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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

Depa Inter	ertmen nal Re	it of the Treasury	social security numbers or m 990-PF and its separate	n this form as	it may be m	ade public. s. <i>gov/form990of.</i>	QUID Open to Public Inspection
_		ndar year 2015 or tax year beginning		, and e			Open to Fublic Inspection
Na	me of	foundation				A Employer identification	n number
		I AND NAINA PATEL FOUND				77-0490360) <u> </u>
		and street (or P O box number if mail is not delivered to street	address)		Room/suite	B Telephone number	
		1 TRUXTUN AVENUE				661-322-22	
		own, state or province, country, and ZIP or foreign per ERSFIELD, CA 93309	ostal code			C If exemption application is p	pending, check here
G (Check	all that apply: Initial return	Initial return of a f	ormer public (charity	D 1. Foreign organization:	s, check here
		Final return	Amended return			2 5	
		Address change	Name change			2. Foreign organizations me check here and attach co	omputation
H (_	type of organization: X Section 501(c)(3) exction 4947(a)(1) nonexempt charitable trust	kempt private foundation Other taxable private found	ation		E If private foundation sta under section 507(b)(1	
I Fa		arket value of all assets at end of year J Account		Accr	ual	F If the foundation is in a	•••
(fi	rom l		ther (specify)			under section 507(b)(1	
	\$	15,188,276. (Part I, colu	mn (d) must be on cash	basıs.)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Pa	ert i	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books		vestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	2,780,200.		Marie (N/A	
	2	Check In the foundation is not required to attach Sch. B		The state of the s		只是是自己是了否。	是基金被下来。
	3	Interest on savings and temporary cash investments	40,350.		0,350.		STATEMENT 1
	4	Dividends and interest from securities	97,486.		6,177.		STATEMENT 2
		Gross rents	<37,277.	> <3	7,277.	>	STATEMENT 3
	۱ ـ	Net rental income or (loss) <37,277.>					
e	ba	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 9,106,972.	922,259.				The same of the second second
Revenue	7	assets on line 6a 9, 100, 9/2. Capital gain net income (from Part IV, line 2)			2,259.		Entre Control
æ	8	Net short-term capital gain	- No 19 19 19 19 19 19 19 19 19 19 19 19 19			7 47 4 4 4	1.25 mass 1.1 1.1 1.2 1.2
	9	Income modifications			and the second s		The state of the s
	10a	Gross sales less returns and allowances		Control of the second			The state of the s
		Less Cost of goods sold	The first of the second		والمستريدة	Contraction of the	建分子员 计一人
	C	Gross profit or (loss)		¥.	(ex e i		
	11	Other income	46,576.		6,576.		STATEMENT 4
	12	Total. Add lines 1 through 11	3,849,594.	1,06	8,085.	7	
	13	Compensation of officers, directors, trustees, etc	0.		0.		0.
	14	Other employee salaries and wages Pension plans, employee benefits					
S	10	Pension plans, employee benefits Legal fees DEC 01 2016	<u></u>				
ŠUŠ	1	Accounting fees			 -		
器		Other professional fees					
Š	17	Interest					
e re	18	Taxes STMT 5	9,628.		0.		0.
⊒ist	19	Depreciation and depletion					- 1 ·
ᅹ	20	Occupancy					
~ĕ	21	Travel, conferences, and meetings					
ੂ ਛੋ ਜ	22	Printing and publications	4.00				
ging.	23	Other expenses STMT 6	127,750.	11	7,760.		9,598.
Operating and Administrative Expenses	24	Total operating and administrative	137,378.	11	7 760		0.500
Ö	25	expenses. Add lines 13 through 23	1,592,801.		<u>7,760.</u>		9,598.
	25 26	Contributions, gifts, grants paid Total expenses and disbursements	1,334,001.		<u> </u>		1,592,801.
	- "	Add lines 24 and 25	1,730,179.	11	7,760.		1,602,399.
	27	Subtract line 26 from line 12:			. , , , , , ,		1,002,009.
		Excess of revenue over expenses and disbursements	2,119,415.	-	_		
		Net investment income (if negative, enter -0-)		95	0,325.		
	C	Adjusted net income (if negative, enter -0-)			, -	N/A	

