	41. Backup withholding and foreign withholding	41.			·			
_	42. Other payments	42.						
	43. Total payments	43.	<u> </u>		<del></del>			
<b>6</b>	44. Balance due/(Overpayment)	44.						
	45. Overpayment applied to next year	45.			<u> </u>			
	46. Penalties	46.						
	47. Total due/(Refund)	47.						
			·					

### Form 990-PF Return Summary

For calendar year 2013, or tax year beginning

, and ending

20-3780507

#### THE TAHIR FAMILY FOUNDATION INC

Interest Dividends Gross rents Capital gain not income Total Investment Income Expenses Officer compensation Salares / employee benefits Other expenses Total expenses Net investment Income Taxes / Credits Regular tax Section 511 tax Subtitle A tax Total tax Payments / Penalties / Application Estimated tax payments Tax withheld Other payments Estimated tax penalty Overpayment applied to next year's tax Payments / Penalties / Application Estimated tax penalty Overpayment applied to next year's tax Payments / Penalty / application Net tax due Interest to lide penalty Failure to	Investment	Income				
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Payments / penalty / application Net tax due Interest on late payments Failure to file penalty Failure to pay penalty Additions to tax  Balance due Refund  Revenue / Expenses per Books Adjusted Net Income  Total contributions 22,750 Interest		-	tay —			
Net tax due Interest on late payments Failure to file penalty Failure to pay penalty Additions to tax  Balance due Refund  Revenue / Expenses per Books Adjusted Net Income  Total contributions    1st quarter     22,750     Next Year's Estimates   1st quarter     Capital gains / losses   2nd quarter     Income modifications   3rd quarter     Income modifications   3rd quarter     Income modifications   4th quarter     Total revenue   22,750     Total revenue   22,750     Total revenue   22,101     Excess / ANI   649   Miscellaneous Information     Amended return     Return / extended due date   05/15/14     Assets   886   1,535     Liabilities   Differences     Differences   1,535     Differences   21,014     Return / extended due date   05/15/14     Differences   1,535     Differences						
Interest on late payments Failure to file penalty Failure to pay penalty Additions to tax   Balance due Refund  Revenue / Expenses per Books Adjusted Net Income  Total contributions 22, 750 Interest Dividends 1st quarter Capital gains / losses 2nd quarter Income modifications Sale of inventory 4th quarter Other income Total revenue 22, 750 Total expenses 22, 101 Excess / ANI 649  Balance Sheet Ending Differences  Assets 886 1, 535  Differences  Differences  Differences  Differences	-			_	<del></del>	
Failure to file penalty Failure to pay penalty Additions to tax  Balance due Refund  Revenue / Expenses per Books Adjusted Net Income  Total contributions 22,750 Interest Next Year's Estimates  Dividends 1st quarter Capital gains / losses 2nd quarter Income modifications Sate of inventory 4th quarter  Other income 7 Total revenue 22,750  Total expenses 22,101  Excess / ANI 649 Miscellaneous Information Amended return Return / extended due date 05/15/14  Assets 886 1,535  Liabilities						<del></del>
Failure to pay penalty Additions to tax  Balance due Refund  Revenue / Expenses per Books Adjusted Net Income  Total contributions 22,750 Interest Next Year's Estimates  Dividends 1st quarter Capital gains / losses 2nd quarter Income modifications 3rd quarter Sale of inventory 4th quarter Other income 7total revenue 22,750  Total expenses 22,101 Excess / ANI 649 Miscellaneous information Amended return Return / extended due date 05/15/14  Assets 886 1,535  Liabilities Differences				<del>_</del>		
Balance due Refund  Revenue / Expenses per Books Adjusted Net Income  Total contributions 22,750 Interest		-				
Balance due Refund  Revenue / Expenses per Books Adjusted Net Income  Total contributions 22,750 Interest Next Year's Estimates Dividends 1st quarter Capital gains / losses 2nd quarter Income modifications 3rd quarter Sale of inventory 4th quarter Other income Total revenue 22,750 Total expenses 22,101 Excess / ANI 649 Miscellaneous Information Amended return Return / extended due date 05/15/14  Balance Sheet Ending Differences  Assets 886 1,535						
Revenue / Expenses per Books Adjusted Net Income  Total contributions 22,750 Interest Next Year's Estimates  Dividends 1st quarter Capital gains / losses 2nd quarter Income modifications 3rd quarter Sale of inventory 4th quarter Other income Total revenue 22,750  Total expenses 22,101  Excess / ANI 649 Miscellaneous Information Amended return Return / extended due date 05/15/14  Beginning Ending Differences  Assets 886 1,535  Liabilities	Addition	iis to tax				
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Income modifications  Sale of inventory Other income  Total revenue  Total expenses  Excess / ANI  Beginning  Balance Sheet  Beginning  Balance Sheet  Beginning  Balance Sheet  Beginning  Balance Sheet   -						
Sale of inventory  Other income  Total revenue  Total expenses  Excess / ANI  Beginning  Balance Sheet  Balance		<del></del>			· · · · · · · · · · · · · · · · · · ·	
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Liabilities	_			Dilletelice2		
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### Form 8868

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

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

► File a separate application for each return.

► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No. 1545-1709

WITCHING L				<del></del>	. <del> </del>			
-		filing for an Automatic 3-Month Extension, of filing for an Additional (Not Automatic) 3-Mo	•	•				. ▶ ⊔
-		plete Part II unless you have already been g					•	3868.
a corp 8868 to Return	oration or required for the second se	filing (e-file). You can electronically file Form n required to file Form 990-T), or an addition uest an extension of time to file any of the foundaries associated With Certain Personal For more details on the electronic filing of the	al (not auto orms listed Benefit C	omatic) 3-month extend in Part II or Part II Contracts, which mu	ension of time. You c with the exception o ust be sent to the il	an ele f For RS ir	ectronically m 8870, In n paper fo	file Form formation rmat (see
Part		Automatic 3-Month Extension of Time	Only sul	omit original (no co	pies needed).			·
	oratio	on required to file Form 990-T and reques	sting an a	utomatic 6-month				nplete . ▶ □
		porations (including 1120-C filers), partnershi	ips, REMIC	S, and trusts must u	ise Form 7004 to req	uest	an extensio	on of time
to file i	ncom	e tax returns.						
		No.	-4		Enter filer's identifyin			structions
Type o	r	Name of exempt organization or other filer, see in	4		Employer identification			
print		Number, street, and room or suite no. If a P.O. bo	n consta	non Soyta-Lusta	Social security number			
File by th		13880 Al Noghsight Blyd.		2010/13.	Goolal Society Harrison	,001	,	
filing you	ır	City, town or post office, state, and ZIP code. For	a foreign a	ddress, see instructions				
retum. Se instruction		Scottsdale, Az. 85260	_					
Enter t	he Re	turn code for the return that this application is	s for (file a	separate application	for each return) .			
Applic	cation	1	Return	Application				Return
Is For	•		Code	is For				Code
Form	990 o	r Form 990-EZ	01	Form 990-T (corporation)				07
Form	990-E	BL	02	Form 1041-A				08
Form	4720	(individual)	03	Form 4720 (other the	nan individual)			09
Form			(04)	Form 5227	<del></del>			10
		(sec. 401(a) or 408(a) trust)	05	Form 6069				11
Form	990-1	(trust other than above)	06	Form 8870	<del></del>			12
Telep • If the • If this for the a list w	ohone organ is for whole ith the ith requ until	are in the care of ►  No. ►	Finess in the raingle of the raingle	ax No. > 480 - 9. the United States, chup Exemption Number of the group, check	HB-6767  neck this box er (GEN)  this box	 ▶ [	. If this and atta	ch
2	If the ☐ Ch	tax year beginning	onths, che	eck reason: LI Initial	return [] Final retur	n	, 20 _	············
		application is for Forms 990-BL, 990-PF, 990	D-T, 4720,	or 6069, enter the te	ntative tax, less any			
		fundable credits. See instructions.  application is for Forms 990-PF, 990-T, 4	1720 07 6	060 enter any refu	ndable credits and	3a	<b>3</b>	
	estim	ated tax payments made. Include any prior ye	ear overpa	yment allowed as a c	credit.	3ь	\$	
		nce due. Subtract line 3b from line 3a. Include S (Electronic Federal Tax Payment System). S			if required, by using	3с	\$	
	. If yo	u are going to make an electronic funds withdrawal			see Form 8453-EO and		<del></del>	or payment

Form-88	368 (Rev. 1-2014)						Page 2
Note.	u are filing for an Additional (Not Automatic): Only complete Part II if you have already been	granted an aut	omatic 3-month ex	tension on a previousl			
Part	u are filing for an Automatic 3-Month Extensi  Additional (Not Automatic) 3-Month			<del></del>	ioo =	oodod)	
Fall	Additional (Not Automatic) 3-Mon	III EXTENSION	or rime. Only life				
	Name of exempt organization or other filer,	ee instructions		Enter filer's identifyir Employer identification			
Type print	or					er (CIIV) O	
	Number, street, and room or suite no. If a P.O. le date for		uctions.	Social security number (SSN)			
filing you return. S instructi	See Only, town or post office, state, and all code. For a foreign address, see mistrations.						
Enter	the Return code for the return that this applicat	ion is for (file a	separate applicatio	n for each return) .			
Appli	cation	Return	Application				Return
Is Fo		Code	Is For			ļ	Code
Form	990 or Form 990-EZ	01					
	990-BL	02	Form 1041-A	m 1041-A			08
	4720 (individual)	03		m 4720 (other than individual)			09
	990-PF	04	Form 5227				10
	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069				11
	990-T (trust other than above)	06	Form 8870	<del></del>			12
STOP!	Do not complete Part II if you were not alread	y granted an au	Itomatic 3-month e	xtension on a previou	sly file	d Form 8	368.
• The	oooks are in the care of ▶						
Tele	phone No. ►	Fav I	Vo. ▶				
<ul><li>If the</li></ul>	organization does not have an office or place	of business in	the United States, o	heck this box			. ▶□
• If this	s is for a Group Return, enter the organization's	s four digit Gro	up Exemption Numi	ber (GEN)		If this	is
	whole group, check this box ▶ □						ich a
list wit	h the names and EINs of all members the exte	nsion is for.					
4	I request an additional 3-month extension of time until						
5	For calendar year , or other tax year beginning , 20 , and ending , 20 , 20						
6	If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return Change in accounting period						
7	State in detail why you need the extension						
					·		
8a	If this application is for Forms 990-BL, 990-Pf	990-T 4720	or 6069, enter the t	entative tax, less any	7		
- Ca	nonrefundable credits. See instructions.	, 500 1, 4120,	20, 0, 0000, 00. 1 10			\$	
b	f this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and						
	estimated tax payments made. Include any prior year overpayment allowed as a credit and any						
	amount paid previously with Form 8868.				8b	\$	
С	c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See Instructions.					\$	
	Signature and Veri	fication mus	t be completed f	or Part II only.	a		<del></del>
	penalties of perjury, I declare that I have examine dge and belief, it is true, correct, and complete, and				ints, ar	nd to the 1	best of my
Signatun	* HOU	Trtle ▶		D	ate ►	5/30/1	Pev. 1-2014)
		·	<del></del>	···	Fc	m 886B (	Rev. 1-2014)