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OMB No 1545-0052

2015

Department of the Treasury

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.

Internal Revenue Service ▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf. Open to Public Inspection , and ending 12-31-2015 For calendar year 2015, or tax year beginning 01-01-2015 A Employer identification number Name of foundation ROSE & K V MATHEW FOUNDATION 38-3210681 BTelephone number (see instructions) Number and street (or P O $\,$ box number if mail is not delivered to street address) 604 THOMPSON DAIRY WAY (810) 230-7905 C If exemption application is pending, check here City or town, state or province, country, and ZIP or foreign postal code G Check all that apply Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return A mended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change If private foundation status was terminated \checkmark Section 501(c)(3) exempt private foundation **H** Check type of organization under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation **J**Accounting method **✓** Cash Accrual IFair market value of all assets at end F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here of year (from Part II, col (c), Other (specify) line 16) >\$ 24,652 (Part I, column (d) must be on cash basis) Part I **Analysis of Revenue and Expenses** Disbursements Revenue and Adjusted net income (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see Net investment for charitable expenses per books ıncome (c) purposes (d) (cash basis only) Contributions, gifts, grants, etc , received (attach 1 19,000 2 Check ► ☐ If the foundation is **not** required to attach Interest on savings and temporary cash investments 3 327 327 Dividends and interest from securities Gross rents Net rental income or (loss)_ b Revenue Net gain or (loss) from sale of assets not on line 10 6a b Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) . . . Net short-term capital gain 8 9 Income modifications . 10a Gross sales less returns and allowances b Less Cost of goods sold . . . Gross profit or (loss) (attach schedule) . c 11 Other income (attach schedule) 327 19.327 12 Total.Add lines 1 through 11 Compensation of officers, directors, trustees, etc 13 Other employee salaries and wages . . 14 Pension plans, employee benefits. 15 Operating and Administrative Expenses 16a Legal fees (attach schedule). . . Accounting fees (attach schedule). . b Other professional fees (attach schedule) . c 597 597 17 **پ** 18 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion 20 Occupancy Travel, conferences, and meetings. 21 22 Printing and publications . . . (چە 34 34 23 Other expenses (attach schedule).

Subtract line 26 from line 12

24

25

27

а

b

Total operating and administrative expenses.

Total expenses and disbursements. Add lines 24 and

Excess of revenue over expenses and disbursements

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

Add lines 13 through 23

Contributions, gifts, grants paid

16,630

17.374

1.953

631

631

n

16,630

16,664

Part	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year		End o	f year
		(a) Book Value	(b) Book Val		(c) Fair Market Value
1	-	4,317		5,302	5,302
2	. ,				
3					
	Less allowance for doubtful accounts ▶				
4					
	Less allowance for doubtful accounts ▶				
5					
6					
	disqualified persons (attach schedule) (see instructions)				
7	·				
	Less allowance for doubtful accounts ▶				
્ર 8	Inventories for sale or use				
4ssets	Prepaid expenses and deferred charges				
& 10	 Investments—U S and state government obligations (attach schedule) 				
	b Investments—corporate stock (attach schedule)	12,177	% 3	12,502	19,350
	c Investments—corporate bonds (attach schedule)				
11	Investments—land, buildings, and equipment basis ▶				
	Less accumulated depreciation (attach schedule) ▶				
12	Investments—mortgage loans				
13	•				
14	Land, buildings, and equipment basis ▶				
	Less accumulated depreciation (attach schedule) ▶				
15	Other assets (describe >)				
16	Total assets(to be completed by all filers—see the				
	ınstructions Also, see page 1, item I)	16,494		17,804	24,652
17	Accounts payable and accrued expenses				
18	Grants payable				
ğ 19	Deferred revenue				
19	Loans from officers, directors, trustees, and other disqualified persons				
[21	Mortgages and other notes payable (attach schedule)				
_ 22	· · · · · · · · · · · · · · · · · · ·	9 643			
23	Total liabilities(add lines 17 through 22)	643		0	
~	Foundations that follow SFAS 117, check here				
Ce	and complete lines 24 through 26 and lines 30 and 31.				
Balance 25	Unrestricted				
සි 25	Temporarily restricted				
[26	Permanently restricted				
Fund	Foundations that do not follow SFAS 117, check here 🕨 🔽				
ō	and complete lines 27 through 31.				
≨ 27	Capital stock, trust principal, or current funds				
Assets	Paid-in or capital surplus, or land, bldg , and equipment fund				
Z 29	Retained earnings, accumulated income, endowment, or other funds	15,851	:	17,804	
30 g	Total net assets or fund balances(see instructions)	15,851	:	17,804	
31	Total liabilities and net assets/fund balances(see instructions)	16,494	:	17,804	
Part	Analysis of Changes in Net Assets or Fund Balances				
1	Total net assets or fund balances at beginning of year—Part II, column	(a), line 30 (must ag	ree		
	with end-of-year figure reported on prior year's return)		<u>1</u>	\perp	15,851
2	Enter amount from Part I, line 27a		2		1,953
3	Other increases not included in line 2 (itemize) ▶		3	\perp	
4	Add lines 1, 2, and 2			Ι -	17 904

