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Form **990-PF** 

# EXTENDED TO NOVEMBER 15, 2016 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.

OMB No 1545-0052

The calendar year 2015 or tax year beginning  The of foundation  F DAHYA FAMILY FOUNT The and street (or P O box number if mail is not deliver O17 CARNOUSTIE COURT TO TOWN, state or province, country, and ZIP of ORT MILL, SC 29707  The check all that apply:  The check type of organization  Section 4947(a)(1) nonexempt charitable true  The country of the characteristic of	DATION  ered to street address  or foreign postal  ge 01(c)(3) exemp ust X Othe  Accounting m  Cart I, column (	code Initial return of a fo Amended return Name change t private foundation r taxable private founda	Accrual	A Employer identification of 47-3251306  B Telephone number 704-972-480  C If exemption application is per D 1. Foreign organizations, 2. Foreign organizations mee check here and attach com E If private foundation statuunder section 507(b)(1)(c) F If the foundation is in a 60	check here  check here  ting the 85% test, poputation  is was terminated A), check here
ty or town, state or province, country, and ZIP of FORT MILL, SC 29707  Check all that apply:  Check type of organization  Section 4947(a)(1) nonexempt charitable true.  Form Part II, col (c), line 16)  Analysis of Revenue and Expenses.  The total of amounts in columns (b), (c), and (d) necessarily equal the amounts in column (a))  Check Check Check in the foundation is not required to attain laterest on savings and temporary cash investments  A Dividends and interest from securities	geOther (column (	Initial return of a form Amended return Name change t private foundation r taxable private foundation rethod: X Cash specify)  (d) must be on cash by	ormer public charity  ation  Accrual	47-3251306  B Telephone number 704-972-480  C If exemption application is per  D 1. Foreign organizations, 2. Foreign organizations mee check here and attach com  E If private foundation statt, under section 507(b)(1)(	check here  check here  ting the 85% test, poputation  is was terminated A), check here
umber and street (or P O box number if mail is not deliver 2017 CARNOUSTIE COURT  Ity or town, state or province, country, and ZIP of FORT MILL, SC 29707  Check all that apply: X Initial return Address change  Check type of organization Section 50  Section 4947(a)(1) nonexempt charitable true.  Fair market value of all assets at end of year J  (from Part II, col (c), line 16)  Analysis of Revenue and Expenses  The total of amounts in columns (b), (c), and (d) necessarily equal the amounts in column (a))  1 Contributions, gifts, grants, etc., received 2 Check  if the foundation is not required to atta 1 interest on savings and temporary cash investments  4 Dividends and interest from securities	geOther (column (	Initial return of a form Amended return Name change t private foundation r taxable private foundation rethod: X Cash specify)  (d) must be on cash by	ormer public charity  ation  Accrual	B Telephone number 704-972-480 C If exemption application is per D 1. Foreign organizations, 2. Foreign organizations mee check here and attach com E If private foundation statunder section 507(b)(1)(c) F If the foundation is in a 60	check here  check here  ting the 85% test. putation  us was terminated A), check here
City or town, state or province, country, and ZIP of FORT MILL, SC 29707  Check all that apply: X Initial return Address chang Check type of organization Section 50 Section 4947(a)(1) nonexempt charitable true Fair market value of all assets at end of year J  (from Part II, col (c), line 16)  Analysis of Revenue and Expenses The total of amounts in columns (b), (c), and (d) necessarily equal the amounts in column (a))  1 Contributions, gifts, grants, etc., received 2 Check in the foundation is not required to atta 1 interest on savings and temporary cash investments 4 Dividends and interest from securities	ge	Initial return of a form Amended return Name change t private foundation r taxable private foundation rethod: X Cash specify)  (d) must be on cash by	ormer public charity  ation  Accrual	7 0 4 - 9 7 2 - 4 8 0  C If exemption application is per  D 1. Foreign organizations,  2. Foreign organizations mee check here and attach com  E If private foundation statu under section 507(b)(1)(i)  F If the foundation is in a 60	check here  check here  ting the 85% test. putation  us was terminated A), check here
