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DLN: 93491062000076

OMB No 1545-0052

**50rm** 990-PF

Department of the Treasury

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.

**Return of Private Foundation** 

Open to Public Inspection

▶ Information about Form 990-PF and its instructions is at <a href="https://www.irs.gov/form990pf">www.irs.gov/form990pf</a>. Internal Revenue Service For calendar year 2015, or tax year beginning 01-01-2015 , and ending 12-31-2015 A Employer identification number Name of foundation KOTHARI FOUNDATION 47-1489539 BTelephone number (see instructions) Number and street (or P O box number if mail is not delivered to street address) 2809 MADONNA DRIVE (714) 526-6316 C If exemption application is pending, check here ▶ City or town, state or province, country, and ZIP or foreign postal code FULLERTON, CA 92835 G Check all that apply Initial return of a former public charity Initial return D 1. Foreign organizations, check here Final return Amended return  $\textbf{2.} \ \ \text{Foreign organizations meeting the } 85\%$ Name change Address change test, check here and attach computation If private foundation status was terminated **H** Check type of organization  $\checkmark$  Section 501(c)(3) exempt private foundation under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation **J**Accounting method IFair market value of all assets at end If the foundation is in a 60-month termination Cother (specify) under section 507(b)(1)(B), check here of year (from Part II, col. (c), (Part I, column (d) must be on cash basis.) line 16) ►\$ 0 Part I Analysis of Revenue and Expenses Disbursements Revenue and Net investment Adjusted net for charitable (The total of amounts in columns (b), (c), and (d) may not expenses per ıncome necessarily equal the amounts in column (a) (see (b) (c) purposes income books (d) (cash basis only) instructions)) Contributions, gifts, grants, etc , received (attach 1 2 Check ► ☐ If the foundation is **not** required to attach . . . . . . . . . . . . . 3 Interest on savings and temporary cash investments 1,994 1,994 1,994 Dividends and interest from securities Gross rents . . . . . . . . . . 5a Net rental income or (loss) \_ b Net gain or (loss) from sale of assets not on line 10 15,580 6a Revenue Gross sales price for all assets on line 6a 54,532 15,580 Capital gain net income (from Part IV, line 2) . . . Net short-term capital gain . . . 8 Income modifications . . . 10a Gross sales less returns and allowances Less Cost of goods sold . . . . b Gross profit or (loss) (attach schedule) . . C 11 Other income (attach schedule) . . . . . . Total. Add lines 1 through 11 17,574 17,574 1,994 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages . . . 15 Pension plans, employee benefits . . Operating and Administrative Expenses Legal fees (attach schedule). . . . . 16a Accounting fees (attach schedule). . . . b Other professional fees (attach schedule) . c **17** 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion . 20 21 Travel, conferences, and meetings. 22 Printing and publications . . 23 Other expenses (attach schedule). 24 Total operating and administrative expenses. Add lines 13 through 23 . . . . 25 Contributions, gifts, grants paid . . . . . . 0 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 17,574 Excess of revenue over expenses and disbursements а 17,574 Net investment income (if negative, enter -0-)

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

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	(a) Book value	(B) Book Value	(e) Full Flurice Value
	2	Savings and temporary cash investments	67,477	85,051	_
	3	Accounts receivable •	,	,	
	•	Less allowance for doubtful accounts 🕨			
	4	Pledges receivable			
	-	Less allowance for doubtful accounts 🕨			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	Ū	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
	•	Less allowance for doubtful accounts 🟲			
	8	Inventories for sale or use			
왍	9	Prepaid expenses and deferred charges			
Assets	10a	Investments—U S and state government obligations (attach			
∢	100	schedule)			
	b	Investments—corporate stock (attach schedule)			
	C	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis 🟲			
		Less accumulated depreciation (attach schedule) -			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis 🟲			
		Less accumulated depreciation (attach schedule) -			
	15	O ther assets (describe 🟲)			
	16	<b>Total assets</b> (to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	67,477	85,051	0
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Ě	19	Deferred revenue			
bilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Lial	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe 🟲)			
	23	Total liabilities(add lines 17 through 22)		0	
۰.۵		Foundations that follow SFAS 117, check here 🕨 🦵			
ě		and complete lines 24 through 26 and lines 30 and 31.			
an	24	Unrestricted			
Ba	25	Temporarily restricted			
핃	26	Permanently restricted			
or Fund Balances		Foundations that do not follow SFAS 117, check here 🕨 🔽	T		
5		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	67,477	85,051	
Net	30	Total net assets or fund balances(see instructions)	67,477	85,051	
	31	Total liabilities and net assets/fund balances(see instructions)	67,477	85,051	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
1		Total net assets or fund balances at beginning of year—Part II, column	(a), line 30 (must agi	ee	
		with end-of-year figure reported on prior year's return) $\dots$		1	67,477
2		Enter amount from Part I, line 27a		2	17,574
3		Other increases not included in line 2 (itemize)		_ 3	
4		Add lines 1, 2, and 3		4	85,051
5		Decreases not included in line 2 (itemize)		_ 5	
6		Total net assets or fund balances at end of year (line 4 minus line 5)—P	art II, column (b), lin	e 30 <b>. 6</b>	85,051

