

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490





### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



#### DLN: 93491133026616

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

For	caler	ndar year 2015, or tax year beginning 01-0	1-2015	, and ending 1	2-31-2015						
	e of four		A Employer ide	entification numbe	er						
		AND INDIA KEITH FOUNDATION AMENDED		20-2016795							
		EM KEITH JR street (or P O box number if mail is not delivered to street address)	Room/suite	<b>B</b> Telephone nun	BTelephone number (see instructions)						
		HAM DRIVE	,	(704) 364-6105							
		state or province, country, and ZIP or foreign postal code NC 28226	1	C If exemption	application is pendin	g, check here 🕨 🦵					
c Ck	ock all	I that apply   Tinitial return   Tinitial return of a fo	ermor public charity			_					
<b>G</b> CI	ieck all	Final return  Amended return  Address change  Name change	offiner public charity	ganizations, check he ganizations meeting chere and attach co	the 85%						
H Ch Se	eck typ	pe of organization Section 501(c)(3) exempt private 947(a)(1) nonexempt charitable trust Other taxable	private foundation	E If private fou under section	ndation status was to 507(b)(1)(A), chec	erminated					
		et value of all assets at end  JAccounting method  Tother (specify)	▼ Cash	F II tile louliua	tion is in a 60-montl						
line	16) 🏲	rom Part II, col. (c),   Other (specify)	be on cash basıs.)	under section	1 507(b)(1)(B), chec	k nere 🗜 I					
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	Revenue and expenses per (a) books	Net investment <b>(b)</b> income	Adjusted net (c) income	Disbursements for charitable purposes (d) (cash basis only)					
	1	Contributions, gifts, grants, etc , received (attach									
		schedule)	3,958,621								
	2	Check $ ightharpoonup$ if the foundation is <b>not</b> required to attach									
		Sch B									
	3	Interest on savings and temporary cash investments	582	582							
	4	Dividends and interest from securities	83,483	83,483							
Reveilue	5a	Gross rents									
	b	Net rental income or (loss)	101 077								
	6a	Net gain or (loss) from sale of assets not on line 10	101,377								
	b	Gross sales price for all assets on line 6a									
	7	Capital gain net income (from Part IV, line 2)		101,377							
	8	Net short-term capital gain									
	9	Income modifications									
	10a	Gross sales less returns and allowances									
	b	Less Cost of goods sold									
	С	Gross profit or (loss) (attach schedule)									
	11	Other income (attach schedule)	358,360	0	0						
	12	Total.Add lines 1 through 11	4,502,423	185,442	0						
	13	Compensation of officers, directors, trustees, etc									
	14	Other employee salaries and wages									
S.	15	Pension plans, employee benefits									
Š	16a	Legal fees (attach schedule)									
Expenses	b	Accounting fees (attach schedule)	2,900	0	0	0					
	c	Other professional fees (attach schedule)	57,052	47,482							
Administrative	17	Interest									
etra L	18	Taxes (attach schedule) (see instructions)	1,307	1,307							
₫	19	Depreciation (attach schedule) and depletion									
틀	20	Occupancy									
₹	21	Travel, conferences, and meetings									
and	22	Printing and publications									
	23	Other expenses (attach schedule)									
Operating	24	Total operating and administrative expenses.									
<u>g</u>		Add lines 13 through 23	61,259	48,789	0						
U	25	Contributions, gifts, grants paid	1,035,280			1,035,280					
	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	1,096,539	48,789	0	1,035,280					
	27	Subtract line 26 from line 12									
	a	Excess of revenue over expenses and disbursements	3,405,884								
	b	Net investment income (If negative, enter -0-)  Adjusted net income(If negative, enter -0-)		136,653							
	С	Aujusteu net moone(n negative, enter -U-)									

