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

## **Return of Private Foundation**

or Section 4947(a)(1) Trust Treated as Private Foundation

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

2015

rcalei	idar year 2015 or tax year deginning		, and ending		
	foundation	<del></del>		A Employer identification	on number
	DEEPAK RAGHAVAN FAMILY NDATION, INC.	4		58-263711	6
	and street (or P O box number if mail is not delivered to stree	t address)	Room/suite	B Telephone number	
	BOX 76070	,			-8485
	own, state or province, country, and ZIP or foreign p	nostal code		C if exemption application is	
	DY SPRINGS, GA 30358			a champion approach is	ponemy, and an incident
	all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organization	ns, check here
	Final return	Amended return			
	Address change	Name change		Foreign organizations n check here and attach	neeting the 85% test, computation
	type of organization: X Section 501(c)(3) e	xempt private foundation	<del></del> :	E If private foundation st	tatus was terminated
Se	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ation	under section 507(b)(	1)(A), check here 🕨 🗀
	arket value of all assets at end of year   J Account	=	Accrual	F If the foundation is in a	a 60-month termination,
	Part II, col (c), line 16)	ther (specify)		under section 507(b)(	1)(B), check here 🕨 🗀
<u>▶\$</u>	2,928,096. (Part I, cold	T			1 (4)
art l	(The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes
т.	necessarily equal the amounts in column (a) )	' '	moonic	1	(cash basis only)
1	Contributions, gifts, grants, etc., received	497,251.		N/A	<del></del>
2	Check If the foundation is not required to attach Sch. B. Interest on savings and temporary			<del>                                     </del>	
4	cash investments  Dividends and interest from securities	50,682.	46,655.		STATEMENT 2
1	Gross rents	30,0021	10,033.		<u> </u>
1	Net rental income or (loss)				
6a	Net gain or (loss) from sale of assets not on line 10	-23,050.			STATEMENT 1
7	Gross sales price for all assets on line 6a 1,503,804.				
7	Capital gain net income (from Part IV, line 2)		90,658.		
8	Net short-term capital gain				
9	Income modifications				
	Gross sales less returns and allowances				
	Less Cost of goods sold LCLIVEU				
0	Gross profit or (loss)	数 <b>ウ</b> 39. <b>2</b> 524,922.			GM3 ME3(E37M G
11	Other income MAY 2 5 2016 Total. Add lines through 11	Φ\ 39.	39.	·	STATEMENT 3
12		<b>2</b> 524,922. <b>■</b> 0.	137,352.	_	
13	Compensation of officers, directore, trustees, etc	H "	0.	1	· · · ·
15	Other employee salaries and wages N, UT Pension plans, employee benefits	<del>      -   -   -   -   -   -   -</del>	<del></del>	-	
2   16a	Legal fees				· ·
<u> </u>	Accounting fees				
Š c	Other professional fees STMT 4	7,941.	7,941.		7
	Interest				
18	Taxes STMT 5	10,873.	473.		
19	Depreciation and depletion				
20	Occupancy				
3	Travel, conferences, and meetings				-
22	Printing and publications	-			1
23	Other expenses		<u> </u>	<del> </del>	+
5   24 5	Total operating and administrative	18,814.	8,414.		
3 25	expenses. Add lines 13 through 23 Contributions, gifts, grants paid	98,036.	0,414.		98,036
	Total expenses and disbursements.	70,030.			70,030
	Add lines 24 and 25	116,850.	8,414.		98,036
20			0,414	<del></del>	1 70,00
		· · · · · · · · · · · · · · · · · · ·			
27	Subtract line 26 from line 12:	408.072.	i		
27		408,072.	128,938.		

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٠	F	(	)	ŪΠ	ďΝ	Δ	Ţ	T	ON		IN	C	

58-2637116 Page 2

		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
Р	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		112,361.	112,361.
	2	Savings and temporary cash investments			<u> </u>
	ı	Accounts receivable ▶			
	-	Less; allowance for doubtful accounts		İ	•
	4	Pledges receivable ▶			
		Less; allowance for doubtful accounts			
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other			
	ľ	disqualified persons			
	7	· · · · · · · · · · · · · · · · · · ·			
	l ′	Other notes and loans receivable  Less; allowance for doubtful accounts			
	۱.				
Assets		Inventories for sale or use			
Ass	ı	Prepaid expenses and deferred charges			<u> </u>
•	l	Investments - U.S. and state government obligations	2 464 526	2 046 202	2 005 250
		Investments - corporate stock STMT 6	2,464,536.	2,846,282.	2,895,350.
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			,
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis ▶			
	ļ	Less accumulated depreciation			
	15	Other assets (describe ► DUE FROM BROKER )	27,561.	0.	-79,615.
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	2,492,097.	2,958,643.	2,928,096.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ģ	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21				
Ï	22	Other liabilities (describe )	21,141.	79,615.	
		,		,	
	23	Total liabilities (add lines 17 through 22)	21,141.	79,615.	
_	Ë	Foundations that follow SFAS 117, check here		,	
	ļ	and complete lines 24 through 26 and lines 30 and 31.			
es	24	•			
ances		Temporarily restricted			
		Permanently restricted			
Ā	20	· · · · · · · · · · · · · · · · · · ·			
Net Assets or Fund Ba	l	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
ō	ر ا	•	2,470,956.	2,879,028.	
ets	27		2,470,936.	4,013,040.	
1880	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
¥ A	29			2 070 020	
ž	30	Total net assets or fund balances	2,470,956.	2,879,028.	
	۱.,		2 402 007	2 050 642	
_	31	Total liabilities and net assets/fund balances	2,492,097.	2,958,643.	
P	art	III Analysis of Changes in Net Assets or Fund B	alances		
=			•	<del></del> , ,	
		I net assets or fund balances at beginning of year - Part II, column (a), line	30		0 450 050
	•	st agree with end-of-year figure reported on prior year's return)		1	2,470,956.
		r amount from Part I, line 27a		2	408,072.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	2,879,028.
		reases not included in line 2 (itemize)		5	0.
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	2,879,028.
					Form <b>990-PF</b> (2015)