Check all that apply:  Check all that apply:  Check type of organization  Section 4947(a)(1) nonexempt charitable true  Fair market value of all assets at end of year  (from Part II, col (c), line 16)  S  Analysis of Revenue and Expenses  (The total of amounts in columns (b), (c), and (d)  necessarily equal the amounts in columns (a))  1 Contributions, gifts, grants, etc., received a cash investments  2 Check  if the foundation is not required to attal interest on savings and temporary  cash investments  4 Dividends and interest from securities	ge 01(c)(3) exempust X Othe Accounting m Other (Part I, column (d) may not	Initial return of a fo Amended return Name change t private foundation r taxable private founda lethod: X Cash specify) (d) must be on cash b	ation Accrual	D 1. Foreign organizations,  2. Foreign organizations mee check here and attach com  E If private foundation statuunder section 507(b)(1)()  F If the foundation is in a 60	check here ting the 85% test, putation swas terminated A), check here
Final return  Address change Check type of organization Section 50  Section 4947(a)(1) nonexempt charitable true Fair market value of all assets at end of year  (from Part II, col (c), line 16)  \$ 3,850. (Policy of the folial of amounts in columns (b), (c), and (diamounts in columns (b), (c), and (diamounts in columns (b))  1 Contributions, gifts, grants, etc., received to the folial of amounts in column (a)  1 Contributions, gifts, grants, etc., received to the folial of t	01(c)(3) exemp ust X Othe Accounting m Other ( Part I, column (	Amended return Name change t private foundation r taxable private founda lethod: X Cash specify) (d) must be on cash b	ation Accrual	Foreign organizations mee check here and attach com     Foreign organization statuunder section 507(b)(1)(a)     Foreign organization statuunder section 507(b)(1)(a)	ting the 85% test.  A), check here
(from Part II, col (c), line 16)  \$ 3,850. (Part I) Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) necessarily equal the amounts in column (a))  1 Contributions, gifts, grants, etc., received 2 Check interest on savings and temporary cash investments 4 Dividends and interest from securities	Other ( Part I, column ( )) may not	specify) (d) must be on cash b			'l-month termination
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) necessarily equal the amounts in column (a))  1 Contributions, gifts, grants, etc., received 2 Check if the foundation is not required to atta Interest on savings and temporary cash investments 4 Dividends and interest from securities	d) may not		oasis j	under section 507(b)(1)(l	
The total of amounts in columns (b), (c), and (d) necessarily equal the amounts in column (a) )  1 Contributions, gifts, grants, etc., received contributions and the foundation is not required to attain the foundation in the foundation is not required to attain the foundation in the foundation is not required to attain the foundation in the foundation is not required to attain the foundation is not required to attain the foundation in the foundation is not required to attain the foun		(a) Hoveliac and	(b) Net investment	(c) Adjusted net	(d) Disbursements
2 Check if the foundation is not required to attain interest on savings and temporary cash investments.  4 Dividends and interest from securities.	d	expenses per books	income	income	for charitable purposes (cash basis only)
	ach Sch B	30,100.			
i da Giossients				<u> </u>	
b Net rental income or (loss)				<del> </del>	
6.2 Net gain or (loss) from sale of assets not on line	10				
Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2)			0 .	<u>,                                    </u>	
8 Net short-term capital gain					
9 Income modifications Gross sales less returns					
102 and allowances				<del>                                     </del>	<del> </del>
b Less Cost of goods sold c Gross profit or (loss)					
11 Other income					
12 Total Add lines 1 through 11		30,100.	0	. 0.	
13 Compensation of officers, directors, trustees, etc	tc	0.	0	. 0.	0.
14 Other employee salaries and wages	<u> </u>		and the same party and advantage of		
15 Pension plans, employee benefits	<u> </u>	<del> </del>			
16a Legal fees b Accounting fees	-		·		<del></del>
b Accounting fees c Other professional fees			9 5 22/2	<b> </b>	<del></del>
2 17 Interest		12. 9	23205		
to the second se		1			
		<u>_</u>	BDEN, UI	4	<del></del>
20 Occupancy 21 Travel, conferences, and meetings					<del></del>
21 Travel, conferences, and meetings 22 Printing and publications	<del> </del>				
				<del>                                     </del>	
23 Other expenses 24 Total operating and administrative expenses Add lines 13 through 23				† <del>  </del>	
expenses Add lines 13 through 23		0.	0	. 0.	0.
25 Contributions, girts, grants paid		26,250.			26,250.
26 Total expenses and disbursements.		26 250	^	.	26 250
Add lines 24 and 25		26,250.	0	• • • • • • • • • • • • • • • • • • • •	26,250.
27 Subtract line 26 from line 12.  a Excess of revenue over expenses and disbursen	ments	3,850.			
b Net investment income (if negative, enter -0	<b>—</b>		0		
c Adjusted net income (if negative, enter -0-)	<b>—</b>			0.	
23501 1-24-15 LHA For Paperwork Reduction Act No		uctions.			Form <b>990-PF</b> (2015)