	0-PF (2015)								Page <b>3</b>
Part I	V Capital Gains a	nd Los	ses for Tax on Inve	estment Incor	ne				T
			) of property sold (e g , r common stock, 200 sh		(b	How acquired P—Purchase D—Donation	ו ט	ate acquired no , day, yr )	Date sold (d) (mo , day, yr )
1 a	MERRILL LYNCH					P	20:	15-01-01	2015-12-31
b	MERRILL LYNCH					Р	200	00-01-01	2015-12-31
С С									
d									
e									
(e) Gross sales price			Depreciation allow <b>(f)</b> (or allowable)			other basis ense of sale			n or (loss) (f) mınus (g)
а		3,780				3,89	1		-111
b	5	0,752				35,06	1		15,691
С									
d									
е									
Con	nplete only for assets s	howing ga	ıın ın column (h) and owr	ed by the foundat	ion or	12/31/69		Gains (Col	(h) gaın mınus
(i) I	M V as of 12/31/69		Adjusted basis			s of col (ı)		ol (k), but no	ot less than -0-) <b>or</b>
			<b>(j)</b> as of 12/31/69	(k) o	verco	ol (j), if any	(1)	Losses	(from col (h))
a									-111
b									15,691
c									
d									
e									
2	Capital gain net incom	ne or (net	capital loss)	If gain, also ent If (loss), enter -			2		15,580
3	Net short-term capita	l gaın or (	loss) as defined in secti	ons 1222(5) and	(6)				
	If gain, also enter in P in Part I, line 8 .	art I , lıne	8, column (c) (see instr	uctions) If(loss)	, ente	r-0- •	3		-111
Part \	Oualification U	nder Se	ection 4940(e) for	Reduced Tax	on N	et Investme	-	come	
(For opti		rıvate fou	ndations subject to the s						
Was the	foundation liable for the	section •	4942 tax on the distribu inder section 4940(e) [				eriod?		┌ Yes ┌ No
1 Ente		int in eacl	h column for each year, s	see instructions b	efore	making any ent	ries		
	(a) period years Calendar r tax year beginning in)	Adjuste	<b>(b)</b> ed qualifying distributions	Net value of none	(c) charitab	le-use assets	(	(d) Distributio (col (b) divideo	n ratio
	2014								
	2013								
	2012								
	2011			1					
	Z010	(4)					<u> </u>		
_	•		· · · · · · · · · · · · · · · · · · ·			<u> </u>	2		
3 4	the number of years th	ne founda	tion has been in existend table-use assets for 201	e if less than 5 y	ears		3 4		
5 Multiply line 4 by line 3				-		_	5		
6			ome (1% of Part I, line i			<u> </u>	6		
7				-		<b>⊢</b>	7		
8			om Part XII, line 4.			<u> </u>	8		
	If line 8 is equal to or						<u> </u>		