523511 11-24-15

2-story brick war		nd(s) of property sold (e. or common stock, 200 s			(b) t	- Purci - Dona	nase	(c) Date a (mo., da		(d) Date sold (mo., day, yr.)
a				<u>—</u>	<b> </b>					<u> </u>
b SEE ATTACHED	STAT	'EMENTS		-						
<u>C</u>					+					
<u>d</u>		<del></del>			╁					
e T	(6) 5		(-) (-)	-11b b	┷┪			/b) C-	(	
(e) Gross sales price	(1) U	Pepreciation allowed (or allowable)		st or other basis expense of sale					in or (loss) (f) minus (	
<u>a</u> b		<del></del>	<del></del>		$\dashv$					
C C							· -			
d 1,503,804.				1,413,14	16					90,658
Complete only for assets showing	a asin in c	column (h) and owned by					41	Gaine (C	ol. (h) gain	
Complete only for assets showing		j) Adjusted basis	<del></del>	cess of col. (I)					ot less than	
(i) F.M.V. as of 12/31/69		as of 12/31/69		col. (j), if any					(from col. (	
a							_			
b			<del> </del>							
C .		<del></del> ,	<del> </del>							
d										90,658
e <u> </u>		<i>C.</i>			$\overline{}$					50,050
Capital gain net income or (net cap	pıtal loss)		ter in Part I, line -0- in Part I, line	7 : 7		2				90,658
Net short-term capital gain or (loss			and (6):							
If gain, also enter in Part I, line 8, o	column (c	i).			١	,			N/A	
If (loss), enter -0- in Part I, line 8  Part V   Qualification Ui					, , ,					
or optional use by domestic private	foundatio	•					nent Inc	ome	117 11	
or optional use by domestic private section 4940(d)(2) applies, leave the as the foundation liable for the sections, the foundation does not quali	foundations part bla tion 4942 to tify under s	ons subject to the section ink. tax on the distributable a section 4940(e). Do not o	n 4940(a) tax on amount of any yo complete this pa	n net investment ii ear in the base pe art.	riod?	e.)	nent Inc	ome	11/11	Yes X N
or optional use by domestic private section 4940(d)(2) applies, leave th as the foundation liable for the section the section of the section	foundations part bla tion 4942 to tify under s	ons subject to the section ink. tax on the distributable a section 4940(e). Do not on inn for each year; see the	n 4940(a) tax on amount of any yo complete this pa	n net investment ii ear in the base pe art.	riod? entries	e.)	nent Inc	ome		
or optional use by domestic private section 4940(d)(2) applies, leave the as the foundation liable for the section to the section of the sect	foundations part blackion 4942 to september 1992	ons subject to the section ink. tax on the distributable a section 4940(e). Do not o	n 4940(a) tax on amount of any yo complete this pa e instructions be	n net investment ii ear in the base pe art.	riod? entries (c)	e.)	use assets		Dıstrık	(d) ution ratio ided by col. (c))
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or optional use by domestic private section 4940(d)(2) applies, leave th as the foundation liable for the section as the foundation does not qualified the appropriate amount in e  (a)  Base period years Calendar year (or tax year beginning)	foundations part blackion 4942 to september 1992	ons subject to the section ank.  tax on the distributable a section 4940(e). Do not on for each year; see the (b)  Adjusted qualifying d	n 4940(a) tax on mount of any yo complete this par instructions be	n net investment in ear in the base pe art. fore making any e	riod? entries (c) onchar	ritable-	use assets	. (	Dıstrık	(d) pution ratio ided by col. (c))
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or optional use by domestic private section 4940(d)(2) applies, leave the as the foundation liable for the section 4940(t) as the foundation does not qualified the appropriate amount in example (a)  Base period years Calendar year (or tax year beginning 2014 2013 2012 2011 2010  Total of line 1, column (d)  Average distribution ratio for the 5 the foundation has been in existent Enter the net value of noncharitable Multiply line 4 by line 3	foundations part blassion 4942 (fify under seach columning in)	ons subject to the section ank.  tax on the distributable a section 4940(e). Do not on for each year; see the (b)  Adjusted qualifying d  1  te period - divide the total than 5 years  sets for 2015 from Part >	amount of any year complete this particular instructions be distributions $86,500.66,500.84,514.11,645.54,953.11$	ear in the base pe art. fore making any e	entries (c) on char 1	, 08 , 58 , 05 , 11	use assets 6,044 0,785 6,316 7,929	2 3	Distrit (col. (b) div	(d) pution ratio ided by col. (c))  . 04146 . 04206 . 08000 . 09986 . 05301 . 31642 . 06328 2,565,650
or optional use by domestic private section 4940(d)(2) applies, leave the section 4940(d)(2) applies, leave the section 4940(d)(2) applies, leave the section of the sectio	foundations part blassion 4942 (fify under seach column in	ons subject to the section ank.  tax on the distributable a section 4940(e). Do not on for each year; see the (b)  Adjusted qualifying d  1  te period - divide the total than 5 years  sets for 2015 from Part >	amount of any year complete this particular instructions be distributions $86,500.66,500.84,514.11,645.54,953.11$	ear in the base pe art. fore making any e	entries (c) on char 1	, 08 , 58 , 05 , 11	use assets 6,044 0,785 6,316 7,929	2 3 4 5	Distrit (col. (b) div	Yes X Note    (d)    (d)    (u)    (d)    (d
or optional use by domestic private section 4940(d)(2) applies, leave the fast the foundation liable for the section 4940, and the foundation does not qualified the appropriate amount in e (a)  Base period years Calendar year (or tax year beginnin 2014 2013 2012 2011 2010  Total of line 1, column (d)  Average distribution ratio for the 5 the foundation has been in existent Enter the net value of noncharitable Multiply line 4 by line 3  Enter 1% of net investment income	foundations part black ton 4942 to the search columning in)  5-year basence if less alle-use assence (1% of	ank.  tax on the distributable a section 4940(e). Do not on for each year; see the (b)  Adjusted qualifying d  1  te period - divide the total than 5 years  sets for 2015 from Part >	amount of any year complete this particular instructions be distributions $86,500.66,500.84,514.11,645.54,953.11$	ear in the base pe art. fore making any e	entries (c) on char 1	, 08 , 58 , 05 , 11	use assets 6,044 0,785 6,316 7,929	2 3 4 5 6	Distrit (col. (b) div	(d) pution ratio ided by col. (c))  . 04146 . 04206 . 08000 . 09986 . 05301 . 31642 . 06328 2,565,650 162,365

THE DEEPAK RAGHAVAN FAMILY

Form 990-PF (2015) FOUNDATION, INC.		-2637			Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see ir	nstru	ıctio	ns)
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)					
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ 📖 and enter 1%	1			<u>2,5</u>	<u>79.</u>
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).					
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				<u>0.</u>
3 Add lines 1 and 2	3	<u> </u>		2,5	
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			2,5	<u>79.</u>
6 Credits/Payments:					
a 2015 estimated tax payments and 2014 overpayment credited to 2015 6a 6 , 525	<u>.</u>				
b Exempt foreign organizations - tax withheld at source 6b					
c Tax paid with application for extension of time to file (Form 8868)					
d Backup withholding erroneously withheld					
7 Total credits and payments. Add lines 6a through 6d	7			6,5	<u>25.</u>
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			3,9	
11 Enter the amount of line 10 to be: Credited to 2016 estimated tax   3,946. Refunded	11				0.
Part VII-A Statements Regarding Activities					
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interven	e in	- 1		Yes	No
any political campaign?			1a		X
b 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 publish	ed or				
distributed by the foundation in connection with the activities					۱.,
c Did the foundation file Form 1120-POL for this year?		ļ	1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
(1) On the foundation. $\triangleright$ \$ 0 \cdot (2) On foundation managers. $\triangleright$ \$ 0	<u>-</u>				
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
managers. ▶ \$ 0.		ŀ			۱.,
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		l			
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	or	ŀ	,		x
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes  4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		}	3 4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?	N	I/A	4b		<del> ^</del> -
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	•	''	5		X
If "Yes," attach the statement required by General Instruction T		ŀ			┝╧╌
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
By language in the governing instrument, or					
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the sta	e law				
remain in the governing instrument?			6	х	
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 X	V	Ì	7	Х	$\vdash$
(a) and a substitution of the substitution of	•	Ì			<del></del>
8a Enter the states to which the foundation reports or with which it is registered (see instructions)					
GA					
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		ļ	8b	X	<u> </u>
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for ca	endar				
year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV		ļ	9		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		(2015)