Part II		Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	End of year			
L G		should be for end-or-year amounts only (see instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value			
	1	Cash—non-interest-bearing						
	2	Savings and temporary cash investments	575,494	1,390,452	1,390,452			
	3	Accounts receivable						
		Less allowance for doubtful accounts 🕨						
	4	Pledges receivable 🟲						
		Less allowance for doubtful accounts 🟲						
	5	Grants receivable						
	6	Receivables due from officers, directors, trustees, and other						
		disqualified persons (attach schedule) (see instructions)						
	7	Other notes and loans receivable (attach schedule)						
		Less allowance for doubtful accounts 🟲						
o.	8	Inventories for sale or use						
Assets	9	Prepaid expenses and deferred charges						
AS	10a	Investments—U S and state government obligations (attach schedule)						
	b	Investments—corporate stock (attach schedule)	3,050,445	5,183,011	5,095,479			
	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	O ther assets (describe 🟲)	3,653,033	4,111,393	2,037,585			
	16	Total assets(to be completed by all filers—see the						
		ınstructions Also, see page 1, item I)	7,278,972	10,684,856	8,523,516			
	17	Accounts payable and accrued expenses						
	18	Grants payable						
ě	19	Deferred revenue						
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons						
lat	21	Mortgages and other notes payable (attach schedule)						
_	22	O ther liabilities (describe 🟲)						
	23	Total liabilities(add lines 17 through 22)		0				
_		Foundations that follow SFAS 117, check here 🕨 🦵						
Ses		and complete lines 24 through 26 and lines 30 and 31.						
ano	24	Unrestricted						
Bal	25	Temporarily restricted						
Net Assets or Fund Balance	26	Permanently restricted						
Fur		Foundations that do not follow SFAS 117, check here 🕨 🔽						
7		and complete lines 27 through 31.						
2	27	Capital stock, trust principal, or current funds						
Şe	28	Paid-in or capital surplus, or land, bldg , and equipment fund						
Ą	29	Retained earnings, accumulated income, endowment, or other funds	7,278,972	10,684,856				
det	30	Total net assets or fund balances(see instructions)	7,278,972	10,684,856				
_	31	<b>Total liabilities and net assets/fund balances</b> (see instructions)	7,278,972	10,684,856				
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 a	gree				
		with end-of-year figure reported on prior year's return)	, ,,	·	7,278,972			
2		Enter amount from Part I, line 27a			3,405,884			
3		Other increases not included in line 2 (itemize)						
4		Add lines 1, 2, and 3			10,684,856			
5		Decreases not included in line 2 (itemize) ►		5	· · · ·			
6		Total net assets or fund balances at end of year (line 4 minus line 5)—F			10,684,856			

	List and describe t  (a) 2-story brick warel		How acquire P—Purchas ( <b>b</b> ) D—Donatio	e (c)	Date acquired (mo , day, yr )	Date sold (d) (mo , day, yr )					
1 a	WELLS FARGO 3701										
	WELLS FARGO 3701										
	CAPITAL GAIN DIVI	DENDS				P	+				
d											
e							Ц_				
(6	e) Gross sales price		Deprectation allowe (f) (or allowable)	ed .	Cost or other basis (g) plus expense of sale			Gain or (loss) (h) (e) plus (f) minus (g)			
а	33	5,518				339,2	94		-3,739		
ь	59	9,417				590,8	52		8,555		
С С									96,561		
d									· · ·		
e											
						12/21/60					
	omplete only for assets sl	nowing gai	n in column (n) and owne Adjusted basis	ea by tr		on 12/31/69 ess of col (1)			(h) gain minus ot less than -0-) <b>or</b>		
(i)	FMV as of 12/31/69		(j) as of 12/31/69			essorcor(1) col(j), if any	(1)		(from col (h))		
a			()) 40 0. 12/02/05		(ii) or or	(3),,	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		-3,776		
b				-					8,555		
				-							
c											
d											
e											
2	Capital gain net incom		apıtal loss)	If (los	s), enter -0-	n Part I, line 7 in Part I, line 7	)	2	101,377		
3			oss) as defined in sectio				,				
	If gain, also enter in P in Part I, line 8 .	art I, line :	3 , column (c) (see ınstru 	ictions • •	) If(loss), en	ter -0 - • •	}   3	3			
Part	V Qualification U	nder Se	ction 4940(e) for R	Reduc	ed Tax on	Net Investm	ent ]	Income			
Ifsecti	tional use by domestic pr on 4940(d)(2) applies, le e foundation liable for the	eave this p	art blank					·	┌ Yes ✔ No		
<u>If"Yes</u>	<u>," the foundation does no</u>	t qualıfy uı	nder section 4940(e) Do	o not c	omplete this	part					
<b>1</b> En	ter the appropriate amou	nt ın each	column for each year, s	ee inst	ructions befo	re makıng any eı	itries				
	(a) e period years Calendar or tax year beginning in)	Adjusted	<b>(b)</b> qualifying distributions	Net v	(c) alue of nonchari	table-use assets		(d) Distributio (col (b) divided	n ratio		
-	2014		737,500			3,654,449			0 201809		
	2013		873,535			2,939,448			0 297177		
	2012		965,800			1,856,941			0 520103		
	2011		449,950			1,103,818			0 407631		
	2010		519,350			729,787			0 711646		
2	<b>Total</b> of line 1, column	(d)					2		2 138366		
3 A verage distribution ratio for the 5-year base period—divide the to the number of years the foundation has been in existence if less th							3		0 427673		
4			ble-use assets for 2015				4		5,389,685		
5							5		2,305,023		
6	• • •		me (1% of Part I, line 2				6		1,367		
-			•	•			-		-, ,		

