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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

Department of the Treasury Internal Revenue Service

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 calendar year 2014 or tax year beginning 9/3/2014 and ending 12/31/2014 Name of foundatio A Employer identification number Zafar and Mir Foundation, Inc Number and street (or P O box number if mail is not delivered to street address) Room/suite 47-1648092 B Telephone number (see instructions) 3762 Turnberry Drive State ZIP code City or town West Des Moines 50265 IΑ (515) 689-3690 Foreign country name Foreign province/state/county Foreign postal code C If exemption application is pending, check here G Check all that apply X Initial return Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, Address change □ Name change check here and attach computation E If private foundation status was terminated under H Check type of organization X Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here Accounting method X Cash Accrual Fair market value of all assets at If the foundation is in a 60-month termination end of year (from Part II, col (c), Other (specify) under section 507(b)(1)(B), check here ▶ 🔲 line 16) ► \$ 95,158 (Part I, column (d) must be on cash basis ) (d) Disbursements Part | Analysis of Revenue and Expenses (The total of (a) Revenue and (c) Adjusted net (b) Net investment for charitable amounts in columns (b), (c), and (d) may not necessarily expenses per income income purposes books equal the amounts in column (a) (see instructions) ) (cash basis only) 1 Contributions, gifts, grants, etc., received (attach schedule) 101,400 2 Check ► I if the foundation is **not** required to attach Sch. B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents h Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances Less Cost of goods sold h Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) Total. Add lines 1 through 11 12 101,400 13 Compensation of officers, directors, trustees, etc. 0000000000 Other employee salaries and wages 14 15 Pension plans, employee benefits 16a Legal fees (attach schedule) 1,200 b Accounting fees (attach schedule) S. Transming. Other professional fees (attach schedule) С 17 Interest 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 42 24 Total operating and administrative expenses. Add lines 13 through 23 1,242 25 Contributions, gifts, grants paid 5,000 5,000 26 Total expenses and disbursements. Add lines 24 and 25 6,242 0 0 5,000 27 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements 95,158 Net investment income (if negative, enter -0-) 0 Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2014)

Pα	rt.II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	i year	
		should be for end-or-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value	
1	1	Cash—non-interest-bearing		95,158	95,158	
}	2	Savings and temporary cash investments				
1	3	Accounts receivable				
1		Less allowance for doubtful accounts				
- {	4	Pledges receivable				
l		Less allowance for doubtful accounts				
	5	Grants receivable				
-	6	Receivables due from officers, directors, trustees, and other				
İ		disqualified persons (attach schedule) (see instructions)				
- }	7	Other notes and loans receivable (attach schedule)				
- 1		Less allowance for doubtful accounts	l		' !	
13	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
A	10a	Investments—U.S. and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)				
]	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 )			<del></del>	
1	16	Total assets (to be completed by all filers—see the				
		instructions Also, see page 1, item I)	o	95,158	95,158	
	17	Accounts payable and accrued expenses				
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe				
	23	Total liabilities (add lines 17 through 22)	0	0		
		Foundations that follow SFAS 117, check here				
		and complete lines 24 through 26 and lines 30 and 31.	1			
	24	Unrestricted	}	95,158		
	25	Temporarily restricted				
	26	Permanently restricted				
ĺ		Foundations that do not follow SFAS 117, check here			•	
ľ		and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds	}			
	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds				
	30	Total net assets or fund balances (see instructions)	0	95,158		
	31	Total liabilities and net assets/fund balances (see				
		instructions)	0	95,158		
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 agree	with		
		of-year figure reported on prior year's return)	-	1	0	
2	Enter	amount from Part I, line 27a		2	95,158	
3	Other	r increases not included in line 2 (itemize)		3		
		ines 1, 2, and 3		4	95,158	
5	Decre	eases not included in line 2 (itemize)		5		
6	Total	net assets or fund balances at end of year (line 4 minus line 5)-Par	t II, column (b), line 3	0 6	95,158	

