Form **999-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 <a href="https://www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

Name of foundation THE KURSH BHARUCHA - REID FOUNDATION, INC.    Second Second Price   Second Inches   Second Second   Second Second Second   Second Second Second   Second Second Second Second Second Second Second   Second Seco	For calen	ndar year 2015 or tax year beginning		, and ending		
Nometour and service (or D to suncessed mail and disurders to steel addressed \$50.2 MASH INIOTON AVRINUE BTH PLOOR  City or toron, state or foronze, country, and ZiP or through postal code  TOWSON, MD 21.204  G Check all that apply:	THE	KURUSH BHARUCHA - REII	FOUNDATION,			number
SO2 WASHINGTON AVENUE 8TH PLOOR  Only or fourn, state or promote, country, and ZIP or foreign postal code TOWSON, MD 21204  G Check all that apply. Initial return   Initial return of a former public chanty   Initial return   Address change   Initial return   Amended return   Address change   Initial return of a former public chanty   Initial return   Address change   Initial return of a former public chanty   Initial return   Address change   Initial return of a former public chanty   Initial return   Initial return of a former public chanty   Initial return   Initial return of a former public chanty   Initial return of			t addraga)		<del> </del>	
City to town, state or province, country, and 2P or foreign postal code  TOWSON, MD 21204  6 Check all that apply:   Initial return   Initial return of a former public charity   Annehold return   Annehold return   Annehold return   Annehold return   Section 497(9(1) nonexempt that 80 tests   Annehold return   Annehold return   Section 497(9(1) nonexempt that 80 tests   Annehold return   Section 497(9(1) nonexempt that 80 tests   Annehold return   Annehold return   Section 497(9(1) nonexempt that 80 tests   Annehold return   Annehold return   Section 497(9(1) nonexempt that 80 tests   Annehold return   Annehold return   Section 497(9(1) nonexempt that 80 tests   Annehold return   Annehold return   Section 497(9(1) nonexempt that 80 tests   Annehold return   Annehold return   Section 497(9(1) nonexempt that 80 tests   Section 497(9(				Room/suite		<b>6</b> 1
TOWSON, MD 21204 6 Check all that apply: Initial return Initial return of a former public chanty Initial return Initial return of a former public chanty Initial return Initial return of a former public chanty Initial return Initial return of a former public chanty Initial return Initial return of a former public chanty Initial return of a former public chanty Initial Return Initial Return of a former public chanty Initial Return Initial Return of a former public chanty Initial Return Initial Return of a former public chanty Initial Return Initial Return of a former public chanty Initial Return Initial Return of a former public chanty Initial Return Initial Return of a former public chanty Initial Return Initial Return of a former public chanty Initial Return Initial Return of a former public chanty Initial Return Initia					<del> </del>	
Final return   Amended return   Amende			poola. 0000		o il exemption application is pe	ending, check here
Final return   Amended return   Amende	G Check	call that apply: X Initial return	Initial return of a	former public charity	D 1. Foreign organizations	check here
H. Check type of organization: Section 501(c)(3) evempt private foundation of Section 504(c)(4), deeth private foundation of Section 504(c)(4), deeth private foundation of Section 504(c)(4), deeth private foundation of Section 507(c)(1), deeth private foundation of Section 507(c)(1), deeth private foundation status was terminated under section 507(c)(1), deeth private foundation status was terminated under section 507(c)(1), deeth private foundation in the section 507(c)(1), deeth private foundation status was terminated under section 507(c)(1), deeth private foundation status was terminated under section 507(c)(1), deeth private foundation status was terminated under section 507(c)(1), deeth private foundation status was terminated under section 507(c)(1), deeth private foundation status was terminated under section 507(c)(1), deeth private foundation status was terminated under section 507(c)(1), deeth private foundation status was terminated under section 507(c)(1), deeth private foundation status was terminated under section 507(c)(1), deeth private foundation status was terminated under section 507(c)(1), deeth private foundation in the section of the section of the section status was terminated under section 507(c)(1), deeth private foundation in the section 507(c)(1), deeth private foundation under section 507(c)(1), deeth private foundation in deeth private foundati		Final return		, , , , , , , , , , , , , , , , , , ,		· —
H. Check type of organization:		Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test, mputation
Section 4947(a)   nonexempt characteristic   Other taxable private foundation   V°   under section \$07(b)(1)(a), check here   Color	H Check	type of organization: X Section 501(c)(3)	exempt private foundation	2 /2	1	
Part I   Analysis of Revenue and Expenses   (d) Posturaments in coloration and interest of minimum and the process of the months of some of the postulation of the				lation UA		
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2 Check   The functions of interest of a stack of a sta	Parti	The total of amounts in columns (b), (c), and (d) may not	expenses per books		income	for charitable purposes
a interest on savings and temporary 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Savest con line fa b Savest con line f	1			2 3 3		**
