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

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

OMB No 1545-0052

2016

Open to Public Inspection

	endar year 2016 or tax year beginning	, 2016	, and ending	-	<u></u>
Name of f	oundation			A Employer identification num	nber
THE	<u>MOSHARRAFA PLASTIC SURGERY F</u>	OUNDATION, INC		47-3058821	
	nd street (or P O box number if mail is not delivered to street a	nddress)	Room/suite	B Telephone number (see instru	
4611	E. SHEA BLVD, #230		L	(602) 513-813	3
-	vn, state or province, country, and ZIP or foreign postal code			C If exemption application is a	
PHOE			85028	C If exemption application is	bending, check here.
G Che	eck all that apply X Initial return	Initial return of a forme	er public charity	D 1 Foreign organizations, chec	k here
	Final return	Amended return		· · · · · · · · · · · · · · · · · · ·	Ч
	Address change	Name change		2 Foreign organizations meet	ing the 85% test, check
H Che	eck type of organization X Section 501	(c)(3) exempt private fou	indation	here and attach computation	n ▶ []
ſ	Section 4947(a)(1) nonexempt charitable trus		rivate foundation	E If private foundation status	was terminated
1 Fair		ounting method X C		under section 507(b)(1)(A),	check here ►
	m Cort II only may (a) line 1(1)	Other (specify)	usi, 🗀, (ooruur ļ	- - - - - - - - - -	
► s	I I I	column (d) must be on c	ash hasis T	F If the foundation is in a 60-r under section 507(b)(1)(B),	nonth termination
	Analysis of Revenue and	COIGHIN (G) MUSIC DO ON C	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	under section 507(b)(1)(b),	Check here
*1. alti		(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in columns (b), (c), and (d) may not neces-	expenses per books	income	income	for charitable
	sanly equal the amounts in column (a)				purposes (cash basis only)
	(see instructions))				**
	1 Contributions, gifts, grants, etc., received (attach schedule) - •				N. Sarah
	2 Check X if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments		1		
	4. Dividends and interest from securities				771 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	5 a Gross rents				
	b Net rental income			2. ** 2.34** 3** 3**	
_	or (loss) 6 a Net gain or (loss) from sale of assets not on line 10	(8) - TARESTA SARANA (AMMERIA) - 14 3 84			
R	b Gross sales price for all	16° 55' 32° - 1,1888 * 1,1789,3° 1 - 1888	77 Sec. 18 3 8 305 8 8 3 3 3 5	2 4 10 7 10 10 10 10 10 1 10 10 10 10 10 10 10 1	
E V	assets on line 6a				
E	7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain		. DOM: 1 4 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	A: M: Profits No. No.	
N U	9 Income modifications		ro nn er, (nasc.		
Ĕ	10 a Gross sales less			(45)	
	returns and allowances				
	b Less Cost of	11 Maria Maria Mara			78.53 (MA) (1.58 M) (M) (F)
	goods sold	36 - 138652 (* 1886) ⁻ LA 12			
	11 Other income (attach schedule)			·2854	
	The street income (and a) surroundly			ì	
\geq	12 Total. Add lines 1 through 11	0.			
Z017	13 Compensation of officers, directors, trustees etc.			DEL COLORES	 **** **** *** *** *** *** *** ** **
25	14 Other employee salaries and wages				
200	15 Pension plans, employee benefits		 +	10	
·	16 a Legal fees (attach schedule)		21 6		
	b Accounting fees (attach sch).	· · · · · · · · · · · · · · · · · · ·			
	c Other professional fees (attach sch)		1		
Cò N	17 Interest		F-1		
P S	18 Taxes (attach schedule)(see instrs)		<u></u>		
OPERAT	19 Depreciation (attach				\$. (\$* \$)s.
ZA A	schedule) and depletion				
EN V	20 Occupancy				**** 27 JANA P. \$2" \$4. 3
V.G É	21 Travel, conferences, and meetings				
A E	22 Printing and publications				
A E X P	23 Other expenses (attach schedule)				
E N					
S	24 Total operating and administrative				
Š	expenses. Add lines 13 through 23				
	25 Contributions, gifts, grants paid		Callet Car		
	26 Total expenses and disbursements. Add lines 24 and 25				
	<u></u>		7,81,7	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	* , ,
	27 Subtract line 26 from line 12: a Excess of revenue over expenses	Maria de la companya della companya della companya della companya de la companya della companya			3"
	and disbursements	0.			1.
	b Net investment income (if negative, enter -0-)				
	C Adjusted net income (if negative, enter -0-)	(A) (A)	, <u>, i ,</u> ,		, .
BAA F	or Paperwork Reduction Act Notice, see ins	tructions.	TEEA0301 12/		Form 990-PF (2016)