Part	V Capital Gains and	Losses for Tax on Investr	nent Income	· · · · · · · · · · · ·		
	(a) List and describe th	e kind(s) of property sold (e.g., real estate use, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a						
<u>b</u>		. <del> </del>				<u> </u>
c	<del></del>			<b> </b>	<b></b>	<del>- </del>
<u>d</u> _	<del></del>			ļ	<b> </b>	<del></del>
<u>е</u>	<del></del>		<del></del>	L	<del> </del>	-L
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		ain or (loss) (f) minus (g)
a			<u> </u>		<b> </b>	
<u> </u>					<del> </del>	
<u>c</u>			<del> </del>		<del> </del>	
<del>0</del>			<del> </del>	<del></del>		· · · · · · · · · · · · · · · · · · ·
e	Complete only for assets sh	owing gain in column (h) and owned	hy the foundation	12/31/60		
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	ss of col (i) (j), if any	col (k), but n	of (h) gain minus ot less than -0-) <b>or</b> (from cof (h))
a			<del> </del>			<del></del>
b	<del></del>		<del> </del>		<del> </del>	
C						
d						
е						
2	Capital gain net income or	Inat canital lose) 1 -	also enter in Pai ), enter -0- in Pai	<b>&gt;</b>	2	0
3	Net short-term capital gain	or (loss) as defined in sections 1	1222(5) and (6)			
		line 8, column (c) (see instructio	ns) If (loss), ente	er -0- in }	1 1	
	Part I, line 8			<u>}</u>	3	0
Part	V Qualification Und	ler Section 4940(e) for Red	uced Tax on N	let Investment	Income	
Was		e this part blank section 4942 tax on the distributa qualify under section 4940(e) Do			e period?	Yes No
1	Enter the appropriate amo	unt in each column for each year	, see the instruct	ions before makii	ng any entries	
Cal	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distribution	s Net value	(c) of noncharitable-use a		(d) stribution ratio divided by col (c))
	2013	<del></del>			1001 (2	0 000000
	2012					0 000000
	2011					0 000000
	2010					0 000000
	2009					0 000000
2	Total of line 1, column (d)				2	0 000000
3	_	or the 5-year base period—divide ation has been in existence if les		2 by 5, or by the	3	0 000000
4	Enter the net value of none	charitable-use assets for 2014 fro	om Part X, line 5		4	
5	Multiply line 4 by line 3				5	
6	Enter 1% of net investmen	it income (1% of Part I, line 27b)			6	0
7	Add lines 5 and 6				7	0
8	Enter qualifying distribution				8	0
	If line 8 is equal to or great  Part VI instructions	ter than line 7, check the box in F	rart VI, line 1b, a	nd complete that	paπ using a 1% ta	ax rate See the

Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)			
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1  Date of ruling or determination letter (attach copy of letter if necessary—see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		- 1	
	here ▶ ☐ 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)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0	
3	Add lines 1 and 2		0	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		0	
6	Credits/Payments		ł	
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 6a		}	
b	Exempt foreign organizations—tax withheld at source 6b		1	
C	Tax paid with application for extension of time to file (Form 8868)  6c  6c		- 1	
_d	Backup withholding erroneously withheld 6d 6d			
7	Total credits and payments Add lines 6a through 6d		의	
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		_ 0	
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  Enter the amount of line 10 to be Credited to 2015 estimated tax  Refunded  10		- 0	
	/II-A Statements Regarding Activities		- 01	
1a	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?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			
	Instructions for the definition)?	1b	}	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	( [	Ì	
С	Did the foundation file Form 1120-POL for this year?	1c	[	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ▶\$ (2) On foundation managers ▶\$		ł	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	i l	i	
	on foundation managers   \$	, ,	1	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?  If "Yes," attach a detailed description of the activities	2		<u>X</u>
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	1	į	
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		<u> </u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<u> </u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?	<del></del>	N/A	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?  If "Yes," attach the statement required by General Instruction T	5		<u> </u>
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		Į	
	By language in the governing instrument, or	1 1	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	X	
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	×	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	1 1	- 1	
	IA		}	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		1	V
0	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b		_X
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 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If		ł	
	"Yes," complete Part XIV	9	1	Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			_^_
	names and addresses	10	x	

Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C. Form 4720, to determine if the

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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 2014?

foundation had excess business holdings in 2014)