1			· · · · · · · · · · · · · · · · · · ·	The state of the s	., 11. 16.	· *
5a Gross rents b test remain come or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line da 7 Capital gain en en from enter more from Pet IV, line 2) 8 Net Short-term capital gain 9 Income modifications 10a and allowances 10a and allowances 10b Less condendes in fine da 11 Other income, s 12 Table, Addulins 1 through 11	3	cash investments				
b Net rental moome or (loss)  8 a Net gam or (loss) from sale of assets not on line 10  9 a Net short-term capital gain  10 an advances  10 b Less cost mones have reliable gain  10 an advances  10 b Less cost mones have reliable gain  10 c Less cost mones have reliable gain  11 therefore, dischorts hustes, etc.  12 b Less cost mones have reliable gain  13 dopphasation of official gain the states, etc.  14 c Uniter initioper silanes and wages  15 Pension plans, employee benefits  16 a Legal fees  17 Interest  18 a Laces  18 a Laces  19 a Legal fees  10 c Legal fees  10 c Legal fees  10 c Legal fees  11 Interest  12 a Legal fees  13 a Legal fees  14 d Legal fees  15 pension plans, employee benefits  16 a Legal fees  17 Interest  18 a Laces  19 a Legal fees  10 c Legal fees  10 c Legal fees  10 c Legal fees  10 c Legal fees  11 Interest  12 a Legal fees  13 c Legal fees  14 d Legal fees  15 pension plans and wages  16 pension plans and wages  18 a Legal fees  19 c Legal fees  10 c Legal fees  10 c Legal fees  10 c Legal fees  10 c Legal fees  11 d Legal fees  12 c Legal fees  13 c Legal fees  14 d Legal fees  14 d Legal fees  15 pension plans and wages  16 pension plans and depletion  17 legal fees  18 a Legal fees  19 c Legal fees  10 c Legal fees  10 c Legal fees  10 c Legal fees  11 d Legal fees  12 c Legal fees  13 c Legal fees  14 d Legal fees  14 d Legal fees  15 pension plans and wages  16 pension plans and wages  17 legal fees  18 a Legal fees	4			-		
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b Gross sales price for all acceptance on line as a fine state of the					SSE 44.45.1	
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9 Income modifications 10a and allowances 10 Less cost proposition of cost sales less returns 110 Total. Addwines 1 through 111 12 Total. Addwines 1 through 111 13 Complementation of one of cost sales and wages 15 Pension plans, employee benefits 16a Legal fees 15 Pension plans, employee benefits 16a Legal fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 2 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: 2 Excess of revenue over expenses and disbursements 24 4 7,774.	Ş 7	assets on line oa	80.5	<del></del>		8, 7 ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (
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108 and allowances   108 and		Income modifications	······	S		
D   Less Carporolition (loss)   10   10   10   10   10   10   10   1	10a	Gross sales less returns	W 234 - 4 4			
11 Other income	b	Less Cost or goods sold	10 miles 1777	K-A WWA		
13 Open plans in though the stress of the st	ع ا دد	Gross profit or (loss) and the first				
12   Compensation of efficient directives business, etc   0.   0.   0.   0.   0.   0.   0.   0	<b>5</b> 11	Other income				<b>*</b>
14 Other employee statutes and wages 15 Pension plans, employee benefits 16a Legal fees STMT 1 4,923. 0. 0. 4,923.  b Accounting fees c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 2 303. 0. 0. 303.  Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, girts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 5,226. 0. 0. 5,226.  27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements  44,774.		Total. Add Vines 1 through 11				
15 Pension plans, employee benefits 16a Legal fees STMT 1 b Accounting fees c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 2 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 5, 226.  27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements  44,774.	S 13	Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
b Accounting fees c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements  44,774.			<del></del>	·-··		
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22 Printing and publications 23 Other expenses STMT 2 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements.  Add lines 24 and 25 27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements  44,774.		_	=, 525.	- 0.	0.	4,943.
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22 Printing and publications 23 Other expenses STMT 2  Total operating and administrative expenses. Add lines 13 through 23  25 Contributions, gifts, grants paid  26 Total expenses and disbursements.  Add lines 24 and 25  27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements  44,774.	三 W 17					
22   Printing and publications	81 <b>at</b>	Taxes				
22   Printing and publications	्रेत्र मुं <mark>ड</mark> ी 19	Depreciation and depletion				
22   Printing and publications	[ 20	Occupancy				
23		Travel, conferences, and meetings				
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26 Total expenses and disbursements.  Add lines 24 and 25  5,226.  0.  5,226.  27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements  44,774.	달 23	· ·	303.	0.	0.	303.
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26 Total expenses and disbursements.  Add lines 24 and 25  27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements  44,774.	oo oc			0.	0.	
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27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements  44,774.			5 226	^	,	F 226
a Excess of revenue over expenses and disbursements 44,774.			5,220.			5,440.
			44 774			
			33,773.	0.	!	
C Adjusted net income (if negative, enter -0-)					0.	