Decreases not included in line 2 (itemize) ▶ _

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

17,804

5

the Part VI instructions

rait.	Capital Gallis	and Losses for Tax on Thee	Stillelit Illcollie	-			
		the kind(s) of property sold (e g , re ehouse, or common stock, 200 shs	•	How acquired P—Purchase (b) D—Donation	יט ן	ate acquired no , day, yr)	Date sold (d) (mo , day, yr)
1a							
b							
С							
d							
e							
(e	e) Gross sales price	Depreciation allowed (f) (or allowable)		t or other basis expense of sale			or (loss) (f) minus (g)
а							
b							
С							
d							
е							
Со	mplete only for assets	showing gain in column (h) and owne	ed by the foundation	n on 12/31/69			(h) gaın mınus
(i)	F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69		cess of col(ı) rcol(j), ıfany	(I) C		ot less than -0-) or (from col (h))
а							
b							
С							
d							
е							
2 3	Net short-term capit If gain, also enter in	me or (net capital loss) al gain or (loss) as defined in sectio Part I, line 8, column (c) (see instru		- ın Part I, line 7	2		
D	ın Part I, line 8 .				3		
Part	Qualification	Under Section 4940(e) for R	educed lax or	net investme	ent In	come	
	cional use by domestic on 4940(d)(2) applies,	private foundations subject to the se leave this part blank	ection 4940(a) tax	on net investment	income	e)	
		ne section 4942 tax on the distributa ot qualify under section 4940(e) Do	,		eriod?		┌ Yes ✓ No
1 Ent	ter the appropriate amo	ount in each column for each year, se	ee instructions befo	ore making any ent	ries		
	(a) period years Calendar or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncha		((d) Distributio (col (b) divided	n ratio
	2014	13,494		20,969		. , ,	0 643521
	2013	12,803		20,047			0 638649
	2012	13,915		17,397			0 799851
	2011	33,340		35,170			0 947967
	2010	13,634		48,488	_		0 281183
2		n (d)		⊢	2		3 311171
3	the number of years	ratio for the 5-year base period—div the foundation has been in existence	e if less than 5 yea	rs ′′′′	3		0 662234
4	Enter the net value o	f noncharitable-use assets for 2015	from Part X, line 5	5	4		23,267
5		e 3		<u> </u>	5		15,408
6		stment income (1% of Part I, line 2)	•	<u> </u>	6		
7					7		15,408
8	Enter qualifying distr	ributions from Part XII, line 4		[8	· · ·	16,664