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(b)	940(e),	or 4948—see p	oage	18 of	the inst	tructio	ons)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	<b>►</b> ┌		)					
	Date of ruling or determination letter			Ų					
	(attach copy of letter if necessary-see instructions)								
b	Domestic foundations that meet the section 4940(e) requirements in Part V			JL	1				351
	here Fand enter 1% of Part I, line 27b								
c	All other domestic foundations enter 2% of line 27b Exempt foreign organization Part I, line 12, col (b)	ations e	enter 4% of						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable four	ndations	s only Others		2				
3	enter -0 - ) Add lines 1 and 2			H	3				351
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable fou enter -0-)	ndation	s only Others		4				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, e	enter - 0			5				351
6	C redits/P ayments	_							
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a							
b	Exempt foreign organizations—tax withheld at source	6b							
C	Tax paid with application for extension of time to file (Form 8868)	6с							
d	Backup withholding erroneously withheld	6d							
7	Total credits and payments Add lines 6a through 6d				7				
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2				8				
9	Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed .			▶	9				351
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amoun	nt overp	oaid	•	10				
11	Enter the amount of line 10 to be Credited to 2015 estimated tax		Refunded	•	11				
Par	t VII-A Statements Regarding Activities								
1a	During the tax year, did the foundation attempt to influence any national, state	e, or loc	al legislation o	r dıd				Yes	No
	it participate or intervene in any political campaign?			•			1a	+	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for production)?						1b		No
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities	and co	pies of any mate	erials	;				
	published or distributed by the foundation in connection with the activities.								
C	Did the foundation file <b>Form 1120-POL</b> for this year?								
d	Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year								
	(1) On the foundation 🕨 \$ (2) On foundation managers			_					
е	Enter the reimbursement (if any) paid by the foundation during the year for pol	itical ex	xpenditure tax	ımpo	sed				
	on foundation managers 🕨 \$								
2	Has the foundation engaged in any activities that have not previously been re	ported 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 i	_	_	-	rticles	5			
_	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conf				•		3	+	No
4a	Did the foundation have unrelated business gross income of \$1,000 or more of	_					4a	+	No
ь -	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?						4b	+-	No
5	Was there a liquidation, termination, dissolution, or substantial contraction du	iring the	e year	•			5		No
6	If "Yes," attach the statement required by General Instruction T.  Are the requirements of section 508(e) (relating to sections 4941 through 49	14 E \ c a t	ticfied oither						
O	By language in the governing instrument, or	43)50	cisiled eltilei						
	By state legislation that effectively amends the governing instrument so the state of the s	nat no m	nandatory direc	tions	5				
	that conflict with the state law remain in the governing instrument?						6		No
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)						
	<b>&gt;</b>			_					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form $9^\circ$								
	General (or designate) of each state as required by General Instruction G? $\it If$						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			rt XI	V )?				
4.0	If "Yes," complete Part XIV						9	+	No
10	Did any persons become substantial contributors during the tax year? If "Yes,			_			10		Na
	and addresses.	• •		•			10		No

Par	Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ► <u>N/A</u>			
14	The books are in care of ►SONNY KOTHARI Telephone no ►(714	) 526	-6316	
	Located at \$\infty\$2809 MADONNA DRIVE FULLERTON CA ZIP+4 \$\infty\$92835			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here		▶ □	-
13	and enter the amount of tax-exempt interest received or accrued during the year	•	- ,	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	مما	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			· ·
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	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 V No			
ь	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations			
_	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		No
	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		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2015?			
	If "Yes," list the years > 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		No
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			
	▶ 20, 20, 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
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 May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	If the foundation had excess business holdings in 2015.).	3b		No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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	1	No

Pai	Statements Rega	rding Activities for	Which Fe	orm 4/20	мау	Be Required (Cont	inue	a)			
5a	During the year did the foundation	n pay or incur any amoun	t to								
	(1) Carry on propaganda, or other	wise attempt to influenc	e legislation	(section 49	45(e	))? <b> </b>	√ No				
	(2) Influence the outcome of any	specific public election (	see section	4955), or to	carr	У					
	on, directly or indirectly, any						- No				
	(3) Provide a grant to an individu					Γ Yes Γ					
	(4) Provide a grant to an organiza		•	•	scrib						
	in section 4945(d)(4)(A)? (se						- No				
	(5) Provide for any purpose other				•	,,					
	educational purposes, or for t	- ·	·			Г Yes 🗟	- No				
ь	If any answer is "Yes" to 5a(1)-(					, ,					
-	Regulations section 53 4945 or i							5b	No		
						<u>_</u>	_	95	110		
_			e regarding disaster assistance check here								
٠			responsibility for the grant?								
	If "Yes," attach the statement requi						140				
6-					nron	nume on					
6a	Did the foundation, during the year a personal benefit contract?						- Na				
<b>L</b>								6h	No		
Ь	Did the foundation, during the year	ir, pay premiums, directi	y or mairect	y, on a perso	onait	denent contract?	•	6b	No		
_	If "Yes" to 6b, file Form 8870.						<del>.</del>				
	At any time during the tax year, w	•	•								
b	If yes, did the foundation receive							7b	No		
Pai		t Officers, Directors	s, Trustee	s, Founda	atior	n Managers, Highly	Paid	Emplo	yees,		
	and Contractors  List all officers, directors, trustees	foundation managers	and their cor	nnoncation (	soo ii	netructions)					
	List an officers, unectors, trustees				<u> </u>	(d)					
	(a) Name and address	Title, and average hours per week		ensation(If		Contributions to	Expense account				
	(a) Name and address	(b) devoted to position		not paid, enter -0-)		nployee benefit plans	(e) other allowance				
CONN	V KOTHADI	D				deferred compensation					
	Y KOTHARI	President & CEO		0							
	9 MADONNA DRIVE LERTON,CA 92835										
	Compensation of five highest-paid	emplovees (other than	those includ	ed on line 1-	-see i	instructions). If none, e	nter "f	NONE."			
						Contributions to					
Nar	(a) ne and address of each employee p	Title, and aver baid hours per we		Compensatio	nn l	employee benefit			account,		
IVUI	more than \$50,000	(b) devoted to pos		compensacio	J11	plans and deferred	(e)	other allo	wances		
NON						(d) compensation					
NO IV	<u> </u>										
rata	I number of other ampleyage hald s		· · · · · · · · · · · · · · · · · · ·								

