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* Form 990-PF

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ 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. Open to Public Inspection

		dar year 2016 or tax year beginning	Janua	ry 1	, 201	6, and 6		December 31	, 20	16_
						İ	A Limpioye		,,	
		undation			T B	/a.uta	D Talashan	02-0656401 ne number (see instructi		
		d street (or P O box number if mail is not delivered to str	eet address)		Room	suite	b relephon	•	•	
		and Lane n, state or province, country, and ZIP or foreign postal co						610-525-5522		
			ide				C If exempt	tion application is pendi	ing, check her	e ▶ []
	_	rr, PA 19010	l4! - l 4							_
G	Спеск	· · · · · —	ınıtıaı returi Amended	n of a former (public	cnarity	D 1. Foreigi	n organizations, check l	nere	▶∐
			Name cha					n organizations meeting		
	Charl							here and attach computed foundation status was to the computer of the computer		
		type of organization: 🔽 Section 501(c)(3 on 4947(a)(1) nonexempt charitable trust				dation		07(b)(1)(A), check here		▶ 🔲
		narket value of all assets at J Accounti								
-		f year (from Part II, col. (c),	-	i. 🖭 Casii		CCIUAI	F If the fou	ndation is in a 60-montl ction 507(b)(1)(B), check	h termination	▶□
	line 16			on cash hasis			under so	00011 001 (D)(1)(D), 011001	(11010	لــا
$\overline{}$	art [Analysis of Revenue and Expenses (The to							(d) Disburser	ments
		amounts in columns (b), (c), and (d) may not necessar		(a) Revenue expenses p			investment come	(c) Adjusted net	for charital	ble
		the amounts in column (a) (see instructions))		books		["'	Come	lilcome	(cash basis	
	1	Contributions, gifts, grants, etc., received (attach	schedule)	T -	10000	¥ :	<u> </u>	A	. 7.7	<u>{</u> }
	2	Check ► ☐ if the foundation is not required to atta			· (4) (1 N	
	3	Interest on savings and temporary cash inve					163	163	V. 3	-35
	4	Dividends and interest from securities .			-			-	3.00	<u> </u>
	5a	Gross rents							2.4	L
	b	Net rental income or (loss)		200	_ & P	1 148	1 .4	St. 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	., 3 (4)	<u> </u>
<u>o</u>	6a	Net gain or (loss) from sale of assets not or	line 10	Į.		2		S. I. S. Carlotte		***
Š	b	Gross sales price for all assets on line 6a		4, 1	·	*	: \$16°		x /# **	25°
Revenue	7	Capital gain net income (from Part IV, line 2)	``						E
ď	8	Net short-term capital gain		. 400	. NG Y	430				J.J.
	9	Income modifications				· 👸			\$ W .	73 à .
	10a	Gross sales less returns and allowances		04	4	<u> </u>	334 3	1:	1 1 1	. 31
	b	Less: Cost of goods sold		AL L	: Å.	311.	<u> </u>		7 4 1	<u> </u>
	С	Gross profit or (loss) (attach schedule) .			-	2. ****				-10.
	11	Other income (attach schedule)								\$2. s.
	12	Total. Add lines 1 through 11		·	10000		<u>163</u>	163	: 190	<u>a 1</u>
S	13	Compensation of officers, directors, trustee								
Expenses	14	Other employee salaries and wages		<u> </u>						
be	15	Pension plans, employee benefits				 				
Ä	16a b	Legal fees (attach schedule)	• •			-	RE	CEIVED		
Š		Accounting fees (attach schedule) Other professional fees (attach schedule)		<u> </u>		- 4	9		ပါ	
ati	17						S MA	Y 1 9 2017	S	
str	18	Interest					≪!		2	
Ë	19	Depreciation (attach schedule) and depletic			- 1		Or.		¥ 83.	ria de la composição
튵	20	Occupancy				1				· · 26_3335
Ă	21	Travel, conferences, and meetings								
Ī	22	Printing and publications			_					
g	23	Other expenses (attach schedule)								
Ë	24	Total operating and administrative ex								
řa		Add lines 13 through 23			1			1		
Operating and Administrative	25	Contributions, gifts, grants paid			8201		· 444	48, W.		8201
_	26	Total expenses and disbursements. Add lines 2	24 and 25		8202			1		8201
	27	Subtract line 26 from line 12:			lk:	1111			4	-32
	а	Excess of revenue over expenses and disbur			1798		<u>.14884.7</u>		43368	
	b	Net investment income (if negative, enter		**************************************	7.8		163			
		Adjusted net income (if negative, enter -0-	· <u>) </u>	21 1 1		δ <u>(* ,</u> (\$,			000 DE	
For	Paper	work Reduction Act Notice, see instructions.			Cat No	11289X		Fo	rm 990-PF	' (2016)