1 Cash - non-interest-bearing 2,555,500 72,210 7	F	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year		of year
2 Savepas and temporary cash evestments 2 2,027,783. 3,186,512. 3,186,512. 3 Accounts recreable ▶ Less: allowance for doubtful accounts ▶ 4 Pelludges recreable ▶ Less: allowance for doubtful accounts ▶ 5 Grants recreable ▶ Less: allowance for doubtful accounts ▶ 6 Recevables due from offices, directors, finaleses, and other disqualified persons 7 Out restricts the scenario 10 Investments of state or use 9 Propared companies and deferred charges 10a, Investments - corporate block 11 Investments - corporate block 12 Investments - corporate block 13 Investments - corporate block 14 Land, buildings, and dayment blass ▶ Less cashed represents 15 Unter assets (descreb ▶ 16 Total assets to be completed by all filers - see the structures, Asks, see page 1, dem 1) 17 Accounts asyable and accread expenses 18 Grants payable 19 Deferred revenue 10 Deferred revenue 11 Deferred revenue 12 Total intabilitée (add times 17 through 22) 13 Total intabilitée (add times 17 through 22) 14 Univestition that follow SFAS 117, check here 15 Deferred accomplete lines 24 through 22 and complete lines 24 through 22 and complete lines 24 through 28 and lines 30 and 31. 15 Total relat assets or fund balances a tegenmay of year - Part II, chamm (a), line 30 15 Total relat assets or fund balances a tegenmay of year - Part II, chamm (a), line 30 16 Decreases not included in line 2 (ternue) ▶ 17 Total relat assets or fund balances at 4d of year (line 4 minus line 5) - Part II, column (b), line 30 17 Total relat assets or fund balances at 4d of year (line 4 minus line 5) - Part II, column (b), line 30 18 Total relatases of the decla	<u>:</u>		COMMIN SHOULD OF FOR THE OFFICE AMOUNTS UNITY	(a) Book Value	(b) Book Value	
A Accounts receivable ► Less: Allowance for doubtid accounts ► 4 Pledges receivable ► Less: Allowance for doubtid accounts ► 5 Cantis receivable due from officers, directors, hustess, and other disqualified persons 7 Our relate subtrantered by the first of th		1	-		72,210.	72,210.
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Price receivable Less: allowance for doubtil accounts		3				
Service receivable		Ì				
S Grants receivable 6 Receivables due from officers, directors, flustees, and other disqualified persons 7 One relist and beautermable Less: allowater for doubtful accounts > 10 Investments: - List and state powermable 10 Investments: - List and state power and to bligations 11 Investments: - List and state power and to bligations 12 Investments: - List and state power and to bligations 13 Investments: - corporate bonds 14 Land, buildrang, and equipment basis 15 Other assets (describe > 16 Total assets (for be completed by all filers - see the matriactions. Also, see page 1, dem 1) 17 Accounts reproaches 18 Grants payable and accrued expenses 19 Deferrance from the see that the season of the see that the season of the		4			ELLER BEER	established in Table
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27 Capital stuck, dust principal, or current funds 0 . 0 . 0 .	Ę		and complete lines 27 through 31.			
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Total liabilities and net assets/fund balances 11,089,686. 13,209,954.	ΙÀ	29	Retained earnings, accumulated income, endowment, or other funds	11,089,686.		STATEMENT 7
Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	Ž	30	Total net assets or fund balances	11,089,686.	13,209,101.	77. (7)
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(must agree with end-of-year figure reported on prior year's return)111,089,686.2Enter amount from Part I, line 27a22,119,415.3Other increases not included in line 2 (itemize)30.4Add lines 1, 2, and 3413,209,101.5Decreases not included in line 2 (itemize)50.6Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30613,209,101.						
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			· · · · · · · · · · · · · · · · · · ·			
	6	Iotal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	

2-story brick warehouse; or common stock, 200 shs. MLC Co.)				P - Pi	vacquired urchase onation	(c) Date (mo., c	acquired lay, yr.)	(d) Date so (mo., day, y		
b SEE ATTACHED	CMAL	PEMENING	-		 		·		ļ	
	SIM.	EMENIS			 				<u> </u>	
d			····		<u> </u>				<u> </u>	
e					 					
(e) Gross sales price	(f) [Depreciation allowed (or allowable)		t or other basis xpense of sale				ain or (loss s (f) minus		
a										
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d										
e 9,106,972.				8,184,71	.3 •				922,2	159.
Complete only for assets showing				·				Col. (h) gain		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any		COI.		not less tha (from col. (
<u>a</u>					_					
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_d										
e		<u> </u>		·					922,2	159.
2 Capital gain net income or (net ca	pital loss)	If gain, also enter If (loss), enter -0-			} 2				922,2	159.
3 Net short-term capital gain or (los	s) as defi	ned in sections 1222(5) and	d (6):		ζ					
If gain, also enter in Part I, line 8,	column (d	:).			}					
If (loss), enter -0- in Part I, line 8		1 4040() (<u> </u>	<u> </u>	<u> </u>		N/A		
		ection 4940(e) for				tment inc	ome	····		
(For optional use by domestic private	foundation	ons subject to the section 4	940(a) tax on	net investment in	icome.)					
lf section 4940(d)(2) applies, leave tl	ns part bla	ank.								
Was the foundation liable for the sec				•	uody				Yes X	⊾ No
If "Yes," the foundation does not qual Enter the appropriate amount in					ntrice					
(a)	Jacii Colui		30 00 0000 000	Ore making any e		 .	T		(d) -	
Base periód years Calendar year (or tax year beginnii	na .n)	(b) Adjusted qualifying disti	ributions	Net value of no	(c) Incharitat	ile-use assets		Distrit	oution ratio (ided by col. (c)	١
2014	ig iii)		7,534.			46,823		(601. (0) 014	• 112	
2013			0,018.			63,394			.154	
2012			0,146.			26,652			.055	
2011			5,645.			58,563		-	.057	
2010			6,734.			33,430			.043	
2010	I.		0,751		<u> </u>	33,430	+	Ι	• 0 = 0	=00
2 Total of line 1, column (d)							2		.422	117
3 Average distribution ratio for the	5-vear has	se period - divide the total o	n line 2 hv 5	or by the number	of veare				• = 2 2	
the foundation has been in exister				or by the number	or yours		3		.084	423
the learned term has been in extensi	100 11 1000	than o yours					<u> </u>		****	
4 Enter the net value of noncharitab	le-use ass	sets for 2015 from Part X. II	ле 5				4	1 1	2,949,6	02.
							_			
5 Multiply line 4 by line 3							5		1,093,2	44.
							<u> </u>		2,030,2	
6 Enter 1% of net investment incom	ne (1% of	Part I, line 27h)					6		9.5	03.
Modern South one Modern							بّ ا			
7 Add lines 5 and 6							7		1,102,7	47
							- 	 	_,,_	
8 Enter qualifying distributions from	•				8 1,602,39				99.	
If line 8 is equal to or greater than See the Part VI instructions.	line 7, ch	eck the box in Part VI, line	1b, and comp	lete that part usin	g a 1% ta	ıx rate.				

