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# Form **990-PF** Department of the Treasury Internal Revenue Service

Name of foundation

For calendar year 2015 or tax year beginning

**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 separate instructions is at www.irs.gov/form990pf.

and ending

OMB No 1545-0052

A Employer identification number THE KHANDWALA FAMILY FOUNDATION 46-1595744 Number and street (or P O box number if mail is not delivered to street address) Room/suite **B** Telephone number 30205 HELMANDALE DRIVE 2487986046 City or town, state or province, country, and ZIP or foreign postal code C if exemption application is pending, check here FRANKLIN, MI 48025 Initial return Initial return of a former public charity G Check all that apply: D 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust \_\_\_\_\_ Other taxable private foundation under section 507(b)(1)(A), check here Fair market value of all assets at end of year J Accounting method: X Cash F If the foundation is in a 60-month termination Other (specify) (from Part II, col (c), line 16) under section 507(b)(1)(B), check here 91,865. (Part I, column (d) must be on cash basis) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (b) Net investment (c) Adjusted net (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income income (cash basis only) 71,404 Contributions, gifts, grants, etc., received Check If the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 2 . 2 STATEMENT 35. 35. STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 0. 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 71,441 37 0 Total. Add lines 1 through 11 0 0. Compensation of officers, directors, trustees, etc. Other employee salaries and wages 15 Pension plans, employee benefits and Administrative Expenses 16a Legal fees STMT 3 3,385. 0. 0 **b** Accounting fees STMT 4 191 0. 0 c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion Occupancy 21 Travel, conferences, and meetings 22 Printing and publications Operating 23 Other expenses 24 Total operating and administrative expenses Add lines 13 through 23 3,576. 0 0 3,670 3,670 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 7,246 3,670. 0 0 Add lines 24 and 25

LHA For Paperwork Reduction Act Notice, see instructions

Form **990-PF** (2015)

0.

64,195

37.

27 Subtract line 26 from line 12:

& Excess of revenue over expenses and disbursements

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

For	m 99	0-PF (2015) THE KHANDWALA FAMILY FOU			L <b>595744</b> Page <b>2</b>
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
_			(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing Savings and temporary cash investments	26,205.	90,395.	90,395.
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶			
		Grants receivable	<del></del>		· · · · · · · · · · · · · · · · · · ·
	6	Receivables due from officers, directors, trustees, and other			
	_	disqualified persons			
	7	Other notes and loans receivable  Less: allowance for doubtful accounts			
ſΛ	8	Inventories for sale or use			
Assets	1	Prepaid expenses and deferred charges			
Asi		Investments - U.S. and state government obligations			
		Investments - corporate stock			
	l	Investments - corporate bonds			
	ł	Investments - land, buildings and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 6	1,498.	1,476.	1,470.
	14	Land, buildings, and equipment; basis			
		Less accumulated depreciation			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
_		instructions. Also, see page 1, item I)	27,703.	91,871.	91,865.
	l	Accounts payable and accrued expenses			
	18	Grants payable			
ies	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons		t	
Lia	21	Mortgages and other notes payable			
	22	Other liabilities (describe >)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_	20	Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
es	24	Unrestricted			
auc	25	Temporarily restricted			
Bal	26	Permanently restricted			
nd		Foundations that do not follow SFAS 117, check here		,	
Ę		and complete lines 27 through 31			
Net Assets or Fund Balances	27	Capital stock, trust principal, or current funds	0.	0.	
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
t As	29	Retained earnings, accumulated income, endowment, or other funds	27,703.	91,871.	
Š	30	Total net assets or fund balances	27,703.	91,871.	
			05 500	01 071	
	31	Total liabilities and net assets/fund balances	27,703.	91,871.	
F	art	III Analysis of Changes in Net Assets or Fund Ba	lances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line 3			
٠		st agree with end-of-year figure reported on prior year's return)		<b>1</b>	27,703.
2	•	r amount from Part I, line 27a		2	64,195.
3		er increases not included in line 2 (itemize)		3	0.
4		lines 1, 2, and 3		4	91,898.
5		reases not included in line 2 (itemize)	SEE STA	TEMENT 5 5	27.
6_	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 30	6	91,871.
					Form <b>990-PF</b> (2015)