N/A

Х

3b

4a

orm 99	20-PF (2014) Zafar and Mir Foundation, Inc							47-16	48092	Р	age 6
Part	VII-B Statements Regarding Activities	for W	hich Form	1720 N	lay Be Re	quire	(contin	ued)			
5a	During the year did the foundation pay or incur an (1) Carry on propaganda, or otherwise attempt to	y amoun	nt to				Yes				!
	<ul><li>(2) Influence the outcome of any specific public el directly or indirectly, any voter registration driv</li><li>(3) Provide a grant to an individual for travel, stud</li></ul>	e?		,.	to carry on		☐ Yes ☐ Yes	⊠ No ⊠ No			
	(4) Provide a grant to an organization other than a section 4945(d)(4)(A)? (see instructions)	a charitai	ble, etc , orga	nızatıor	n described	ın	Yes	X No			
	(5) Provide for any purpose other than religious, or purposes, or for the prevention of cruelty to ch			erary, c	or education	al	☐ Yes	X No			
b	If any answer is "Yes" to 5a(1)–(5), did any of the Regulations section 53 4945 or in a current notice		•	-		•		nı b	5b	N/A	
С	Organizations relying on a current notice regarding if the answer is "Yes" to question 5a(4), does the because it maintained expenditure responsibility for the second sec	foundation	on claim exer				☐ Yes	► □  No			
6a	If "Yes," attach the statement required by Regulat Did the foundation, during the year, receive any fund a personal benefit contract?				pay premiui	ns	☐ Yes	⊠ No			
b	Did the foundation, during the year, pay premiums If "Yes" to 6b, file Form 8870	s, directly	y or indirectly	on a p	ersonal ber	efit cor	itract?		6b		×
7a b	At any time during the tax year, was the foundation a p					e trans:	☐ Yes action?	⊠ No	7b	N/A	
Part	VIII Information About Officers, Direct	tors, Tr	rustees, Fo	undati	ion Manag	gers, F	lighly P	aid Em	ploye	es,	
	and Contractors				<del></del>	<del></del>	<del></del>				
_1	List all officers, directors, trustees, foundation		ers and their e, and average		mpensation (se		Contribution				
	(a) Name and address	hou devot	irs per week ted to position	(If r	not paid, iter -0-)	emplo	oyee benefit erred compe	plans	(e) Expe	ense ac allowar	
8811	F Zafar Waterside Drive Indianapolis, IN 46278	Presid	ent 3 00	 	0				<u> </u>		
	d Sabooh Zafar 2 Lakeshore Drive Clive, IA 50325	Secret	tary 1 00		0						
	a Zafar Turnberry Drive West Des Moines, IA 50265	Treasu	urer 1 00		0						
		<u> </u>	·								
2	Compensation of five highest-paid employees "NONE."	(other t	han those in	cluded	on line 1—	see ins	tructions	s). If no	ne, ent	er 	
	(a) Name and address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to pe	/eek	(c) Comper	sation	(d) Contrib employee plans and compen	benefit deferred	(e) Expe	ense ac allowar	
NONE											

Total number of other employees paid over \$50,000

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors (continued)	Paid Em	ployees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, en	ter "NON!	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	lei NON	(c) Compensation
NONE		
		<del></del>
	ł	
Total number of others receiving over \$50,000 for professional services	<b>&gt;</b>	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
Charitable donation to King Edward Medical College Alumni Association of North America		
		5,000
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instructions)	l	
Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	<del></del>	Amount
1		, and an
2		
	}	
All other program-related investments. See instructions		
2		
·		
Total. Add lines 1 through 3	<b>&gt;</b>	0
	F	orm <b>990-PF</b> (2014)

Part 2	Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	ign foundatio	ns,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.		
-	purposes	1 1	
а	Average monthly fair market value of securities	1a	0
	Average of monthly cash balances	1b	11,992
	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	11,992
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) le	} }	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	11,992
4	Cash deemed held for charitable activities Enter 1 ½ % of line 3 (for greater amount, see		
	instructions)	4	180
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	11,812
6	Minimum investment return. Enter 5% of line 5 MIR Prorated - Short Year	6	194
Part 2	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here   □ and do not complete this part )	)	
1	Minimum investment return from Part X, line 6	1	194
<b>2</b> a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014 (This does not include the tax from Part VI)  2b		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	194
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	194
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	194
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	}	
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	5,000
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		
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	5,000
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	5,000
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wh	hether the four	
	qualifies for the section 4940(e) reduction of tax in those years		