81-0923148

Form 990-PF (2015)

INC.

Form 990-PF (2015) Page 2 End of year Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only Beginning of year (b) Book Value (c) Fair Market Value (a) Book Value 44,774. 44,774. 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Accounts receivable Less: allowance for doubtful accounts 4 Pledges receivable ► Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations b Investments - corporate stock c 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 Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 44,774 instructions. Also, see page 1, item I) 0. 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable 21 22 Other liabilities (describe > \_ 0. Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Fund Balances 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted  $\triangleright [X]$ Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Assets or 27 Capital stock, trust principal, or current funds 0 28 Paid-in or capital surplus, or land, bldg., and equipment fund 44,774 0. Retained earnings, accumulated income, endowment, or other funds š 44,774 0. Total net assets or fund balances 0. 44.774 31 Total liabilities and net assets/fund balances Analysis of Changes in Net Assets or Fund Balances Part III 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 1, line 27a 3 Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶

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

81-0923148 Page 3 Capital Gains and Losses for Tax on Investment Income Part IV (b) How acquired P - Purchase (a) List and describe the kind(s) of property sold (e.g., real estate, (d) Date sold (c) Date acquired 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (mo., day, yr.) (mo., day, yr.) D - Donation 1a NONE đ (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) b d Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col. (i) Losses (from col. (h)) (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any þ e If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 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 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income N/A (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes if "Yes," the foundation does not qualify under section 4940(e). Do not complete this part Enter the appropriate amount in each column for each year; see the instructions before making any entries. (d)
Distribution ratio
(col. (b) divided by col. (c)) (a) Base period years (b) (c) Adjusted qualifying distributions Net value of noncharitable-use assets Calendar year (or tax year beginning in) 2014 2013 2012 2011 2010 2 Total of line 1, column (d) Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years 4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5 Multiply line 4 by line 3 Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Form 990-PF (2015)

INC.

	rt VI Excise Tax Based on Investment Income (Section 4940	(a) 4940(b) 4940(a)	or 40	18 - (	092314 see instr	vetions	Page 4
			01 43	<del>+0</del>	366 11130	uctions	<del>"</del> —
1ą	Exempt operating foundations described in section 4940(d)(2), check here and e			ı			
	Date of ruling or determination letter:(attach copy of letter if nec		\	<del>-</del>			0.
D	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	► [A] and enter 1%	<b>!</b>	_1_			<del></del>
_	of Part I, line 27b		1				1
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%		' ⊦	_	_		0.
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Ot Add lines 1 and 2	ners enter -u-)	+	2			0.
3		thana antan () \	ŀ	3			0.
-	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. O	mers enter -u-)		4			<del>0.</del>
6	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- Credits/Payments:		ŀ	5			<del></del> -
-	2015 estimated tax payments and 2014 overpayment credited to 2015	1 60 1	0.	- 1			i i
	Exempt foreign organizations - tax withheld at source	6a   6b	—∹				ľ
	Tax paid with application for extension of time to file (Form 8868)	6c 6c	0.	1			
	Backup withholding erroneously withheld	6d	<del>- 0.</del>				
7	Total credits and payments. Add lines 6a through 6d	ou I	<del>~~ </del>	7			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	ched	}	8			<u> </u>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	iono <b>u</b>		9			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			10			<del></del>
11	Enter the amount of line 10 to be: Credited to 2016 estimated tax	Refund	ed	11			
	rt VII-A   Statements Regarding Activities		04 -				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legis	lation or did it participate or in	tervene i	n	,,	Yes	No
	any political campaign?	, , ,			1:	,	х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpor	ses (see instructions for the de	finition):	,	11	,	х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and				i to	27 di	
	distributed by the foundation in connection with the activities.	,					1 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
C	Did the foundation file Form 1120-POL for this year?				10	:	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	year:			- <b>A</b>		ؙڿٛؿڐؠٙ
	(1) On the foundation. > \$ (2) On foundation managers	.▶ \$	0.				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expendi	ture tax imposed on foundatio	n		1 No. 17 T		* - 3!
	managers. ► \$ 0 .				* The	m - 1	1 5.3
2	Has the foundation engaged in any activities that have not previously been reported to the IF	RS?			2		X
	If "Yes," attach a detailed description of the activities.						1.22
3	Has the foundation made any changes, not previously reported to the IRS, in its governing i	· · · · · · · · · · · · · · · · · · ·	ation, or				- 'G
An	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change Did the foundation have unrelated business gross income of \$1,000 or more during the year				3		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	1 <b>f</b>		N	/A 4		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			7.4	7 4 5		х
•	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 er	ther:					\$ 35°
-	By language in the governing instrument, or	- · - · <del>-</del>					\$"
	By state legislation that effectively amends the governing instrument so that no mandatory	y directions that conflict with t	he state I	aw	].	3	1 & 1
	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," cor	mplete Part II, col. (c). and I	Part XV		7		
		<i>(-)</i>			7.7	11/4	5 °.
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ns) 🕨				1 3	1.
	MD					* *	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	ttorney General (or designate)			Ŀ	X	$\coprod$
	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							اليا
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," of		_		. 4 9	<del></del>	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedu	le listing their names and addresses	S	TMT		X DE	(00.45)