the Part VI instructions

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

2,306,390

1,035,280

ĽŒΙ	Excise Tax based on Investment Income (Section 4940(a), 4940(b), 49		, UI 4340—SE	e page	= 10 OL	the ins	LIUCLIC	'IIS)				
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			ļ								
	(attach copy of letter if necessary-see instructions)											
b	Domestic foundations that meet the section 4940(e) requirements in Part V,			)	1				733,2			
_	here ► Tand enter 1% of Part I, line 27b	• • •		•								
С	All other domestic foundations enter $2\%$ of line $27b$ Exempt foreign organiza Part I, line $12$ , col (b)	tions e	enter 4% of									
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foun enter $-0-$ )	dation	s only Othe	rs	2							
3	Add lines 1 and 2				3		2,733					
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, en	nter - 0		•	5			;	2,733			
6	C redits/P ayments											
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a		1,105								
b	Exempt foreign organizations—tax withheld at source	6b										
С	Tax paid with application for extension of time to file (Form 8868)	6c										
d	Backup withholding erroneously withheld	6d										
7	Total credits and payments Add lines 6a through 6d				7			:	1,105			
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here [ if Form 2	220 is	attached		8							
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> .				9			:	1,628			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount	t overp	paid	•	10							
11	Enter the amount of line 10 to be Credited to 2015 estimated tax		Refunded	<u> </u>	11							
Par	t VII-A Statements Regarding Activities											
1a	During the tax year, did the foundation attempt to influence any national, state							Yes	No			
	it participate or intervene in any political campaign? 🕏						1a		No			
b	Did it spend more than \$100 during the year (either directly or indirectly) for p			see In	structi	ons						
	for definition)?					•	1b		No			
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities	and co	pies of any n	nateria	ıls							
_	published or distributed by the foundation in connection with the activities.						1.		N-			
	Did the foundation file <b>Form 1120-POL</b> for this year?					•	1c		No			
a	Enter the amount (if any) of tax on political expenditures (section 4955) impos											
_	(1) On the foundation  \$\bigs\\$ (2) On foundation managers  Enter the reimbursement (if any) paid by the foundation during the year for point				acod.							
е	on foundation managers <b>&gt;</b> \$	tical e.	xpenditure t	ax IIIIL	oseu							
2	Has the foundation engaged in any activities that have not previously been rep	orted i	to the IRS2				2		No			
_	If "Yes," attach a detailed description of the activities.	orceu .	to the 1ND.	• •								
3	Has the foundation made any changes, not previously reported to the IRS, in it	e aove	rnina inetrii	ment	article							
3	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a confe	_	_				3		No			
4a	Did the foundation have unrelated business gross income of \$1,000 or more di						4a	$\vdash$	No			
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?						4b					
5	Was there a liquidation, termination, dissolution, or substantial contraction dur						5		No			
	If "Yes," attach the statement required by General Instruction T.	9	.,	•								
6	Are the requirements of section 508(e) (relating to sections 4941 through 494	45) sa	tisfied eithe	r								
	By language in the governing instrument, or	, , ,										
	By state legislation that effectively amends the governing instrument so that	at no n	nandatory dı	rectio	ns							
	that conflict with the state law remain in the governing instrument?						6	Yes				
7	Did the foundation have at least \$5,000 in assets at any time during the year?	oIf "Yes	s," complete i	Part II	, col. (c	),						
	and Part XV.						7	Yes				
8a	Enter the states to which the foundation reports or with which it is registered (s	see ins	tructions)									
	<u>NC</u>											
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99	0-PF	to the Attorr	ney								
	General (or designate) of each state as required by General Instruction G? If $^{\prime\prime}$	"No," at	tach explana	tion .			8b	Yes				
9	Is the foundation claiming status as a private operating foundation within the n	neanın	g of section	4942	(3)(3)							
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see	ee inst	ructions for	Part X	(IV)?							
	If "Yes," complete Part XIV						9		No			
10	Did any persons become substantial contributors during the tax year? If "Yes,"	" attach	a schedule i	listing	their n	ames						
	and addresses.						10		No			

Par	Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►N/A			
14	The books are in care of ►GRAEME M KEITH JR Telephone no ►(704	1364	-6105	
	Located at ►5201 GORHAM DRIVE CHARLOTTE NC  ZIP+4 ►28226	<del>/ 0 0 .</del>	0100	
				<del></del>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here			
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over		Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial			
	Accounts (FBAR) If "Yes", enter the name of the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a dısqualıfıed person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	ıf 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 ) <b>Yes V No</b>			
b	If any answer is "Yes" to $1a(1)-(6)$ , did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2015?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	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?			
1.	If "Yes," list the years > 20, 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	2h		No
_	to <b>all</b> years listed, answer "No" and attach statement—see instructions)	2b		No
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
2-	▶ 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
h	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation			
U	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 determine			
	If the foundation had excess business holdings in 2015.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	1	No
ъ 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?	4b		No