Pa	ırt II	Ralance Sheets	Attached schedules and amounts in the description column	Beginning of year	End o	of year
			should be for end-of-year amounts only. (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash-non-interest-l	bearing	40225	42185	42185
	2	Savings and tempora	ary cash investments			
	3	Accounts receivable	>	, , , , , , , , , , , , , , , , , , , ,		***
		Less: allowance for c	loubtful accounts ▶	ì		
	4	Pledges receivable ▶	•			72
		Less: allowance for o	loubtful accounts ▶			
	5	Grants receivable .				
	6		m officers, directors, trustees, and other		<u> </u>	
		· ·	(attach schedule) (see instructions)			
	7	Other notes and loans re	eceivable (attach schedule) ▶			3.8. V 7.83
		Less. allowance for dou	ubtful accounts ▶			
Assets	8	Inventories for sale o	ruse			
se	9	Prepaid expenses an	d deferred charges			
As	10a	Investments-U.S. and	state government obligations (attach schedule)			
	b	Investments-corpor	ate stock (attach schedule)		- 	
	С	Investments-corpor	ate bonds (attach schedule)			
	11	Investments-land, build	lings, and equipment: basis ▶	3.2 4 4 . 2.3 5	243 % A383	() () () () ()
		Less: accumulated depre	ciation (attach schedule) ▶		na ya 1990 Maddini kata 1990 ya 1990 Madaman 1	
	12	Investments-morta	age loans			
	13					
	14	Land buildings and ed	attach schedule)	2.12 445		4 MM '- MM Y
		Less, accumulated depr	reciation (attach schedule) ▶	1 **********************************	distribution of the state of th	- Continued III Consider the Addition of the Consideration of the Consid
	15					
	16	Total assets (to	be completed by all filers—see the	-		
		instructions. Also, se	e page 1, item l)	40225	42185	42185
	17		d accrued expenses	70220	12100	\$ W
	18			<u> </u>		
Liabilities	19					
	20		ectors, trustees, and other disqualified persons			
ap	21		notes payable (attach schedule)			
=	22	Other liabilities (desc		· · · · · · · · · · · · · · · · · · ·		
ļ	23	Total liabilities (add	lines 17 through 22)			1
			llow SFAS 117, check here ▶ □			
S		and complete lines	24 through 26 and lines 30 and 31.]		
2	24	•		ļ :		
ag	25		d			
m	26	• •	ed			
nd Balances	20	·	o not follow SFAS 117, check here ▶ □			
		and complete lines				
Net Assets or Fu	27		rincipal, or current funds			
S	28	•	plus, or land, bldg., and equipment fund			
Set	29	•	umulated income, endowment, or other funds			
Asi	30		fund balances (see instructions)			
,	31		nd net assets/fund balances (see	-		
ž	31					
Da	rt III		nges in Net Assets or Fund Balances	<u></u>		786 - Mary 1 12 18 23 1 1 20 1
1			palances at beginning of year—Part II, colu		t agree with	
•			d on prior year's return)		_	40005
^			· · ·			40225
2		er amount from Part I, I				1798
3	Othe	increases not includ	ed in line 2 (ıtemize) ►		3	163
4	_					42185
5	Deci	reases not included in	line 2 (itemize) ► alances at end of year (line 4 minus line 5)—	Dort II. column (h) III	5	
<u> </u>	lota	in het assets or fund ba	marices at end of year (line 4 minus line 5)—	rait II, COIUMN (D), II	ne 30 6	42185
						Form 990-PF (2016)