Form 990-PF (2016) THE MOSHARRAFA PLASTIC SURGERY FOUNDATION, INC. 47-3058821 Page						
Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year	End o	f year		
rar		(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash - non-interest-bearing	0.	0.	0.	
	2	Savings and temporary cash investments				
	3	Accounts receivable ▶	* * * * * * * * * * * * * * * * * * * *			
	ĺ	Less allowance for doubtful accounts				
	4	Pledges receivable				
	ĺ	Less allowance for doubtful accounts			**************************************	
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach sch)	1.18 15 (本名) 数/15。 2·8	dia Millian with	13. 75. 75. 75. 75. 75. 75. 75. 75. 75. 75	
A		Less allowance for doubtful accounts		**************************************		
S	8	Inventories for sale or use				
A S E T	9	Prepaid expenses and deferred charges				
S	10.8	Investments – U.S. and state government				
	'**	obligations (attach schedule)				
	t	Investments — corporate stock (attach schedule)				
	d	Investments — corporate bonds (attach schedule)				
	11	Investments — land, buildings, and equipment basis ▶				
		Less accumulated depreciation (attach schedule)	Stephynophilis Self-ti — Alberte perfect and materials couponed it would be designed as a graph to the behavior		Batterge Physiology (1945) (1945) (1945) (1945) (1945) (1945) (1945) (1945) (1945) (1945) (1945) (1945) (1945)	
	12	Investments – mortgage loans	·			
	13	Investments — other (attach schedule)				
	14	Land, buildings, and equipment basis	STREET AND THE STREET			
		Less accumulated depreciation (attach schedule)	California aggi Man massalaki (1970-1974) William (1974) Massali an mahingali Wasali terbi	B. Der College Company and Miller (1994) in manifest tank and an experience of the college Col	gandain daring tribban mad historia ya na mandha dani dari galikun musiki Engalari da ta I	
	15	Other assets (describe	<u> </u>			
	16	Total assets (to be completed by all filers — see the instructions. Also, see page 1, item I)	0.	0.	0.	
Ŀ	17	Accounts payable and accrued expenses				
Ä	18	Grants payable				
В	19	Deferred revenue				
- 1	20	Loans from officers, directors, trustees, & other disqualified persons				
<u>ī</u>	21	Mortgages and other notes payable (attach schedule)				
Ţ	22	Other liabilities (describe)				
Ė	23	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.				
		•				
NF	24	Unrestricted				
N F E U T N	25	Temporarily restricted				
D	26	Permanently restricted				
A S S A E T A		Foundations that do not follow SFAS 117, check here . \(\times \) and complete lines 27 through 31.				
ĒÜ	27	Capital stock, trust principal, or current funds				
T A S N	28	Paid-in or capital surplus, or land, bldg, and equipment fund		 		
С	29	Retained earnings, accumulated income, endowment, or other funds				
O E R S	30	Total net assets or fund balances (see instructions)		 		
0	31	Total liabilities and net assets/fund balances (see instructions)		0.		
Par	t III	Analysis of Changes in Net Assets or Fund Balance				
1	Total	I net assets or fund balances at beginning of year — Part II, column of-year figure reported on prior year's return)	(a), line 30 (must agree v	with		
2		r amount from Part I, line 27a			0.	
3	Other	Increases not included in line 2 (itemize)		3	 	
4	Add	lines 1, 2, and 3 · · · · · · · · · · · · · · · · · ·			0.	
•					<u> </u>	
6	Tota	eases not included in line 2 (itemize)	Part II, column (b), line 30	6	0.	