Pai	t VII-B	Statements Rega	ırdir	ng Activities for	Wh	ich Form 4720	May	Be Required	(Co	ntir	iue	1)		
5a	During the	e year dıd the foundatıo	n pay	or incurany amoun	t to									
	(1) Carry	on propaganda, or othe	rwise	attempt to influence	e leg	ıslatıon (section 49	45(e	))? Г	Yes	~	No			
	(2) Influe	nce the outcome of any	spec	ıfıc publıc election (	see	section 4955), or to	carı	<b>-</b> y						
		rectly or indirectly, any							Yes	굣	No			
		de a grant to an individu							Yes					
		de a grant to an organiza					scrib			•				
		tion 4945(d)(4)(A)? (s							Voc	ᅜ	No			
		de for any purpose other					•	,	103	1.	110			
		tional purposes, or for t		= '				_	Yes	L.	No			
Ь				•				·		•	140			
U				, did <b>any</b> of the transactions fail to qualify under the exceptions described in a current notice regarding disaster assistance (see instructions)?										
											•	5b		
		ions relying on a currer							•	-1				
С		wer is "Yes" to question								_				
		ise it maintained expend					٠		Yes	I	No			
		ttach the statement requ												
6a		undation, during the yea							_	_				
		I benefit contract?						•	Yes					
b	Did the fo	undation, during the yea	ar, pa	y premiums, directly	orı	ndırectly, on a perso	nall	penefit contract?				6b		No
	If "Yes" to	6b, file Form 8870.												
7a	At any tin	ne during the tax year, w	vas tl	s the foundation a party to a prohibited tax shelter transaction? <b>Yes</b> F										
b	If yes, dic	l the foundation receive	any	proceeds or have an	y ne	t income attributable	e to t	he transaction?				7b		No
Da	t VIII	<b>Information Abou</b>	t Of	ficers, Directors	, Tı	ustees, Founda	tio	n Managers, I	ligh	y P	aid	Emp	loye	es,
		and Contractors												
_1_	List all off	icers, directors, trustee	s, foι ⊤	ındation managers a	nd t	heir compensation (	see i							
				Title, and average	(c)	Compensation( <b>If</b>		(d) Contributions t			_	xpens	0.300	ount
	<b>(a)</b> Nar	me and address	(1)	hours per week		not paid, enter	e	mployee benefit i		١,		othera		
			(B)	devoted to position		-0-)	and	deferred comper	satio	n				
GRAE	ME M KEITH :	JR	PRE	SIDENT		0								
	1 GORHAM		0											
		IC 28226	<u> </u>							$\perp$				
INDIA	Е КЕІТН		-1	RETARY		0								
	1 GORHAM		0											
	RLOTTE, N				<u> </u>			instructions) Tf			V B	IONE /	,	
	compensa	tion of five highest-paid	ı emp	loyees (other than )	nos	e incinaea ou liue 1-	see	Contributions	_		er r	IUNE.		
		(a)		Title, and aver				employee b			Е	xpens	e acc	ount,
Nar		ress of each employee   re than \$50,000	paid	hours per wee ( <b>b</b> ) devoted to posi		(c) Compensation	n	plans and d	eferre		(e) (	other a	llowa	nces
				(b) devoted to post				(d) compensa	ation					
										$\top$				
										+				
		fother employees hald								$\perp$				

Form 990-PF (2015)		Page <b>7</b>
Part VIII Information About Officers, Directors, Trusto and Contractors (continued)	ees, Foundation Managers, Highl	y Paid Employees,
3 Five highest-paid independent contractors for professional services (	(see instructions). If none, enter "NONE".	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
<b>Total</b> number of others receiving over \$50,000 for professional services.	<u> </u>	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include releorganizations and other beneficiaries served, conferences convened, research papers prod		Expenses
1N/A	decu, etc	+
2		
3		
4		
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	A mount
1		
		7
		7
2		
		7
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3	<del> </del>	►

Pa	(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	j.,	
	purposes		
а	Average monthly fair market value of securities	1a	2,575,867
b	A verage of monthly cash balances	1b	858,309
c	Fair market value of all other assets (see instructions)	1c	2,037,585
d	<b>Total</b> (add lines 1a, b, and c)	1d	5,471,761
е	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	0
3	Subtract line 2 from line 1d	3	5,471,761
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	82,076
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	5,389,685
6	Minimum investment return. Enter 5% of line 5	6	269,484
Pai	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cer check here ► ☐ and do not complete this part.)	taın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	269,484
2a	Tax on investment income for 2015 from Part VI, line 5 2a 2,733		
b	Income tax for 2015 (This does not include the tax from Part VI ) 2b		
c	Add lines 2a and 2b	2c	2,733
3	Distributable amount before adjustments Subtract line 2c from line 1	3	266,751
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	266,751
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	266,751
Par	t 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	1,035,280
b	Program-related investments—total from Part IX-B	1b	0
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	0
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	За	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	1,035,280
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,035,280
	<b>Note:</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the	foundation qualifies for