orn	1990-PF (2015) INC. 81-0923	148		Page <b>5</b>
Pa	ort 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		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		_X_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► HTTPS://GREATNONPROFIT.ORG/ORG/KURUSH.BHARUCHA-RE			
14	The books are in care of ► KERSI SHROFF Telephone no. ► 301-51	2-9	900	
	Located at ▶ 7612 TIMBER CREST DRIVE , ROCKVILLE, MD ZIP+4 ▶20			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<b>•</b>	
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16			Yes	No
	securities, or other financial account in a foreign country?	16		х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country	,		[ [
Pa	ort 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.	/p -	Yes	No
1a	During the year did the foundation (either directly or indirectly):	, gi	electric states	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		****	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	2 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	2.00 m	
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	3	4	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		, , ,	, I
	(5) Transfer any income or assets to a disqualified person (or make any of either available			Fig
	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.)	- 4		1. gr.
h	of fany 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			
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 - 1 - 1	ž - "	*'*\$ €,.`
·	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	- 21°	_ ·· · · · · · · · · · · · · · · · · ·	My .
-	defined in section 4942(j)(3) or 4942(j)(5)):		- 144 - 15 - 15	
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning		13 to 4.	
_	before 2015?			- <b> </b>
	If "Yes," list the years ,,			- ~
h	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			
_	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	- 1/A	2 270	
	statement - see instructions.)  N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.		× -	· ]
•	The state of the s		1944	<sub>⊗</sub> .
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		7	1 32
	during the year?		ا يُحْدُ	`
h	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after	- 19.3	Î	] [
J	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,	3 %		
	Form 4720, to determine if the foundation had excess business holdings in 2015)	3b		'
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<b>-</b>	X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	74	, .	<u>†</u>
.,	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4h	<del>                                     </del>	X

Form **990-PF** (2015)