Part IV Capital Gains and			761	(c) Date acquired		
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company) P — Purchase D — Donation					(d) Date sold (mo, day, yr)	
1a						
b						
С						
						
е						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sale		(h) Gain or (e) plus (f) mi		
a						
С						
е						
Complete only for assets show	wing gain in column (h) and owned by the	ne foundation on 12/31/69		(I) Gains (Col	(h)	
(i) F.M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		ain minus col (k), bu an -0-) or Losses (fro		
а						
b						
C						
e				·		
2 Capital gain net income or (ne		enter in Part I, line 7 er -0- in Part I, line 7	2			
3 Net short-term capital gain or	(loss) as defined in sections 1222(5) an	nd (6)				
	e 8, column (c) (see instructions) If (los			i 		
Part V Qualification Und	ler Section 4940(e) for Reduce	ed Tax on Net Investm	ent Income	'		
	te foundations subject to the section 494					
	the seat blook					
if section 4940(d)(2) applies, leave t	:nis part blank.					
Was the foundation liable for the sec	ction 4942 tax on the distributable amoi	unt of any year in the base p	eriod?	Yes	No	
If 'Yes,' the foundation does not qua	alify under section 4940(e) Do not comp	olete this part				
1 Enter the appropriate amount	ın each column for each year, see the i	nstructions before making ar	ny entries			
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of		(d) Distribution ratio (col (b) divided by col. (c))		
	1	noncharitable-use ass	ets	(col (b) divided	ratio by col. (c))	
2015	+	noncharitable-use assi	ets	(col (b) divided	ratio by col. (c))	
		noncharitable-use ass	ets	(col (b) divided	ratio by col. (c))	
2015		noncharitable-use ass	ets	(col (b) divided	ratio by col. (c))	
2015 2014		noncharitable-use assi	ets	(col (b) divided	ratio by col. (c))	
2015 2014 2013		noncharitable-use ass	ets	(col (b) divided	ratio by col. (c))	
2015 2014 2013 2012 2011				(col (b) divided	ratio by col. (c))	
2015 2014 2013 2012 2011 2 Total of line 1, column (d) . 3 Average distribution ratio for the second content of the second content	he 5-year base period — divide the total	on line 2 by 5, or by the	2	(col (b) divided	ratio by col. (c))	
2015 2014 2013 2012 2011 2 Total of line 1, column (d) . 3 Average distribution ratio for the number of years the foundation	he 5-year base period — divide the total	on line 2 by 5, or by the ears	2	(col (b) divided	ratio by col. (c))	
2015 2014 2013 2012 2011 2 Total of line 1, column (d) . 3 Average distribution ratio for the number of years the foundation 4 Enter the net value of nonchal	he 5-year base period — divide the total on has been in existence if less than 5 y	on line 2 by 5, or by the ears	2	(col (b) divided	ratio by col. (c))	
2015 2014 2013 2012 2011 2 Total of line 1, column (d) . 3 Average distribution ratio for the number of years the foundation 4 Enter the net value of nonchance 5 Multiply line 4 by line 3	he 5-year base period — divide the total on has been in existence if less than 5 y iritable-use assets for 2016 from Part X,	on line 2 by 5, or by the ears	3	(col (b) divided	ratio by col. (c))	
2015 2014 2013 2012 2011 2 Total of line 1, column (d) . 3 Average distribution ratio for the number of years the foundation 4 Enter the net value of nonchation 5 Multiply line 4 by line 3 6 Enter 1% of net investment in	he 5-year base period — divide the total on has been in existence if less than 5 y iritable-use assets for 2016 from Part X,	I on line 2 by 5, or by the ears	2 4 5	(col (b) divided	ratio by col. (c))	