Part VIII Information About Officers, Directors, Trusto and Contractors (continued)		
3 Five highest-paid independent contractors for professional services (		E"
(a) Name and address of each person paid more than \$50,000	<b>(b)</b> Type of service	(c) Compensation
NONE		
otal number of others receiving over \$50,000 for professional services.		<b>•</b>
Part IX-A Summary of Direct Charitable Activities		
ist the foundation's four largest direct charitable activities during the tax year. Include rele	evant statistical information such as the number	of Expenses
rganizations and other beneficiaries served, conferences convened, research papers prod	uced, etc	Lxpelises
1		
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	•	A mount
1	the tax year on lines I and 2	Amount
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		<b>•</b>

## Part X Minimum Investment Return

Pa	(All domestic foundations must complete this part. Foreign foundations, see instructions	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	0
b	A verage of monthly cash balances	1b	0
С	Fair market value of all other assets (see instructions)	1c	0
d	<b>Total</b> (add lines 1a, b, and c)	1d	0
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	A cquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	0
4	Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ % of line 3 (for greater amount, see		
	ınstructions)	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0
6	Minimum investment return.Enter 5% of line 5	6	0
Pai	Distributable Amount  (See instructions) (Section 4042(1)(2) and (1)(5) private energing foundations and corr	.ta.n (	íouotan ouannimations
	(see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cer check here ► ☐ and do not complete this part.)	laiii i	oreign organizations
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	351
3	Distributable amount before adjustments Subtract line 2c from line 1	3	351
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	351
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	0
Dar	t XIII 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	0
	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		į.
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	<b>l</b> .	
	income Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	foundation cualification
	<b>Note:</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the	roundation qualifies for

Ŀ	Undistributed Income (see insti	uctions)			
		(a) Corpus	(b) Years prior to 2014	<b>(c)</b> 2014	( <b>d)</b> 2015
1	Distributable amount for 2015 from Part XI, line 7				0
2	Undistributed income, if any, as of the end of 2015				
	Enter amount for 2014 only				
	Total for prior years 20 , 20 , 20				
	Excess distributions carryover, if any, to 2015				
	From 2010				
	From 2011				
c	From 2012				
d	From 2013				
	From 2014				
f	Total of lines 3a through e				
	Qualifying distributions for 2015 from Part				
	XII, line 4 🕨 \$				
а	Applied to 2014, but not more than line 2a				
	Applied to undistributed income of prior years				
	(Election required—see instructions).				
C	Treated as distributions out of corpus (Election required—see instructions)		0		
d	Applied to 2015 distributable amount				
	Remaining amount distributed out of corpus				
	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:				
	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b	Prior years' undistributed income Subtract line 4b from line 2b				
_	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				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)				
8	Excess distributions carryover from 2010 not				
J	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016.				
	Subtract lines 7 and 8 from line 6a				
	Analysis of line 9				
	Excess from 2011				
	Excess from 2012				
	Excess from 2013				
	Excess from 2014				
е	Excess from 2015				