	•	•		KURUSH	I B	HARU	ICHA	- RE	ID FO	DUND.	ATION	,		_					
	0-PF (20		INC		<u> </u>	Aireitie	- for \	A/la: ala F		700 84	D- D			_	1-09	231	48	!	Page <b>6</b>
	VII-B			Regarding				Which F	orm 4	/20 M	ау ве н	equir	ea (cor	<u>tanue</u>	ed)			_	
. (1)	Carry	on propaga	nda, or ot	on pay or incu herwise attem <sub>l</sub> ny specific pub	pt to	influence	e legislati				etly or indir	ectly.		Yes	X	io			
, ,	any vo	iter registra	tion drive			·		. "	•	o., a o.	ony or mon	,,			X				
	4945(	d)(4)(A)? (s	see instru	ization other t ctions) her than religio				-				fau	. $\square$	Yes	X	ło			
	the pre	evention of	cruelty to	children or an 5), did any of	nmals	37							lations	Yes	X	10			
				notice regardii						Бериона	described	ricgu	ations		N/A	a t	5b		
				nt notice regai	-			•	•		•				▶□	<u> </u>			
	-			n 5a(4), does 1	•					ıx becau	se it mainta	ined				_	Ī		
		e responsib										N/A		Yes		Vo			
			-	t required by	v Rea	ulation	s sectioi	n 53.4945	5-5(d).				. —			1	}		
				ear, receive an						iums on						- Į			
		benefit con												] Yes	X	No			
<b>b</b> Did	d the fou	ndation, du	iring the y	ear, pay premi	iums,	directly	or indire	ctly, on a	oersonal b	enefit co	ontract?						6b		X
lf '	"Yes" to	6b, file Fo	orm 8870	).														*,	
7a At	any time	during the	tax year,	was the found	dation	a party	to a proh	iibited tax	shelter tra	nsaction	?			] Yes	X	No L	-	100	5
<u>b lf "</u>	Yes," did			ve any procee											N/1	<u> </u>	7b		
Part	Ville	Inform	ation /	About Offi	icer	s, Dir	ectors	, Trust	ees, Fo	unda	tion Ma	nage	rs, High	ıly					
		Paid	mploy	ees, and (		tracto	ors												
		••							-										
1 List	all offic	cers, dire	ctors, tr	ustees, foun	datio	on man	agers a	nd their	<del></del>			(a) C	ompensati	on I	(d) Contrib	outions to	Τ,	- Lor	
1 List	all offic	cers, dire		me and addre		on man	agers a	and their	(b) T	itle, and	average k devoted ion	(11	ompensati f not paid, enter -0-)	on [	(d) Contrib employee be and def compen	outions to mefit plans lerred sation	ac	(e) Exp count allowa	ense other nces
1 List	all offic	cers, dire				on man	agers a	and their	(b) T	itle, and per wee	k devoted	(11	not paid,	on	(d) Contrib employee be and def compen	outions to nefit plans erred sation	ac	(e) Exp ecount allowa	ense other nces
			(a) Na			on man	agers a	and their	(b) T	itle, and per wee	k devoted	(11	f not paid, enter -0-)		(d) Contrib imployee be and def compen	sation	ac	(e) Exp ecount allowa	nces
1 List		cers, directions	(a) Na			on man	agers a	and their	(b) T	itle, and per wee	k devoted	(11	f not paid, enter -0-)	on [	(d) Contrib employee be and def compen	outions to melit plans terred sation	ac	(e) Exp ecount allowa	ense other nces
			(a) Na			on man	agers a	and their	(b) T	itle, and per wee	k devoted	(11	f not paid, enter -0-)		(d) Contrib employee be and def compen	sation	ac	(e) Exp ccount allowa	nces
			(a) Na			on man	agers a	and their	(b) T	itle, and per wee	k devoted	(11	f not paid, enter -0-)		(d) Contrib Imployee be and def compen	sation	ac	(e) Expectount allowa	nces
			(a) Na			on man	agers a	and their	(b) T	itle, and per wee	k devoted	(11	f not paid, enter -0-)		(d) Contrib imployee be and def compen	sation	( ac	(e) Expectount allowa	nces
			(a) Na			on man	agers a	and their	(b) T	itle, and per wee	k devoted	(11	f not paid, enter -0-)		(d) Contribution (d) Co	sation	ac	(e) Expectoring allows	nces
			(a) Na			on man	agers a	and their	(b) T	itle, and per wee	k devoted	(11	f not paid, enter -0-)		(d) Contribution (d) Co	sation	ac	(e) Expectoring	nces
			(a) Na			on man	agers a	and their	(b) T	itle, and per wee	k devoted	(11	f not paid, enter -0-)		(d) Contribution (d) Co	sation	ac ac	(e) Expectoring	nces
			(a) Na			on man	agers a	and their	(b) T	itle, and per wee	k devoted	(11	f not paid, enter -0-)		(d) Contribution (d) Co	sation	( ac	(e) Expectoring	nces
			(a) Na			on man	agers a	and their	(b) T	itle, and per wee	k devoted	(11	f not paid, enter -0-)		(d) Contribution (d) Co	sation	( acc	(e) Expectoring	nces
SEE	STA	TEMEN	(a) Na		iss .				(b) Thours	itle, and per wee to posit	k devoted	(11	f not paid,	).	compen	0.		allowa	O.
SEE	STA	TEMEN	(a) Na	me and addre	loyee	es (othe	er than	those inc	(b) Thours	itle, and per wee to posit	). If none, average week	enter	f not paid,	).	(d) Contribution (d) Co	O .	30	allowa	O .
SEE	STA	TEMEN	(a) Na	me and addre	loyee	es (othe	er than	those inc	(b) Thours	itle, and per wee to posit	). If none, average week	enter	not paid, enter -0-)	).	(d) Contribution of the co	O .	30	(e) Exception	O .
SEE	STA	TEMEN	(a) Na	me and addre	loyee	es (othe	er than	those inc	(b) Thours	itle, and per wee to posit	). If none, average week	enter	not paid, enter -0-)	).	(d) Contribution of the co	O .	30	(e) Exception	O .
SEE	STA	TEMEN	(a) Na	me and addre	loyee	es (othe	er than	those inc	(b) Thours	itle, and per wee to posit	). If none, average week	enter	not paid, enter -0-)	).	(d) Contribution of the co	O .	30	(e) Exception	O .
SEE	STA	TEMEN	(a) Na	me and addre	loyee	es (othe	er than	those inc	(b) Thours	itle, and per wee to posit	). If none, average week	enter	not paid, enter -0-)	).	(d) Contribution of the co	O .	30	(e) Exception	O .
SEE	STA	TEMEN	(a) Na	me and addre	loyee	es (othe	er than	those inc	(b) Thours	itle, and per wee to posit	). If none, average week	enter	not paid, enter -0-)	).	(d) Contribution of the co	O .	30	(e) Exception	O .
SEE	STA	TEMEN	(a) Na	me and addre	loyee	es (othe	er than	those inc	(b) Thours	itle, and per wee to posit	). If none, average week	enter	not paid, enter -0-)	).	(d) Contribution of the co	O .	30	(e) Exception	O .