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

	990-PF (2016) THE MOSHARRAFA PLASTIC SURGERY FOUNDATION, INC.		<u> 3058</u>			F	Page 4
	t VI 💮 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	- See	instr	uctio	ns)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here Land and enter 'N/A' on tine 1		17 (g)	C 1+1	<u> </u>	· .	,
	Date of ruling or determination letter: (attach copy of letter if necessary — see instructions)			}			
b	Domestic foundations that meet the section 4940(e) requirements in Part V,		1	<u> </u>	·····		
	check here . and enter 1% of Part I, line 27b			The second secon	ing.		
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		<u> </u>	· · · ·			<u> </u>
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)						
_				Ļ			
3	Add lines 1 and 2			.			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)						
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	• • •	5		^_ sLs r	%Z 3.1 .	0.
6	Credits/Payments 2016 estimated tax pmts and 2015 overpayment credited to 2016						
	Exempt foreign organizations — tax withheld at source						
	Tax paid with application for extension of time to file (Form 8868) 6 c						
	Backup withholding erroneously withheld	0.					P. A.
7	Total credits and payments Add lines 6a through 6d		7		<u> </u>		
8	Enter any penalty for underpayment of estimated tax. Check here					——	0.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9		· · · ·		0.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	-			0.
11	Enter the amount of line 10 to be Credited to 2017 estimated tax Refunded			 			- • ·
	tVII-A Statements Regarding Activities		L	Ь			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it				West St	Yes	No
ıa	participate or intervene in any political campaign?				1 a		X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes					ļ	
	(see Instructions for the definition)?				1 b	İ	х
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials pub	lished	,			a, 1.37,	
	or distributed by the foundation in connection with the activities.	.,,,,,,					
c	Did the foundation file Form 1120-POL for this year?				1 c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				100		
۵	(1) On the foundation ► \$ (2) On foundation managers ► \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed o	n			-[]	10	
•	foundation managers > \$				N. T.		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2	at emplify each of	X
	If 'Yes,' attach a detailed description of the activities.				(S. J. N	1	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles						÷1.
	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		Х
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4 a		Х
b	If 'Yes,' has it filed a tax return on Form 990-T for this year?				4 b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5	<u></u>	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 either				/%		4,7
	By language in the governing instrument, or						
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that co	nflict				علاك	الأنية
	with the state law remain in the governing instrument?				6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col (c), and Part XV				7		X
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)	_		_		1 No.	
	ARIZONA			_			
t	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation				8 b		التافينية
_							4
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If 'Yes,' complete	Part)	常.		9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their na					<u> </u>	
	and addresses	· · · ·	<u></u>		10		_x
BAA				F	orm 99	0-PF (2016)

Form	990-PF (2016) THE MOSHARRAFA PLASTIC SURGERY FOUNDATION, INC. 47-30588	21	P	age 5
Par	t VII-A Statements Regarding Activities (continued)			
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	Yes	No X
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		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	. 13	Х	
	Website address			
	Website address N/A The books are in care of blocks			3
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here			Π
	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?	. 16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country			
Par	t VIIB 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.	13,	Yes	No
1 a	During the year did the foundation (either directly or indirectly)			A
	(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) a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)			
t	If any 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)?	. 1 b	ar A.	1 6.0
	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 before the first day of the tax year beginning in 2016?	. 1 c		X
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?			
	If 'Yes,' list the years ▶ 20 , 20 , 20 , 20		24.0	
t	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		
_	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	70	ر کی ا	N. 324
	► 20, 20, 20			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
t	of Yes,' did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016)	. 3 b		
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			x
ŧ	Did the foundation make any investment in a prior year (but after December 31, 1969) that could perpartize its charitable purpose that had not been removed from jeopardy before the first day of			
	the tax year beginning in 2016?			X
BAA		Form 99	U-PF (2	(U16)

Form 990-PF (2016) THE MOSHARRAFA PLAST Part VII-B Statements Regarding Activiti	IC SURGERY FOUNDA	ATION, INC. 14720 May Be Req	47-30	58821 Page 6					
5 a During the year did the foundation pay or incur a				7 (, A					
(1) Carry on propaganda, or otherwise attempt to	•	ection 4945(e))?	Yes X	No S					
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registration	No								
(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No									
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions).	No Fig.								
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?									
b If any answer is 'Yes' to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?									
Organizations relying on a current notice regardii				V 155 VI					
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsib	ility for the grant?		· · · · · · · · · Yes	No					
If 'Yes,' attach the statement required by Regulat	tions section 53 4945–5((d)							
6 a Did the foundation, during the year, receive any to on a personal benefit contract?				No					
b Did the foundation, during the year, pay premium If 'Yes' to 6b. file Form 8870	is, directly or indirectly, o	on a personal benefit con	tract'	6b X					
7 a At any time during the tax year, was the foundation	on a party to a prohibited	tax shelter transaction?	Yes X	. Ist va. 19 2 1 2 4 4					
b If 'Yes,' did the foundation receive any proceeds									
Part VIII Information About Officers, D									
and Contractors									
1 List all officers, directors, trustees, foundation	n managers and their o	compensation (see inst	ructions).						
(a) Name and address	(b) Title, and average hours per week devoted to position	(c)Compensation (If not paid, enter -0-)	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances					
ALI M. MOSHARRAFA, M.D. 5346 E. ROYAL PALM ROAD PARADISE VALLEY AZ 85253	DIRECTOR	0.	0.	0.					
TAMIR M. MOSHARRAFA, M.D. 11208 N. SAINT ANDREWS WAY SCOTTSDALE AZ 85254	DIRECTOR	0.	0.	0					
SCOTTSDALE AZ 63234	10.00			0.					
									