		kind(s) of property sold (e g , real estate, e, or common stock, 200 shs MLC Co)		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
<u>1a</u>					<u> </u>	
b				 		
<u>c</u>						ļ
<u>d</u>				 		
<u>е</u>				<u> </u>		<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis bense of sale		in or (loss) (f) minus (g)
a						
<u>b</u>						
<u>c</u>						
<u>d</u>						
<u> </u>			. 41 61-4	10/04/00		
	Complete only for assets snow	ing gain in column (h) and owned by				ıl (h) gaın mınus ot less than -0-) or
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ess of col (i) ol (j), if any		from col (h))
a						
<u>b</u>						
c				<u>. </u>		
<u>d</u>						
e						
2	Capital gain net income or (not canital locel / ~ ·	so enter in P enter -0- in P		2	
3		or (loss) as defined in sections 1 line 8, column (c) (see instructi				
	Part I, line 8	<u></u> . <u></u>		5	3	
Part	V Qualification Unde	r Section 4940(e) for Reduc	ed Tax on	Net Investment	Income	
If sec	tion 4940(d)(2) applies, leave the foundation liable for the se	ate foundations subject to the se this part blank. ection 4942 tax on the distributa ualify under section 4940(e). Do	ble amount o	of any year in the b	·	☐ Yes ☐ No
1		nt in each column for each year			akıng anv entries.	
	(a)	(b)		(c)		(d)
Cale	Base period years endar year (or tax year beginning in)	Adjusted qualifying distributions	Net value	of noncharitable-use a		tribution ratio divided by col. (c))
	2015	6	200			, , , , , , , , , , , , , , , , , , , ,
	2014		151			
	2013	7(001			
	2012	60	36			
	2011	6	502			
2	Total of line 1, column (d)		- -		. 2	
3		r the 5-year base period—divide				
_		tion has been in existence if less			. 3	
4	Enter the net value of nonch	naritable-use assets for 2016 fro	m Part X, line	e5	. 4	
5	Multiply line 4 by line 3 .				. 5	· · · · · · · · · · · · · · · · · · ·
6	Enter 1% of net investment	income (1% of Part I, line 27b)			. 6	
7	Add lines 5 and 6				. 7	
8		s from Part XII, line 4				8201
	Part VI instructions.	I Griden and Box III I	Cit 71, 11110 1	D, and complete	mat part using a	. , o tax rato. 000 tric

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	nstru	ICTIO	ns)				
1a	Exempt operating foundations described in section 4940(d)(2), check here \(\bigcup \) and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)		٠					
h	b Domestic foundations that meet the section 4940(e) requirements in Part V, check							
	here ▶ ☐ and enter 1% of Part I, line 27b							
С								
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	<u> </u>				
3	Add lines 1 and 2							
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			<u> </u>				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	. 90-708	2	3				
6	Credits/Payments:	N. X	. %.					
a	2016 estimated tax payments and 2015 overpayment credited to 2016 6a	•						
b	Exempt foreign organizations—tax withheld at source 6b Tax paid with application for extension of time to file (Form 8868) . 6c		3.3					
c d	Tax paid with application for extension of time to file (Form 8868) . 6c Backup withholding erroneously withheld 6d			ľ				
7	Total credits and payments. Add lines 6a through 6d		<u> </u>					
8	Enter 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 line 7, enter amount owed 9		2					
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10							
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax ▶ Refunded ▶ 11							
Part '	VII-A Statements Regarding Activities							
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	Yes	No ✓				
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1b		1				
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	. * 1	21.					
	published or distributed by the foundation in connection with the activities.							
С	Did the foundation file Form 1120-POL for this year?	1c		✓				
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$							
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$		***	1				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	<u>2</u> ≥.	¥.	✓ ③.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		1				
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		1				
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		1				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		✓				
	If "Yes," attach the statement required by General Instruction T.		. 3					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	- 1	100	4				
	By language in the governing instrument, or By state logiclation that affectively amends the governing instrument so that no mandatory directions that	🦓	- CO	* *				
	• 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?	6						
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		 				
, 8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	133		·				
			ż					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		× L	1				
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b		✓				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		id.	<u> </u>				
	4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"		ļ					
	complete Part XIV	9		/				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	1,-	,					
	names and addresses	10	✓	<u></u>				

Par	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		1
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		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		1
	Website address ▶			
14		0-525-	5522	
	Located at ► 318 Highland Lane, Bryn Mawr, PA ZIP+4 ►	1901	0	<u></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		•	▶
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?		Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	16	<u> </u>	
	the foreign country	P. 4		
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u>. </u>	7. 7	1 3
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	74. %	Yes	No
1a	During the year did the foundation (either directly or indirectly):		¥ .	\$ · ·
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No No No	\$		
	disqualified person?	*		: 3
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . Yes No		**	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No		à.	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	1 %		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		1 ×	
	foundation agreed to make a grant to or to employ the official for a period after		3 .	
	termination of government service, if terminating within 90 days.)		ľ	300
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations		\ \tag{\partial}	%
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	J -2 ****	***************************************
	Organizations relying on a current notice regarding disaster assistance check here ▶□			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2016?	100	133.	
	If "Yes," list the years ▶ 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	""		
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	<u> 20</u>	Bio on	
	► 20 , 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?	, y''		
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or		à	
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the	1. 7.8	1.3	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of	1 . 4		
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016.)	-1	} _ 1	1
4 -		3b	<u> </u>	 _ _
4a b	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a	W.	
J	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b	<u> </u>	7
				, .