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3,850.

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

Part IV Capital Gains a	and Losses for	Tax on Inv	estment	Income						
	ibe the kind(s) of pro ehouse, or common				(p) h	How ac - Purck - Dona	quired hase	(c) Date (mo., d		(d) Date sold (mo., day, yr )
1a		<del>'</del>	<u></u>	<del></del>	۲	Done	111011			-
b NON	1E	-	-		1					
С										
d										
е									_	
(e) Gross sales price	(f) Depreciation (or allowal	I .		t or other basis xpense of sale					ain or (loss) s (f) minus (	
a										
<u>b</u>										
<u>c</u>							<del></del> .	<del></del>		
e										-
Complete only for assets showing	g gain in column (h)	and owned by th	e foundation	on 12/31/69				(I) Gains (C	ol. (h) gain	minus
(ı) F.M.V. as of 12/31/69	(j) Adjusted as of 12/3			cess of col (ı) col (ı), ıf any				òl. (k), but r	ot less than (from col. (	n -0-) <b>or</b>
a									<del> </del>	
b					Ì					
С										
d										
е								<del>_</del>		
2 Capital gain net income or (net cap	oital loss) { If	gaın, also enter ıı (loss), enter -0- ı	n Part I, line n Part I, line	7 7	}	2				
3 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, c		ons 1222(5) and	(6)		}					
If (loss), enter -0- in Part I, line 8  Part V   Qualification Ur	nder Section 4	1940/e) for F	Reduced	Tay on Net	Inv	3 estr	ent In	come		
(For optional use by domestic private								000		N/A
(i of optional use by domestic private	iounoations subject	to the Section 49	40(a) lax on	net mvestmem n	icome	·- <i>)</i>				H/ H
If section 4940(d)(2) applies, leave the	is part blank									
Was the foundation liable for the secti	on 4942 tax on the c	istributable amo	unt of any ye	ar in the base pe	rıod?					Yes No
If "Yes," the foundation does not qualif				•						
1 Enter the appropriate amount in e	ach column for each	year, see the ins	tructions bef	ore making any e	ntries			-		
(a) Base period years Calendar year (or tax year beginnin	g ın) Adjusted	(b) I qualifying distri	butions	Net value of no	(c) onchar		use asset	s	Dıstrıt (col. (b) dıv	(d) oution ratio rided by col (c))
2014										
2013										
2012								_		
2011	+									
2 Total of line 1, column (d)								2		
3 Average distribution ratio for the 5	-year base period - c	ivide the total on	line 2 by 5,	or by the number	of ye	ars				
the foundation has been in existen	ce if less than 5 year	s						3		
4 Enter the net value of noncharitable	e-use assets for 201	5 from Part X, lir	ne 5					4		
5 Multiply line 4 by line 3								5_		
6 Enter 1% of net investment incom-	e (1% of Part I, line 2	?7b)						6		
7 Add lines 5 and 6								7		
8 Enter qualifying distributions from		on Daniel III.	<b>.</b>	lasa shasi4 :		W A		8		
If line 8 is equal to or greater than See the Part VI instructions.	ime 7, check the box	iii Mart VI, line 1	u, and comp	ete that part usir	iga 19	∕₀ tax r	ate.			