P	art XIIII Undistributed	Income (see instri	uctions)			
			(a) Corpus	(b) Years prior to 2014	(c) 2014	( <b>d)</b> 2015
1	Distributable amount for 2015	from Part VI line 7	Corpus	rears prior to 2014	2014	266,751
	Undistributed income, if any, a					
a					0	
	Total for prior years 2013			0	-	
3	Excess distributions carryove			-		
a	From 2010	482,861				
b	From 2011	394,759				
c	From 2012	872,955				
d	From 2013	727,440				
е	From 2014	555,653				
f	<b>Total</b> of lines 3a through e		3,033,668			
4	Qualifying distributions for 201	5 from Part				
	XII, line 4 🕨 \$	1,035,280				
а	Applied to 2014, but not more	than line 2a			0	
b	Applied to undistributed incom					
	(Election required—see instruc					
С	Treated as distributions out of required—see instructions).					
d	Applied to 2015 distributable					266,751
е	Remaining amount distributed	out of corpus	768,529			
5	Excess distributions carryove	rapplied to 2015				
	(If an amount appears in column same amount must be shown					
6	Enter the net total of each col	umn as				
	indicated below:					
	Corpus Add lines 3f, 4c, and 4		3,802,197			
b	Prior years' undistributed incom			0		
_	line 4b from line 2b			0		
С	Enter the amount of prior years income for which a notice of de					
	been issued, or on which the se	•				
	tax has been previously assess	sed				
d	Subtract line 6c from line 6b T			0		
	—see instructions			0		
е	Undistributed income for 2014 4a from line 2a Taxable amour					
	instructions	it—see			0	
f	Undistributed income for 2016	Subtract				
	lines 4d and 5 from line 1 This					0
	be distributed in 2015					0
7	Amounts treated as distributio					
	corpus to satisfy requirements section 170(b)(1)(F) or 4942(	• •				
	be required - see instructions)					
8	Excess distributions carryover	from 2010 not	482,861			
	applied on line 5 or line 7 (see		402,801			
9	Excess distributions carryover Subtract lines 7 and 8 from line		3,319,336			
10		: va	_,5_2,550			
	Analysis of line 9 Excess from 2011	394,759				
	Excess from 2012	872,955				
	Excess from 2013	727,440				
	Excess from 2014	555,653				
	Excess from 2015	768,529				

NONE

	Part XIV Private Operating Foundat	ions (see instri	uctions and Part	: VII-A, questioi	า 9)	rage 10
	If the foundation has received a ruling or determ foundation, and the ruling is effective for 2015,	nınatıon letter tha	t it is a private ope	erating	,	
b	Check box to indicate whether the organization		-		□ 4942(1)(3) or	T 4942(1)(5)
	Enter the lesser of the adjusted net	Tax year		Prior 3 years	17 1312())(3) 01	1 1312(1)(3)
Lu	income from Part I or the minimum investment return from Part X for each year listed	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(e) Total
b	85% of line 2a					
c	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt					
e	activities					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					
	<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying</li></ul>					
b	under section 4942(j)(3)(B)(i) "Endowment" alternative test— enter 2/3					
·	of minimum investment return shown in Part X, line 6 for each year listed "Support" alternative test—enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties) (2) Support from general public					
	and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income			1	1	
Pa	rt XV Supplementary Information (			ie organizatio	n had \$5,000 o	r more in
1	assets at any time during the Information Regarding Foundation Managers:	<u>year—see ins</u>	tructions.)			
	List any managers of the foundation who have c before the close of any tax year (but only if they					lation
	See Additional Data Table  List any managers of the foundation who own 10	) (/ or more of the				
	ownership of a partnership or other entity) of wh		•		y range portion or th	
2	Information Regarding Contribution, Grant, Gif	t, Loan, Scholarsh	ip, etc., Programs:	l		
	Check here \( \backsquare\) If the foundation only makes counsolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, and countries are conditions.	makes gifts, gran				
a	The name, address, and telephone number or e INDIA E KEITH 5201 GORHAM DRIVE CHARLOTTE, NC 28211 (704) 364-6105	-mail address of t	he person to whon	n applications sho	uld be addressed	
	The form in which applications should be subm THE FOUNDATION MAKES GRANTS TO TAX DIRECTORS AT PERIODIC MEETINGS WHI OTHER MATERIALS ARE REQUIRED TO BE S	-EXEMPT 501(C) LE REQUESTS FR	(3) CHARITIES A	AS DETERMINED	BY THE FOUNDAT	
_	Any submission deadlines NONE					
d	Any restrictions or limitations on awards, such factors	as by geographic	al areas, charitabl	e fields, kinds of i	nstitutions, or othe	r

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of A mount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 1,035,280 **b** Approved for future payment

Part XVI-A Analysis of Income-Produc			F I. J. J. L	. 512 . 512 514	(e)
Enter gross amounts unless otherwise indicated	(a)	(b)	Excluded by section	(d)	Related or exempt function income (See
1 Program service revenue	Business code	A mount	Exclusion code	A mount	instructions )
a b					
с					
d					
e f					
<b>g</b> Fees and contracts from government agencies					
Membership dues and assessments					
investments			14	582	
Dividends and interest from securities			14	83,483	
Net rental income or (loss) from real estate  a Debt-financed property					
<b>b</b> Not debt-financed property					
Net rental income or (loss) from personal property					
Other investment income					
Gain or (loss) from sales of assets other than					
Net income or (loss) from special events			18	101,377	
Gross profit or (loss) from sales of inventory					
. L Other revenue a INCREASE IN CASH					
b SURRENDER VALUE					
c OF LIFE INSURANCE					
d CONTRACT e					358,360
2 Subtotal Add columns (b), (d), and (e).				185,442	358,360
3 Total.Add line 12, columns (b), (d), and (e).			1	13	543,802
(See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities to		lishment of	Exempt Purpos	es	
Line No. Explain below how each activity for wh					
instructions )	s exempt purpos	es (other than by	providing funds for	such purposes) (	