	Private Operating Foundat	•			19)	
1a	If the foundation has received a ruling or determ					
	foundation, and the ruling is effective for 2015,					
	Check box to indicate whether the organization		ting foundation de		1 4942(j)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for each	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	
	year listed					
<b>b</b> 8	35% of line 2a					
c	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used					
	directly for active conduct of exempt activities					
e	Qualifying distributions made directly					
•	for active conduct of exempt activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets		1			
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3		1			
-	of minimum investment return shown in					
	Part X, line 6 for each year listed					
C	"Support" alternative test—enter					
	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments					
	on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt organizations as provided in					
	section $4942(j)(3)(B)(iii)$					
	(3) Largest amount of support					
	from an exempt organization					
	(4) Gross investment income					
Pa	rt XV Supplementary Information (C			e organizatio	n had \$5,000 o	r more in
	assets at any time during the	<u>year—see ins</u>	tructions.)			
L a	<b>Information Regarding Foundation Managers:</b> List any managers of the foundation who have co	ontributed more th	nan 2% of the tota	ıl contributions rec	eived by the found	lation
	before the close of any tax year (but only if they					ideloli
b	List any managers of the foundation who own 10				large portion of th	е
	ownership of a partnership or other entity) of wh	ich the loundation	inas a 10% or gre	eaterinterest		
	Total Control Control Control City	Cabalanak	:t- B			
2	Information Regarding Contribution, Grant, Gift					
	Check here ► ✓ If the foundation only makes counsolicited requests for funds. If the foundation					
	other conditions, complete items 2a, b, c, and d		its, etc. (see ilisti)	actions) to marvia	dais of organizatio	iis uiidei
а	The name, address, and telephone number or e	mail address of th	e nerson to whom	annlications shou	ld he addressed	
u	The name, address, and telephone number of el	man address of th	e person to whom	applications shou	ia be addressed	
b	The form in which applications should be submi	tted and informat	ion and materials t	they should includ	e	
C	Any submission deadlines					
_	A					
d	Any restrictions or limitations on awards, such factors	as by geographic	aı areas, charitabl	e neias, kinds of ii	nstitutions, or othe	Γ

Form 990-PF (2015)				Page
Part XV Supplementary Inform				
3 Grants and Contributions Paid	1	proved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient	Continuation	
a Paid during the year				
Total				
Total				
Total				

Part XVI-A Analysis of Income-Produc	ing Activitie	s			_
Enter gross amounts unless otherwise indicated		isiness income	Excluded by section	<u> </u>	(e) Related or exemption function income
1 Program service revenue	(a) Business code	<b>(b)</b> A mount	(c) Exclusion code	(d) A mount	(See Instructions )
a b					
c d					
e					
g Fees and contracts from government agencies Membership dues and assessments Interest on savings and temporary cash investments					
4 Dividends and interest from securities 5 Net rental income or (loss) from real estate					1,994
a Debt-financed property  b Not debt-financed property					
Net rental income or (loss) from personal property					
7 Other investment income					15,58
9 Net income or (loss) from special events 0 Gross profit or (loss) from sales of inventory					19,30
.  1 Other revenue a  b					
c					
e 2 Subtotal Add columns (b), (d), and (e) 3 Total.Add line 12, columns (b), (d), and (e)					17,574 17,574
(See worksheet in line 13 instructions to verify  Part XVI-B Relationship of Activities to	calculations )			13	17,374
Explain below how each activity for wh the accomplishment of the foundation's instructions )	ıch ıncome ıs re	ported in column i	(e) of Part XVI-A c	ontributed importa	