523511 11-24-15

(a) List and desi 2-story brick w	cribe the kin varehouse; o	d(s) of property sold (e.g r common stock, 200 sh	ı., real estate, s. MLC Co.)		( <b>b)</b>   D	How ac - Purc - Dona	cquired hase ation		acquired lay, yr.)	(d) Date sold (mo., day, yr.)
1a								-		
b NC	)NE									
<u>C</u>		<del></del>								
d e	<del></del>	<del></del>		<u>.</u>					<del> </del>	
(e) Gross sales price		epreciation allowed (or allowable)		t or other basis xpense of sale			<u></u>		ain or (loss s (f) minus (	
a								·		
b	ļ						<del></del>			
<u>C</u>	-									<del> </del>
d		724-2-1-2-24-4								
Complete only for assets show	ing gain in c	olumn (h) and owned by	the foundation	on 12/31/69			(1	) Gains (C	Col. (h) gain	minus
(i) F.M.V. as of 12/31/69	(i	Adjusted basis as of 12/31/69	(k) Ex	cess of col. (i) col. (j), if any				. (k), but I	not less that (from col. (	n -0-) <b>or</b>
a										
b									····	
<u>C</u>					-					
<u>d</u>	<del></del>	· · · · · · · · · · · · · · · · · · ·	<del> </del>							-
<u>e</u>	<u> </u>	<u> </u>			$\overline{}$		Ι			
2 Capital gain net income or (net o	, ,	$\begin{cases} \text{ If gain, also ente} \\ \text{ If (loss), enter -0} \end{cases}$	)- ın Part I, lıne		}	2				
3 Net short-term capital gain or (lo if gain, also enter in Part I, line 8 if (loss), enter -0- in Part I, line 8	, column (c)		nd (6):		}	3				
Part V Qualification I	Jnder Se	ection 4940(e) for	r Reduced	Tax on Net	t Inv	estn	nent Inc	ome		
(For optional use by domestic priva	te foundatio	ns subject to the section	4940(a) tax on	net investment i	ncome	∍.)				
If section 4940(d)(2) applies, leave	this part bla	nk.								
Was the foundation liable for the se				•	rıod?					Yes X No
Enter the appropriate amount in					entries	 S.	·· · · · · · · ·			
(a) Base period years Calendar year (or tax year beginr		(b) Adjusted qualifying dis		Net value of no	(c)		-use assets		Distrib (col. (b) div	(d) oution ratio eided by col. (c))
2014		5	3,298.			1	0,321		**************************************	5.16403
2013			0.				1,023			.00000
2012			0.				0	1.		.00000
2011								-		
2010		· <u></u> · · · · ·							1	
<ul><li>2 Total of line 1, column (d)</li><li>3 Average distribution ratio for the</li></ul>	5 -voor hoo	o pariod - divida the total	on line 2 by 5	or by the numbe	r of vo	are		2		5.16403
3 Average distribution ratio for the the foundation has been in exist			on mie z by 5,	or by the numbe	i Ui ye	iai 3		3		1.72134
4 Enter the net value of noncharita	able-use ass	ets for 2015 from Part X,	line 5					4		27,978
5 Multiply line 4 by line 3								5		48,160
6 Enter 1% of net investment inco	ome (1% of F	Part I, liñe 27b)			-	-		6	_	0
7 Add lines 5 and 6								7		48,160
8 Enter qualifying distributions fro	om Part XII, I	ine 4						8		3,670
If line 8 is equal to or greater that See the Part VI instructions.	an line 7, che	eck the box in Part VI, line	e 1b, and comp	lete that part usi	ng a 1	% tax	rate.			

	990-PF (2015) THE KHANDWALA FAMILY FOUNDATION 4940(b), 4940(e), or 49		15957 <b>see</b> in			age 4
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)	İ				
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here  and enter 1%	1				1.
	of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	1				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
	Add lines 1 and 2	3				1.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5				1.
	Credits/Payments:	i				
a	2015 estimated tax payments and 2014 overpayment credited to 2015					
	Exempt foreign organizations - tax withheld at source					
	Tax paid with application for extension of time to file (Form 8868)	-				
	Backup withholding erroneously withheld 6d					
	Total credits and payments. Add lines 6a through 6d	7				0.
	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached	8				
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9				1.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be: Credited to 2016 estimated tax	11				
	rt VII-A Statements Regarding Activities					
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene ii	1			Yes	No
	any political campaign?		Ī	1a		X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	•		1b		X
-	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published					
	distributed by the foundation in connection with the activities.					
c	Did the foundation file Form 1120-POL for this year?		1	1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
•	(1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$					
۵	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
·	managers. > \$ 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
-	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or					
Ü	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		х
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		-	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		, <u></u>	5		X
J	If "Yes," attach the statement required by General Instruction T.		<u> </u>	_ <u></u> -		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
·	By language in the governing instrument, or					
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state</li> </ul>	aw				
	remain in the governing instrument?	u.,,		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		ŀ	7	X	
7	The foundation have at least \$5,000 in assets at any time during the year in 165, Complete Fart II, Con. (c), and Fart NV		ŀ	•		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
-	MI					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
·	of each state as required by General Instruction G? If "No," attach explanation			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 calen	dar	Ţ			
•	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV		1	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	_	-	<sup>-</sup> 10		X
			Forr	n <b>99</b> 0	)-PF	(2015)