Page 5

P	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	<u> </u>	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	l		
	If "Yes," attach statement (see instructions)	12	<u></u>	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address N/A		405	
14	The books are in care of ► DEEPAK RAGHAVAN  Telephone no. ► 678-77		485	
4-	Located at ►P O BOX 76070, SANDY SPRINGS, GA ZIP+4 ►30	1358		<del></del>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	2.7	- / 3 ▶	· [
40	and enter the amount of tax-exempt interest received or accrued during the year  As on the during a shadow as 2015, did the foundation bear an attention as the state of the s	IN	/A	<u> </u>
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	L	<u>X</u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
Þε	foreign country  art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		
٠٠		γ	V	Na
4.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	-	Yes	No
16	a 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 X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)  a disqualified person?  Yes X No			•
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	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.)			
	of tany answer is "Yes" to 1a(1)-(6), did any 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)?  N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	"U		
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		χ ~
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	<u>                                   </u>		
_	defined in section 4942(j)(3) or 4942(j)(5)):			
а	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			
	If "Yes," list the years • , , , ,	ŀ		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
C	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	<b>•</b> , , , , , , , , , , , , , , , , , , ,			
3a	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	o 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) N/A	3ь		
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
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		<u> </u>
	Fo	rm <b>99</b> (	)-PF	(2015)

SANDY SPRINGS, GA 30358	1.00		0.	U.
	TRUSTEE			
P O BOX 76070		1		
SANDY SPRINGS, GA 30358	1.00	0.	0.	0.
<del></del>				
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Form **990-PF** (2015)

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

## THE DEEPAK RAGHAVAN FAMILY

Form 990-PF (2015) FOUNDATION, INC.	58-:	2637116 Page 7
Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	ation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	er "NONE."	· · · · · · · · · · · · · · · · · · ·
(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	1	▶ 0
Part IX-A Summary of Direct Charitable Activities	-	
List the foundation's four largest direct charitable activities during the tax year. Include relevant station number of organizations and other beneficiaries served, conferences convened, research papers pro		Expenses
1 N/A		
2		
3		
4		
Part IX-B   Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year or	lines 1 and 2.	Amount
1N/A		
2		
Ail other program-related investments. See instructions. 3		
	-	
Total. Add lines 1 through 3		0.

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FOUNDATION, INC.

58-2637116 Page 8

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations must complete this part.	ndations	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a		1a	2,596,825.
b		1b	33,923.
c		1c	-26,027.
_	Total (add lines 1a, b, and c)	1d	2,604,721.
	Reduction claimed for blockage or other factors reported on lines 1a and		<del></del>
•	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,604,721.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	39,071.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,565,650.
6	Minimum investment return. Enter 5% of line 5	6	128,283.
P	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	128,283.
2a	Tax on investment income for 2015 from Part VI, line 5 2,579.		
- ь	Income tax for 2015. (This does not include the tax from Part VI.)	<del>- 1.1</del>	
	Add lines 2a and 2b	2¢	2,579.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	125,704.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	125,704.
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	125,704.
	Qualifying Distributions (see instructions)		40.44
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	₹.	00 000
а	· · · · · · · · · · · · · · · · · · ·	1a	98,036.
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:		
	Suitability test (prior IRS approval required)	3a	
þ	Cash distribution test (attach the required schedule)	3b	00.006
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	98,036.
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	98,036.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies f	or the section

Form **990-PF** (2015)

## 58-2637116 Page 9

Form 990-PF (2015)

THE DEEPAK RAGHAVAN FAMILY FOUNDATION, · INC.

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,				125,704.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0.	
<b>b</b> Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2015.		<u> </u>		
a From 2010				
b From 2011 48,817.				
c From 2012 38,100.				
d From 2013				
e From 2014	06 04 5			
f Total of lines 3a through e	86,917.	<del></del>		
4 Qualifying distributions for 2015 from				
Part XII, line 4. ►\$ 98,036.	•			7
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.			
d Applied to 2015 distributable amount				98,036.
e Remaining amount distributed out of corpus	0.			, <u>/</u>
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	27,668.			27,668.
6 Enter the net total of each column as indicated below:				· · ·
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	59,249.			*
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				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.	50 040			
Subtract lines 7 and 8 from line 6a	59,249.			
10 Analysis of line 9:				
a Excess from 2011 21,149. b Excess from 2012 38,100.				
c Excess from 2013				
d Excess from 2014				
e Excess from 2015			1	Form <b>990-PF</b> (2015)
523581 11-24-15				191111 <b>3 3 U - F 1</b> (20 [3]

Part XIV   Private Operating F	oundations (see in:	structions and Part VII	A. question 9)	N/A	77110 Tage 10
1 a If the foundation has received a ruling o			, 4 4000.00.00	21/22	
foundation, and the ruling is effective fo					
b Check box to indicate whether the found		=	section	4942(j)(3) or 494	12(J)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	10 12())(0) 01 10	
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for	(-)	(-/	(-)	(-,	
				i	
each year listed <b>b</b> 85% of line 2a			_		<del></del>
c Qualifying distributions from Part XII,					
line 4 for each year listed  d Amounts included in line 2c not					<del></del>
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					<del></del>
for active conduct of exempt activities.				İ	
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					·
alternative test relied upon:			,		
<ul><li>a "Assets" alternative test - enter;</li><li>(1) Value of all assets</li></ul>			,		
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)  b "Endowment" alternative test - enter				-	
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter:				1	
(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		A - Ab. ! b b	£ 41= = £===============================	h 1 05 000	
Part XV   Supplementary Info at any time during t			t the foundation	nad \$5,000 or mo	re in assets
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh			butions received by the	foundation before the clos	e of any tax
year (but only if they have contributed n	nore than \$5,000). (See s	ection 507(d)(2).)			
DEEPAK RAGHAVAN					
b List any managers of the foundation wh			or an equally large portio	on of the ownership of a pa	rtnership or
other entity) of which the foundation has	s a 10% or greater interes	SI.			
NONE					
2 Information Regarding Contributi					
Check here ► X if the foundation of the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	ber or e-mail address of t	he person to whom apple	cations should be address	sed:	
<b>b</b> The form in which applications should b	e submitted and informati	tion and materials they sh	ould include;		
c Any submission deadlines:					
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields,	kınds of institutions, or o	other factors:	