Part V.L. Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(c), or 4948 - see instructions)		n 990-PF (2015) RAVI AND NAINA PATEL FOUNDATION	<u>77-0</u>				Page 4
Disease for fulling of other ministration letter: A coll other domistic foundations with time et this section 4940(e) requirements in Part V, check here X and enter 1% of Part I, line 27b.			948 -	see ir	ıstru	ctio	ns)
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	18	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	1.				
of Part I, Ine 27b • All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, Ine 12, cob. (b). 2 Tax under action 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 3 Sy 503. 3 Subtitle A (nome) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Sy 503. 6 Exception organizations - Eax withheld at source 6 Exception organizations - Eax withheld at source 6 Examption organizations - Eax withheld at source 6 Examption organizations - Eax withheld at source 7 Coll cridds and payments. Add lines 8 bit through 80 8 Extent organizations for recties on 0 time to line (Form 8868) 8 Examptioregin organizations - Eax withheld at source 7 Coll cridds and payments. Add lines 8 bit through 80 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if form 2220 is attached 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if form 2220 is attached 8 Enter any penalty for underpayment of estimated tax. Provided to 2016 estimated tax. Provided tax. Provided tax. Provided to 2016 estimated tax. Provided							- ;
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4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tex based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 S 9,503. 3 2015 estimated tax payments and 2014 overpayment credited to 2015 6 B Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) 6 B Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) 6 B Enter any penalty for underpayment of restimated tax. Check here ☐ if Form 2220 is attached 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 8 Total credits and payments. Add hines 5 and 6, enter the amount owerpaid 10 Overpayment. Ill line? Is more than the total of lines 5 and 6, enter the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2016 estimated tax 12 Dorng the tax year, did the foundation attempt to mifuence any netional, state, or local legislation or did it participate or intervene in any political campaign? b Did it spend more than \$100 during the eyar (either directly or indirectly) for political purposes (see instructions for the definitions)? If the answer is 'Yes' to Tay or 16, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. C Did the foundation have unrelated business gross income of \$1,000 more during the year: (1) On the foundation have unrelated business gross income of \$1,000 more during the year? If 'Yes,' Task filed a tax return on Form 990-F1 to the year? If 'Yes,' Task filed a tax return on Form 990-F1 to the changes B Has the foundation have unrelated business gross income of \$1,000 or more during the year? If 'Yes,' Task filed a tax return on Form 990-F1 to the year? If 'Yes,' Task filed a ta	2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
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5 9 , 5 0 3 - Credits/Payments: 6 Credits/Payments: 8 2015 estimated tax payments and 2014 overpayment credited to 2015 8 Exempt foreign organizations - tax withheld at source 1 Exp and with application for extension of time to bit (Form 8688) 6 Eaclup withholding erroneously withheld 7 7 Total credits and payments. Add lines 6a through 6d 8 Earlier any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 8 5 52. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount ower. 10 Total credits and payments. Add lines 6a through 6d 8 Earlier any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 8 5 2. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount ower. 10 Total credits and payments. Add lines 6a through 6d 8 Earlier any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 8 5 2. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount ower. 10 Total credits and payments. Add lines 6a through 6d 8 Earlier any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than sittle of the 10 total payments. 10 Total credits and 10 total payments. Add lines 6a through 6d 11 Enter the amount of line 10 to be. Credited to 2016 estimated tax. 12 Tax due 11 total payments. 13 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any optical campaign? 14 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any optical campaign? 14 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any optical payments. 15 During the tax year, did the foundation of the activities. 16 During the tax year, did the foundation of the acti	4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
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b If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T. 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 state law remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV Ba Enter the states to which the foundation reports or with which it is registered (see instructions) CA 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 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV Ab Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV		bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T. 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 state law remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 7 X Ba Enter the states to which the foundation reports or with which it is registered (see instructions) CA 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 9 is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV 9 X	4	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
If "Yes," attach the statement required by General Instruction T. 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 state law remain in the governing instrument? 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 7 X 8a Enter the states to which the foundation reports or with which it is registered (see instructions) • CA 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 9 is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV 9 X		b If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		
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9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV 9 X					8b	Х	
year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		endar		-		·
					9		Х
	_10	_	TMT	10	10	Х	