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Pá	art VII-A Statements Regarding Activities (continued)			
			Yes	No
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	1	Х
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		х
13		13	Х	
	Website address ► N/A			
14	The books are in care of ▶ DR. SALIL KHANDWALA  Telephone no. ▶ 24879	8604	6	
	Located at ► 30205 HELMANDALE DRIVE, FRANKLIN, MI ZIP+4 ►4			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<b></b>	
••	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the		1	
	foreign country			
P	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required	<del></del>	-	
نت	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	$\neg$	Yes	No
4.	a During the year did the foundation (either directly or indirectly).			110
- 10	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No			
	(1) Engage in the sale of exchange, or leasing or property with a disqualified person.  (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?  Yes X No			
			ĺ	
	(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)?  Yes X 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 X No			
ļ	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?  N/A	1b	<del> </del>	
	Organizations relying on a current notice regarding disaster assistance check here			
•	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?	1c		х
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)):			
	a At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2015? Yes X No		Ì	
	If "Yes," list the years - ,,,,	ļ	Ì	
	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	Ì		
	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.) N/A	2b		
	c 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.			
	<b>&gt;</b>			
3	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	-	l	
	during the year?	1		
	b If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after	ŀ		
	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)  N/A	3b		
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	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		X
		Form <b>99</b>	0-PF	

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Part VII-B   Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)		<del></del> -
5a During the year did the foundation pay or incur any amount to:					İ
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 ""		es X No		
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indir		( <del></del>		
any voter registration drive?	.0		es X No	1	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Yo	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section	Г1	es X No		
4945(d)(4)(A)? (see instructions)  (5) Provide for any purpose other than religious, charitable, scientific, literary	or advectional purposes or		es La No		
the prevention of cruelty to children or animals?	, or educational purposes, or		es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the excentions described		s LALINU		
section 53.4945 or in a current notice regarding disaster assistance (see instru	•	in riegulations	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check i	•			-	<del>  -</del> -
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption if		uned			
expenditure responsibility for the grant?		J/A 🔲 Y	es No		
If "Yes," attach the statement required by Regulations section 53.494		.,		ł	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Ye	s X No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Y6	es 🗶 No		
b If "Yes," did the foundation receive any proceeds or have any net income attrib				7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors		anagers, Highly	y 		
1 List all officers, directors, trustees, foundation managers and their					
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) E	Expense unt, other wances
DR. SALIL KHANDWALA	OFFICER	Cite o j	compensation	uno	wantoos
30205 HELMANDALE DRIVE					
FRANKLIN, MI 48025	2.00	0.	0.		0.
	1				
	-				
		<u> </u>		<u> </u>	
	-			!	
	_		i	ĺ	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
	(b) Title, and average		(d) Contributions to employee benefit plans and deterred	(e) [	xpense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	accou allo	int, other wances
NONE		1			
				ĺ	
			<u> </u>		
	_				
		<u> </u>		<b></b>	
	-				
		<u> </u>		-	·····
	-				
Total number of other embloyees paid over \$50,000		<del></del>			0

Total. Add lines 1 through 3

P	art X . Minimum Investment Return (All domestic foundations must complete this part. Foreign for	undations, see	instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	T [	
a	Average monthly fair market value of securities	1a	1.476.
b		1b	1,476. 26,928.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	28,404.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0	.	
2	Acquisition indebtedness applicable to line 1 assets		0.
3	Subtract line 2 from line 1d	3	28,404.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	426.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	27,978.
6	Minimum investment return. Enter 5% of line 5	6	1,399.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a	and certain	
	foreign organizations check here  and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	1,399.
2a	Tax on investment income for 2015 from Part VI, line 5	<u>-</u>	
b	Income tax for 2015. (This does not include the tax from Part VI.)	_	
C		2c	<u>1.</u>
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,398.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,398.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,398.
	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	3,670.
b	Program-related investments - total from Part IX-B	1b	0.
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:		
a	Suitability test (prior IRS approval required)	3a	
þ	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	3,670.
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	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	3,670.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for the	section