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	rt VI Excise Tax Based on Investment Income (Section 494					e), or 4	948	see i	nstru	ctio	าร)
1a	Exempt operating foundations described in section 4940(d)(2), check here  and e					)					
	Date of ruling or determination letter: (attach copy of letter if ned										
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	<b>-</b>	_ an	nd enter	1%	<b>}</b>	1				0.
	of Part I, line 27b										
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%	of Pa	irt I,	line 12,	col. (b).	J					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Of	hers e	enter	r -0-)			2				0.
3	Add lines 1 and 2						3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. O	thers (	ente	r -0-)			4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-						5				0.
6	Credits/Payments.										
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a									
b	Exempt foreign organizations - tax withheld at source	6b	,				1				
C	Tax paid with application for extension of time to file (Form 8868)	6c					1				
	Backup withholding erroneously withheld	6d					1				
	Total credits and payments Add lines 6a through 6d						7				0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	ched					8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	••				•	9				0.
	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				Refu	nded	11				
	rt VII-A   Statements Regarding Activities										
_	During the tax year, did the foundation attempt to influence any national, state, or local legis	lation	or d	lid it par	ticipate or	intervene	: In			Yes	No
	any political campaign?								1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpor	ses (se	ee in	structio	ns for the	definition	)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities an										
	distributed by the foundation in connection with the activities	م ده ه		o, a.,,		, , , , , , , , , , , , , , , , , , , ,					
	Did the foundation file Form 1120-POL for this year?								1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	vear.									
٠	(1) On the foundation. > \$ 0. (2) On foundation managers	-				0.					
	Enter the reimbursement (if any) paid by the foundation during the year for political expendi			nnnsed	on founda		-		ŀ		
·	managers. > \$		A/\ 111	просос	311 1001100						
2	Has the foundation engaged in any activities that have not previously been reported to the II	357							2		Х
	If "Yes," attach a detailed description of the activities								_		
	Has the foundation made any changes, not previously reported to the IRS, in its governing i	netrun	meni	t article	s of incori	noration (	nr				
Ū	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the chang			.,	5 01 111001	, , , , , , , , , , , , , , , , , , ,			3		Х
4a	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?	,						,	5		X
•	If "Yes," attach the statement required by General Instruction T								۳		<del></del>
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	ther.									
٠	By language in the governing instrument, or										
	By state legislation that effectively amends the governing instrument so that no mandator	v dired	ction	s that c	onflict wit	h the state	e law				
	remain in the governing instrument?	y unce	Clion	is that c	OTTINGE WIT	ii tiio stati	C IUV		6		х
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," cor	nnlata	o Pa	ert II cr	d (c) an	d Part XI	,		7	X	<del></del> -
•	bid the foundation have at least \$5,000 in assets at any time during the year. If Tes, Cor	ripiete	C / C	21 t 11, CC	// (C), a//	o ran X	,		<del></del>		
R a	Enter the states to which the foundation reports or with which it is registered (see instruction	ne)	<b>-</b>								
υa	NC		_			***					
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	ttorne	v G	neral (o	r desinna	te)					
J	of each state as required by General Instruction G? If "No," attach explanation		,	onoral (U	. oosiyila	,			8b	х	
۵	Is the foundation claiming status as a private operating foundation within the meaning of se	ction 4	4941	2(1)(3) ^	r 4942/11	5) for calc	endar		<u>"</u>		$\vdash$
9	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," or					o, ioi oait			9		х
10	Did any persons become substantial contributors during the tax year? if "yes," attach a schedi					S	TMT	1	10	Х	<del></del> -

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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?