Pa	nrt-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	1		
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	1 1		
	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ▶ PRADIP SHAH Telephone no. ▶ 661-32		206	
	Located at ▶ 6501 TRUXTUN AVENUE, BAKERSFIELD, CA ZIP+4 ▶93	<u> 3309</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			· 🗀
	and enter the amount of tax-exempt interest received or accrued during the year		/A	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	1	ر مه منز العميد آ	差費
	foreign country >		377	
Pá	art VII-B. Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	a During the year did the foundation (either directly or indirectly):	Ç-		1
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	21	- 4 E	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			\$P. 17
	a disqualified person?	15		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1. 12. km	ا ماران الماران	大意
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	72		
	(5) Transfer any income or assets to a disqualified person (or make any of either available		. ବିହିଲ୍ଲ ନି	7
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		7	- T - N - 1
	if the foundation agreed to make a grant to or to employ the official for a period after	- 1	7 mm m	
	termination of government service, if terminating within 90 days.)	50.5		
-	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	- 5	1	1
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	1 7 -	
	Organizations relying on a current notice regarding disaster assistance check here	3		3
(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		1	- ' - ' - ' - ' - ' - ' - ' - ' - ' - '
	before the first day of the tax year beginning in 2015?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		-	1 2
	defined in section 4942(j)(3) or 4942(j)(5)):), (F)	, 1
	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		1,	- '
		-		-`,
	If "Yes," list the years >	!		ļ - ,
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	-	16"	. '
	· · · · · · · · · · · · · · · · · · ·	2ь	-1	! .
	statement - see instructions.) c if the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	20		V* 2 8
		-	,	
9	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		7"	
3	during the year?		, -	1 2
	b if "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after	1	' .	l . :
	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	_	1	3
	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,			1:
	Form 4720, to determine if the foundation had excess business holdings in 2015) N/A	3b	l	
A	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 invest during the year any amount in a marmer that would jeopardize its charitable purposes? 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 legnardy before the first day of the tax year beginning in 2015?	4b	1	x

Part VIII Information About Officers, Directors, Trustees, Foundation 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 Part IX:A. Summary of Direct Charitable Activities		▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis number of organizations and other beneficiaries served, conferences convened, research papers pro		Expenses
1 N/A		
		0.
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 1 N/A	i lines 1 and 2.	Amount
		0.
2		
All other program-related investments. See instructions. 3 NONE		
		0.
Total. Add lines 1 through 3)	0.
		Form QQ0-DF (2015)

Page 8

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndation	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	11,500,366.
b	Average of monthly cash balances	1b	1,646,438.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	13,146,804.
е	Reduction claimed for blockage or other factors reported on lines 1a and	T.	
	1c (attach detailed explanation) 1e 0 •	7.5	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	13,146,804.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	197,202.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	12,949,602.
6	Minimum investment return. Enter 5% of line 5	6	647,480.
Pa	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.)	ıd certaıı	n
1	Minimum investment return from Part X, line 6	1	647,480.
2a	Tax on investment income for 2015 from Part VI, line 5 2a 9,503.	22	
b	Income tax for 2015. (This does not include the tax from Part VI.)	م م م م م	
C	Add lines 2a and 2b	2c	9,503. 637,977.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	637,977.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	637,977.
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	637,977.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	2.5	
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	1,602,399.
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		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	1,602,399.
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	9,503.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,592,896.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies	for the section

Form **990-PF** (2015)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instru	ctions)
--	---------

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,			2	
line 7			-	637,977.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0.	
ь Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2015:				and the same of the same
a From 2010				是第二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十
bFrom 2011 35,904.			と 一方で変	
c From 2012 61,681.				
dFrom 2013 1,148,780.				
eFrom 2014 747,927.			臺灣等等 1. 15.	養語 漢子或3
f Total of lines 3a through e	1,994,292.	注意等。在\$P\$分子	最高的企业	
4 Qualifying distributions for 2015 from				
Part XII, line 4: ►\$ 1,602,399.				
a Applied to 2014, but not more than line 2a			0.	(1) 10 10 10 10 10 10 10 10 10 10 10 10 10
b Applied to undistributed income of prior	The state of the s			
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus			4 5	
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount	. }		gin ter untug t	637,977.
e Remaining amount distributed out of corpus	964,422.		e tredicité .	Ŧ
5 Excess distributions carryover applied to 2015	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))	4.2			
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,958,714.			
b Prior years' undistributed income. Subtract			THE PART	
line 4b from line 2b		0.	The state of the s	
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				<u> </u>
amount - see instructions		٥.		
e Undistributed income for 2014. Subtract line	; -	-	<u>-</u>	
4a from line 2a. Taxable amount - see instr.			0.	,
f Undistributed income for 2015. Subtract		ما يراه الماسية الماسية	z	
lines 4d and 5 from line 1. This amount must				1
be distributed in 2016	*	7. 7.		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.	0 050 511			
Subtract lines 7 and 8 from line 6a	2,958,714.			
10 Analysis of line 9:			-	
a Excess from 2011 35,904.				
b Excess from 2012 61,681.				
c Excess from 2013 1,148,780.				
d Excess from 2014 747, 927.				
e Excess from 2015 964,422.	L	<u> </u>	<u> </u>	Form 990-DE (2015)