3 Grants and Contributions Paid During the		Payment		·-· ·
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year				
CHILDREN'S HEALTHCARE OF ATLANTA 1001 JOHNSON FERRY RD	N/A	PUBLIC	HEALTHCARE	
ATLANTA, GA 30342				25,000
				,
GEORGIA STATE UNIVERSITY FOUNDATION	N/A	PUBLIC	EDUCATION - GENERAL	
P.O. BOX 3963				
ATLANTA, GA 30302-3963			+	13,285
INDIAN-AMERICAN SCHOLARSHIP FUND	N/A	PUBLIC	INDIAN AMERICAN	
2707 RANGEWOOD DR	[","		SCHOLARSHIP FUND	
ATLANTA, GA 30345			,	6,000
WOODWARD ACADEMY	N/A	PUBLIC	EDUCATION	
1662 RUGBY AVENUE ATLANTA, GA 30337				20,000
main, di soss,				20,000
ZOO ATLANTA	N/A	PUBLIC	CONSERVATION	
800 CHEROKEE AVE SE				
ATLANTA, GA 30315	NETHINETON CHE	] 		30,000
Total SEE CO  b Approved for future payment	NTINUATION SHE	ST(S)	<b>▶</b> 3a	98,036
NONE				
		1		
		1		

FOUNDATION, INC.

Part XVI-A	Analysis of Income-Producing A	Activities

nter gross amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section 512, 513, or 514		(e)
······ <b>9</b>	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue;	code	Amount —	code	Aillouill	ranction income
a	_		+		<del></del>
b					<del></del>
C	_				
d			$\bot$		
e	_		+-+		
f					_
g Fees and contracts from government agencies		_			
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	50,682.	
5 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					•
7 Other investment income			14	39.	
B Gain or (loss) from sales of assets other					
than inventory			18	-23,050.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					-
1 Other revenue:					
a					
b					
С					
d					
е					
2 Subtotal. Add columns (b), (d), and (e)				27,671.	0
3 Total. Add line 12, columns (b), (d), and (e)				13	27,671
See worksheet in line 13 instructions to verify calculations.)	_				
Part XVI-B Relationship of Activities	to the Accom	plishment of	Exempt P	urposes	
Line No. Explain below how each activity for which in the foundation's exempt purposes (other than				importantly to the accomp	lishment of

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
$\longrightarrow$	
$\longrightarrow$	
$\longrightarrow$	
$\longrightarrow$	
$\longrightarrow$	
$\longrightarrow$	
$\longrightarrow$	
$\longrightarrow$	
$\longrightarrow$	
523621 11-24-	15 Form <b>990-PF</b> (20

Form **990-PF** (2015)

		DEEPAK RAG		FAMILY					
Form 990-PF (2		DATION, II					58-263		Page 13
Part XVII			nsfers To a	and Transac	ctions a	nd Relations	hips With Nonch	aritable	
1 Did the or	Exempt Organ		of the followin	a with any other	organizatio.	a dagarihad in gasti	on FO1(a) of	1	Yes No
	ganization directly or ind			-			on 50 i(c) oi	-	162 140
	(other than section 501(d				Ricai organi.	zations			
	from the reporting found	uation to a noncharit	able exempt of	gamzanon oi.				12/11	x
(1) Cash								1a(1)	$\frac{\lambda}{X}$
(2) Other								1a(2)	<del>  ^</del>
b Other tran		abla avamat avama						45/41	v
	of assets to a noncharita							1b(1)	X
	hases of assets from a no	•	organization					1b(2)	$\frac{\hat{x}}{x}$
	al of facilities, equipment,							1b(3)	X
• •	bursement arrangements	.5						1b(4)	$\frac{\Lambda}{X}$
	s or loan guarantees Irmance of services or m	ambarchin ar fundra	ucina colicitatio					1b(5)	X
	f facilities, equipment, ma	•	•					1b(6)	$\frac{x}{x}$
	wer to any of the above is				should alw	rave chow the fair m	arket value of the goods		
	s given by the reporting t		-			•	•		13,
	i) the value of the goods,				TIAT NOT VATOR	on any bandadion	or sharing arrangement,	311011 111	
(a)Line no	(b) Amount involved			e exempt organiza	ation	(d) Description	of transfers, transactions and	sharing arra	ngements
			N/A			1			
								-	
									··········
			<u>-</u>			ļ			
			<del></del>			<del> </del>			
		+				+			
		<del>                                     </del>				·	<del></del>		
		<u> </u>							
	ndation directly or indirec	-			mpt organiz	ations described	,		
	501(c) of the Code (other		c)(3)) or in sect	tion 527?			l	Yes	X No
b If "Yes," co	omplete the following sct (a) Name of or			L (h) Tunn of our	anization I		(a) Dansarias of valeton	a hua	
	N/A	yanızanın		( <b>b</b> ) Type of org	amzadon		(c) Description of relation	SHIP	
	N/A						<del></del>		
						·			
						<u> </u>			
				İ	1				
l and b	penalties of perjury, I declare							lay the IRS di	scuss this
Sign   🔽	elief, it is true, correct, and to	omplete Declaration of p	reparer (other tha			ation of writch prepare		turn with the hown below (s	
Here	11. seal			05/1	4/16	TRUSTE	EE	X Yes	L No
Sigi	nature of officer or truste		10	Date		Title	Chart I is LOTIV		
	Print/Type preparer's n	name	Preparer's s	ignature		Date	Check if PTIN		
Paid	DODEDE *	IIA D T T	LOPEZZ		[	05/14/16	self- employed	10121	412
Preparer	ROBERT A.		KOREKI	A. HAB	1 F	05/14/16	Firm's EIN ► 58 – 2	01314	
Use Only	Firm's name ► AGF	ם, ששנ					rifmsein > 30-2	יססס.	10
	Firm's address ▶ 35	500 PTEDMO	מא ידעוכ	SUITER 5	0.0				
		TLANTA, G			- •		Phone no. 404-2	233-54	186

Form **990-PF** (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.irs.gov/form990.

2015

OMB No 1545-0047

Name of the organization

THE DEEPAK RAGHAVAN FAMILY FOUNDATION, INC.