Form **990-PF** (2015)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

,	(a) Corpus	(b) Years prior to 2014	(c) 2014	( <b>d)</b> 2015
1 Distributable amount for 2015 from Part XI,				
line 7				1,398.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0.	
b Total for prior years:				
· · · · · · · · · · · · · · · · · · ·		0.		
3 Excess distributions carryover, if any, to 2015:				
<b>a</b> From 2010				
<b>b</b> From 2011				
c From 2012				
d From 2013				
e From 2014 52,735.				
f Total of lines 3a through e	52,735.	<del></del>		
4 Qualifying distributions for 2015 from				
Part XII, line $4^{\circ} \triangleright \$$ 3,670.				
a Applied to 2014, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	_			
(Election required - see instructions)	0.	<del></del>		
d Applied to 2015 distributable amount				1,398.
e Remaining amount distributed out of corpus	2,272.			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	55,007.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.	· · · · · · · · · · · · · · · · · · ·		0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016		<del></del>		0.
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)	0.			
8 Excess distributions carryover from 2010	_			
not applied on line 5 or line 7	0.	· · · · · · · · · · · · · · · · · · ·		
9 Excess distributions carryover to 2016.	- FF 00F	<i>,</i>	_ =	
Subtract lines 7 and 8 from line 6a	55,007.			
10 Analysis of line 9:				
a Excess from 2011				
b Excess from 2012				
c Excess from 2013				
d Excess from 2014 52,735.				
e Excess from 2015 2,272.		*		50 000 DE (0045)

523581 11-24-15

523811 11-24-15

\*\* SEE PURPOSE OF GRANT CONTINUATIONS

nter-gross amounts unless otherwise indicated.	Unrelated b	usiness income		y section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
Program service revenue:	code	Amount	sion code	Amount	function income
a		<del>, , ,</del>			
b					
C	1				
d					
e					
f		-			
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash					
investments			14	2.	
Dividends and interest from securities			14	35.	
Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal					
property					
Other investment income			14		
Gain or (loss) from sales of assets other					
than inventory					
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:					
a					
b	_				
c					
d	_				
e					·
Subtotal. Add columns (b), (d), and (e)		0	•		
Total. Add line 12, columns (b), (d), and (e)				13	3
ee worksheet in line 13 instructions to verify calculations.	)	·			
Part XVI-B Relationship of Activities	s to the Accom	plishment of E	Exempt P	urposes	
ine No. Explain below how each activity for which in	ncome is reported in c	olumn (e) of Part XVI	-A contributed	importantly to the accomp	olishment of

npt purposes (other than			******		
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# Form 990-PF (2015) THE KHANDWALA FAMILY FOUNDATION 46-1595744 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations**