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Par	VII-B Statements Regarding Activities	s for V	Vhich Form	4720	May Be P	equire	ed (contil	nued)		
5a	During the year did the foundation pay or incur a	•							, _^ .	
	(1) Carry on propaganda, or otherwise attempt t(2) Influence the outcome of any specific public						Yes	 No		
	directly or indirectly, any voter registration dr				-	•	Yes	 ✓ No	, « *	
	(3) Provide a grant to an individual for travel, stu						Yes	✓ No)	
	(4) Provide a grant to an organization other than section 4945(d)(4)(A)? (see instructions)		ritable, etc.,				_			
	(5) Provide for any purpose other than religious						Yes !	✓ No		
	purposes, or for the prevention of cruelty to	childre	n or animals?	•			☐Yes	✓ No	1 196750	
b	If any answer is "Yes" to 5a(1)–(5), did any of the Regulations section 53.4945 or in a current notice							ıbed ın	المنتسب الأ	لاللشك
	Organizations relying on a current notice regardi	_	-		-	uctions			5b	8 kg 15 15 15
С	If the answer is "Yes" to question 5a(4), does to	the fou	ndation claim	n exem	ption from					
	because it maintained expenditure responsibility						☐ Yes	✓ No		
6a	If "Yes," attach the statement required by Regula Did the foundation, during the year, receive any					emiums	1			
-	on a personal benefit contract?		-	-			☐ Yes	✓ No		
b	Did the foundation, during the year, pay premium	ns, dire	ectly or indire	ctly, on	a personal	benefi	t contract	? .	6b	3. 80. 12
7a	If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundation	a nartv	to a prohibite	d tay sh	elter transar	etion?	Yes	[₹] No		
	If "Yes," did the foundation receive any proceed	s or ha	ve any net inc	come a	ttributable	to the t	ransactio	າ?ື.	7b	
<u>Par</u>	VIII Information About Officers, Direct	tors, 1	Γrustees, F	ounda	tion Man	agers,	Highly F	Paid E	mploy	ees,
	and Contractors List all officers, directors, trustees, foundation	n mana	agers and th	eir con	npensation	ı (see i	nstructio	ns).	· · ·	-
	(a) Name and address	(b) Title	e, and average irs per week	(c) Co	mpensation not paid,	(d)	Contribution byee benefit	s to	(e) Expe	nse account,
			ed to position		iter -0-)	and def	erred compe	nsation	other a	allowances
	Patwardhan ghland Lane, Bryn mawr, PA 19010	Directo	or			1				
	itwardhan	Directo	 or				 -			
318 Hi	ghland Lane, Bryn Mawr, PA 19010	1.0	-	ļ						
				_						
				L						
2	Compensation of five highest-paid employed "NONE."	es (otn	er than thos	se inci	uaea on II	ne 1—:	see instr	uctions	s). It no	one, enter
			(b) Title, and a	verage			(d) Contribu			
	(a) Name and address of each employee paid more than \$50,00	00	hours per v devoted to p	veek	(c) Compe	nsation	employee plans and o compens	deferred		nse account, allowances
							Compens	SECTION .		
							·	-		
			-							
									i	
										-
			 -			_			_	
		••								
Total	number of other employees paid over \$50,000.	• •					<u></u>	. ▶		
									OO	^_DE /ootes

Par	VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E	mployees,
		and Contractors (continued)	
3	Five	nighest-paid independent contractors for professional services (see instructions). If none, enter "NOI	NE."
		(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
			
			
			
<u>Fotal</u>	numbe	er of others receiving over \$50,000 for professional services	<u> </u>
Par	t IX-A	Summary of Direct Charitable Activities	
		idation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of s and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1			
			<u> </u>
2			
3	—		+
•			
•			
4			
			