Page 11

3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
` Recipient	If recipient is an individual,			
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	 	
a Paid during the year			<u> </u>	
		1	1	
ALLIANCE AGAINST FAMILY VIOLENCE		CHARITY	FOR ASSISTANCE IN	
1921 19TH STREET			FIGHTING DOMESTIC	
			VIOLENCE AND SEXUAL	
BAKERSFIELD, CA 93301			ASSAULT.	30,000
	1			
BAKERSFIELD HOMELESS CENTER		CHARITY	FOR HOMELESS AND POOR	
1600 EAST TRUXTUN AVENUE		}	TO EQUIP THEM FOR	
BAKERSFIELD, CA 93309		i	SELF-SUFFICIENT &	
			PRODUCTIVE FUTURE.	30,000
	1	ĺ		
BHRAHMANANDA SARASWATI FOUNDATION		CHARITY	FOR ASSISTANCE TO	
70 BROAD STREET		1	PROMOTE WORLD PEACE.	
NEW YORK, NY 10004				1,378,800
CAL STATE UNIVERSITY BAKERSFIELD		CHARITY	FOR THE ENCOURAGEMENT	
SPORTS FOUNDATION		1	AND PROMOTION OF	
PO BOX 13221			FITNESS AND	
BAKERSFIELD, CA 93389		}	SPORTSMANSHIP, THE	
	-	<u> </u>	SPONSORSHIP AND	3,000
		L		
CATHOLIC CHARITIES		CHARITY	RELIGIOUS CHARITIES -	
825 CHESTER AVENUE			GENERAL SUPPORT	
BAKERSFIELD, CA 93301	NTINUATION SHEE	<u> </u>		10,000
b Approved for future payment	MITHORITON SHE	\$1 (8)	> 3a	1,592,801
• , pproved to ratare payment		1		
NONE				
		1		
				
	 			
	}			
	<u> </u>			
Total .			▶ 3b	0

Enter gross amounts unless otherwise indicated.	Unrelated business income			by section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion code	Amount	function income
a					
b					
C					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash			1 1		
ınvestments			14	40,350.	
4 Dividends and interest from securities			14	97,486.	
5 Net rental income or (loss) from real estate:		是正弦馬克達			
a Debt-financed property	531190	<37,277	• 🕨 📗		
b Not debt-financed property					
6 Net rental income or (loss) from personal	1				
property					
7 Other investment income	ļ	·,	15	20.	46,556.
8 Gain or (loss) from sales of assets other					
than inventory			18	922,259.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:			1		
a	-		1		
b	ļ				
C	ļ		 		
d	 		1		
e		27 277	++-	1 060 115	AC EEC
12 Subtotal. Add columns (b), (d), and (e)	. 5	<37,277	• 🔼	1,060,115.	46,556. 1,069,394.
13 Total. Add line 12, columns (b), (d), and (e)				13	1,069,394.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities t	o the Accon	plishment of E	xempt	Purposes	
Line No. Explain below how each activity for which inco the foundation's exempt purposes (other than			A contribut	ed importantly to the accom	plishment of

▼	the foundation's exempt purposes (other than by providing funds for such purposes).
7	N/A

Form 990	-DE (2)	115\ PAVT	AND NAINA	PATEI.	FOID	MOTTAGE		77-0	490360	D:	age 13
		Information Re					nd Relations				ige io
r_a::::/	/ W 11 ÷	Exempt Organ	_	31013 10 a	ilia ilia		ing Holations	mpo wan non	Jilai Kabi		
4 D.d	the ere	anizătion directly or indi		of the following	a wath any	other organization	n described in sec	tion 501/c) of		Yes	No
	_	other than section 501(c						1011 30 1(0) 01		 • • •	 •••
		• •			-	-	izations,				
		rom the reporting found	ation to a noncharitad	ne exempt org	anization	01.			4.41	-	
	Cash								1a(1)		X
(2)	Other	assets						-	1a(2)	<u> </u>	X
	-	sactions:							a _r -	-7. A-	ر ماری اور با داد
(1)	Sales	of assets to a noncharita	ble exempt organizati	ЮП					1b(1)		X
(2)	Purch	ases of assets from a no	ncharitable exempt o	rganization					1b(2)	L	X
(3)	Renta	of facilities, equipment,	or other assets						1b(3)		X
(4)	Reimb	ursement arrangements	i						1b(4)		X
(5)	Loans	or loan guarantees							1b(5)		X
(6)	Perfor	mance of services or me	embership or fundrais	sing solicitation	ns				1b(6)		X
c Sha	aring of	facilities, equipment, ma	uling lists, other asset	ts, or paid emp	oloyees	_			1c		X
	_	er to any of the above is				mn (b) should alv	ways show the fair	market value of the god	ods, other as	sets,	
		given by the reporting f									
) the value of the goods,					•	•			
(a)Line no		(b) Amount involved		noncharitable	exempt o	rganization	(d) Description	n of transfers, transactions	, and sharing a	талдет	ents
``			 	N/A	-						
	+		 							_	
			-			· · · · · · · · · · · · · · · · · · ·					
			 								
			 				-	· · · · · · · · · · · · · · · · · · ·			
	+-		 							-	
	-		 				-				
						-					
	_		 								
	—		<u> </u>								
	<u> </u>		ļ								
_								 			
		·									
					-						
		•									
2a Ist	he four	idation directly or indirec	tly affiliated with, or r	elated to, one	or more ta	x-exempt organi	zations described				_
ın s	section	501(c) of the Code (othe	r than section 501(c)	(3)) or in secti	ion 527 ?				Yes	2	No 🔼
b If "\	Yes," co	mplete the following sch	iedule.								
		(a) Name of org	ganization		(b) Type	of organization		(c) Description of rela	tionship		
	-	N/A									
								- · · ·			
						•					
				-							
		penalties of perjury, I declare							May the IRS	dication	15.0
Sign	and be	lief, it is true, correct, and co	molete Degraration of pro	eparer (other than	n taxpayer)	s based on all inform	nation of which prepar	er has any knowledge	return with the	he prepa	erer
Here		x l/tw	N/		1	11-14-16	PRESI	DENT	X Yes	· —] No
	Sian	ature of officer or trustee	e e		Dat	e	Title				
	1	Print/Type preparer's n		Preparer's &				Check if F	PTIN		
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-		<u> </u>	I I I I I I I I I I	Date 115-16	self- employed			
Paid		GREGORY G.	BRAIM	/ Lu	jay.	Sille	μυ		P00192	2870)
	arer	Eurmic name CRT		.C	'-U'		<u> </u>	Firm's EIN > 33			