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1 – see ir	nstructions). If none, e	nter 'NONE.'					
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances					
NONE			·						
Total number of other employees paid over \$50,000 .	<u> </u>			17					
BAA	TEEA0306 12			None Form 990-PF (2016)					

Form 990-PF (2016) THE MOSHARRAFA PLASTIC SURGERY FOUNDATION, INC. 47-305	
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	None
Part IX:A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	
·	
2	
3	
4	
	<u> </u>
Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	Amount
·	
2	. — — — — — — — — — — — — — — — — — — —
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3	
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	1 990-PF (2016) THE MOSHARRAFA PLASTIC SURGERY FOUNDATION, INC. 47	7-3058821	Page 8
Pai	Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	gn foundations,	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes Average monthly fair market value of securities	1 a	
t	Average of monthly cash balances	1 b	
•	Fair market value of all other assets (see instructions)	1 c	
•	¹ Total (add lines 1a, b, and c)	1 d	
•	Reduction claimed for blockage or other factors reported on lines 1a and	man and a second	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	0.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	0.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		0.
6	Minimum investment return. Enter 5% of line 5	6	0.
Pai	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	foundations	
	and certain foreign organizations check here ► □ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	0.
	Tax on investment income for 2016 from Part VI, line 5		
t	Income tax for 2016 (This does not include the tax from Part VI)		
•	Add lines 2a and 2b	1 1	0.
3	Distributable amount before adjustments Subtract line 2c from line 1		0.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4		0.
6	Deduction from distributable amount (see instructions)		
_7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	0.
Pài	t XIII Qualifying Distributions (see instructions)		
	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26		
ı	Program-related investments – total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes		
3	Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required)	3 a	
i	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the forqualifies for the section 4940(e) reduction of tax in those years	oundation	
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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
Distributable amount for 2016 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2016				0
a Enter amount for 2015 only	.]	, ,		
b Total for prior years 20 , 20 , 20			* • ,	<u> </u>
3 Excess distributions carryover, if any, to 2016		- 44 MA-110	, , , ,	
a From 2011	N. Marchael Control			
b From 2012				
c From 2013				
d From 2014				
e From 2015				
f Total of lines 3a through e				
4 Qualifying distributions for 2016 from Part	\$4.40 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
XII, line 4 [.] • \$				
a Applied to 2015, but not more than line 2a				
b Applied to undistributed income of prior years (Election required — see instructions)		3 0 8 79		
c Treated as distributions out of corpus (Election required — see instructions)				
d Applied to 2016 distributable amount		0.75 % 0.27 \$4 1.1 \$1.5 11	9086AMERE PERSON	<u> </u>
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2016				8 46, 73 88, c.) 2,87,888
(If an amount appears in column (d), the same amount must be shown in column (a))				
Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount — see instructions		0.		
e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)				
8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9	1, 1, 10 1 1 1 1 1 1 1 1 1 1 1		******	
a Excess from 20120 .		Carlo Sant Volume		1.
b Excess from 2013 0 .				at alight my
© Excess from 2014 0 .				《 《新生》。
d Excess from 2015 0 .			是被理解之类。因为	
e Excess from 2016 0 .	, 10 th 1 half half with 1 h			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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	Private Operating Foundations (see instructions and Part VII-A, question 9) 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling						
1 a	 If the foundation has received a ruling or determined is effective for 2016, enter the date of the ruling 	ermination letter that	t it is a private opera	iting foundation, and	l the ruling		
b	Check box to indicate whether the foundation	ı is a private operati	ing foundation descr	ibed in section	4942(j)(3) or	4942(j)(5)	
2 a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total	
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total	
b	85% of line 2a				 		
C	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						
	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	·					
3	Complete 3a, b, or c for the alternative test relied upon						
а	'Assets' alternative test — enter						
	(1) Value of all assets		ļ	 	 		
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)				ļ		
	'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	·					
C	'Support' alternative test — enter						
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)			ļ			
	(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> </u>				
Par	t XV Supplementary Information assets at any time during the	(Complete this	part only if the	foundation had	d \$5,000 or more	in	
1	Information Regarding Foundation Manag		istructions.,				
	List any managers of the foundation who have close of any tax year (but only if they have co	e contributed more	than 2% of the total n \$5,000) (See secti	contributions received to the contribution on 507(d)(2)	ed by the foundation I	pefore the	
b	List any managers of the foundation who own a partnership or other entity) of which the fou	n 10% or more of the	e stock of a corporator or greater interest	tion (or an equally la	rge portion of the owr	ership of	
2	Information Regarding Contribution, Gran Check here if the foundation only ma requests for funds if the foundation makes g complete items 2a, b, c, and d	kes contributions to	preselected charita	ble organizations an			
а	The name, address, and telephone number o	or e-mail address of	the person to whom	applications should	be addressed.		
b	The form in which applications should be sub	mitted and informa	tion and materials th	ey should include.			
c	Any submission deadlines						
d	Any restrictions or limitations on awards, suc	h as by geographic	al areas, charitable f	ields, kınds of ınstıtu	tions, or other factors		
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3 Grants and Contributions Paid During the Ye	ar or Approved for Fut			
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
Name and address (home or business)	or substantial contributor	recipient		
Name and address (home or business) a Paid during the year	any foundation manager or substantial contributor	recipient	contribution	Amount
		İ		j
Total		<u> </u>	<u> </u> 	
b Approved for future payment	1	Τ		
Total	<u> </u>	<u> </u>		<u>'</u>