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

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4	1940(e),	or 4948—see pag	e 18 of th	ne inst	ructio	ns)	
1a	1 1 3	▶ ┌)					
	and enter "N/A" on line 1							
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)		Ì					
ь	Domestic foundations that meet the section 4940(e) requirements in Part V	, check		1				0
	here ▶ 🔽 and enter 1% of Part I, line 27b · · · · · · · · · · · ·		· · · · · '					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organiz Part I, line 12, col (b)	ations e	nter 4% of					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable fou enter -0-)	ındatıons	s only Others	2				
3	Add lines 1 and 2			3				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable fou enter -0-)	undation:	s only Others	4				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, e	enter -0		5				
6	Credits/Payments							
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a						
b	Exempt foreign organizations—tax withheld at source	6b						
С	Tax paid with application for extension of time to file (Form 8868)	6 c						
d	Backup withholding erroneously withheld	6d		l l				
7	Total credits and payments Add lines 6a through 6d			7				
8	Enter any penalty for underpayment of estimated tax. Check here if Form			8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed .			9				
10	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amount	nt overp	oaid	10				
11	Enter the amount of line 10 to be Credited to 2015 estimated tax		Ref unded P	11				
	t VII-A Statements Regarding Activities						1	
1a	During the tax year, did the foundation attempt to influence any national, state	•	-				Yes	No
	• • • • • • • • • • • • • • • • • • • •				ŀ	1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for for definition)?	•		istruction	15	1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities			· · ·	}			140
	published or distributed by the foundation in connection with the activities	s and cop	ores or any materia					
С	Did the foundation file Form 1120-POL for this year?					1 c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) impo	osed dur	ing the year					
	(1) On the foundation > \$ (2) On foundation managers	▶ \$						
e	Enter the reimbursement (if any) paid by the foundation during the year for po	litical ex	penditure tax im	posed				
	on foundation managers > \$							
2	Has the foundation engaged in any activities that have not previously been re	eported t	to the IRS?			2		No
	If "Yes," attach a detailed description of the activities							
3	Has the foundation made any changes, not previously reported to the IRS, in	ıts gove	rning instrument,	articles				
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a con-					3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more of				ı	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?				ŀ	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction du	uring the	e year?			5		No
_	If "Yes," attach the statement required by General Instruction T	0.45	6 1 11					
6	Are the requirements of section 508(e) (relating to sections 4941 through 49 • By language in the governing instrument, or	945) sat	tistied either					l
	 By state legislation that effectively amends the governing instrument so the 	hat no m	nandatory directio	ıns				
	that conflict with the state law remain in the governing instrument?		·			6	Yes	1
7	Did the foundation have at least \$5,000 in assets at any time during the year							
	and Part XV					7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered	(see ins	tructions)					
	▶MI							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 9	90-PF t	to the Attorney					
	General (or designate) of each state as required by General Instruction G? If		· ·			8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the		_					
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (s			•		_		
	If "Yes," complete Part XIV					9		No
10	Did any persons become substantial contributors during the tax year? If "Yes	," attach	a schedule listing	tneir nam	ıes	10		Ne
	and addresses				Form	10		No

Par	t VII-A Statements Regarding Activities (continued)		<u>'</u>	uge .
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	Τ		
	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			1
	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 ▶DELON PINTO Telephone no ▶(810	1) 230-	7908	
	Located at ▶604 THOMPSON DAIRY WAY ROCKVILLE MD ZIP+4 ▶20850	,,250	7 3 0 0	
1 =				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here	• •		
	and enter the amount of tax-exempt interest received or accrued during the year		1	1
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	1	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 ▶			
201	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1	T.,	T
	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 Vo		 	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?		 	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	!		
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)? \square Yes \square No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days) Yes 🔽 No		 	
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations	١		
	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	I	l	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,	1	I	
	that were not corrected before the first day of the tax year beginning in 2015?	1c		
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? Yes ▼ No			
	If "Yes," list the years ▶ 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement—see instructions)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
_	2 0			
3а	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?		 	
D	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine	1		
	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		No
ь	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	<u> </u>		†
_	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No
	Ear	~ 000	-DE /	2015

Form 990-PF (2015)		Page 7
Part VIII Information About Officers, Directors, Truste and Contractors (continued)	ees, Foundation Managers, Hi	ghly Paid Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NOI	 NE".
(a) Name and address of each person paid more than \$50,000	(b) ⊤ype of service	(c) Compensation
NONE		
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 rele	event statistical information such as the number	er of
organizations and other beneficiaries served, conferences convened, research papers produ		Expenses
1 N/A		
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 t	the tax year on lines 1 and 2	A mount
1 N/A		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		▶

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

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

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

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

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

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

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

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

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

check here ► and do not complete this part.)