0

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

Form 990-PF (2			<u>09231</u>	<u> 48 Page 7</u>
PartVIII	Information About Officers, Directors, Trustees, Foundati Paid Employees, and Contractors (continued)	on Managers, Highly		
3 Five highe	est-paid independent contractors for professional services. If none, enter	'NONE."		
	(a) Name and address of each person paid more than \$50,000	(b) Type of service		(c) Compensation
N	IONE	(3) 1) 100 01 001 100		,-, <u>-</u>
		_	1	
		-		
		-		
Total number	of others receiving over \$50,000 for professional services		▶	0
PartiXA	Summary of Direct Charitable Activities			
	ation's four largest direct charitable activities during the tax year. Include relevant statisti Janizations and other beneficiaries served, conferences convened, research papers produi		E	expenses
	CONDUCTED SINCE ORGANIZATION WAS STILL W	AITING ON IRS		
REGARD	OING ON THE TAX EXEMPT STATUS		į	_
				0.
2		······································		
3				
		<del></del>	ł	
4				
·			]	
Down IVan			<u> </u>	
	Summary of Program-Related Investments wo largest program-related investments made by the foundation during the tax year on li	nes 1 and 2		Amount
1 NONE	Wo largest program related investments made by the real earling the tax year on in	1103 1 0110 2.	<u> </u>	unount
			]	
		· · · · · · · · · · · · · · · · · · ·	ļ	0.
2	<del></del>	<del></del>	ł	
			]	
All other progr	am-related investments. See instructions.			
3				
			1	
Total Add In	es 1 through 3		<del>                                     </del>	0.

THE	KURUSH	BHARUCHA	_	REID	FOUNDATION,

ror	M 990-PF (2015) INC.	81-0923148	Page 8
P	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	idations, see instructions)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b 44,	774.
C	Fair market value of all other assets	1c	0.
d	Total (add lines 1a, b, and c)	1d 44,	774.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3 44,	774.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	672.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		102.
6	Minimum investment return, Enter 5% of line 5	6 2	205.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certain	
_	foreign organizations check here  and do not complete this part.)		20/5
1	Minimum investment return from Part X, line 6	1 2	, 2,0′5 .
	Tax on investment income for 2015 from Part VI, line 5	<b> </b>	
b	Income tax for 2015. (This does not include the tax from Part VI.)	<u> </u>	^
C	Add lines 2a and 2b	2c /	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1		205.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	<del></del>	205.
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 2	205.
٣	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a 5,	,226.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4 5	,226.
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		0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		,226.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for the section	
	4940(e) reduction of tax in those years.		

Form **990-PF** (2015)

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Form 990-PF (2015)

NONE

NONE

ANY FORM PERMITTED. c Any submission deadlines:

INC.

Form 990-PF (2015)

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation status of recipient Purpose of grant or contribution show any relationship to any foundation manager or substantial contributor Amount Name and address (home or business) a Paid during the year NONE ▶ 3a 0. <u>Total</u> b Approved for future payment NONE 0. Total **▶** 3b

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INC.