Employer identification number

58-2637116

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 chantable trust treated as a private foundation
	501(c)(3) taxable private foundation
, ,	s covered by the <b>General Rule</b> or a <b>Special Rule</b> . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions
	( <i>n</i> ( <i>n</i> ) ( )
General Rule	
X For an organization	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor Complete Parts I and II See instructions for determining a contributor's total contributions
X For an organization	· · ·
For an organization property) from any  Special Rules  For an organization sections 509(a)(1) any one contributed	· ·
For an organization property) from any  Special Rules  For an organization sections 509(a)(1) any one contribute or (ii) Form 990-EZ.  For an organization year, total contribution	one contributor Complete Parts I and II See instructions for determining a contributor's total contributions in described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 or, 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,

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)

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Employer identification number

58-2637116

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed

(c)   Name, address, and ZIP + 4   Total contributions   Type of contribution   Type of contributions   Type of contribution	Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed	
PO BOX 76070   SANDY SPRINGS, GA 30358   Sand SPRINGS, GA 30358   Complete Part II for noncesh contributions   Type of contribution			, ,	
No.   Name, address, and ZIP + 4   Total contributions   Type of contribution	1	PO BOX 76070	\$15,791.	Payroll Noncash X (Complete Part II for
PO BOX 76070		• •	- T	
No.   Name, address, and ZIP + 4   Total contributions   Type of contribution	2	PRIYA DEEPAK PO BOX 76070	\$3,948.	Person X Payroll Noncash X (Complete Part II for
PO BOX 76070   SANDY SPRINGS, GA 30358   Sandy Springs, GA 30358   Payroll   Complete Part II for noncash contributions   Person   Compl		• •	•	1
No. Name, address, and ZIP + 4  DEEPAK RAGHAVAN AND PRIYA DEEPAK  PO BOX 76070  SANDY SPRINGS, GA 30358  (a) (b) (c) (d) Total contributions  DEEPAK RAGHAVAN AND PRYIA DEEPAK  PO BOX 76070  SANDY SPRINGS, GA 30358  (b) (c) (d) Type of contributions  DEEPAK RAGHAVAN AND PRYIA DEEPAK  PO BOX 76070  SANDY SPRINGS, GA 30358  (c) (d) Type of contributions  Person X Payroll Noncash X (complete Part II for noncash contributions)  (a) (a) (b) (c) (d) Total contributions  (c) (d) Type of contributions  Person X Payroll Noncash X (complete Part II for noncash contributions)  (a) No. Name, address, and ZIP + 4  DEEPAK RAGHAVAN AND PRIYA DEEPAK  PO BOX 76070  SANDY SPRINGS, GA 30358	3	PO BOX 76070	\$15,691.	Payroll Noncash X (Complete Part II for
PO BOX 76070   \$ 26,609.		` '	· · ·	1
No. Name, address, and ZIP + 4  Total contributions  Type of contribution  Type of contribution  Person X Payroll Noncash X (Complete Part II for noncash contributions)  (a) No. Name, address, and ZIP + 4  DEEPAK RAGHAVAN AND PRIYA DEEPAK  PO BOX 76070  SANDY SPRINGS, GA 30358  Person X Payroll Noncash Contributions  (b) Total contributions  Person X Type of contributions  Person X Type of contributions  (Complete Part II for noncash Contributions)  Person X Payroll Noncash X (Complete Part II for noncash contributions)	4	PO BOX 76070	s26,609.	Payroll Noncash X (Complete Part II for
Payroll			1	, ,
No. Name, address, and ZIP + 4  Total contributions  Type of contribution  Type of contribution  Type of contribution  Type of contribution  Type of contribution  Type of contribution  Type of contribution  Type of contribution  Type of contribution  Type of contribution  Type of contribution  Type of contribution  Type of contribution  Type of contribution  Type of contribution  Type of contribution  Type of contribution  Type of contribution	5	PO BOX 76070		Payroll Noncash X (Complete Part II for noncash contributions)
PO BOX 76070  SANDY SPRINGS, GA 30358  SANDY SPRINGS, GA 30358  Payroll Noncash X (Complete Part II for noncash contributions.)		, , ,		, ,
		PO BOX 76070 SANDY SPRINGS, GA 30358		Payroll Noncash X (Complete Part II for noncash contributions.)

Employer identification number

58-2637116

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed

Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	nal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	DEEPAK RAGHAVAN AND PRIYA DEEPAK PO BOX 76070 SANDY SPRINGS, GA 30358	\$ 11,768.	Person X Payroll X Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	DEEPAK RAGHAVAN AND PRIYA DEEPAK PO BOX 76070 SANDY SPRINGS, GA 30358	\$\$	Person X Payroll X Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	DEEPAK RAGHAVAN AND PRIYA DEEPAK PO BOX 76070 SANDY SPRINGS, GA 30358	\$\$. 	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	DEEPAK RAGHAVAN AND PRIYA DEEPAK PO BOX 76070 SANDY SPRINGS, GA 30358	- \$\$5,479.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	PRIYA DEEPAK PO BOX 76070 SANDY SPRINGS, GA 30358	\$\$	Person X Payroli
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	DEEPAK RAGHAVAN AND PRIYA DEEPAK PO BOX 76070 SANDY SPRINGS, GA 30358	s <u>36,269</u> .	Person X Payroll
523452 10-2		Schedule B (Form	990, 990-EZ, or 990-PF) (2015)

Employer identification number

58-2637116

Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	al space is needed	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
13	DEEPAK RAGHAVAN AND PRIYA DEEPAK		Person X Payroll
	PO BOX 76070	\$3,808.	Noncash X
	SANDY SPRINGS, GA 30358		(Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
14	DEEPAK RAGHAVAN AND PRIYA DEEPAK		Person X Payroll
	PO BOX 76070	\$ 34,524.	Noncash X
	SANDY SPRINGS, GA 30358		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>15</u>	PRIYA DEEPAK		Person X
	PO BOX 76070	\$ 11,843.	Payroll X
	SANDY SPRINGS, GA 30358		(Complete Part II for noncash contributions)
(a) <b>N</b> o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
16	DEEPAK RAGHAVAN AND PRIYA DEEPAK		Person X
	PO BOX 76070	\$ 1,579.	Payroll
	SANDY SPRINGS, GA 30358		(Complete Part II for noncash contributions.)
(a) <b>N</b> o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>17</u>	DEEPAK RAGHAVAN AND PRIYA DEEPAK		Person X
	PO BOX 76070	\$	Payroll
	SANDY SPRINGS, GA 30358		(Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
18	DEEPAK RAGHAVAN AND PRIYA DEEPAK		Person X Payroll
	PO BOX 76070	\$9,869.	Noncash X
	SANDY SPRINGS, GA 30358		(Complete Part II for noncash contributions)
523452 10-2		Schedule B (Form	990, 990-EZ, or 990-PF) (2015)

Name of organization THE DEEPAK RAGHAVAN FAMILY Employer identification number

FOUND	ATION, INC.	58	3-2637116
Part I	Contributors (see instructions) Use duplicate copies of Part I	ıf addıtıonal space ıs needed	
(a) <b>N</b> o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	THE PD 2012 TRUST PO BOX 76070 SANDY SPRINGS, GA 30358	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b> \$</b>	Person Payroll Payroll 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
		\$	Person Payroll Noncash Complete Part II for

Employer identification number

58-2637116

FOUND	ATION, INC.	58	<u> 2637116                                    </u>
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
1	200 SHS EPAM SYSTEMS		
		\$\$	12/21/15
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	50 SHS EPAM SYSTEMS	_	
		\$\$	12/21/15
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	100 SHS UNITED THERAPEUTICS		
		\$ 15,691.	12/21/15
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4	35 SHS ALPHABET/GOOGLE		
		\$ 26,609.	12/21/15
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
5	325 SHS EPAM SYSTEMS		
		\$\$	12/21/15
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
6	47 SHS UNITED THERAPEUTICS		
			12/21/15