Tax on investment income for 2015 from Part VI, line 5. Income tax for 2015 (This does not include the tax from Part VI). . .

Recoveries of amounts treated as qualifying distributions.

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

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

Page 8

1,163

1,163

1,163

1.163

1,163

16,664

16,664

16,664

Form 990-PF (2015)

6

1

2c

3

4

5

6

7

1a

1b

2

За

3b

4

5

Distributable Amount

Form 990-PF (2015)

Part XI

1

2a

3

4

5

6

7

1

2

5

Part XII

		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	Distributable amount for 2015 from Part XI, line 7	'	'		1,163
	Undistributed income, if any, as of the end of 2015				
	Enter amount for 2014 only				
b	Total for prior years 20, 20, 20				
	Excess distributions carryover, if any, to 2015				
	From 2010				
b	21 501				
c	From 2012 13,045				
d	From 2013				
е	From 2014 12,450				
f	Total of lines 3a through e	80,087			
4	Qualifying distributions for 2015 from Part				
	XII, line 4 ▶ \$ 16,664				
а	Applied to 2014, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required—see instructions)				
c	Treated as distributions out of corpus (Election				
_	required—see instructions)				
d	Applied to 2015 distributable amount				1,163
е	Remaining amount distributed out of corpus	15,501			
5	Excess distributions carryover applied to 2015				
	(If an amount appears in column (d), the same amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	95,588			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable amount				
_	-see instructions				
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount—see				
	instructions				
f	Undistributed income for 2016 Subtract				
	lines 4d and 5 from line 1 This amount must be distributed in 2015				
7	Amounts treated as distributions out of				
-	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election may				
	be required - see instructions)				
8	Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	11,210			
9	Excess distributions carryover to 2016.				
	Subtract lines 7 and 8 from line 6a	84,378			
LO	Analysis of line 9		\Box		
а	Excess from 2011 31,581				
b	Excess from 2012 13,045				
c	Excess from 2013 11,801				
d	Excess from 2014 12,450				
е	Excess from 2015 15,501				
					Form 990-PF (2015

- b The form in which applications should be submitted and information and materials they should include
- Any submission deadlines
- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Form 990-PF (2015)

3 Grants and Contributions Paid		around for E	utura Daymant	
	If recipient is an individual,		uture Payment	
Recipient Name and address (home or business)	show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
	or substantial contributor	Тестрісті		
a Paid during the year See Additional Data Table	or substantial contributor	Тестринг		
Total			▶ 3a	16,630
b Approved for future payment				
			▶ 3b	

Form 990-PF (20 Part XVI-A	Analysis of Income-Produc	ing Activitie	es			Page 1 2
	unts unless otherwise indicated		ısıness income	Excluded by section	າ 512, 513, or 514	(e)
1 Program serv	ICO revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exemply function income (See
-		business code	Amount	Exclusion code	Amount	instructions)
_	ontracts from government agencies dues and assessments					
3 Interest on s	savings and temporary cash					
	nd interest from securities			14	327	
	come or (loss) from real estate					
	ced property nanced property					
	come or (loss) from personal					
property.						
	ment income					
) from sales of assets other than					
	or (loss) from special events					
	or (loss) from sales of inventory					
1 Other revenu	ue a _				_	
	de d					
	d columns (b), (d), and (e)				227	
	e 12, columns (b), (d), and (e).				327 13	<u> </u> 327
(See worksh	eet in line 13 instructions to verify	calculations)				
Line No.	Relationship of Activities to plain below how each activity for wh accomplishment of the foundation's	ich income is re	ported in column ((e) of Part XVI-A c	ontributed importa	
Ins	tructions)					
				-		-