Phone no. (661)325-7500

Use Only

Firm's address ▶ 5060 CALIFORNIA AVE., SUITE 800

BAKERSFIELD, CA 93309

CONTINUATION FOR 990-PF, PART IV 77-0490360 PAGE 1 OF 2

RAVI AND NAINA P		77-049	90360	PAGE 1 OF 2
Part IV Capital Gains and Los	sses for Tax on Investment Income			
	describe the kind(s) of property sold ick warehouse; or common stock, 20		I I ulonus	red (c) Date acquired (d) Date sold (mo., day, yr.) (mo., day, yr.)
			D - Donatio	" 1 _ 1
a CHARLES SCHWAB			P	VARIOUS VARIOUS
MERRILL LYNCH			P	VARIOUS VARIOUS
c CHARLES SCHWAB			P	VARIOUS VARIOUS
d CHARLES SCHWAB	- #4729		P	VARIOUS VARIOUS
e UBS - #4381			P	VARIOUS VARIOUS
f UBS - #4430			P	VARIOUS VARIOUS
g PASSTHROUGH AS		K-1	P	VARIOUS VARIOUS
"	- #4124		P	VARIOUS VARIOUS
CHARLES SCHWAB	- #4729		P	VARIOUS VARIOUS
CHARLES SCHWAB	- #7421		P	VARIOUS VARIOUS
k CHARLES SCHWAB	- #8998		P	VARIOUS VARIOUS
UBS - #4381			P	VARIOUS VARIOUS
m UBS - #4430			P	VARIOUS VARIOUS
n PASSTHROUGH AS	CEND PARTNERS II	K-1	P	VARIOUS VARIOUS
O PASSTHROUGH FR	ANCISCO PARTNERS	III CAYMAN K-1	P	VARIOUS VARIOUS
(e) Gross sales price	(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (loss)
	(or allowable)	plus expense of sale	((e) plus (f) minus (g)
2,090,073.		2,134,752.		<44,679.
73,281.		91,157.		<17,876.
62,479.		92,577.		<30,098.
2,878,326.		2,599,440.		278,886.
47,786.		48,341.		<555.
39,579.		40,596.		<1,017.
43,193.			· -	43,193.
436,605.		276,981.		159,624.
2,150,969.		1,824,474.		326,495.
532,353.		448,289.		84,064.
488,949.		462,560.		26,389.
113,392.		122,395.		<9,003.
41,570.		42,992.		<1,422.
2,713.				2,713.
62,173.				62,173.
Complete only for assets showing	ng gain in column (h) and owned by t		(I)	Losses (from col. (h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (ı) over col. (ı), ıf any	Gains (exce b	ess of col. (h) gain over col. (k), out not less than "-0-")
				<44,679.
				<17,876
				<30,098.
				278,886.
,				<555.
				<1,017.
				43,193.
				159,624.
				326,495.
				84,064.
				26,389.
				<9,003.
1				<1,422.
`` 		-		2,713.
)				62,173
Capital gain net income or (net ca	ipital loss) { If gain, also enter If (loss), enter "-0	in Part I, line 7	2	
		, I	2	
Net short-term capital gain or (los If gain, also enter in Part I, line 8,	ss) as defined in sections 1222(5) an column (c). 3	d (6):		

523591 04-01-15

Part IV. Capital Gains and Lo	osses for Tax on Investment Income	<u> </u>			
2-story b	d describe the kind(s) of property so irick warehouse; or common stock, 2	200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a PASSTHROUGH FR	ANCISCO PARTNERS	S III K-1	P	VARIOUS	VARIOUS
	EP VII COMMERCIA	L K-1	P	VARIOUS	VARIOUS
c CHARLES SCHWAE			P	VARIOUS	VARIOUS
d CHARLES SCHWAR			P		VARIOUS
e MERRILL LYNCH	- #4124		P		VARIOUS
MERRILL LYNCH	- #4124		P		VARIOUS
	EP VII COMMERCIA	AL K-1	P		VARIOUS
h UBS - #4430			P	VARIOUS	VARIOUS
					