	IX-B		
	scribe the	two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1			
2			
			,
All	other pro	gram-related investments. See instructions	1
3			
-			
	A 1 4 **		
otal	. Add li	nes 1 through 3	<u> </u>
			Form 990-PF (201

Part	· · · · · · · · · · · · · · · · · · ·	ign fo	undations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	
С	Fair market value of all other assets (see instructions)	1c	<u>-</u>
d	Total (add lines 1a, b, and c)	1d	
e	Reduction claimed for blockage or other factors reported on lines 1a and	10	
	1c (attach detailed explanation)	J	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities. Enter $11/2\%$ of line 3 (for greater amount, see		
	instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	
6	Minimum investment return. Enter 5% of line 5	6	
Part	and certain foreign organizations check here ▶ ☐ and do not complete this part.)	ounda	ations
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2016 from Part VI, line 5	. 11	
b	Income tax for 2016. (This does not include the tax from Part VI.) 2b		
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	
Part	XII 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	8201
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	7.	
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	8201
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 (see instructions)	5	1
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	8202
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculatin qualifies for the section 4940(e) reduction of tax in those years.	g whe	ther the foundation
		_	

Part	XIII Undistributed Income (see instruct	ions)			
1	Distributable amount for 2016 from Part XI, line 7	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
_					
2	Undistributed income, if any, as of the end of 2016				
a	Enter amount for 2015 only				
þ	Total for prior years: 20,20,20				
3	Excess distributions carryover, if any, to 2016:				,
a	From 2011	_			į.
b	From 2012	- · · · · ·		, 1,	,
C	From 2013	_		, , , , , , , , , , , , , , , , , , , ,	
d	From 2014	↓ '	ŕ	, 1	â
e		*			
f 4	Total of lines 3a through e	₩ 2 2	, , ,	3 % 48	** * * * * * * * * * * * * * * * * * *
-	line 4: > \$				
_				<u>*********************************</u>	11 PM 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
a b	Applied to 2015, but not more than line 2a. Applied to undistributed income of prior years			3 % /	* * * *
D	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election	*8 '." \$i × - \2	* *		***
·	required—see instructions)				
ď	Applied to 2016 distributable amount	0122. 33			[*
e	Remaining amount distributed out of corpus	,	A A A A A A A A A A A A A A A A A A A		
5	Excess distributions carryover applied to 2016	8201			37.7% 38
•	(If an amount appears in column (d), the same	8201		**************************************	· ** .
	amount must be shown in column (a).)				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b	Prior years' undistributed income. Subtract			34 B 3	
	line 4b from line 2b				
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				
d	Subtract line 6c from line 6b. Taxable amount—see instructions				
_	Undistributed income for 2015. Subtract line		* 8 * * * * * * *		
-	4a from line 2a. Taxable amount—see				
	Instructions			•	
f	Undistributed income for 2016. Subtract lines	1,014 / 12 /	2.80		
-	4d and 5 from line 1. This amount must be				
	distributed in 2017				
7	Amounts treated as distributions out of corpus				*
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be	[
	required—see instructions)				
8	Excess distributions carryover from 2011 not		4 13 ×	1.4	
	applied on line 5 or line 7 (see instructions) .		1	, , , , ,	M. 2. 5 V
9	Excess distributions carryover to 2017.	Ι Τ	·	4 .	
	Subtract lines 7 and 8 from line 6a	,	× ', ,	, \$ '	<u> </u>
0	Analysis of line 9:				***
_	Excess from 2012			, i	
b	Excess from 2013		- 7 × 3 ·		'
C	Excess from 2014				43 % %
d	Excess from 2015				1. J. (
е	Excess from 2016		<u>\ </u>	M () () ()	31' K ()