Part		Information Pe	agardin	a Transfers	To and Trans	actions and I	Relationships With		Ра	ige L .
raic	AVII	Noncharitable				actions and i	verationships with			
		rganızatıon dırectly or ı 01(c) of the Code (othe	ndırectly	engage in any o	f the following wit				Yes	No
org	anızat	ions?								
a Tra	nsfers	from the reporting four	ndation to	a noncharitable	e exempt organiza	tion of				
(1)	Cash	1						1a(1)		No
(2)	Othe	erassets						1a(2)		No
b Oth	er tra	nsactions								
		s of assets to a noncha						1b(1)		No
		hases of assets from a			-			1b(2)		No
										No
		nbursement arrangemer						1b(4)		No
		s or loan guarantees.						1b(5)		No
								1b(6)		No
	-		-	•			uld always show the fair i		I.e.	No
of t	he god ny tra	ods, other assets, or se	rvices giv angement	ven by the repor t, show in colum	ting foundation I	f the foundation r the goods, other	eceived less than fair ma assets, or services rece of transfers, transactions, and	rket value ived	е	nts
des	cribed No	indation directly or indiction 501(c) of the complete the following (a) Name of organization	ne Code (o	other than secti		n section 527?.	organizations	·	es	
Sign	the		and belief,	it is true, corre			npanying schedules and s reparer (other than taxpa	yer) ıs ba	sed on	n all
Here	👢	*****			2016-09-22	*****	ret			
						—) ——	wit	h the prepa ow	rer show	٧n
	'	Signature of officer or t	rustee		Date	Title		e instr)? [Yes [No
	l	Print/Type preparer's AKSHAY KAPOOR	name	Preparer's Sig	ınature	Date 2016-11-01	Check if self- employed ▶ ☐ PTIN	P01393	935	
Paid Prepa Use	arer	Firm's name ► LEWIS & KNOPF CPA	S				Firm's EIN ▶ 38-3205	662		
Only		Fırm's address ▶								
		5206 GATEWAY CEN 48507	ITRE SUI	TE 100 FLINT,	MI		Phone no (810) 238-4	617		
		40307								

December	76	1	the Year or Approved for	A
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	A mount
a Paid during the year				
BASILICA OF OUR LADY OF CONSOLATION 315 CLAY STREET CAREY,OH 43316	NONE	501C(3)	GENERAL FUNDS	535
BLESSED SACRAMENT MONASTERY 29575 MIDDLEBELT RD FARMINGTON HILLS,MI 48334	NONE	501C(3)	GENERAL FUNDS	125
CAPUCHIN FRANCISCAN FRIARS PO BOX 839 UNION CITY,NJ 07087	NONE	501C(3)	GENERAL FUNDS	100
EWTN 5817 OLD LEEDS RD IRONDALE,AL 35210	NONE	501C(3)	GENERAL FUNDS	300
FATIMA CENTER 17000 STATE RTE 30 CONSTABLE,NY 12926	NONE	501C(3)	GENERAL FUNDS	100
FOOD FOR THE POOR 6401 LYONS RD COCONUT GROVE,FL 33073	NONE	501C(3)	GENERAL FUNDS	250
HUMAN LIFE INTERNATIONAL 4 FAMILY LIFE LANE FRONT ROYAL, VA 22630	NONE	501C(3)	GENERAL FUNDS	50
LIFE LEGAL DEFENSE FOUNDATION P O BOX 2105 NAPA CA,CA 94555	NONE	501C(3)	GENERAL FUNDS	50
MERCY HOME FOR BOYS GIRLS 1140 W JACKSON BLVD CHICAGO,IL 60607	NONE	501C(3)	GENERAL FUNDS	125
MISCELLANEOUS ORGANIZED CHARITIES PO BOX 320379 FLINT,MI 48532	NONE	501C(3)	GENERAL FUNDS	1,029
OUR LADY OF THE LAKES CHURCH 5481 DIXIE HWY WATERFORD MI,MI 48237	NONE	501C(3)	GENERAL FUNDS	1,355
ST BENEDICTS CHURCH 80 S LYON WATERFORD,MI 48237	NONE	501C(3)	GENERAL FUNDS	350
ST CYRIL METHODIST CHURCH 41233 RYAN RD STERLING HEIGHTS,MI 48314	NONE	501C(3)	GENERAL FUNDS	220
ST HUGO OF THE HILLS 2215 OPDYKE RD BLOOMFIELD HILLS MI, MI 48301	NONE	501C(3)	GENERAL FUNDS	750
ST THOMAS SYRO MALABAR CATHOLIC CHU 17235 MT VERNON SOUTHFIELD MI, MI 48015	NONE	501C(3)	GENERAL FUNDS	3,100