Part	XIII Undistributed Income	(see instructions	)			
1	Distributable amount for 2014 from line 7	Part XI,	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014 194
2	Undistributed income, if any, as of the	and of 2014				194
a	Enter amount for 2013 only	end 0/ 20 14			o	
b	•	20, 20 [				
3	Excess distributions carryover, if ai					
a	From 2009	,, 20		:		
b	From 2010					
C	From 2011					
ď	From 2012					
e	From 2013					
f	Total of lines 3a through e		o			
4	Qualifying distributions for 2014 fro	om Part XII.			·····	
	line 4 ▶ \$ 5,000	,				
а	Applied to 2013, but not more than	ı lıne 2a			l	
	Applied to undistributed income of					
	(Election required—see instruction					
С	Treated as distributions out of corp	ous (Election				
	required—see instructions)	,				
d	Applied to 2014 distributable amou	ınt				194
	Remaining amount distributed out		4,806			
5	Excess distributions carryover app	lied to 2014				
	(If an amount appears in column (c	d), the same				
	amount must be shown in column	(a) )				
6	Enter the net total of each colum	n as				
	indicated below:				ľ	
а	Corpus Add lines 3f, 4c, and 4e S	Subtract line 5	4,806			
b	Prior years' undistributed income	Subtract				
	line 4b from line 2b			0		
C	Enter the amount of prior years' un	ndistributed				
	income for which a notice of deficie	•	I			
	been issued, or on which the section	on 4942(a)				
	tax has been previously assessed		· · · · · · · · · · · · · · · · · · ·			
d	Subtract line 6c from line 6b Taxa	ble	1		į	
	amount—see instructions					
е	Undistributed income for 2013 Su					
	4a from line 2a Taxable amount—	-see	 			
	instructions				0	<del> </del>
f	Undistributed income for 2014 Su					
	4d and 5 from line 1 This amount	must be			-	•
-	distributed in 2015		<del></del>			0
7	Amounts treated as distributions o	-				
	to satisfy requirements imposed by					
	170(b)(1)(F) or 4942(g)(3) (Electio required—see instructions)	n may be				
8	Excess distributions carryover from	n 2000 not		ļ	<del></del>	<del> </del>
0	applied on line 5 or line 7 (see inst					
9	Excess distributions carryover t	•	<del></del>	<del></del>		
3	Subtract lines 7 and 8 from line 6a		4,806			
10	Analysis of line 9	'	7,000		<b> </b>	
a				}		
h	Excess from 2011			}		
C	Excess from 2012					
d	Excess from 2013	<u> </u>				
_	Excess from 2014	4,806		]		

factors

Form **990-PF** (2014)

Part XV Supplementary Information (conti 3 Grants and Contributions Paid During	nued)	ed for Eur	turo Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation		7
	☐ any foundation manager	status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)  a Paid during the year	or substantial contributor			-
KEMCAANA Scholarship Fund	None	PC	Scholarship Fund	5,000
210 W 22nd St Ste 115		l		
Oak Brook, IL 60523		}		
		1		Ì
				}
		}		}
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				1
				1
				}
				}
				1
				1
		}		1
	<u> </u>	<u> </u>		5.000
Total b Approved for future payment	Т	Τ	<u> </u>	<b>3a</b> 5,000
, , , , , , , , , , , , , , , , , , ,				
	1			
		1		
		}		1
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		1		
		1		1
		1		
			}	
		}		
Total	1	<del></del>	<u> </u>	3h (

	rt XVI-A Analysis of Income-Producing Ac	MAINES				
⊨nte	er gross amounts unless otherwise indicated		siness income	Excluded by secti	on 512, 513, or 514	(e)
1	Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
	a	<b> </b>				
	b	<del></del>		<del> </del>		
	d	<del>-</del>				<del></del>
	e					
	f					
	g Fees and contracts from government agencies					
2	Membership dues and assessments	ļ		ļ		
3	Interest on savings and temporary cash investments			<del> </del>		
4	Dividends and interest from securities  Net rental income or (loss) from real estate		<del></del>	<del> </del>		<del></del>
5	a Debt-financed property	<del></del>	<del> </del>	<del> </del>		
	b Not debt-financed property	<u> </u>				<del></del>
6	Net rental income or (loss) from personal property		<del></del>			
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events			l		
10	Gross profit or (loss) from sales of inventory					<del></del>
11	Other revenue a	<b> </b>	<del> </del>	<b></b>		
	b			<del> </del>		
	d		<del></del>			<del></del>
	e			<del></del>	<del></del>	
12	Subtotal Add columns (b), (d), and (e)		0		0	0
	Total. Add line 12, columns (b), (d), and (e)				13	0
	e worksheet in line 13 instructions to verify calculations				<del> </del>	
_	rt XVI-B Relationship of Activities to the A				<del></del>	
	<ul> <li>e No. Explain below how each activity for which incon accomplishment of the foundation's exempt pur</li> </ul>	ne is reported in co poses (other than	olumn (e) of Part 2 by providing fund:	KVI-A contributed s for such purpos	importantly to the es) (See instruction	ons )
					<del></del>	
	- <del></del>					