Name of organization THE DEEPAK RAGHAVAN FAMILY Employer identification number

Part II	ATION, INC.  Noncash Property (see instructions) Use duplicate copies of P	Part II if additional space is needed	
		arrini additional space is needed	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
7	75 SHS UNITED THERAPEUTICS		
		\$ 11,768	12/21/15
(a) No. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
8	400 SHS MICROSOFT		
		\$ \$ 21,916	12/21/15
(a) No. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
9	150 SHS MICROSOFT	_	
		\$8,219	12/21/15
(a) No. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
10	100 SHS MICROSOFT		
10		\$ 5,47 <u>9</u>	12/21/15
(a) No. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
11	25 SHS EVEREST RE GROUP		
		\$\$	12/21/15
(a) No. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
12	200 SHS EVEREST RE GROUP		
		s 36,269	9.   12/21/15

Employer identification number

58-2637116

Part II	Noncash Property	(see instructions)	Use duplicate copie	es of Part II if additional space is	needed
---------	------------------	--------------------	---------------------	--------------------------------------	--------

Part II	Noncasti Property (see instructions) Ose duplicate copies of Pa	- additional space is needed	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
13	21 SHS EVEREST RE GROUP		
		\$\$	12/21/15
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
14	350 SHS ISHARES RUSSELL		-
	-	\$\$	12/21/15
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>15</u>	150 SHS EPAM SYSTEMS		
		\$\$	12/21/15
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
16	20 SHS EPAM SYSTEMS		
		\$\$	12/21/15
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
17	30 SHS EPAM SYSTEMS		
		\$\$.	12/21/15
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
18	125 SHS EPAM SYSTEMS		
523453 10-26	1-15	\$ 9,869.	12/21/15 990, 990-EZ, or 990-PF) (2015)

Employer identification number

THE	DEEPAK	RAGHAVAN	FAMILY
	Dudiim	IGIGIDITATE	

FOIDIDATION TNC 58-2637116

	the year from any one contributor. Complete completing Part III, enter the total of exclusively religion		willy little effity. For organizations r less for the year (Enterthis info once)
No. om art I	Use duplicate copies of Part III if addition  (b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_   :			
		(e) Transfer of gif	<u> </u>
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
No. m	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_   ·			
	Transferee's name, address, a	(e) Transfer of gif	Relationship of transferor to transferee
lo. m t l	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_   -	-	(e) Transfer of gif	t
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
No. m	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_   ·			
		(e) Transfer of gif	it
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
1 '			

Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (c) Date acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (d) Date sold 2-story brick warehouse, or common stock, 200 shs. MLC Co. (mo., day, yr.) (mo., day, yr.) P 1a SEE ATTACHMENT D-6744 12/31/15 12/31/15 b SEE ATTACHMENT D-6744 P c SEE ATTACHMENT D-3083 P 12/31/15 d SEE ATTACHMENT D-3083 P 12/31/15 e SEE ATTACHMENT D-3084 P 12/31/15 SEE ATTACHMENT D-3084 P 12/31/15 P 12/31/15 SEE ATTACHMENT D-8211 h SEE ATTACHMENT D-8211 P 12/31/15 SEE ATTACHMENT D-8212 P 12/31/15 SEE ATTACHMENT D-8212 P 12/31/15 k SEE ATTACHMENT P 12/31/15 D-8214 SEE ATTACHMENT D-8214 12/31/15 P m BASIS ADJUSTMENTS P 12/31/15 n THE BLACKSTONE GROUP CAPITAL GAIN P 12/31/15 o THE BLACKSTONE 12/31/15 GROUP CAPITAL (g) Cost or other basis (h) Gain or (loss) (f) Depreciation allowed (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 369,026. 334,466. -34,560. а 491,672. 387,828. 103,844. b 29,777. -3,640. 26,137. С 6,998. d 57,804. 50,806. 28,013. -2,781. 25,232. е 92,540. 92,796. -256. 266,938. 260,394 6,544. 9,340. 8,605. 735. h 82,340. 76,604. 5,736. 1,825. 1,105.720. 96,139. 98,965. 2,826. k 10,909. 11,999. -1,090. -53. 53. m 117. 117. n 1. -1. 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any -34,560. a 103,844. b С -3,640.6,998. d -2,781. е -256. 6,544. 735. 5,736. 720. 2,826. k -1,090. I -53. m <del>117</del>. n -1. 0 { If gain, also enter in Part I, line 7 } If (loss), enter "-0-" in Part I, line 7 } 2 Capital gain net income or (net capital loss) 2 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8

(a) List and 2-story bri	describe the kind(s) of property so ck warehouse; or common stock,		P - Purchase D - Donation	(c) Date acquired (mo., day, yr)	(d) Date sold (mo., day, yr.)	
1a CAPITAL GAINS I						
b						
C						<del></del>
d						<del></del> -
e f						
g						
h						
I					i - i	
J						
k						
1		<del></del>				
m						
n		<del></del> .				<u> </u>
0	(f) Depreciation allowed	(g) Cost or other basis	Т	l /h	ll ) Gaın or (loss)	
(e) Gross sales price	(or allowable)	plus expense of sale		(e) p	lus (f) minus (g)	
a 5,519.	· · · · · · · · · · · · · · · · · · ·		+			5,519
b			1			
c						
d						
e						
f			+			
g			+			
<u>h</u>		<u> </u>	<del> </del>			
1			1			
<u>,                                      </u>			+	-		
1			1		<u>.</u>	
m						
n						
0						
Complete only for assets showing	g gain in column (h) and owned by		4	(I) Los	ises (from col. (h)) of col. (h) gain over	ool (k)
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		but n	ot less than "-0-")	cui. (k),
		Over col. (j), il ally	+		<u> </u>	5,519
a						3,319
b c			+			
d			1			
e						
f						
g						
h			+			
		<u> </u>	+			
l k			+			<del></del>
l l	<del></del>		+	<del></del>		
m	_		1			
n						
0						
2 Capital gain net income or (net cap	pital loss) { If gain, also ent	er in Part I, line 7 '-0-" in Part I, line 7	2			90,658
3 Net short-term capital gain or (los			<u> </u>		· .	
If gain, also enter in Part I, line 8, ( If (loss), enter "-0-" in Part I, line 8	column (c).	)	3		N/A	

3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
SRI MAHALAKSHMI TEMPLE OF ATLANTA	N/A	PUBLIC	RELIGION	
1637 PEACHTREE PARKWAY				٠.,
CUMMING, GA 30047			<del>   </del>	1,00
KIPP METRO ATLANTA	N/A	PUBLIC	EDUCATION	
350 TEMPLE STREET NW	,,,,	100000	DECEMPON.	
ATLANTA, GA 30314				50
IIT FOUNDATION	N/A	PUBLIC	EDUCATION	
P.O. BOX 2884 CASTRO VALLEY, CA 94546				1,00
				,
MV FOUNDATION FUNDRAISER 201 NARAYAN APARTMENTS	N/A	PUBLIC	EDUCATION	
WEST MARREDPALLY, SECUNDERABAD, INDIA				
500026				50
RABUN CO BOARD OF EDUCATION	N/A	PUBLIC	EDUCATION	
963 TIGER CONNECTOR ROAD				
TIGER, GA 30576				25
COMMUNITY PANTRY INC P.O. BOX 1067	N/A	PUBLIC	GENERAL	
CLAYTON, GA 30525				50
			<del> </del>	
		<u> </u>		
Total from continuation sheets				3,75