Par	t XVI		Information Re Noncharitable					saction	ns and	Relationships	With			
		organ	zation directly or ii c) of the Code (other	ndırectly (	engage	ın any of t	the following wi						Yes	No
or	ganıza	tions	7											
a Ti	ansfer	s fron	n the reporting four	ndation to	a nonc	harıtable (	exempt organız	ation of						
(1	L) Cas	sh										1a(1)		No
(2	2) Oth	eras	sets									1a(2)		No
<b>b</b> 0	ther tr	ansac	tions											
(1	L) Sale	esofa	assets to a noncha	rıtable ex	empt or	rganızatıoı	n					1b(1)		No
(2	2) Pur	chase	s of assets from a	noncharit	able ex	empt orga	inization					1b(2)		No
(3	) Ren	ital of	facilities, equipme	nt, or othe	erasset	ts						1b(3)		No
(4	l) Reii	mburs	ement arrangemer	nts								1b(4)		No
(5	) Loa	ns or	loan guarantees.									1b(5)		No
			ce of services or m									1b(6)		No
<b>c</b> SI	narıng	of fac	ılıtıes, equipment, i	mailing lis	ts, oth	er assets,	or paid employ	ees				1c		No
of ın	the go any tr	ods, ansac	to any of the above other assets, or se tion or sharing arr	rvices giv angement	en by t , show	he reportı ın column	ng foundation I	If the fou of the goo	indation r ods, other	received less than rassets, or servio	n fair marko ces receive	et value ed	!	
<b>(a)</b> ⊔	ne No	(Ь	) Amount involved	(c) Name	of nonch	naritable exe	empt organization	(d)	Description	of transfers, transact	ions, and sha	ring arra	ngemer	its
de	scribe	ed in s	tion directly or indirectly or indirection 501(c) of the plete the following solution in the solution is the solution of the solution in the solution is the solution in the solution in the solution is the solution in the solution in the solution is the solution in the solution in the solution is the solution in the solution in the solution is the solution in the solution in the solution is the solution in the solution in the solution is the solution in the solution in the solution in the solution is the solution in the solution in the solution in the solution is the solution in the s	ne Code (d schedule		an sectioi		ın sectı			otion of relati		es 🔽	No
Sigr	the	e best	enalties of perjury, of my knowledge a ion of which prepar	and belief,	ıt ıs tru	ue, correct					n taxpaye		sed on	all
Her	e )	***					2016-05-11	<b>-)</b>	*****	· 	return	he prepai		
	'	Sign	ature of officer or t	rustee			Date	•	Title			nstr)? 🗸	Yes N	No
	•		nt/Type preparer's UCY NIZINSKI	name	Prepa	rer's Sıgn	ature	Date		Check if self- employed ►	PTIN	002959	986	
Use	pare	PES	n's name ► STA FINNIE & ASS n's address ►	SOCIATE	S LLP					Firm's EIN 🕨				
Only	<b>/</b>		26 MORRISON BL	VD CHAR	LOTTE	,NC 282	11			Phone no (704	365-600	00		

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

GRAEME M KEITH JR

INDIA E KEITH

#### Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	Amount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
ADVENTURE RESOURCES 9227 HANOVER SOUTH TRAIL CHARLOTTE,NC 28210		PC	CONTRIBUTION	5,000
AFRICAN CHRISTIAN OUTREACH PO BOX 702001 DALLAS,TX 75370		PC	CONTRIBUTION	25,000
ATHLETES IN ACTION 651 TAYLOR DR XENIA,OH 45385		PC	CONTRIBUTION	500
BEDS FOR KIDS 1800 CAMDEN RD STE 10717 CHARLOTTE,NC 28203		PC	CONTRIBUTION	50,000
BILLY GRAHAM EVANGELISTIC ASSOCIATION 1 BILLY GRAHAM PKWY CHARLOTTE,NC 28201		PC	CONTRIBUTION	20,000
BOY SCOUTS OF AMERICA 1325 W WALNUT HILL LN IRVING,TX 75038		PC	CONTRIBUTION	15,000
CAPITOL COMMISSION 2600 FAIRVIEW RD STE 200 RALEIGH,NC 27608		PC	CONTRIBUTION	15,000
CHANGED LIVES PO BOX 100 CHATTANOOGA,TN 37401		PC	CONTRIBUTION	5,000
CHARLOTTE RESCUE MISSION 907 W 1ST ST CHARLOTTE,NC 28202		PC	CONTRIBUTION	5,000
CHESHIRE ACADEMY 10 MAIN ST CHESHIRE,CT 06410		PC	CONTRIBUTION	80,000
CROSSROADS MINISTRIES USA 5585 ERINDALE DR STE 207 COLORADO SPRINGS,CO 80918		PC	CONTRIBUTION	50,000
DILWORTH UNITED METHODIST CHURCH 605 EAST BLVD CHARLOTTE,NC 28203		PC	CONTRIBUTION	1,000
EDUCATION EQUALS HOPE 100 MAIN ST FORT MILL,SC 29715		PC	CONTRIBUTION	10,000
FAITH HOPE AND LOVE 3175 S CONGRESS AVE STE 310 PALM SPRINGS,FL 33461		PC	CONTRIBUTION	25,000
FELLOWSHIP OF CHRISTIAN ATHLETES 8701 LEEDS RD KANSAS CITY, MO 64129		PC	CONTRIBUTION	175,000
Total			▶ 3a	1,035,280

# Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual,	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
FELLOWSHIP OF CHRISTIAN COWBOYS PO BOX 1210 CANON CITY,CO 81215		PC	CONTRIBUTION	5,000
FIRST PRESBYTERIAN CHURCH OF GASTONIA 1621 EAST GARRISON BLVD GASTONIA,NC 28054		PC	CONTRIBUTION	1,000
FOCUS ON THE FAMILY 8655 EXPLORER DR COLORADO SPRINGS,CO 80920		PC	CONTRIBUTION	25,000
GODS ANOINTED IN NEED 58 WATER PLANT RD OCRACOKE,NC 27960		PC	CONTRIBUTION	10,000
HARAMBEE MINISTRIES 1609 NAVARRO AVE PASADENA,CA 91103		PC	CONTRIBUTION	10,000
HARVEST CENTER CHARLOTTE 1800 BREWTON DR CHARLOTTE,NC 28206		PC	CONTRITBUION	50,000
HOPEWELL BAPTIST CHURCH 18841 DAVIDSON CONCORD RD DAVIDSON,NC 28036		PC	CONTRIBUTION	1,000
HOPE OUT LOUD 1168 LAKE MEADOW LN FOREST, VA 24551		PC	CONTRIBUTION	25,000
JESUS ONLINE 3497 S PONDEROSA DR GILBERT,AZ 85297		PC	CONTRIBUTION	125,000
LIBERTY BAPTIST CHURCH 3000 SAM WILSON RD CHARLOTTE,NC 28214		PC	CONTRIBUTIONS	2,500
MARANATHA HIGH SCHOOL 169 S SAINT JOHN AVE PASADENA,CA 91105		PC	CONTRIBUTION	52,000
MYM SERVICES PO BOX 470021 CHARLOTTE,NC 28247		PC	CONTRIBUTION	25,680
MASTERS COLLEGE 21726 PLACERITA CANYON RD SANTA CLARITA,CA 91321		PC	CONTRIBUTIONS	30,000
MCCALLIE SCHOOL 500 DODDS AVE CHATTANOOGA,TN 37404		PC	CONTRIBUTIONS	17,000
MISSION COMMUNITY CHURCH 414 WINDSONG LN EXTON,PA 19341		PC	CONTRIBUTIONS	5,000
Total			▶ 3a	1,035,280

#### Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
MYERS PARK PRESBYTERIAN CHURCH 2501 OXFORD PL CHARLOTTE,NC 28207		PC	CONTRIBUTIONS	500
NEWELL BAPTIST CHURCH 9115 NEWELL BAPTIST CHURCH RD CHARLOTTE,NC 28213		PC	CONTRIBUTIONS	5,000
SHELTERED TREASURES 4223-8 PROVIDENCE RD CHARLOTTE,NC 28211		PC	CONTRIBUTIONS	3,000
SHILOH LUTHERAN CHURCH 1011 SHILOH CHURCH RD HICKORY,NC 28601		PC	CONTRIBUTIONS	100
SIM 14830 CHOATE CIRCLE CHARLOTTE,NC 28273		PC	CONTRIBUTIONS	30,000
SPORTS FRIENDS 1838 GOLD HILL RD FORT MILL,SC 29708		PC	CONTRIBUTIONS	5,000
SPORTS WORKS PO BOX 8031 GREENVILLE,NC 27835		PC	CONTRIBUTIONS	5,000
STRAS MEMORIAL CHURCH 211 N CENTRAL AVE TAZEWELL,VA 24651		PC	CONTRIBUTIONS	1,000
WITH OPEN EYES 4100 COCA COLA PLAZA CHARLOTTE,NC 28211		PC	CONTRIBUTIONS	52,500
YCI 251 POST OFFICE DR STE 4 INDIAN TRAIL, NC 28079		PC	CONTRIBUTIONS	60,000
YMCA 500 E MOREHEAD ST 300 CHARLOTTE,NC 28202		PC	CONTRIBUTIONS	7,500
Total			▶ 3a	1,035,280