Form 99	)-PF (2	014) Zafar and	Mir Fo	undation, Inc.						47-164	48092	Pag	ge <b>13</b>
Part :	XVII	Information Exempt Org			fers To and	Transactio	ns and R	elationship	os With	Nonchar	itable	-	
	Date					15 . 6 11		<del></del>	<del></del>	<del></del>	<del>,                                    </del>		<del></del>
		ne organization di otion 501(c) of the	-	-		_	•	-				Yes	No_
	orgar	nizations?				_					1 1	1	
	_	sfers from the rep	orting f	oundation to a	a noncharitable	exempt orga	nization of				1 1		İ
	(1) C		ŭ			, 3					1a(1)		Х
		ther assets									1a(2)		X
		r transactions											
-	(1) S	ales of assets to	a nonch	naritable exen	opt organization	1					1b(1)		Х
		urchases of asse									1b(2)		X
		ental of facilities,									1b(3)		X
		eimbursement ar			455515						1b(4)		X
		oans or loan guar	_								1b(5)		X
		erformance of se			n or fundraising	solicitations					1b(6)		X
C		ing of facilities, ed					ovees				1c		X
		answer to any of the						evewle blunds	show th	a fair market			
	value	of the goods, other	er assets	s, or services a	iven by the repor	ting foundation	n If the fou	ndation receiv	ed less t	han fair marl	ket		
(a) Line		(b) Amount involved			haritable exempt org			scription of trans				gemer	its
<del></del>	$\neg \uparrow$	<del>```</del>		·			<del> </del>	<del></del>					
	_	<del></del>	<del>                                     </del>				+						
			<del>                                     </del>			<del></del>	<del>                                     </del>						
					<del></del>	<del></del>							
	1		<del>                                     </del>				<del> </del>						
	-+		<del> </del>				+						
	-+		<del> </del>										
	$\neg \uparrow$		<del> </del>				<del></del>						
			<del> </del>				+						
	$\neg +$			•			<del></del>						
	+				<del> </del>		+						
	-+	<del></del>	<del> </del>				+						
	$\dashv$	<del></del>	<del> </del> -				<del></del>						
	<del></del>		<del> </del>				+						
	-+		<del> </del>				+						
	-+		<del> </del>				<del></del>						
2a		e foundation direc							nızatıon				
		ribed in section 5		•	ner than section	1 501(c)(3)) c	r in section	1 5277		L	] Yes	XI N	10
b	If "Y∈	es," complete the	followir	ng schedule									
		(a) Name of organ	ization		(b) Typ	e of organizatio	<u>n</u>	<b></b>	(c) Desc	ription of relation	onship		
								<b></b>					
		<del></del>			<del> </del>								
								ļ					
	<del></del>		Jan 18 17 1		<u> </u>			l .		41.1.1			
٥.		r penalties of perjury, I dec ct, and complete Declarati							knowledge a				
Sign				arer tomer than taxpo	1 21.	indian of which pre	parer rids arry kin	1	· . ^		RS discuss		
Here			<u> </u>	8	<u></u>	4117	1-100	viger 1	$\frac{1}{1}$		reparer shouctions)?		
	Sig	nature of officer or trus		<del></del>	Date	Title		I Date	1		I DTILL	==	==
Paid		Print/Type preparer	s name		Preparer's signa			Date		Check 🔲 ıf	PTIN		
Prep	arer	Greg McRay			Greg McF	ray		8/14/20		self-employed	P0028	1093	
Use		Firm's name		ation Group, i					Firm's E		313735		
	y	Firm's address	1321 N	Murfreesboro	Pike, Ste 610, N	<u>lashville, TN</u>	37217		Phone n	<u>o (61</u> 5)	361-94	45	

Phone no

#### 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, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Employer identification number