	90-PF (2016)	 				Page 10
Part						
та	If the foundation has received a ruling foundation, and the ruling is effective for			private operating		
ь	Check box to indicate whether the foun		•	L	ction	3) or 4942(j)(5
2a	Enter the lesser of the adjusted net	Tax year	operating realist	Prior 3 years	10.01.	
	income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
	investment return from Part X for each year listed					
b	85% of line 2a				-	<u></u>
С	Qualifying distributions from Part XII, line 4 for each year listed .					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly		1			
	for active conduct of exempt activities. Subtract line 2d from line 2c		ja			
3	Complete 3a, b, or c for the alternative test relied upon:					•
а	"Assets" alternative test-enter				ļ	
	(1) Value of all assets					
	(2) Value of assets qualifying under					
b	section 4942(j)(3)(B)(i)					
D	of minimum investment return shown in					
_	Part X, line 6 for each year listed			 		
С	"Support" alternative test – enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) .					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income .					
<u>Part</u>		•	-	the foundation ha	ad \$5,000 or mo	re in assets a
	any time during the year—		s.)			
1 a	Information Regarding Foundation N List any managers of the foundation w before the close of any tax year (but or	ho have contribu				by the foundation
b	List any managers of the foundation wownership of a partnership or other en			•		ge portion of the
2	Information Regarding Contribution,	Grant, Gift, Loa	n, Scholarship.	etc., Programs:		
	Check here ► ✓ if the foundation of unsolicited requests for funds. If the fo	only makes contri	ibutions to prese	elected charitable o		
	other conditions, complete items 2a, b		gto, g. ato, o.to.	(000 11.00.000.07.10)	,a.v.a.a.a.a	jamzanono anao
а	The name, address, and telephone nur		dress of the pers	son to whom applica	tions should be ac	ddressed:
	The form in which applications should	be submitted and	I information and	materials thev shou	ıld include:	
				2.2 1 3 , 2.1.00		
С	Any submission deadlines:					

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

Form **990-PF** (2016)

Par	Supplementary Information (cont	rinued)			
_3	Grants and Contributions Paid During	the Year or Approv	ed for Fu	ture Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a	Name and address (home or business) Paid dunng the year	or substantial contributor	recipient	 	
u	r aid ddinig the year				
Per at	tached list			Contributions to various organizati	820
				}	
			}	1	
			į		
			ĺ		
				}	
	•		[
				,	
			i		
			}		
]		
		1	}	1	
			!		
	Total			▶ 3a	
b	Approved for future payment				
	•				
		1			
	Total	L	<u>' </u>	D 2h	

		oss amounts unless otherwise indicated.		usiness income	Excluded by sect	ion 512, 513, or 514	
	ŭ		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exemp function income (See instructions.)
1		gram service revenue:					(Oce matractions.)
	a						
	b						
	q		-				
	d						
	e f						_
	<u>'</u>	Formation to the state of the s					
_		Fees and contracts from government agencies					
2		mbership dues and assessments					
3 4		rest on savings and temporary cash investments idends and interest from securities	-				
5		rental income or (loss) from real estate:	1987 188 Set Su.			75 2 x 4 1 1 1 2 x x	
3		Debt-financed property	**************************************	- *	\$ 'S' \ ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '		**
		Not debt-financed property					
6		rental income or (loss) from personal property	<u> </u>				
7		per investment income		_			
8		n or (loss) from sales of assets other than inventory					
9		income or (loss) from special events					
10		ess profit or (loss) from sales of inventory					
11		er revenue: a					
	b						
	С						
	d	197		·····			
	е						
12	Sub	ototal. Add columns (b), (d), and (e)	118				
					<u> </u>	13	
See	wor	ksheet in line 13 instructions to verify calculation	ıs.)				
Pa	rt X\	VI-B Relationship of Activities to the A	ccomplishm	ent of Exemp	t Purposes		
	e No	Explain below how each activity for which accomplishment of the foundation's exempt pur	income is repo	orted in column	(e) of Part XVI	-A contributed in	nportantly to the
	V	accomplishment of the foundation's exempt pur	poses (otner tha	n by providing tun	as for such purp	oses). (See instruc	tions.)
					. <u>.</u>		
						··	
							
		<u> </u>					-
							
							
							
					 -		
							
						 _	
							
				<u></u>	<u>-</u> -		
					-	_	
			<u>-</u> .				-
			 				
				-			

Part	XVII		n Regarding Trai ganizations	nsters to and tran	isactions and r	seiationsni	ıps w	ith Noi	ncnarit	apie	
1	Did th			engage in any of the	following with any	other organ	nizatio	n descri	ibed	Ye	s No
				section 501(c)(3) orga						1	* 1
		zations?	ic code (otrici triai)	Scotton sortologo orga	111124110110) OF 111 O	500011 027,1	Clathi	3 10 po	11001	. 1	
	-					- £.					
		-		o a noncharitable exe	•	OT:			-	<u>;</u>	لشا
	(1) Ca									1(1)	
	(2) Ot	her assets .							. <u>1</u> 2	(2)	
b	Other	transactions:							١.		
	(1) Sa	les of assets to	a noncharitable ex	empt organization .					. 1t	(1)	
	(2) Pu	rchases of asse	ets from a noncharit	able exempt organiza	tíon				. 1t	(2)	T
				er assets					_	(3)	
									F	(4)	
		ans or loan gua	-						_	o(5)	+
		_		hip or fundraising solu			• •	• •		o(6)	+
				sts, other assets, or p			• •			ic	+
		-	• •								
				es," complete the follo							
	value	of the goods, o	tner assets, or serv	ices given by the rep	orting foundation	If the found	ation	received	iess tn	an tair	market
				gement, show in colur							
(a) Line	no (b) Amount involved	(c) Name of nonc	haritable exempt organizati	on (d) Descri	ption of transfe	ers, trans	sactions, a	and sharing	arrange	ments
						_					
	\neg									·	
	_ _										
			l								
											