N/A  2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52??  If yes, complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  Sign and belief, it is true/porrect, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge in the continuous organization of the popular		e organization directly or indir					tion 501(c) of		Yes	No
(9) Other assets    Chief transactions:		` ' '				nzations?				
(2) Other assets (3) Sales of assets from a noncharitable exempt organization (4) Sales of assets from a noncharitable exempt organization (5) Hential of lepities, equipment, or other assets (5) Hential of lepities, equipment, or other assets (6) Reformance of services or membership or fundrasing solicitations (6) Lears or from guarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Hential or lepities, equipment, mainting lists, other assets, or paid employees (6) If the answer for any of the above is Yes, "complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services received.  (6) Amount involved (6) Amount involv		·	ition to a noncharitat	ne exempt org	janization of:					7.7
b Other transactions; (1) Sales of assets to a noncharitable exempt organization (2) Perubhases of assets from a noncharitable exempt organization (3) Herial of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or ioan guarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) Sales of loan got ioan guarantees (8) Performance of services or membership or fundrasing solicitations (8) This is a service of services or membership or fundrasing solicitations (8) This is a service of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services organization (1) Performance of the goods, other assets, or services greatered to any transaction or sharing arrangement, show in column (9) Perservices of the goods, other assets, or services received.  (9) Amount involved (9) Name of inoncharitable exempt organization (9) Description of treatment, show in section 501(c) of the Cool (other than section 501(c)(3)) or in section 52??  (1) Amount involved (1) Amount	` '									
(1) Sales of assets from a nonchartable exempt organization (2) Purchases of assets from a nonchartable exempt organization (3) Rential of facilities, suppressing a rangements (4) Remitturement arrangements (5) Lears no from guarantees (6) Lears no from guarantees (6) Lears no from guarantees (6) Lears no from guarantees (7) Sharing of Solities, equipment, mailing lists, other assets, or paid employes (8) It the answer to any of the above is Yes, complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services roceved.  2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 50 ft(c) 3) and in section 50 ft(c) 3) or in section								1a(2)		
(2) Peruthases of assess from a noncharable exempt organization  (3) Rental of facilities, equipment, or other assets  (4) Reinbursement arrangements  (5) Loans or loan guarantees  (6) Performance of services or membership or fundrasing solicitations  (7) Rental of the profit of services or membership or fundrasing solicitations  (8) Rental of Loans or loan guarantees  (8) Performance of services or membership or fundrasing solicitations  (9) Performance of services or membership or fundrasing solicitations  (9) Rental of Loans or loans guarantees  (10) It loans or loans guarantees  (11) It loans or loans guarantees  (12) It loans or loans guarantees  (13) It loans or loans guarantees  (14) It loans or loans guarantees  (15) Loans or loans guarantees  (16) Amount make the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services received. Solicit assets, or services graves or services graves or services graves or services graves or services graves.  (16) Amount myolved  (17) Amount myolved  (18) Amount myolved  (19) Amount myolved  (19) Amount myolved  (20) Amount myolved  (21) Name of organization  (22) It loans the following schedule.  (3) Name of organization  (4) Description of relationship  (5) Loans the following schedule.  (6) Amount myolved  (7) Type of organization  (8) Type of organization  (9) Type of organization  (19) Description of relationship  (19) Type of organization  (19) Type of organization  (19) Description of relationship  (19) Type of organization  (19) Description of relationship  (19) Type of organization  (19) Type of organization  (19) Description of relationship  (19) Type of organization			nla avamnt organizat	ion				15/1		v
(4) Rembursement arrangements (5) Loans or toward guarantees (6) Performance of services or membership or fundralising solicitations (6) Performance of services equipment, maining lasts, other assets, or paid employees (7) In the answer to any of this above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services growen by the reporting foundation. If the foundation recovered less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services recoved.  (8) Amount involved (9) Amount involved (10) Name of noncharitable exempt organization (10) Amount involved (10) Amount involved (10) Name of noncharitable exempt organization (10) Description of transfers, transactions, and animary arrangements (11) N/A  22 is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52??  23 is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52??  24 is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52??  25 is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52??  26 is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52??  27 is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in the section 501(c) or indirectly aff	٠, ٠		· -							<u>~</u>
(4) Rembursement arrangements (5) Loans or toward guarantees (6) Performance of services or membership or fundralising solicitations (6) Performance of services equipment, maining lasts, other assets, or paid employees (7) In the answer to any of this above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services growen by the reporting foundation. If the foundation recovered less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services recoved.  (8) Amount involved (9) Amount involved (10) Name of noncharitable exempt organization (10) Amount involved (10) Amount involved (10) Name of noncharitable exempt organization (10) Description of transfers, transactions, and animary arrangements (11) N/A  22 is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52??  23 is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52??  24 is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52??  25 is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52??  26 is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52??  27 is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in the section 501(c) or indirectly aff	, .		•	gamzanon						<u>~</u>
(6) Performance of services or membership or fundrasing solicitations  (8) Performance of services or membership or fundrasing solicitations  (9) Performance of services or membership or fundrasing solicitations  (9) Individual of the above is "Yes", complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services received.  (9) Individual of the goods, other assets, or services received.  (9) Name of the poods, other assets, or services received.  (9) Name of the poods, other assets, or services received.  (9) Name of the poods, other assets, or services received.  (9) Name of the poods, other assets, or services received.  N/A  (9) Name of the poods, other assets, or services received.  N/A  (9) Name of the poods, other assets, or services received.  N/A  (9) Name of the poods, other assets, or services received.  N/A  (9) Name of the poods, other assets, or services received.  N/A  (10) Description of transfers, two-sections, and sharing arrangements.  (10) Description of transfers, two-sections, and sharing arrangements.  N/A  (11) Description of transfers, two-sections, and sharing arrangements.  (12) Name of the poods, other assets, or services received.  (13) Name of code (other than section 501(c)(3)) or in section 527?  (14) Description of transfers, two-sections, and sharing arrangements.  (15) Name of code (other than section 501(c)(3)) or in section 527?  (15) If "Yes, complete the following schedule.  (16) Description of relationship.  N/A  (17) Perfect discussion for a market value in any translation of the best of my knowledge in a market value in any translation of the best of my knowledge in a market value in any translation of the best of my knowledge in a market value in any translation of the best of my knowledge in a market value in any translation of the best of my knowledge in a market value in any translation of the best of my knowledge in any translation of the poods and in defendance and statements, and to the best of my know	٠,		or other assets							X X
(e) Performance of services or membership or fundrasing solicitations experience imaginal pats, other assets, or pate dentities, equipment, maintiple states, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (g) the value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (g) the value of the goods, other assets, or services received.  a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) pescription of transfers, transactions, and sharing arrangements in section 501(c) of the Code (other than section 501(c)(3)) or in section 501(c) of the Code (other than section 501(c)(3)) or in section 501(c) of the Code (other than section 501(c)(3)) or in section 501(c) of the Code (other than section 501(c)(3)) or in section 501(c) of the Code (other than section 501(c)(3)) or in section 501(c) of the Code (other than section 501(c)(3)) or in section 501(c) of the Code (other than section 501(c)(3)) or in section 501(c) of the Code (other than section 501(c)(3)) or in section 501(c) of the Code (other than section 501(c)(3)) or in section 501(c) of the Code (other than section 501(c)(3)) or in section 501(c) of the Code (other than section 501(c)(3)) or in section 501(c) of the Code (other than section 501(c)(3)) or in section 501(c) of the Code (other than section 501(c)(3)) or in section 501(c) of the Code (other than section 501(c)(3)) or in section 501(c) of the Code (other than section 501(c)(3)) or in section 501(c) of the Code (other than section 501(c)(3)) or in section 501(c) of the Code (other than section 501(c)(3)) or in section 501(c) of the Code (other than section 501(c)(3)) or in section 501(c) of the Code (other than section 501(c)(3)) or in section 501(c) of the Code (other 501(c) of the Code (other 501(c) of the Code (o	, ,	<del>-</del>								X