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
,	or substantial contributor			
a Paid during the year				
AID TO THE CHURCH IN NEED 725 LEONARD ST BROOKLYN,NY 11222	NONE	501C(3)	GENERAL FUNDS	300
AMERCAN LEPROSY MISSION 120 BROADUS AVE GREENVILLE,SC 29601	NONE	501C(3)	GENERAL FUNDS	220
BASILICA NATIONAL SHRINE 400 MICHIGAN AVE NE WASHINGTON DC,DC 20017	NONE	501C(3)	GENERAL FUNDS	190
CATHOLIC RELIEF SERVICES 228 W LEXINGTON ST BALTIMORE, MD 21201	NONE	501C(3)	GENERAL FUNDS	650
ST JOSEPH CHURCH LAKE ORION 715 N LAPEER ROAD LAKE ORION,MI 48362	NONE	501C(3)	GENERAL FUNDS	2,550
ST PAULINE ST FRANCIS COVENANT 415 MICHIGAN AVE NE WASHINGTON DC,DC 20017	NONE	501C(3)	GENERAL FUNDS	650
SMILE TRAIN PO BOX 96208 WASHINGTON DC, DC 20090	NONE	501C(3)	GENERAL FUNDS	370
RIGHT TO LIFE 2340 PORTER STREET GRAND RAPIDS,MI 49501	NONE	501C(3)	GENERAL FUNDS	676
SEHION USA MINISTRIES 5000 SAINT CHARLES RD BELLWOOD,IL 60104	NONE	501C(3)	GENERAL FUNDS	500
SHALOM TV PO BOX 180 RIVERDALE SECT BRONX,NY 10471	NONE	501C(3)	GENERAL FUNDS	300
INTERNATIONAL CATHOLIC MIGRATION 14 BEACON ST BOSTON,MA 02108	NONE	501C(3)	GENERAL FUNDS	150
FATIMA CENTER 17000 STATE RTE 30 CONSTABLE,NY 12926	NONE	501C(3)	GENERAL FUNDS	259
RIGHT TO LIFE 2340 PORTER STREET GRAND RAPIDS,MI 49501	NONE	501C(3)	GENERAL FUNDS	676
AVE MARIA COMMUNICATIONS 1 AVE MARIA DR PO BOX 504 ANN ARBOR MI,MI 48106	NONE	501C(3)	GENERAL FUNDS	100
SEAGRAM POTHY THALAYOLAPARAMBU KERALA, KERALA IN	NONE	501C(3)	GENERAL FUNDS	600

Name of Stoo	k	End of Year Book Value	End of Year Fair Market Value				
EIN:	38-3210681	T					
Name:	ROSE & K V MATHEW FO	UNDATION					
TY 2015 Investments Corporate Stock Schedule							
efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	D	LN: 93491307003006				

12,502

19,350

CORPORATE STOCK-SCHWAB SECURITIES

effie GRAPHIC PHILL - DO NOT PROCESS	AS FIIEU Data -	DEN: 93491307003008
TY 2015 Other Expenses Sched	ule	

DI N. 02401207002006

Name:	ROSE & K V MATHEW FOUNDATION
FTN:	38-3210681

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	21111 30 3210001	•		
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