						_ -					
	_										
			L								
	_										
										_	
			-								
2a	Is the	foundation dire	ectly or indirectly a	filiated with, or relate	ed to one or mor	e tax-exem	nt ora	anizatio	ns		
				other than section 50						Yes 🗆	l No
			e following schedule		. (0)(0)) 0 000	02	•		. П	163 _	, 140
	11 100			, 	Januaration I	-	(a) Dan	orintian of	frolotionoh		
		(a) Name of organ	nzation	(b) Type of org	anization		(c) Des	enpuon oi	f relationshi		
				<u> </u>							
				<u></u>							
				ed this return, including accor				est of my l	knowledge	and belief	, it is true,
Sign	correc	t, and complete Decl	aration of preparer (other the	nan taxpayer) is based on all in	formation of which prep	arer has any kno	wiedge	Ms	ay the IRS o	discuss th	us return
Here) /	1000/22	111	15/14/14	Dive	CTO	•	wit	th the prepa	arer show	n below
1016	Signa	ure of efficer or trus	stee	Date	Title			(se	e instruction	ns)? 💾 Y e	s⊟No
_	-	Print/Type preparer		Preparer's signature		Date	Т		- PTIN	1	
Paid	1	, po proparer		. ropa or o orginatoro			1	Check	_j if [•	
Prepa						ــــــــــــــــــــــــــــــــــــــ		self-emple	oyea		
Use ()nly -	Firm's name					Firm's	EIN ►			
		Firm's address 🕨					Phone	no			
									Earm	uuri_D	E (2016)

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

► 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.

	f the organization Foundation		Employer identification number 02-0656401
Organi	zation type (check or	е):	
Filers o	of:	Section:	
Form 9	90 or 990-EZ	☐ 501(c)() (enter number) organization	
		4947(a)(1) nonexempt charitable trust not treated as a private for	undation
		☐ 527 political organization	
Form 99	90-PF	✓ 501(c)(3) exempt private foundation	
		☐ 4947(a)(1) nonexempt charitable trust treated as a private founda	tion
		501(c)(3) taxable private foundation	
	Only a section 501(c)(7	covered by the General Rule or a Special Rule.), (8), or (10) organization can check boxes for both the General Rule a	and a Special Rule. See
Genera	l Rule		
V		filing Form 990, 990-EZ, or 990-PF that received, during the year, con r property) from any one contributor. Complete Parts I and II. See instr ontributions.	
Special	l Rules		
	regulations under se 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 3 ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 99 that received from any one contributor, during the year, total contributhe amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1	90 or 990-EZ), Part II, line tions of the greater of (1)
	contributor, during to	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that ne year, total contributions of more than \$1,000 <i>exclusively</i> for religious al purposes, or for the prevention of cruelty to children or animals. Cor	, charitable, scientific,
	contributor, during t contributions totaled during the year for a General Rule applie	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that year, contributions exclusively for religious, charitable, etc., purposed more than \$1,000. If this box is checked, enter here the total contribution exclusively religious, charitable, etc., purpose. Don't complete any of second to this organization because it received nonexclusively religious, charitable, etc., purpose.	es, but no such utions that were received if the parts unless the aritable, etc., contributions
990-EZ,	, or 990-PF), but it m u	t isn't covered by the General Rule and/or the Special Rules doesn't fi st answer "No" on Part IV, line 2, of its Form 990; or check the box or certify that it doesn't meet the filing requirements of Schedule B (For	line H of its Form 990-EZ or on its

Name of organization Employer identification number Rishta Foundation 02-0656401

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	ita & Girish Patwardhan 18 Highland Lane, Bryn Mawr, PA 19010	\$ <u>10000</u>	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 Doncash 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) Io.	(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.	Name, address, and ZIP + 4	(c) Total contributions	Type of contribution
			Person Payroll Noncash
			(Complete Part II for noncash contributions.)