c Shamp of Scolites, equipment, mailing lists, other assets, or paid employees  d if the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.  (b) Amount involved  (c) Name of noncharriable exempt organization  (d) Description of transfers, transactions, and sharing arrangements  N/A  (e) Name of noncharriable exempt organization  (f) Amount involved  (g) Amount involved  (g) Amount involved  (h) Amount involved  (g) Amount involved  (g) Name of noncharriable exempt organization  (g) Description of transfers, transactions, and sharing arrangements  N/A  (g) Cascription of transfers, transactions, and sharing arrangements  N/A  (g) Description of relationship involved in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  (g) No  If Yes, complete the following schedule.  (g) Name of organization  (g) Description of relationship  N/A  (g) Description o	` '	•	mbership or fundrais	sing solicitatio	ns					
d if the answer to any of the above is Yes, 'complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or stranger arrangement, show in column (d) the value of the goods, other assets, or services received.    (a) Amount involved   (b) Name of noncharitable exempt organization   (d) description of transfers, transactions, and sharing arrangements.    (a) Amount involved   (b) Name of noncharitable exempt organization   (d) description of transfers, transactions, and sharing arrangements.    (a) Amount involved   (b) Name of noncharitable exempt organization of transfers, transactions, and sharing arrangements.    (a) Amount involved   (b) Name of noncharitable exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52??   Yes   X No										
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(c) Name of noncharitable exempt organization  (d) Description of transactions, and sharing amangements  N/A  2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)3) or in section 527?  Yes X No bill Yes, complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A    Description of relationship  N/A    Description of relationship   N/A    Description of relationship   N/A   Desc		-					=		,	
N/A  2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  If 'Yes,' complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  Sign and belief, it is true foundation of preparer (other than taxpayer) is based on all information of which preparer as any knowledge where the control of the code (other than taxpayer) is based on all information of which preparer as any knowledge where the control of the code (other than taxpayer) is based on all information of which preparer as any knowledge where the control of the code (other than taxpayer) is based on all information of which preparer as any knowledge where the control of the code (other than taxpayer) is based on all information of which preparer as any knowledge where the control of the code (other than taxpayer) is based on all information of which preparer as any knowledge where the code in the code (other than taxpayer) is based on all information of which preparer as any knowledge where the code in the code (other than taxpayer) is based on all information of which preparer as any knowledge where the code in the code (other than taxpayer) is based on all information of which preparer as any knowledge where the code in the code (other than taxpayer) is based on all information of which preparer as any knowledge where the code (other than taxpayer) is based on all information of which preparer as any knowledge where the code (other than taxpayer) is based on all information of which preparer as any knowledge where the code (other than taxpayer) is based on all information of which preparer than the code (other than taxpayer) is based on all information of which preparer as any knowledge where the code (other than taxpayer) is based on all information of which preparer than the preparer than taxpayer to be code (other than taxpayer) in the code (		·				•				
2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Junder perallities of giplary, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge   Many the IRS discuss the return with the preparer stand belief, it is they/correct, and complete. Declaration of preparer (other than tax-payer) is based on all information of which preparer has any knowledge   Many the IRS discuss the return with the preparer signature   11/3/2016   OFFICER   Title	a) Line no	(b) Amount involved	(c) Name of	noncharitable	exempt organization	(d) Descriptio	n of transfers, transactions, and s	haring arra	angeme	nts
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   X   No				N/A						
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Ves										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Ves										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Ves										
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In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Ves					<del> </del>					
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In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?		<del></del>					<del> </del>			
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In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?		<del></del>		-	<del></del>		<del></del>			
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?		<u> </u>		.1.1.1.1						
Sign   Description of relationship   N/A			•			izations described		٦,,,,	37	٦.,
(a) Name of organization  N/A    Description of relationship   N/A		• • • • • • • • • • • • • • • • • • • •	` '	(3)) or in sect	ion 52/?		L	Yes	LX.	_ No
N/A  Sign Here  Under penalties of p@jury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true/correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge shown below (see mstr)?  Signature of officer or trustee  Print/Type preparer's name  Preparer  Use Only  UNEIL P. DESAI  Firm's name ► MARTIN, ARRINGTON, DESAI & MEYERS, PC  Firm's elin ► 38 - 2071689  Firm's address ► 30200 TELEGRAPH RD., STE. 444  BINGHAM FARMS, MI 48025  Phone no. 248-645-5370	b if Yes				(h) Type of organization	T	(a) Description of relationsh			
Under penalties of polyury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true/correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge shown below (see inst; )?    No		<del></del>	nation .		(b) Type of organization	<del>                                     </del>	(c) Description of relationsh	יקו		
Sign   And belief, it is true/correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge   May the IRS discuss this return with the preparer shown below (see instr.)?   X Yes		N/A					· · · · · · · · · · · · · · · · · · ·		-	
Sign   And belief, it is true/correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge   May the IRS discuss this return with the preparer shown below (see instr.)?   X Yes						<del> </del>	<del></del>	_		
Sign   And belief, it is true/correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge   May the IRS discuss this return with the preparer shown below (see instr.)?   X Yes					<u> </u>	<del></del>				
Sign   And belief, it is true/correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge   May the IRS discuss this return with the preparer shown below (see instr.)?   X Yes	<del></del>					<del> </del>	<del> </del>			
Sign Here    Manufactural	Ū	nder penalties of perjury, I declare t	that I have examined this	s return, includin	g accompanying schedules and	statements, and to the	best of my knowledge			=
Here Signature of officer or trustee Date Title  Print/Type preparer's name Preparer's signature Date Check if self- employed Prim's name ► MARTIN, ARRINGTON, DESAI & MEYERS, PC Firm's EIN ► 38-2071689  Firm's address ► 30200 TELEGRAPH RD., STE. 444  BINGHAM FARMS, MI 48025 Phone no. 248-645-5370	Sign	nd belief, it is true correct, and con	nplete Declaration of pro	eparer (other than	n taxpayer) is based on all inform	nation of which prepare	retur	n with the	prepare	er e
Paid Print/Type preparer's name  Preparer's signature  NEIL P. DESAI Preparer Use Only  Firm's address ▶ 30200 TELEGRAPH RD., STE. 444 BINGHAM FARMS, MI 48025  Date  Title  Check ☐ If PTIN self- employed PO0041037  Prim's EIN ▶ 38-2071689  Phone no. 248-645-5370	Here	Thand	rala		11/8/2016	OFFIC	ER Snov	<b>-</b> 71	see inst	7 I
Paid Preparer Use Only  Pirm's address ► 30200 TELEGRAPH RD., STE. 444  BINGHAM FARMS, MI 48025  Bingham Farms, MI 48025  Self- employed  P00041037  Pond VISC Self- employed  P00041037  Prim's EIN ► 38-2071689  Phone no. 248-645-5370		Signature of officer or trustee	<del></del>							, 140
Paid Preparer Use Only  Pirm's address ► 30200 TELEGRAPH RD., STE. 444  BINGHAM FARMS, MI 48025  Bingham Farms, MI 48025  Self- employed  P00041037  Pond VISC Self- employed  P00041037  Prim's EIN ► 38-2071689  Phone no. 248-645-5370		<del></del>		Preparer's s		····	Check If PTIN			
Paid Preparer Use Only    NEIL P. DESAI   QQQ (QQQQ   V   V   V   V   V   V   V   V   V		j		. ~ -	~ 0 C A		<u> </u>			
Preparer Use Only  Firm's name ► MARTIN, ARRINGTON, DESAI & MEYERS, PC  Firm's address ► 30200 TELEGRAPH RD., STE. 444  BINGHAM FARMS, MI 48025  Phone no. 248-645-5370	Paid	NEIL P. DE	SAI	IN WO (	)V (D(BUXXV)	14/8/16		0410	37	
Use Only    Firm's address   30200 TELEGRAPH RD., STE. 444	Prepar			NGTON.	DESAI & MEY	ERS. PC				
BINGHAM FARMS, MI 48025 Phone no. 248-645-5370	Use Or		,	,		, <b>-</b> -			-	
BINGHAM FARMS, MI 48025 Phone no. 248-645-5370		Firm's address ► 30	200 TELEG	RAPH R	D., STE. 444			_		
		1					Phone no. 248-64	<u>5-5</u> 3	<u>370</u>	
		· <del></del>								(2015)