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Part VII-B Statements Regarding Activities for Which I	orm 4720 May Be F	lequired (contin	ued)		
5a During the year did the foundation pay or incur any amount to					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Y6	es X No		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ctly,			
any voter registration drive?		Y6	es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes'	7	Y€	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					
4945(d)(4)(A)? (see instructions)		☐ Y6	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational nurnoses, or fo				
the prevention of cruelty to children or animals?	or caddational purposes, or it		es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	for the eventions described in				
		n negulations	N/A	5b	
section 53.4945 or in a current notice regarding disaster assistance (see instru	,		N/A	<del>"  </del>	——
Organizations relying on a current notice regarding disaster assistance check h					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		. —			
expenditure responsibility for the grant?		/A Y	es L No		
If "Yes," attach the statement required by Regulations section 53 494	5-5(d)				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			1	
a personal benefit contract?		Ye	es X No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal 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	helter transaction?	Y	es 🗶 No 📙		
b If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A	7b	
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	<del></del>		
Paid Employees, and Contractors					
1 List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans	(e	Expense count, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	acc	llowances
TEHSEEN DAHYA	MANAGING DIRE	<u> </u>			
2017 CARNOUSTIE CT	<del></del>				
FORT MILL, SC 29707	0.00	o.	0.		0.
	TRUSTEE				
2017 CARNOUSTIE CT					
FORT MILL, SC 29707	0.00	0.	О.		0.
	TRUSTEE	•			<del></del>
812 MCDONALD AVE	IKODIEE				
CHARLOTTE, NC 28203	0.00	ο.	0.	1	0.
CHARLOTTE, NC 20203	0.00	0.	· ·	<del> </del>	<del></del>
				ŀ	
				İ	
	luded on line 4) If none	ontor INONE II	<u> </u>	<u> </u>	
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter NONE.	(d) Contributions to	1 16	Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	acc	count, other
	devoted to position		compensation	a	llowances
NONE					
		_			
				<u> </u>	
			ļ		
	_				
			}		

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

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none, enter "NONE."    (a) Name and address of each person paid more than \$50,000   (b) Type of service   (c) Compensation	Form 990-PF (2015) A F DAHYA FAMILY FOUNDATION 4	7-3251306	Page 7
(a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE    Total number of others receiving over \$50,000 for professional services	Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly		
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research pagers produced, etc.  Expenses    N/A	3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convenied, research pagers produced, etc.    N/A		(c) C	ompensation
Part IX-A   Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  1	NONE		
Part IX-A   Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  1			
Part IX-A   Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  1			
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List the foundation's four largest direct charitable activities during the lax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  1	Total number of others receiving over \$50,000 for professional services	<b>&gt;</b>	0
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.    N/A	Part IX-A Summary of Direct Charitable Activities		
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  All other program-related investments. See instructions.  Total. Add lines 1 through 3	List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expen	ises
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  All other program-related investments. See instructions.  Total. Add lines 1 through 3	1 N/A		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  All other program-related investments. See instructions.  Total. Add lines 1 through 3			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  All other program-related investments. See instructions.  Total. Add lines 1 through 3			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  All other program-related investments. See instructions.  Total. Add lines 1 through 3	2		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  All other program-related investments. See instructions.  Total. Add lines 1 through 3		_	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  All other program-related investments. See instructions.  Total. Add lines 1 through 3			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  All other program-related investments. See instructions.  Total. Add lines 1 through 3	3	$\dashv$	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  All other program-related investments. See instructions.  Total. Add lines 1 through 3		$\neg$	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  All other program-related investments. See instructions.  Total. Add lines 1 through 3	4		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  All other program-related investments. See instructions.  Total. Add lines 1 through 3			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  All other program-related investments. See instructions.  Total. Add lines 1 through 3			
1 N/A  2  All other program-related investments. See instructions. 3  Total. Add lines 1 through 3	Part IX-B   Summary of Program-Related Investments	1 Amou	ınt
All other program-related investments. See instructions.  Total. Add lines 1 through 3		7,11100	
All other program-related investments. See instructions.  3  Total. Add lines 1 through 3		_	
All other program-related investments. See instructions.  3  Total. Add lines 1 through 3			
Total. Add lines 1 through 3	2		
Total. Add lines 1 through 3		_	
Total. Add lines 1 through 3	All other program-related investments. See instructions.		
Total. Add lines 1 through 3			
Total. Add lines 1 through 3		_	
Total. Add lines 1 through 3			0
	Total. Add lines 1 through 3		

	art X	<u> </u>	231300 , ago v
	Minimum Investment Return (All domestic foundations must complete this part Foreign foundations	ndations, see	instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	6,140.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	6,140.
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	2	0.
3	Subtract line 2 from line 1d	3	6,140.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	92.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	6,048.
6	Minimum investment return Enter 5% of line 5	6	302.
P	art XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
_			302.
1	Minimum investment return from Part X, line 6	1	304.
	Tax on investment income for 2015 from Part VI, line 5	-	
	Income tax for 2015 (This does not include the tax from Part VI.)	1 .	٥
	Add lines 2a and 2b	2c	0. 302.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	0.
4	Recoveries of amounts treated as qualifying distributions	4	302.
5	Add lines 3 and 4	5	
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	302.
L	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	26,250.
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:		
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	26,250.
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	26,250.
	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	
	4940(e) reduction of tax in those years		