EXPENSES

34

BANK CHARGES 68 34

MARGIN LOAN			643		
Description		_	ing of Year - ok Value	End of Year - Book Value	
EIN:	38-3210681				
Name:	ROSE & K V MATH	IEW FOUNDATI	ON		
TY 2015 Other Liabilities Schedule					
•	•				
efile GRAPHIC print - DO NOT PROCESS	As Filed Data -			DLN: 93491307003006	

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491307003000				
TY 2015 Taxes Sche	dule			
	Name: ROSE & EIN: 38-3210	K V MATHEW FOUN 0681	DATION	
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
SUPPLIES	77			
EXCISE TAX	2			

efile GRAPHIC print	- DO NOT PROCESS As Filed Data -		DLN: 93491307003006			
Schedule B	Ile B Schedule of Contributors		OMB No 1545-0047			
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Form 990, 990-EZ, or 990-PF) Department of the Treasury Attach to Form 990, 990-EZ, or 990-PF and its instructions is at					
Name of the organizati	ion	Employer ide	entification number			
ROSE & K V MATHEW	FOUNDATION	38-321068	1			
Organization type (ch	eck one)					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private found	dation				
	☐ 527 political organization					
Form 990-PF	√ 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation					
	eation filing Form 990, 990-EZ, or 990-PF that received, during the year, contribut) from any one contributor Complete Parts I and II See instructions for determini	_				
under sections : received from a	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ /3% 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), ny one contributor, during the year, total contributions of the greater of (1) \$5,00 or (ii) Form 990-EZ, line 1 Complete Parts I and II	Part II, line 13, 16a	, or 16b, and that			
during the year,	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that red total contributions of more than \$1,000 exclusively for religious, charitable, scie on of cruelty to children or animals. Complete Parts I, II, and III					
during the year, this box is chec purpose Do not	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that recontributions exclusively for religious, charitable, etc., purposes, but no such coked, enter here the total contributions that were received during the year for an accomplete any of the parts unless the General Rule applies to this organization able, etc., contributions totaling \$5,000 or more during the year	ontributions totaled exclusively religiou because it receive	more than \$1,000 lf is, charitable, etc ,			
990-EZ, or 990-PF), but	on that is not covered by the General Rule and/or the Special Rules does not file it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line orm 990PF, Part I, line 2, to certify that it does not meet the filing requirements of	H of its				
For Paperwork Reduction for Form 990, 990-EZ, or		hedule B (Form 990	, 990-EZ, or 990-PF) (2015)			

Name of organization
ROSE & K V MATHEW FOUNDATION

Employer identification number 38-3210681

Part I	Contributors (see instructions) Use duplicate copies of Part I il	<u> </u>	1	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1			Person 🗸	
·	K V MATHEW P O BOX 320379	\$ 19,000	Payroll	
	FILME MIAOFOO	3 19,000	Noncash	
	FLINT, MI48532		(Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
			Person	
			Payroll	
		\$	Noncash —	
			(Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
			Person	
			Payroll	
		\$	Noncash	
			(Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
			Person	
		s	Payroll	
			Noncash	
			(Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
			Person	
		\$	Payroll	
			Noncash	
			(Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
			Person	
		\$	Payroll	
			Noncash	
			(Complete Part II for noncash contributions)	

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

Schedule B (Form 990,	990-EZ, or 990-PF) (2015)		Page 4
Name of organization ROSE & K V MATHEW	FOUNDATION		Employer identification number
total more line entry. of \$1,000 o	than \$1,000 for the year from any o	ne contributor. Complete co III, enter the total of <i>exclusiv</i> mation once. See instruction	38-3210681 ribed in section 501(c)(7), (8), or (10) that blumns (a) through (e) and the following ely religious, charitable, etc., contributions ns.) ► \$
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, and	(e) Transfer of gr	ft Relationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, and	(e) Transfer of gr	ft Relationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
· -	Transferee's name, address, and	(e) Transfer of gr	ft Relationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
· -	Transferee's name, address, and	(e) Transfer of gr	ft Relationship of transferor to transferee
 	iransierees nane, audress, and	441 7	relationally of transferor to transferee

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