FORM 99	0-PF	G	AIN OR	(LOSS)	FROM	SALE	OF	A	SSETS		STA	TEMENT	1
DESCRIE	(A) PTION OF	PROPERTY							ANNER QUIRED		TE IRED	DATE S	OLD
SEE ATT	ACHMENT	D-6744					P	UR	CHASED		_	12/31	/15
	GRO	B) OSS PRICE	COS	C) F OR BASIS	EXI	(D) PENSE SALE	OF	,	(E)	c.	GAIN	(F) OR LOS	S
		334,466.		369,026	•		0	•		0.		-34,5	60.
DESCRIE	(A) PTION OF	PROPERTY							ANNER QUIRED		TE IRED	DATE S	OLD
SEE ATT	CACHMENT	D-6744	_				P	UR	CHASED			12/31	/15
		в)		2)		(D)			(E)			(F)	
		OSS PRICE		r or Basis	EXI	PENSE SALE	OF	,	DEPRE	c.	GAIN OR LOSS		
		491,672.		501,536	•		0	•		0.		-9,8	64.
DESCRIE	(A) PTION OF	PROPERTY							ANNER QUIRED		TE IRED	DATE S	OLD
SEE ATT	ACHMENT	D-3083	_				P	UR	CHASED			12/31	/15
	GR	B) OSS	COS'	C) T OR	EXI	(D) PENSE	OF	•	(E)	<b>a</b>	C) T)	(F)	ıa
	SALES	PRICE	OTHER	BASIS		SALE			DEPRE		GAIN	OR LOS	
		26,137.		29,777	•		0	•		0.		-3,6	40.

	12/31/15 (F) GAIN OR LOSS
GROSS COST OR EXPENSE OF SALES PRICE OTHER BASIS SALE DEPREC.  57,804. 50,806. 0. 0.  (A) MANNER DA	
57,804. 50,806. 0. 0. 0. (A) MANNER DA	
(A) MANNER DA	6 000
• •	6,998.
DESCRIPTION OF PROPERTY ACQUIRED ACQUI	ATE JIRED DATE SOLD
SEE ATTACHMENT D-3084 PURCHASED	12/31/15
(B) (C) (D) (E) GROSS COST OR EXPENSE OF SALES PRICE OTHER BASIS SALE DEPREC.	(F)
	GAIN OR LOSS
25,232. 28,013. 0. 0.	-2,781.
	ATE JIRED DATE SOLD
SEE ATTACHMENT D-3084 PURCHASED	12/31/15
(B) (C) (D) (E) GROSS COST OR EXPENSE OF	(F)
SALES PRICE OTHER BASIS SALE DEPREC.	GAIN OR LOSS
92,540. 92,796. 0. 0.	-256.
, ,	ATE JIRED DATE SOLD
SEE ATTACHMENT D-8211 PURCHASED	12/31/15
(B) (C) (D) (E) GROSS COST OR EXPENSE OF SALES PRICE OTHER BASIS SALE DEPREC.	(F) GAIN OR LOSS
266,938. 260,394. 0. 0.	6,544.

DESCRIP	(A) TION OF	PROPERTY			i	MANNER ACQUIRED	DA ACQU		DATE SOLD
SEE ATT	ACHMENT	D-8211	<del></del>		PI	URCHASED			12/31/15
	GRO	B) OSS PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	c.	GAIN	(F)
		9,340.	8,605.		0	•	0.		735.
DESCRIP	(A) TION OF	PROPERTY			1	MANNER ACQUIRED	DA ACQU	TE IRED	DATE SOLD
SEE ATT	ACHMENT	D-8212	_		PI	URCHASED			12/31/15
	GRO	B) DSS PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	<b>.</b>		(F)
		82,340.	76,604.		0		0.	-	5,736.
DESCRIP	(A) TION OF	PROPERTY			i	MANNER ACQUIRED	DA ACQU		DATE SOLD
SEE ATT	ACHMENT	D-8212	_		P	URCHASED			12/31/15
		B)	(C)	(D)	<b>0</b> =	(E)			(F)
		OSS PRICE	COST OR OTHER BASIS	EXPENSE SALE	OF	DEPRE	c.	GAIN	OR LOSS
		1,825.	1,105.		0	•	0.		720.
DESCRIP	(A) TION OF	PROPERTY			i	MANNER ACQUIRED	DA ACQU		DATE SOLD
SEE ATT	ACHMENT	D-8214	_		P	URCHASED			12/31/15
		B) OSS	(C) COST OR	(D) EXPENSE	OF	(E)			(F)
		PRICE	OTHER BASIS	SALE		DEPRE	c.	GAIN	OR LOSS
		98,965.	96,139.		0	•	0.		2,826.