Part XVI-A	Analy	sis of Incon	ne-Producing	<b>Activities</b>
------------	-------	--------------	--------------	-------------------

Enter gross amounts unless otherwise indicated.	Unrelated busin			ded by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a					
b					
c					
d					
e					
1					
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	·			<del></del>	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
• • • •		ļ			
7 Other investment income	-				
	<del>                                     </del>				
8 Gain or (loss) from sales of assets other					
than inventory	<del></del>				
9 Net income or (loss) from special events			<u> </u>		<del> </del>
10 Gross profit or (loss) from sales of inventory	-				
11 Other revenue:					
a	-			<del></del>	
b	1 " 1				<u> </u>
c					<del> </del>
d	_				
e	7 % . *				
12 Subtotal. Add columns (b), (d), and (e)		0.	\$\$\frac{1}{2}	0.	
13 Total. Add line 12, columns (b), (d), and (e)				13_	<u> </u>
(See worksheet in line 13 instructions to verify calculations.)	<u> </u>	<del></del>		· · · · · · · · · · · · · · · · · · ·	
Part XVI-B Relationship of Activities	to the Accompli	shment of Exe	empt	Purposes	
Line No. Explain below how each activity for which in	come is reported in colui	nn (e) of Part XVI-A	contril	outed importantly to the accor	mplishment of
▼ the foundation's exempt purposes (other than the foundation) is exempt purposes.					• • • • • • • • • • • • • • • • • • • •
1 THE ORGANIZATION WILL	USE ITS FUN	DS TO EDU	CA'	E THE PUBLIC	ON
HEALTH-RELATED TOPICS	INCLUDING,	BUT NOT L	[MI	TED TO, AVOIL	ING THE
SPREAD OF INFECTIONS A					
HEALTH CARE PROVIDERS	AND GET API	ROPRIATE	HEA	LTH-SCREENING	, SPONSORING
EDUCATIONAL LECTURES,	PROVIDING (	LINICAL H	EAI	TH CHECKS IN	POOR AND
UNDER-SERVED COMMUNITI	ES, AND THE	GENERAL	PRO	MOTION OF A H	IEALTHY
DIET AND CLEAN LIVING.	THE ORGANI	ZATION MA	Y P	ALSO CREATE AN	D MAINTAIN
A WEBSITE THAT CONTAIN	IS EDUCATION	AL MATERI	AL	ON PROPER HEA	LTH
MAINTENANCE, ANTI-DISC					
	<del> </del>				
					<del></del>
		<del></del>			
_					

INC

Part XVII	Jofornation De	anaudina Taasa	oform To a	nd Transcotions	and Dalatians		boritoble	Pa	ye 13
Pair VAII	Information Re Exempt Organ		sters to a	nd Transactions	and Relations	nips with None	maritable		
1 Did the c	organization directly or indi		of the followin	g with any other organiza	tion described in sec	tion 501(c) of		Yes	No
	(other than section 501(c)								
	s from the reporting founda			- · · · · · · · · · · · · · · · · · · ·					
(1) Casi	• •	2.1071 10 10 1107101742 114	.Dio onompt org	jumzatrom on			1a(1)		X
(2) Othe			•	•		•	1a(2)		X
<b>b</b> Other tra			•				1015		
	es of assets to a noncharital	ible exempt organiza	tion				1b(1)		X
• •	chases of assets from a noi						15(2)		X
• •	tal of facilities, equipment,	•	or garnzanon				1b(3)		X
	mbursement arrangements						1b(4)	1	X
	ns or loan guarantees						1b(5)		X
• •	•	mbarahia ar fundra	 Autotion animation			•••			X
• •	formance of services or me	•	-				1b(6) 1c	<del>                                     </del>	X
	of facilities, equipment, ma				alwaya abou the for	morket value of the a		-otc	
	swer to any of the above is							,e15,	
	es given by the reporting fo			ed less man fall market va	nue in any transactio	n or snaring arrangen	ieni, snow in		
(a) Line no	(d) the value of the goods, (b) Amount involved			e exempt organization	(d) p				
(a) Line no	(b) Autoutit illvolveu	(c) Name o		exempt organization	(u) Description	on of transfers, transaction	s, and sharing arr	angemen	
<del></del>	<del></del>	<del> </del>	N/A						
		<del> </del>		<del></del>			<del> </del>		<del></del>
	<del></del>	<del></del>			_ <del> </del>				
	<del></del>	<del> </del>		<del></del> _	<del> </del>				
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l		<u> </u>							
2a is the for	undation directly or indirect	tly affiliated with, or	related to, one	or more tax-exempt orga	inizations described				_
ın sectio	n 501(c) of the Code (other	r than section 501(c	(3)) or in sect	ion 527?			Yes	X	□No
b If Yes,	complete the following sch	edule				<del></del>	·		
	(a) Name of org	ganization		(b) Type of organization	1	(c) Description of re	lationship		
	N/A								
							<del></del>		
	er penalties of perjury, I declare t						May the IRS	discuss	this
Sign	belief, it is true, correct, and corr	Deter Declaration of pro-	eparer (otner than	taxpayer) is based on all inform			return with the shown below		
Here	Venn ,	F 01	$\sim$ 0 $^{\prime}$	1 2 2/1		ESIDENT	X Yes	• —	∫No
Sig	gnature of officer or trustee	;		Date	Title				
	Print/Type preparer's na	ame	Preparer's s	ignature	Date	Check ıf	PTIN		
			7	1 11		self- employed			
Paid	DAVID ALBE	RT, CPA	1 1/	an Most	2/20718		P00174	736	
Preparer	Firm's name ► RUB		OMPANY	, CHARTERED	-1-1	Firm's EIN ► 52			
<b>Use Only</b>			<b>-</b>	· <del></del>					
	Firm's address ▶ 69	03 ROCKLE	DGE DR	IVE, SUITE	1200				
		THESDA, M				Phone no. 301	L-56 <b>4</b> -3	636	