Form 990-PF (2016) THE MOSHARRAFA PLASTIC SURGERY FOUNDATION, INC. 47-3058821 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

de re a Tr (1 (2 b O (1) (2 (3) (4 (5) (6) c Sl	escribed lating transfers Cash Other tra Sale Purc Rein Rein Performation	d in section 501(c o political organizes from the reporting a sasets or a sasets or a sasets for a sasets or a sasets for a sasets for a sasets for a sasets for a saset or a saset or a saset or a saset or facilities, equipment arranges or loan guarant formance of services of facilities, equipment assets or only of the sasets.	of the Code (oth ations?) Ing foundation to a concharitable exertion a noncharital uipment, or other gements	mpt organization. ble exempt organic assets	cempt organization cempt organization control	ions) or	should always s	how the fair market	1 a (2) 1 b (1) 1 b (2) 1 b (3) 1 b (4) 1 b (5) 1 b (6) 1 c	Yes	X X X X X X X
(a) Line	 -	(b) Amount involved		ow in column (d)				rvices received isfers, transactions, and	charing agran	nomont	
(a) Line	-10	(w) Amount involved	G (G) Wallie	or nonchantable exe	mpt organization	+	a Description of tran	isicis, narisaciloris, alto	ananny aman	gement	<u></u>
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de	escribe	undation directly of in section 501(complete the follow) of the Code (otl	ted with, or related her than section 5	d to, one or more 01(c)(3)) or in sec	tax-exer tion 527	npt organizations	.	Yes	X	No
	(a)	Name of organiz	ation	(b) Typ	e of organization		(0) Description of rela	tionship		
				<u> </u>			ļ				
							 				
								- 			
							1				
	correct,	enaîties of perjury, I dei and complete. Declarat	clare that I have examition of preparer (other t	med this return, includin than taxpayer) is based	ig accompanying sched I on all information of wh	nich brebar Jich brebar	atements, and to the b er has any knowledge	est of my knowledge and	belief, it is true,		
Sign Here	v ·	Tun			10/11/17	•	DIRECTOR		May the li this return preparer s	with the shown be	elow
	Signa	re of officer or trustee			Date		Trtle		_ (see instr	Yes	No No
	<u> </u>	Print/Type preparer's	name	Preparer's	signature 000	** - •	Date	Check If	PTIN		لتب
Paid		Kevin A Ab	bott. Cpa	Kem	s a cooper	M,C/	A 10/11/17	self-employed	P00185	552	
Prepa	rer	Firm's name		ompany Ltd.				Firm's EIN > 86-0	485253	<u> </u>	
Use O		Firm's address		ower St.				1			
	,	_	Phoenix_			AZ 8	5012	Phone no (602	224-9	9092	
BAA									Form 990		2016)