k				ļ	
				ļ	
m					
<u>n</u>				<u> </u>	
0	// Depression allowed	(a) Cost or other book) Com or (loss)	<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale) Gain or (loss) plus (f) minus (g)	
a 5,918.	1 '	F.22 3k 3.100 01 0410	(5)	(.,	5,918.
$\frac{a}{b}$ 23,001.					23,001.
c 9,681.					9,681.
d 505.					505.
e 996.	1				996.
f 153.		153.			0.
g	<u> </u>	6.			<6.>
h 3,277.					3,277.
1					
1					
k					
I					
m					
n					
0	l				
Complete only for assets show	ing gain in column (h) and owned by			sses (from col. (h)	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (ı) over col. (¡), ıf any		of col. (h) gain ove not less than "-0-")	
	as 01 12/3 1/05	over cor. (j), ii arry			
<u>a</u>				<u>.</u>	5,918.
<u>b</u>					9,681.
d d	 				505.
	 				996.
<u>e</u> f		-			0.
		-			
g h					3,277.
1					- / / -
1					
k					
1	1				
m					
n					
0					
	16 mans also	ur in Dart I. line 7			
2 Capital gain net income or (net c	apital loss) { ii gain, aiso ente If (loss), enter "-	r in Part I, line 7 0-" in Part I, line 7 }	2		922,259.
3 Net short-term capital gain or (lo		, i			
If gain, also enter in Part I, line 8	, column (c).	}			
If (loss), enter "-0-" in Part I, line	8)	3	N/A	

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or **Amount** any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient CHINMAYA MISSION BAKERSFIELD CHARITY RELIGIOUS CHARITIES -GENERAL SUPPORT 1723 COUNTRY BREEZE PL 5,001. BAKERSFIELD, CA 93312 HEAVEN ON EARTH CREATIONS CHARITY EDUCATIONAL MEDIA 7 MIMOSA ROAD PRODUCTIONS SANTA FE, NM 87508 111,000. LIGHTWAVE EDUCATION CHARITY EDUCATION 333 PALMER DRIVE #220 BAKERSFIELD, CA 93309 5,000. MAHARISHI UNIVERSITY OF MANAGEMENT CHARITY ANNUAL OPERATIONS DEVELOPMENT OFFICE 1000 NORTH FOURTH ST FAIRFIELD, IA 52557 20,000. **Total from continuation sheets** 141,001.

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.

OMB No 1545-0047

2015

Name of the organization

Employer identification number

R	AVI AND NAINA PATEL FOUNDATION	77-0490360
Organization type (check	one):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
Check if your organization	n is covered by the General Rule or a Special Rule .	
	(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Speci	al Rule. See instructions.
General Rule		
	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions to ny one contributor. Complete Parts I and II See instructions for determining a contrib	
Special Rules		
sections 509(a)(1 any one contribu	ion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% sup 1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, ator, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the are EZ, line 1 Complete Parts I and II.	16a, or 16b, and that received from
year, total contril	ion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received f butions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, literary, or e f cruelty to children or animals. Complete Parts I, II, and III.	
year, contribution is checked, enter purpose. Do not	ion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received fins exclusively for religious, charitable, etc., purposes, but no such contributions totaler here the total contributions that were received during the year for an exclusively religions complete any of the parts unless the General Rule applies to this organization becauble, etc., contributions totaling \$5,000 or more during the year	ed more than \$1,000. If this box gious, charitable, etc ,
but it must answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedon Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on set 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

RAVI AND NAINA PATEL FOUNDATION

77-0490360

Part K	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
1	RAVI PATEL, M.D. INC. DBA CBCC 6501 TRUXTUN AVENUE BAKERSFIELD, CA 93309	\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	PRIVERWALK PEDIATRIC CLINIC, INC. 9508 STOCKDALE HWY #150 BAKERSFIELD, CA 93311	\$30,000.	Person X 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
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

RAVI AND NAINA PATEL FOUNDATION

77-0490360

(a) No. From 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 art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom eart 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
		\$	

ame of organiza	ation		Employer identificatio						
AVI AND	NAINA PATEL FOUNDATIO)N		77-0490360					
Part III	Exclusively religious, charitable, etc., contribute year from any one contributor. Complete colu	itions to organizations described	IN SECTION 501(C)(7), (8), O	r (10) that total more than \$1,000 for					
c	completing Part III, enter the total of exclusively religious, ch	naritable, etc., contributions of \$1,000 or	r less for the year (Enter this info onc	s					
(a) No.	Use duplicate copies of Part III if additional s	pace is needed.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held					
2.1									
		(e) Transfer of gif	<u> </u>						
		(o) Transier or gir	•						
	Transferee's name, address, and	ZIP + 4	Relationship of tra	insferor to transferee					
									
-									
a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held					
Part I									
			_						
_									
ļ. <u> </u>									
1	(e) Transfer of gift								
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee								
									
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held					
Part I	(b) i di possi di gili		(4) 200						
	-			·····					
	(e) Transfer of gift								
	Transferee's name, address, and	ZIP + 4	Relationship of tra	ansferor to transferee					
-									
			 <u>-</u>						
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) D	cription of how gift is held					
from Part I	(b) Furpose of gift	———————————	(u) Desi						
—									
		(e) Transfer of gif	ft						
	Transferee's name, address, and	7IP ± 4	Relationship of transferor to transferee						
	manaieree a name, audress, and	<u> </u>	netationship of tra	maier or to u anateree					
			-						
		1							