Zafar and Mir Foundation,	nc		47-1648092
Organization type (check			
Filers of:	Section:		
Form 990 or 990-EZ	501(c)( ) (enter num	nber) organization	
	4947(a)(1) nonexempt cha	ritable trust not treated as a private f	oundation
	527 political organization		
Form 990-PF	X 501(c)(3) exempt private for	oundation	
	4947(a)(1) nonexempt cha	ritable trust treated as a private found	dation
	501(c)(3) taxable private fo	oundation	
• •	is covered by the <b>General Rule</b> or a <b>S</b> )(7), (8), or (10) organization can chec	•	nd a Special Rule See
General Rule			
	n filing Form 990, 990-EZ, or 990-PF to or property) from any one contributor contributions		
Special Rules			
regulations under 13, 16a, or 16b, a	n described in section 501(c)(3) filing F sections 509(a)(1) and 170(b)(1)(A)(vi) nd that received from any one contribu if the amount on (i) Form 990, Part VIII	), that checked Schedule A (Form 99 itor, during the year, total contribution	0 or 990-EZ), Part II, line is of the greater of <b>(1)</b>
contributor, during	n described in section 501(c)(7), (8), o the year, total contributions of more th onal purposes, or for the prevention of	nan \$1,000 exclusively for religious, c	haritable, scientific,
contributor, during contributions total during the year for General Rule app	n described in section 501(c)(7), (8), of the year, contributions exclusively for ed more than \$1,000. If this box is chest an exclusively religious, charitable, et lies to this organization because it recommore during the year.	religious, charitable, etc., purposes, locked, enter here the total contribution to, purpose Do not complete any of	but no such ns that were received the parts unless the
Caution. An organization	hat is not covered by the General Rule	e and/or the Special Rules does not f	ile Schedule B (Form 990,

990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization	Employer identification number
Zafar and Mir Foundation, Inc	47-1648092

Zafar and	Mir Foundation, Inc		47-1648092
Part I	Contributors (see instructions). Use duplicate copie	s of Part I if additional space is r	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Alsha F Zafar  8811 Waterside Drive Indianapolis IN 46278 Foreign State or Province Foreign Country	\$50,000	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Saima Zafar 3762 Turnberry Drive West Des Moines IA 50265 Foreign State or Province Foreign Country	\$ 51,200	Person X Payroll  Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Oncash (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization
Zafar and Mir Foundation, Inc

Employer identification number 47-1648092

Part II	Noncash Property (see instructions) Use duplicate of	opies of Part II if additional space	ce 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) 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 gíven	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

	Mir Foundation, Inc		47-1648092
Part III	Exclusively religious, charitable, etc., co (10) that total more than \$1,000 for the y the following line entry. For organizations of	ear from any one contributor. Completing Part III, enter the total	escribed in section 501(c)(7), (8), or Complete columns (a) through (e) and of exclusively religious, charitable, etc.
	contributions of \$1,000 or less for the year Use duplicate copies of Part III if additional	•	ee instructions ) > \$ 0
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, and	ZIP + 4 Rela	ationship of transferor to transferee
(a) No.	For Prov Country		
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, and	-	ationship of transferor to transferee
	For Prov Country		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, and	ZIP + 4 Rela	ationship of transferor to transferee
<del></del>	For Prov Country		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, and	ZIP + 4 Rela	ationship of transferor to transferee
	For Prov. Country		

Part I, Line 16a (990-PF) - Legal Fees

		1,200	0	0	0
•		Revenue and			Disbursements for Charitable
		Expenses per	Net Investment	Adjusted Net	Purposes
	Description	Books	Income	Income	(Cash Basis Only)
	Nonprofit start up fees	1,200			

Part I, Line 23 (990-PF) - Other Expenses

	42	0	0	0
	Revenue and			Disbursements
	Expenses	Net Investment	Adjusted Net	for Charitable
Description	per Books	Income	Income	Purposes
1 Bank Fees - Wire Transfers	42			

Part VII-A, Line 8b (990-PF) - Copy of Form 990-PF to Attorney General
This is the foundation's first 990 filing. Once the 990 is approved by the Board of Directors and sent to the IRS, the foundation
will send a copy to the state

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

								Avg Hrs			Expense	
Name	If Business	Street	City	State	Zip Code	Foreign Country	Title	Per Week	Compensation	Benefits	Account	
_ <del></del>		8811 Waterside Drive		<u>S</u>	IN 46278		President	3 00	6	0		
		13682 Lakeshore Dnve	Clive	4	50325		Secretary	8	0	0		16-
		3762 Turnberry Drive	West Des Moines	₹	50265		Treasurer	100	0	0	8	76
	_					-		_		_		_