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

Department of the Treasury Internal Revenue Service

## **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.lrs.gov/form990.

OMB No 1545-0047

2015

Name of the organization

**Employer identification number** 

T	HE KHANDWALA FAMILY FOUNDATION	46-1595744
Organization type (check	one):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	·
	n is covered by the <b>General Rule</b> or a <b>Special Rule.</b> c)(7), (8), or (10) organization can check boxes for both the General Rule and a Specia	al Rule. See instructions.
X For an organization	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions tot ny one contributor. Complete Parts I and II. See instructions for determining a contrib	
Special Rules		
sections 509(a)(1 any one contribu	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% supply and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, stor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the art IZ, line 1 Complete Parts I and II	16a, or 16b, and that received from
year, total contrib	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received figurations of more than \$1,000 exclusively for religious, charitable, scientific, literary, or efficively to children or animals. Complete Parts I, II, and III	
year, contributior is checked, enter purpose Do not	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received fins exclusively for religious, charitable, etc., purposes, but no such contributions totaler here the total contributions that were received during the year for an exclusively religions complete any of the parts unless the <b>General Rule</b> applies to this organization becauble, etc., contributions totaling \$5,000 or more during the year	ed more than \$1,000 If this box group, charitable, etc.,
but it must answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedon Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on ite the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