Form **990-PF** (2015)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,	· · · · · · · · · · · · · · · · · · ·			
line 7				302.
2 Undistributed income if any as of the end of 2015			<del></del>	
a Enter amount for 2014 only			0.	
<b>b</b> Total for prior years			<del>.</del>	
		0.		
3 Excess distributions carryover, if any, to 2015.				
a From 2010				
<b>b</b> From 2011				
c From 2012				
d From 2013	•			
e From 2014				
<del></del>	0.			
f Total of lines 3a through e				
4 Qualifying distributions for 2015 from Part XII, line 4. ►\$ 26, 250.				
			0.	
a Applied to 2014, but not more than line 2a	· · · · · · · · · · · · · · · · · · ·		0.	
<b>b</b> Applied to undistributed income of prior		ا م		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	_			
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount				302.
e Remaining amount distributed out of corpus	25,948.			
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	25,948.			
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		• • • • • • • • • • • • • • • • • • • •	- 1	
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				0.
7 Amounts treated as distributions out of			<del></del>	
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	0.			
not applied on line 5 or line 7				
9 Excess distributions carryover to 2016.	25,948.			
Subtract lines 7 and 8 from line 6a	45,546.		<del></del>	<del></del>
10 Analysis of line 9.				
a Excess from 2011				
b Excess from 2012				
c Excess from 2013				
d Excess from 2014 e Excess from 2015 25,948.				
e Excess from 2015 25,948.				<u> </u>

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation status of recipient Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) or substantial contributor a Paid during the year COMFORT AID PC DEVELOPMENT WORK 3415 WEST LAKE MARY BLVD LAKE MARY, FL 32795 10,000. SOLACE FOR THE CHILDREN PC DEVELOPMENT WORK PO BOX 4442 MOORESVILLE, NC 28117 1,200. CDRS PC RELIEF WORK 687 W. 204TH STREET, #2-J NEW YORK, NY 10034 300. SHIA CAROLINAS PC CHURCH 5227 MONROE RD CHARLOTTE, NC 28205 2,000. DEVELOPMENT AND RELIEF FOUNDATION PC DEVELOPMENT WORK 7944 N. MAPLE AVE. #115 FRESNO, CA 93720 10,000. SEE CONTINUATION SHEET(S) **▶** 3a 26,250. Total b Approved for future payment NONE Total

Enter gross amounts unless otherwise indicated	Unrelated t	ousiness income		ded by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue	code	<del> </del>			
a			<del> </del>		
		······			
<u> </u>			-	<u> </u>	
d	J		-		
e					
1			-		
g Fees and contracts from government agencies			-		*
2 Membership dues and assessments	ļ		4		· · · · · · · · · · · · · · · · · · ·
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate			$\bot$		
a Debt-financed property			<u> </u>		
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					•
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b					
c					
d					
e					-
12 Subtotal. Add columns (b), (d), and (e)		0		0.	0
13 Total Add line 12, columns (b), (d), and (e)				13	0.
(See worksheet in line 13 instructions to verify calculations )				_	
				1 D	
Part XVI-B Relationship of Activities t	to the Accon	iplishment of E	xemp	t Purposes	
Line No. Explain below how each activity for which inco			A contrib	outed importantly to the accon	nplishment of
the foundation's exempt purposes (other than	by providing funds	for such purposes)			
	•				
				<u>-</u>	
				<del>** ***</del>	
1					_
					<del></del>