Employer identification number

Part II	Noncash Property (See instructions). Use duplicate copies	of Part II if additional sp	ace 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 (1	Form 990, 990-EZ, or 990-PF) (2016)		Page 4
Name of or	rganization		Employer identification number
Part III	(10) that total more than \$1,000 for the the following line entry. For organization contributions of \$1,000 or less for the	ne year from any one contribuns completing Part III, enter the year. (Enter this information one	ns described in section 501(c)(7), (8), or ator. Complete columns (a) through (e) and total of exclusively religious, charitable, etc., ce. See instructions.)
/a\ Na	Use duplicate copies of Part III if additi	onal 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	
_	Transferee's name, address, and	ZIP + 4 Re	lationship 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 Re	lationship 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 Re	lationship of transferor to transferee
			······································
	•		•
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
L			
	Transferee's name, address, and	(e) Transfer of gift	lationship of transferor to transferee
-	Transieree S Hame, address, and		iodonish of dansieror to dansieree

Rishta Foundation Profit & Loss Detail January through December 2016

05/14/17 Cash Basis

10:24 PM

Type Date	Num Name	Paid Amount	Balance
Ordinary Income/Expense Income			
Annual Contributions by Rita & Deposit 12/27/2016		10,000 00	10,000 00
Total Annual Contributions by Rita &	જ	10,000.00	10,000 00
Total Income		10,000 00	10,000 00
Expense			
ble Donation	Donation)		
		1,000 00	1,000 00
		100 00	1,100 00
	., .	100 001	1,200 00
	_ `	100 00	1,300 00
		250 00	1,550 00
	238 Plymouth Balvinar	400 00	1,950 00
	-	150 00	2,100 00
	_	1,000 00	3,100 00
		150 00	3,250 00
		150 00	3,400 00
		00 152	3,651 UU
		1,500 00	5,151 00
		1,000 00	6,151 00
	_	750 00	6,901 00
J	247 Susan G Komen	100 00	7,001 00
_	_	100 00	7,101 00
_	251 United Way	200 009	7,601 00
_		100 00	
Check 12/27/2016	252 Vibha	200 00	8,201 00
Total Charitable Donation (Charitable Donation)	ible Donation)	8,201 00	8,201 00
Paid Tax (Tax on last year's interst in)	nstin) 239 - HS Treasury	00 1	100
			3
Total Paid Tax (Tax on last year's interst in)	interst in)	100	1 00
Total Expense		8,202 00	8,202 00
Net Ordinary Income		1,798 00	1,798 00

Rishta Foundation Profit & Loss Detail

January through December 2016

05/14/17 Cash Basis

10:24 PM

Type	Date	Num	Name	Paid Amount	Dalarice
Other Income/Expense	theuse				
Other Income					
Interest Income (Moni		thly interest on Checking)			
Deposit	01/29/2016			0 49	0 49
Deposit	01/29/2016			11 75	12 24
Deposit	02/29/2016			0 36	12 60
Deposit	02/29/2016			11 82	24 42
Deposit	03/31/2016			0 16	24 58
Deposit	03/31/2016			14 93	39 51
Deposit	04/29/2016			0 14	39 65
Deposit	04/29/2016			14 46	54 11
Deposit	05/31/2016			0 15	54 26
Deposit	05/31/2016			14 82	80 69
Deposit	06/30/2016			0 12	69 20
Deposit	06/30/2016			14 06	83 26
Deposit	07/29/2016			0 12	83 38
Deposit	07/29/2016			14 54	97 92
Deposit	08/31/2016			0 11	98 03
Deposit	08/31/2016			14 54	112 57
Deposit	09/30/2016			0 20	112 77
Deposit	09/30/2016			12 92	125 69
Deposit	10/31/2016			0 17	125 86
Deposit	10/31/2016			12 44	138 30
Deposit	11/30/2016			0 16	138 46
Deposit	11/30/2016			12 04	150 50
Deposit	12/31/2016			0 24	150 74
Deposit	12/31/2016			12 02	162 76
Total Interest Ir	Total Interest Income (Monthly Interest on Checking)	erest on Checking)		162 76	162 76
Total Other Income	me			162 76	162 76
Net Other Income				162 76	162 76
Net Income				1,960.76	1,960.76