FORM 990-PF INTERE	ST ON SAVING	S AND	TEMPOR!	ARY (CASH	IN	ESTMENTS	STATEMENT	1
SOURCE			(A) REVENUE ER BOOKS	5	NET	IN.	(B) /ESTMENT COME	(C) ADJUSTED NET INCOM	
INTEREST FROM BANKS/INVESTMENTS		- ,	40,3	50.		_	40,350.		
TOTAL TO PART I, LI	NE 3		40,3	50.	_		40,350.		
FORM 990-PF	DIVIDENDS	AND I	NTEREST	FRO	M SEC	CUR	ITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	GA	PITAL AINS DENDS	RE	(A) VENUI BOOI		(B) NET INVES MENT INCO		
DIVIDEND INCOME FROM INVESTMENTS NONDIVIDEND	96,177.		0.		96,17	77.	96,17	<u>'</u> 7.	
DISTRIBUTIONS NONTAXABLE DIVIDEND INCOME	1,282.		0.		1,28	32.		0.	
FROM INVESTMENTS	27.		0.		2	27.		0.	
TO PART I, LINE 4	97,486.		0.		97,48	36.	96,17	'7.	
FORM 990-PF		RENTA	L INCOM	E	· · · · · · ·	=		STATEMENT	3
KIND AND LOCATION O	F PROPERTY						ACTIVITY NUMBER	GROSS RENTAL INC	OME
NET RENTAL REAL EST	ATE LOSS FRO	OM PAS	STHRUS				1	<37,2	77.
TOTAL TO FORM 990-P	F, PART I,	LINE 5	5A					<37,2	77.

FORM 990-PF	OTHER I	INCOME	S	TATEMENT	4
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCOM	
ROYALTIES FROM PASSTHROUGHS OTHER INCOME FROM PASSTHROUGH SECTION 1231 GAIN FROM PASSTH MISCELLANEOUS INCOME		20. 17,416. 27,140. 2,000.	20. 17,416. 27,140. 2,000.		
TOTAL TO FORM 990-PF, PART I,	LINE 11 =	46,576.	46,576.		
FORM 990-PF	TAX	ŒS	S	TATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITAI PURPOSI	
STATE TAXES FOREIGN TAXES FEDERAL TAXES	10. 251. 9,367.	. 0	•		0.
TO FORM 990-PF, PG 1, LN 18 =	9,628	. 0	•		0.
FORM 990-PF	OTHER I	EXPENSES	S	TATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITA PURPOSI	
LICENSES & PERMITS INVESTMENT FEES PORTFOLIO DEDUCTIONS 50% CHARITABLE CONTRIBUTIONS	392 34,108 58,104	34,108	•		0.
FROM PASSTHROUGHS ORDINARY LOSS FROM PASSTHROUGHS	34. 12,442.				0.
INVESTMENT INTEREST EXPENSE COMMUNITY AWARENESS/DINNER	12,219	12,219	•	0.00	0.
FOR HOMELESS MISCELLANEOUS EXPENSE REIMBURSED EXPENSES	9,298, 853, 300,	853	•	9,2	98. 0. 00.

FORM 990-PF	OTHER	FUNDS		STATEMENT	7
DESCRIPTION			(A) BEGINNING OF YEAR	(B) END OF YEAR	
RETAINED EARNINGS/ACCUMULATED INC	OME		11,089,686.	13,209,10	01.
TOTAL TO FORM 990-PF, PART II, LI	NE 29		11,089,686.	13,209,10	01.
FORM 990-PF OT	HER I	NVESTMENTS		STATEMENT	8
DESCRIPTION		VALUATION METHOD	BOOK VALUE	FAIR MARKE	T
CHARLES SCHWAB - 8998	•	COST	1,771,474.	2,833,4	64.
MERRILL LYNCH - 4124		COST	701,284.	993,8	
ASCEND PARTNERS II LP		COST	894,752.	904,9	
EDUCATION LOANS		COST	294,624.	294,6	24.
CHARLES SCHWAB - 7421		COST	1,184,342.	1,184,3	42.
FRANCISCO PARTNERS III - CAYMAN L	P	COST	386,506.	523,2	
FRANCISCO PARTNERS III LP		COST	251,600.	389,3	09.
ARMOR QUALIFIED LP		COST	0.		0.
WW MULTISTATE PROPERTIES I LLC -		COST	404 044	40= 0	
OLYMPUS PROPERTY		00.0T	191,211.	197,0	40.
FRANCISCO PARTNERS III - DOMESTIC	;	COST	162 002	277 2	76
AIV L.P. BREP VII COMMERCIAL REAL ESTATE		COCM	163,083.	373,3	/5.
TRUST		COST	699,849.	682,3	64
JP MORGAN FOUNDATION		COST	306,000.	306,0	
CHARLES SCHWAB - 4729		COST	2,433,090.	2,444,2	
WW OLYMPUS PROPERTY IV LLC		COST	81,203.	81,2	
UBS - 4381		COST	346,023.	435,9	
UBS - 4430		COST	247,709.	242,1	
PRESERVER INVESTORS LLC		COST	<1,518.>	-	
TOTAL TO FORM 990-PF, PART II, LI	NE 13		9,951,232.	11,929,5	

FORM 990-PF	ОТН	ER LIABILITIES		STATEMENT	9
DESCRIPTION			BOY AMOUNT	EOY AMOUNT	ı
DUE TO CBCC FOUNDATION		_	0.	8	53.
TOTAL TO FORM 990-PF,	PART II, LIN	E 22	0.	8	53.
FORM 990-PF		TANTIAL CONTRIBU	UTORS	STATEMENT	10
NAME OF CONTRIBUTOR		ADDRESS			
RAVI PATEL, M.D. INC.	DBA CBCC	6501 TRUXTUN A			