# **TY 2015 Accounting Fees Schedule**

Name: THE GREG AND INDIA KEITH FOUNDATION AMENDED

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	2,900			

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

DLN: 93491133026616

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

## **TY 2015 Depreciation Schedule**

Name: THE GREG AND INDIA KEITH FOUNDATION AMENDED

#### **TY 2015 Other Assets Schedule**

Name: THE GREG AND INDIA KEITH FOUNDATION AMENDED

Description	Beginning of Year -	End of Year - Book	End of Year - Fair
	Book Value	Value	Market Value
LIFE INSURANCE CONTRACTS	3,653,033	4,111,393	2,037,585

#### **TY 2015 Other Income Schedule**

Name: THE GREG AND INDIA KEITH FOUNDATION AMENDED

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
INCREASE IN CASH SURRENDER VALUE OF LIFE			
INSURANCE CONTRACTS	358,360	0	0

#### **TY 2015 Other Professional Fees Schedule**

Name: THE GREG AND INDIA KEITH FOUNDATION AMENDED

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MANAGEMENT FEES	47,482	47,482		
LEGAL FEES	9,570	0		

#### **TY 2015 Taxes Schedule**

Name: THE GREG AND INDIA KEITH FOUNDATION AMENDED

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES	1,307	1,307		

efile GRAPHIC print - DO NOT PROCESS

As Filed Data

DLN: 93491133026616

Schedule B

**Schedule of Contributors** 

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

2015

**Employer identification number** 

	REG AND INDIA K	ETTH FOUNDATION AMENDED	20-2016795				
Organ	ization type (check	one)					
Filers	of:	Section:					
Form 9	90 or 990-EZ	□ 501(c)( ) (enter number) organization					
			4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation				
Form 9	90-PF	√ 501(c)(3) exempt private foundation					
		□ 501(c)(3) taxable private foundation					
⊽		on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions om any one contributor. Complete Parts I and II. See instructions for determining a					
оробіє							
Γ	under sections 509 received from any	described in section $501(c)(3)$ filing Form 990 or 990-EZ that met the $33^1 B\%$ supposed (a)(1) and $170(b)(1)(A)(vi)$ , that checked Schedule A (Form 990 or 990-EZ), Partone contributor, during the year, total contributions of the greater of <b>(1)</b> \$5,000 or (ii) Form 990-EZ, line 1 Complete Parts I and II	II, line 13, 16a, or 16b, and that				
Γ	during the year, total	described in section $501(c)(7)$ , $(8)$ , or $(10)$ filing Form $990$ or $990$ -EZ that receive all contributions of more than $$1,000$ exclusively for religious, charitable, scientific of cruelty to children or animals. Complete Parts I, II, and III					
Γ	during the year, conthis box is checked purpose. Do not co	described in section $501(c)(7)$ , $(8)$ , or $(10)$ filing Form 990 or 990-EZ that receive attributions $exclusively$ for religious, charitable, etc., purposes, but no such contributions, enter here the total contributions that were received during the year for an $exclusively$ applies any of the parts unless the <b>General Rule</b> applies to this organization because, etc., contributions totaling \$5,000 or more during the year	outions totaled more than \$1,000 If usively religious, charitable, etc, ause it received nonexclusively				

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file 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 990PF, 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
THE GREG AND INDIA KEITH FOUNDATION AMENDED

Employer identification number 20-2016795

Part I	Contributors (see instructions) Use duplicate copies of Part I if	additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
1			Person	I
	GREG AND INDIA KEITH 5201 GORHAM DRIVE	\$ 3,958,621	Payroll	Γ
	CHARLOTTE, NC 28226		Noncash  (Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Г
		\$	Payroll	Γ
		<u> </u>	Noncash	Г
			(Complete Part II f contributions )	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Γ
		\$	Payroll	Γ
			Noncash	Γ
			(Complete Part II f contributions )	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Γ
		\$	Payroll	Γ
			Noncash	Γ
			(Complete Part II f contributions )	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Γ
		\$	Payroll	Γ
			Noncash	Γ
			(Complete Part II f contributions )	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Γ
		\$	Payroll	Γ
			Noncash	Γ
1			(Complete Part II f contributions)	or noncash

Name of organization THE GREG AND INDIA KEITH FOUNDATION AMENDED		Employer identification no	umber
THE GREG AND IN	NDIA KEITH FOUNDATION AMENDED	20-2016795	
reit. II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed	•	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) 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

hedule B (Form 990, :	990-EZ, or 990-PF) (2015)		Page 4
me of organization IE GREG AND INDIA KEITH FOUNDATION AMENDED			Employer identification number
			20-2016795
total more line entry. of \$1,000 o	than \$1,000 for the year from any or	ne contributor. Complete co II, enter the total of <i>exclusiv</i> mation once. See instruction	ribed in section 501(c)(7), (8), or (10) that plumns (a) through (e) and the following ely religious, charitable, etc., contributions is.) • \$
(a) .from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
. =		(e) Transfer of gi	ft
-	Transferee's name, address, and		Relationship of transferor to transferee
(a) O.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 ZIP4 Relationship of transferor to transferee		
(a)	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
. =			
-	(e) Transfer of gift Transferee's name, address, and ZIP4 Relationship of transferor to transferee		
(a)			
o.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	1ZP4	Relationship of transferor to transferee