Part	: XVI		Information Ro Noncharitable					saction	ns and I	Relationships	With			
		rganı	zation directly or i ) of the Code (othe	ndırectly (	engage	ın any of t	the following wit						Yes	No
		tions?	•			( )( )	,		,	<b>J</b> .				
a Tra	nsfer	s from	the reporting four	ndation to	a nonc	harıtable e	exempt organız	ation of						
(1)	Cas	h										1a(1)		No
(2)	Oth	erass	ets									1a(2)		No
<b>b</b> Ot	her tra	ansac	tions											
(1)	Sale	es of a	ssets to a noncha	rıtable ex	empt or	ganızatıor	n					1b(1)		No
(2)	Puro	chase:	s of assets from a	noncharit	able ex	empt orga	inization					1b(2)		No
(3)	Ren	tal of	facılıtıes, equipme	nt, or othe	erasset	ts						1b(3)		No
(4)	Reir	nburs	ement arrangemer	nts								1b(4)		No
(5)	Loa	ns or l	oan guarantees.									1b(5)		No
(6)	Perfo	rmanc	e of services or m	embershi	p or fun	draising s	olicitations					1b(6)		No
<b>c</b> Sh	arıng	of facı	lities, equipment,	mailing lis	ts, oth	er assets,	or paid employ	ees				1c		No
of t	the go any tra	ods, c ansac	o any of the above ther assets, or se tion or sharing arr Amount involved	rvices giv angement	en by t , show :	he reportii in column	ng foundation I	If the fou f the god	indation r ods, other	eceived less than	n fair marko ces receive	et value ed		ıts
des	scribe	d in s comp	on directly or indi ection 501(c) of the lete the following ) Name of organization	ne Code (d schedule		an sectior		ın secti			otion of relati		s 🔽	No
									+					
Sign Here	the	best ormati ****	enalties of perjury, of my knowledge a on of which prepar ***	and belief, rer has an	ıt ıs tru	ıe, correct					May t May t return with t below	r) is bas he IRS di he prepai	sed on scuss th	all ıs ın
		Т						Date		Check if self-	PTIN	/ 1	, 1	
Paid Prep	arei	Firm	t/Type preparer's cott Krivis n's name ► tt Krivis & Compai		Prepa	rer's Sıgn	ature			employed ▶ Firm's EIN ▶		004789	30	
Use		Firm	n's address ▶											
Only		1	00 Ventura Blvd 2	234 Wood	land Hı	lls,CA 9	1364			Phone no (818	3)594-720	00		
		1								1				

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As Filed Data -

DLN: 93491062000076

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

KOTHARI FOUNDATION

## **Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF.
► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

OMB No 1545-0047

2015

**Employer identification number** 

	47-1469539
Organization type (check	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 foundation
Form 990-PF	√ 501(c)(3) exempt private foundation
	√ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	□ 501(c)(3) taxable private foundation
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or om any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions
Special Rules	
under sections 509 received from any o	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> /3% support test of the regulations (a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, ii) Form 990-EZ, line 1 Complete Parts I and II
during the year, tota	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, il contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or f cruelty to children or animals. Complete Parts I, II, and III
during the year, cor this box is checked, purpose Do not cor	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, itributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., implete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization KOTHARI FOUNDATION Employer identification number 47-1489539

Part I	Contributors (see instructions) Use duplicate copies of Part I if	additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
1			Person	ᅜ
	SONNY KOTHARI 2809 MADONNA DRIVE	\$ 55,675	Payroll	Г
	FULLERTON, CA 92835		Noncash	ᅜ
			(Complete Part II to contributions )	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
			Person	Γ
		<b>\$</b>	Payroll	Г
		·	Noncash	Γ
			(Complete Part II to contributions )	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
			Person	Γ
		<b>\$</b>	Payroll	Γ
		Ψ	Noncash	Г
			(Complete Part II to	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
			Person	Γ
		\$	Payroll	Г
		Ψ	Noncash	Г
			(Complete Part II to	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
			Person	Γ
			Payroll	Г
		\$	Noncash	Г
			(Complete Part II to	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	tribution
			Person	Г
		\$	Payroll	Г
		*	Noncash	Г
			(Complete Part II to contributions )	or noncash

Name of organization		Employer identification no	Employer identification number		
OTHARI FOUN	NOITAC	47.4400500			
	Names h Drangety	47-1489539			
Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed				
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
1	VARIOUS STOCKS	\$ 50,175			
(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		
		<u> </u>			
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		<u> </u>			
(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		

Schedule B (Form 990, 990-E∠, or 990-PF) (2015)
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hedule B (Form 990	, 990-EZ, or 990-PF) (2015)		Page <b>4</b>		
<b>me of organization</b> THARI FOUNDAT		mployer identification number 7-1489539			
total mor line entry of \$1,000	e than \$1,000 for the year from any o	tions to organizations describe ne contributor. Complete colur II, enter the total of exclusively mation once. See instructions.	ed in section 501(c)(7), (8), or (10) that mns (a) through (e) and the following religious, charitable, etc., contributions		
(a) o.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-  -					
	(e) Transfer of gift Transferee's name, address, and ZIP4 Relation		Relationship of transferor to transferee		
(a) o.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-	(e) Transfer of gift Transferee's name, address, and ZIP4 Relationship of transferor to transferee				
(a) o.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
.   -	(e) Transfer of gift Transferee's name, address, and ZIP4 Relationship of transferor to transferee				
(a) o.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 gift	Relationship of transferor to transferee		