47-3251306 Page 13 Form 990-PF (2015) A F DAHYA FAMILY FOUNDATION 47-3251306

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable

		Exempt Organ	izations			
1	Did the or	ganization directly or indir	rectly engage in any of the following	ng with any other organization	described in section 501(c) of	Yes No
	the Code	(other than section 501(c)	)(3) organizations) or in section 5	27, relating to political organiz	ations?	
a	Transfers	from the reporting founda	ation to a noncharitable exempt or	ganization of:		
	(1) Cash					1a(1) X
	(2) Other	assets				1a(2) X
Ь	Other tran	sactions:				
	• •	of assets to a noncharital				1b(1) X
	• •		ncharitable exempt organization			1b(2) X
		al of facilities, equipment, i	or other assets			1b(3) X
	• •	bursement arrangements				1b(4) X
	• •	s or loan guarantees				1b(5) X
			mbership or fundraising solicitation			1b(6) X
			iling lists, other assets, or paid em			1c X
d					ays show the fair market value of the goo	
					in any transaction or sharing arrangemen	nt, snow in
۵۱.	<u>`</u>	<del> </del>	other assets, or services received.		[ (d) p	
a)Li	ne no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description of transfers, transactions,	and sharing arrangements
			N/A	<del></del>		
						<del></del>
			<u></u>			
				<del></del>		
					<del></del>	
-	<del></del>			<del></del>		
						_
2 a	Is the fou	ndation directly or indirect	tly affiliated with, or related to, one	e or more tax-exempt organiza	itions described	
			r than section 501(c)(3)) or in sec			Yes X No
ь		omplete the following sch				
_	,	(a) Name of org		(b) Type of organization	(c) Description of relati	onship
_		N/A				
		· · ·			····	<del>.</del>
			, ., ., ., ., ., ., ., ., ., ., ., .,			
		1				
					tatements, and to the best of my knowledge	May the IRS discuss this
Siç	gn 📗	elief, it is true, correct, and ton	npiete Declaration in preparer (other tha		tion of which preparer has any knowledge MANAGING	return with the preparer shown below (see instr.)?
He	re	// <b>/</b> /		10/1/206	DIRECTOR	X Yes No
	Sigi	nature of office or toustee	7 00-	Date /	Title	
		Print/Type preparer's na	ame Preparer's s	signature (	Date Check if P1	IN
_			/		self- employed	
Pa		JULIE AYER				200197994
	eparer	Firm's name ► LBA	HAYNES STRAND	, PLLC	Firm's EIN ► 20-	-4759472
Us	e Only					
			2 W MATTHEWS ST	17		
		MA	TTHEWS, NC 2810	/5	Phone no 704-	-841-1120
			\ / / /			Form <b>990-PF</b> (2015)

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
HIC		PC	CHURCH	
5211 HESTER AVENUE				
SANFORD, FL 32773				250
NASIMCO		PC	DEVELOPMENT WORK	
5120 BROOKLYN BLVD, SUITE B				
MINNEAPOLIS, MN 55429				2,500
	1			
			-	
		ļ		
		<del> </del>		
Total from continuation sheets			-	2,750

#### Schedule B (Form 990, 990-EZ,

or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

#### Schedule of Contributors

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

OMB No 1545-0047

**Employer identification number** 

DAHYA FAMILY FOUNDATION 47-3251306 Organization type (check one) Filers of: Section: 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation X 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(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 received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, 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 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

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

## A F DAHYA FAMILY FOUNDATION

47-3251306

Part I	Contributors (see instructions) Use duplicate copies of Part I	ıf addıtıonal space ıs needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	TEHSEEN DAHYA  2017 CARNOUSTIE COURT  FORT MILL, SC 29707	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
523452 10-2		\$	Person Payroll Noncash (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (2015)

Employer identification number

### A F DAHYA FAMILY FOUNDATION

47-3251306

Part II	Noncash Property (see instructions) Use duplicate copies of Par	t 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	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
(a) No. rom Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		   \$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		   \$	
(a) No. rom	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

A F DAHYA FAMILY FOUNDATI	.ON
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FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	1
NAME OF CONTRIBUTOR	ADDRESS	,	
TEHSEEN DAHYA	2017 CARNOUSTIE COURT FORT MILL. SC 29707		