### THE KHANDWALA FAMILY FOUNDATION

46-1595744

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed (a) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution KHANDWALA 2012 GRANTOR CHARITABLE LEAD 1 ANNUITY TRUST Person Payroll 30205 HELMANDALE DRIVE 24,939. Noncash (Complete Part II for FRANKLIN, MI 48025 noncash contributions.) (b) (a) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. KHANDWALA 2013 GRANTOR CHARITABLE LEAD 2 ANNUITY TRUST Person Payroll 15,290. Noncash 30205 HELMANDALE DRIVE (Complete Part II for noncash contributions.) FRANKLIN, MI 48025 (b) (c) (d) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. KHANDWALA 2014 CHARITABLE LAT UAD 3 6/17/14 Person Payroll 31,175. Noncash 30205 HELMANDALE DRIVE (Complete Part II for FRANKLIN, MI 48025 noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Pavroll Noncash (Complete Part II for noncash contributions) (a) (c) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Payroll Noncash (Complete Part II for noncash contributions) (b) (c) (d) (a) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person Payroll Noncash (Complete Part II for

noncash contributions)

Employer identification number

# THE KHANDWALA FAMILY FOUNDATION

46-1595744

Part II	Noncash Property (see instructions). Use duplicate copies of P	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
1			 990, 990-EZ, or 990-PF)

ame of orga	nization		Employer identification number
HE KHA	the year from any one contributor. Complete of	ributions to organizations described in columns (a) through (e) and the follows	46-1595744  a section 501(c)(7), (8), or (10) that total more than \$1,000 for ng line entry. For organizations
	completing Part III, enter the total of exclusively religious	s, charitable, etc., contributions of \$1,000 or le	ss for the year (Enter this info once) > \$
(a) No.	Use duplicate copies of Part III if addition	al space is needed	
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, ar	nd ZIP + 4	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
-		(e) Transfer of gift	
_	Transferee's name, address, ar	nd ZIP + 4	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
-		(e) Transfer of gift	
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
(a) No.			
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, ar	(e) Transfer of gift	Relationship of transferor to transferee
-			

FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	PORARY CASH	INVESTMENTS	STATEMENT 1	
SOURCE		(A REVE PER B	NUE NET	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME	
CIG SECURITIES, INC	7370-881	2	2.		2.	
TOTAL TO PART I, LI	INE 3				2.	
FORM 990-PF	DIVIDEND	S AND INTER	EST FROM SE	CURITIES	STATEMENT 2	
GROSS SOURCE AMOUNT		CAPITAL GAINS DIVIDEND	REVENU	E NET INVE	/EST- ADJUSTED	
CIT SECURITIES, INC. TR6-008304	35	•	0.	35.	35. 35.	
TO PART I, LINE 4	35	•	0.	35.	35. 35.	
FORM 990-PF		ACCOUNTI	NG FEES		STATEMENT 3	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM			
ACCOUNTING/TAX PREF	ARATION	3,385.		0.	0. 0.	
TO FORM 990-PF, PG	1, LN 16B	3,385.		0.	0. 0.	
FORM 990-PF	0	THER PROFES	SIONAL FEES		STATEMENT 4	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM			
INVESTMENT ADVISORY	FEES -	191.	<del></del>	0.	0. 0.	
TO FORM 990-PF, PG	1, LN 16C	191.		0.	0. 0.	
	=					

FORM 990-PF	OTHER	DECREASES	IN NE	T ASSETS	OR FUND	BALANCES	STATEMENT	5
DESCRIPTION							AMOUNT	
UNRELEAZIED GA	INS(LOS	SSES) ON I	NVESTM	ENT				27.
TOTAL TO FORM	990-PF	PART III	, LINE	5				27.
FORM 990-PF			OTHER	INVESTME	NTS		STATEMENT	6
FORM 990-PF DESCRIPTION			OTHER	INVESTMENT VALUATION METHOD	ON	OOK VALUE	STATEMENT FAIR MARKE VALUE	
	D PRODU	JCTS	OTHER	VALUATI(	ON	OOK VALUE 1,476.	FAIR MARKE VALUE	