# 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 <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

OMB No 1545-0047

2015

Name of the organization

THE KURUSH BHARUCHA - REID FOUNDATION,

INC.

Employer identification number

81-0923148

Organization type (check one):								
Filers of:		Section:						
Form 990 o	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-F	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						
•	/ a section 501(c)(7	is 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	S.					
	-	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (i y one contributor. Complete Parts I and II. See instructions for determining a contributor's total contribution						
Special Ru	ules							
se aı	ections 509(a)(1) a ny one contributor	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulation and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that record, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Inne 1. Complete Parts I and II.	eceived from					
ye	ear, total contribut	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contribute utions of more than \$1,000 exclusively for religious, chantable, scientific, literary, or educational purposes, cruelty to children or animals. Complete Parts I, II, and III.						
ye is p	ear, contributions checked, enter he urpose. Do not co	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contribute is exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If here the total contributions that were received during the year for an exclusively religious, charitable, etc., complete any of the parts unless the General Rule applies to this organization because it received nonexcolle, etc., contributions totaling \$5,000 or more during the year	If this box					
but it must	t answer "No" on I	that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-E n Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part at the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						

Name of organization
THE KURUSH BHARUCHA - REID FOUNDATION,
INC.

Employer identification number

81-0923148

Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RODABE BHARUCHA-REID  1501 CHATEAUFORT PLACE  DETROIT, MI 48207	\$\$	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 Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person 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 )

Name of organization

THE KURUSH BHARUCHA - REID FOUNDATION,

INC.

Employer identification number

81-0923148

Partill	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Page 4 Name of organization Employer identification number THE KURUSH BHARUCHA - REID FOUNDATION, INC 81-0923148 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for Partill the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF	LEGAL FEES		STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES	
LEGAL FEES	4,923.	0.	0.	4,923.	
TO FM 990-PF, PG 1, LN 16A	4,923.	0.	0.	4,923.	
FORM 990-PF	OTHER EXPENSES		STATEMENT 2		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES	
FILING FEES	303.	0.	0.	303.	
TO FORM 990-PF, PG 1, LN 23	303.	0.	0.	303.	

#### FOOTNOTES

STATEMENT 3

990-PF PAGE.10

PART XIV - PRIVATE OPERATING FOUNDATION; SECTION 1B.
ACCORDING THE DETERMINATION LETTER DATED MAY 09, 2015 THE
IRS RECOGNIZED THAT WE ARE A PRIVATE OPERATING FOUNDATION
UNDER IRC SECTION 4942(J)(3). HOWEVER, WE DID NOT MEET THE
CRITERIA FOR THIS TEST FOR THE YEAR 2015.

0.

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS
PART VII-A, LINE 10

STATEMENT 4

NAME OF CONTRIBUTOR

ADDRESS

RODABE BHARUCHA-REID

1501 CHATEAUFORT PLACE DETROI, MI 48207

	PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS			
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
RODABE BHARUCHA-REID 1501 CHATEAUFONT PLACE DETROIT, MI 48207	PRESIDENT/DIREC	OTOR 0.	0.	0.
KERSI SHROFF 7612 TIMBERCREST DR. ROCKVILLE, MD 20855	PRESIZENT SECRETARY/DIREC 30.00	CTOR 0.	0.	0.
DOLLY DASTOOR 502 WASHINGTON AVE, 8TH FL TOWSON, MD 21204	DIRECTOR 10.00	0.	0.	0.
SARA CHRISTENSEN 502 WASHINGTON AVE, 8TH FL TOWSON, MD 21204	DIRECTOR 10.00	0.	0.	0.
RUSTAM BHARUCHA-REID 502 WASHINGTON AVE, 8TH FL TOWSON, MD 21204	DIRECTOR 10.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	0.	0.	0.