SEE ATTACHMENT D-8214	DESCRIP	(A) PTION OF	PROPERTY					ANNER QUIRED	DA ACQU	TE IRED	DATE	SOLD
CROSS SALES PRICE   OTHER BASIS   EXPENSE OF SALE   DEPREC.   GAIN OR LOSS	SEE ATT	ACHMENT	D-8214	_		P	UR	CHASED			12/	31/15
10,909.   11,999.   0.   0.   -1,090.		GRO	oss	COST OR	EXPENSE	OF	1		_			
MANNER   ACQUIRED   DATE   SOLD		SALES		<u> </u>	SALE			DEPRE		GAIN		
DESCRIPTION OF PROPERTY			10,909.	11,999.	·	0	•		0.		-1 	,090.
C	DESCRIP		PROPERTY								DATE	SOLD
COST OR OTHER BASIS	BASIS A	DJUSTME	NTS	_		P	URO	CHASED			12/	31/15
SALES PRICE   OTHER BASIS   SALE   DEPREC.   GAIN OR LOSS								(E)			(F)	
MANNER ACQUIRED   DATE SOLD						OF		DEPRE	<b>:</b> .	GAIN	OR L	oss
DESCRIPTION OF PROPERTY  THE BLACKSTONE GROUP CAPITAL GAIN  (B) (C) (D) (E) (F) GROSS COST OR EXPENSE OF DEPREC.  117.  0.  0.  0.  117.  (A) DESCRIPTION OF PROPERTY  DESCRIPTION OF PROPERTY  (B) (C) (D) (E) (F) DEPREC.  GAIN OR LOSS  ACQUIRED DATE SOLD  MANNER ACQUIRED ACQUIRED DATE SOLD  THE BLACKSTONE GROUP CAPITAL GAIN  (B) (C) (D) (E) (F) GROSS COST OR EXPENSE OF DEPREC.  (B) (C) (D) (E) (F) GROSS SALES PRICE OTHER BASIS  0.  1.  CAPITAL GAINS DIVIDENDS FROM PART IV  5,519.			0.	53.		0	•		0.			-53.
(B) GROSS SALES PRICE         (C) OTHER BASIS         (D) EXPENSE OF DEPREC.         (F) GRIN OR LOSS           117.         0.         0.         0.         117.           DESCRIPTION OF PROPERTY         ACQUIRED ACQUIRED ACQUIRED DATE SOLD         DATE SOLD         DATE SOLD           THE BLACKSTONE GROUP CAPITAL GAIN         PURCHASED         12/31/15           (B) GROSS SALES PRICE OTHER BASIS         COST OR SALES PRICE OTHER BASIS SALE         DEPREC. GAIN OR LOSS           0.         1.         0.         0.         -1.           CAPITAL GAINS DIVIDENDS FROM PART IV         5,519.	DESCRIP		PROPERTY								DATE	SOLD
GROSS SALES PRICE OTHER BASIS SALE DEPREC. GAIN OR LOSS  117. 0. 0. 0. 117.    MANNER ACQUIRED ACQUIRED DATE SOLD	THE BLA	CKSTONE	GROUP CA	- PITAL GAIN		P	URO	CHASED			12/	31/15
117.   0.   0.   0.   117.		GRO	oss	COST OR	EXPENSE	OF	,		~			ารร
DESCRIPTION OF PROPERTY  THE BLACKSTONE GROUP CAPITAL GAIN  (B) (C) (D) (E) (F) GROSS COST OR EXPENSE OF SALES PRICE OTHER BASIS  0. 1. 0. 01.  CAPITAL GAINS DIVIDENDS FROM PART IV  ACQUIRED ACQUIRED DATE SOLD  (F) (F) (F) (ACQUIRED ACQUIRED DATE SOLD  (ACQUIRED ACQUIRED DATE SOLD  (B) (C) (D) (E) (F) (C) (C) (D) (E) (F) (F) (F) (F) (F) (F) (F) (F) (F) (F)						0	<u> </u>				<u> </u>	
(B)         (C)         (D)         (E)         (F)           GROSS         COST OR OTHER BASIS         EXPENSE OF SALE         DEPREC.         GAIN OR LOSS           0.         1.         0.         0.         -1.           CAPITAL GAINS DIVIDENDS         FROM PART IV         5,519.	DESCRIP		PROPERTY	_							DATE	SOLD
GROSS COST OR EXPENSE OF DEPREC. GAIN OR LOSS  0. 1. 0. 01.  CAPITAL GAINS DIVIDENDS FROM PART IV 5,519.	THE BLA	CKSTONE	GROUP CA	PITAL GAIN		P	UR	CHASED			12/	31/15
CAPITAL GAINS DIVIDENDS FROM PART IV 5,519.		GR	oss	COST OR	EXPENSE	OF	י		c.			oss
			0.	1.		0	· ·		0.			-1.
TOTAL TO FORM 990-PF, PART I, LINE 6A -23,050.	CAPITAL	GAINS	DIVIDENDS	FROM PART IV							5	,519.
	TOTAL T	O FORM	990-PF, P	ART I, LINE 6A					•		-23	,050.

FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SECUR	ITIES S'	<b>TATEMENT</b>	 2 
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME		
LAZARD, LTD						_
DIVIDENDS	153.	0.	153.	153.		
MS CGD - 3083	2,058.	2,058.	0.	0.		
MS CGD - 3084	1,105.	1,105.	0.	0.		
MS CGD - 6744	2,351.	2,351.	0.	0.		
MS CGD - 8212	5.	5.	0.	0.		
MS DIVIDENDS -						
3083	5,394.	0.	5,394.	5,394.		
MS DIVIDENDS -						
3084	8,156.	0.	8,156.	8,156.		
MS DIVIDENDS -		_				
6744	26,869.	0.	26,869.	26,869.		
MS DIVIDENDS -	4 600	•	4 400			
8211	1,602.	0.	1,602.	1,602.		
MS DIVIDENDS -	0 505	•	0 505	0 505		
8212	2,597.	0.	2,597.	2,597.		
MS DIVIDENDS -	1 702	0	1 700	1 700		
8214 MS INTEREST - 3083	1,702.	0. 0.	1,702.			
MS INTEREST - 3084	1. 133.	0.	1. 133.			
MS INTEREST - 6744	4.	0.	4.			
MS T/E DIVIDENDS -	4.	0.	<b>3.</b> •	4.		
3084	1,714.	0.	1,714.	0.		
MS T/E DIVIDENDS -	1,711.	•	1,714.	•••		
6744	2,313.	0.	2,313.	0.		
THE BLACKSTONE GR	-,	•	_,,,	• •		
DIVIDENDS	10.	0.	10.	10.		
THE BLACKSTONE GR						
INTEREST	34.	0.	34.	34.		
TO PART I, LINE 4	56,201.	5,519.	50,682.	46,655.		
= = = = = = = = = = = = = = = = = = =	30,201.	=======================================	30,002.	40,033:		_
EORN 000 DE	=	OMUED INCO	WE	Cr	na memerim	<u> </u>
FORM 990-PF		OTHER INCO	ME 	S'.	TATEMENT	3
DESCRIPTION		RE		(B) ET INVEST- ENT INCOME	(C) ADJUSTED NET INCOM	
THE BLACKSTONE GROUP	ומקק חקוע – כ	·,				
ESTATE INCOME	. HUI KUMI	_	2.	2.		
THE BLACKSTONE GROUP	3 N. 1910		- •			
THE PERCHAPONE GROOM	- NET					
ROYALTIES	P - NET		1.	1.		

THE DEEPAK RAGHAVAN FAMILY	FOUNDATION,	I		58-2637116
THE BLACKSTONE GROUP - NET O'INCOME	THER	7.	7	
TOTAL TO FORM 990-PF, PART I,	, LINE 11 ==	39.	39	•
FORM 990-PF (	OTHER PROFES	SIONAL FEES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
MS INVESTMENT FEES	7,941.	7,941.		0.
TO FORM 990-PF, PG 1, LN 16C	7,941.	7,941.		0.
FORM 990-PF	TAX	ES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
FOREIGN TAX EXCISE TAX	473. 10,400.			0.
TO FORM 990-PF, PG 1, LN 18	10,873.	473.		0.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 6
DESCRIPTION		ВО	OK VALUE	FAIR MARKET VALUE
MS SECURITIES - 6744 MS SECURITIES - 3083 MS SECURITIES - 3084 MS SECURITIES - 8211 MS SECURITIES - 8212 MS SECURITIES - 8214			1,773,928. 418,702. 234,375. 140,316. 152,154. 126,807.	1,799,882. 443,911. 230,187. 137,779. 156,780. 126,811.
TOTAL TO FORM 990-PF, PART I	I, LINE 10B		2,846,282.	2,895,350.