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Form 990-PF

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

Department of the Treasury Internal Revenue Service

Open to Public Inspection

| For calendar year 2016 or tax year beginn Name of foundation | ing | | 09 | 0/13 , 2016 , | , and end | | A Employer Identific | 12/31, 2016 | |
|---|-----------------|-------------|--------------------|---------------------------|------------|--|---|-------------------------------|--|
| | TO 1131 D 7 0 | m 7 / \\ \ | | | | | • • | | |
| THE VASANT AND PRABHA RATHI Number and street (or P O box number if mail is not d | | | | | D/ | | 81-3878588 B Telephone number (see instructions) | | |
| Number and street (or PO box number if mail is not d | elivered to st | treet add | ress) | | Room/suite | • | B Telephone numbe | er (see instructions) | |
| EQUINDATION COURCE FOI CILVED | מד שם מו | D | | | | | (000) 03 | 0 1764 | |
| FOUNDATION SOURCE 501 SILVER City or town, state or province, country, and ZIP or fore | | | | | L | -+ | (800) 83 | 9-1/54 | |
| Only of town, state of province, couldny, and 21 of lore | sign postal o | oue. | | | | - 1 | C If exemption applicat | tion is | |
| MILMINGTON DE 10000-1277 | | | | | | ļ | pending, check here, | | |
| WILMINGTON, DE 19809-1377 3 Check all that apply X Initial return | | T-10 | nitial ration | of a farmar = | ublia aba | | | | |
| Final return | | _ | Amended ret | of a former p | oublic cha | ן אייי | D 1 Foreign organizati | • | |
| Address cha | 200 | | Name change | | | ì | 2 Foreign organizat 85% test, check h | ere and attach | |
| H Check type of organization X Section | | | | | | \dashv | computation . | , | |
| | · — | _ | | oundation ivate founda | tion | 1 | E if private foundation | | |
| Section 4947(a)(1) nonexempt charitable to Fair market value of all assets at J | | | thod X Ca | | rual | \dashv | under section 507(b) | | |
| l r | | r (spec | | asn Acc | ruai | | F If the foundation is | | |
| end of year (from Part II, col (c), line 16) ▶ \$ 10,737,866. | | | nust be on cas | h have l | | | under section 507(b) | (1)(B), check here . D | |
| Part'l Analysis of Revenue and Expense | | nn (u) n | iust be on cas | sri basis) | | | | (d) Disbursements | |
| total of amounts in columns (b), (c), and | (d) | ` ' | renue and | (b) Net inve | | (c |) Adjusted net | for charitable | |
| may not necessarily equal the amounts i | | | nses per 1 ooks | ıncon | ne | | income | purposes (cash basis only) | |
| column (a) (see instructions)) | 4.12 | | 645,845. | | | | | (Casii Dasis Urily) | |
| 1 Contributions, gifts, grants, etc., received (attach sched) 2 Check fifthe foundation is not required to the foundation of the foundation is not required. | ed to | | 030,030. | | | | | | |
| attach Sch B | • • • | | | | 7. | | | | |
| 3 Interest on savings and temporary cash investm | | | 2,330. | | 2,330. | | | | |
| 4 Dividends and interest from securities . | _ | | | | 2,330. | | | | |
| 5a Gross rents | $\cdots \vdash$ | | | | | | | | |
| b Net rental income or (loss) | - 10 | | -1,320. | | | | | | |
| 6a Net gain or (loss) from sale of assets not on lin b Gross sales price for all 372, | | | | | | | | | |
| assets on line 6a | | | | 11 | 5,093. | | | | |
| 6a Net gain or (loss) from sale of assets not on lin b Gross sales price for all 372, 7 Capital gain net income (from Part IV, lin 8 Net short-term capital gain | | | | | .5,055. | | | | |
| 9 Income modifications | | | | | | | | | |
| 10 a Gross sales less returns | ···- | | | | | - | | | |
| and allowances , . , b Less Cost of goods sold . | | | | | | - | | | |
| b Gross sales proce for all assets on line 6a 372, 7 Capital gain net income (from Part IV, lin 8 Net short-term capital gain | | | | | | | | | |
| 11 Other income (attach schedule) | | - | | | | | | | |
| 12 Total Add lines 1 through 11 | | 10, | 646,862. | 11 | 7,430. | | | | |
| 13 Compensation of officers, directors, trustees, e | | | 0. | | | | | | |
| 14 Other employee salaries and wages | | | | | , | - | | | |
| 15 Pension plans employee henefits | | | | | , , } | 9 | | | |
| 16a Legal fees (attach schedule) | | | | | | | | ; | |
| 16a Legal fees (attach schedule) b Accounting fees (attach schedule) c Other professional fees (attach schedule) 17 Interest 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depled 20 Occupancy 21 Travel, conferences, and meetings | | | | | AAA | V | 7 6 3 | | |
| c Other professional fees (attach schedule) | | | 3,995. | | 3,9957 | 1 I | 8 2017 10 | | |
| 17 Interest | [| | | | - | | 18% | | |
| 18 Taxes (attach schedule) (see instructions |) [| | | | 7 / 3 | تعقا الرع | | | |
| 19 Depreciation (attach schedule) and depl | etion. | | | | | ************************************** | | | |
| 20 Occupancy | [| | | | | | | | |
| 21 Travel, conferences, and meetings | | | | | | | | | |
| Travel, conferences, and meetings Printing and publications | [_ | | | | | | | | |
| | | | | | | | | | |
| 24 Total operating and administrative exp | Г | _ | | | | l | | | |
| Other expenses (attach schedule) 24 Total operating and administrative exp Add lines 13 through 23 | | | 3 <u>,</u> 995. | | 3,995. | <u> </u> | | ļ <u> </u> | |
| 25 Contributions, gifts, grants paid | | | | | | | | ļ | |
| 26 Total expenses and disbursements Add lines 24 | and 25 | | 3,995. | | 3,995. | | | | |
| 27 Subtract line 26 from line 12 | i | | | | | } | | 1 | |
| a Excess of revenue over expenses and disbursemen | its | 10, | 642,867. | <u> </u> | | | | <u> </u> | |
| b Net investment income (if negative, ent | er -0-) 🛴 | | | 1 | 13,435. | <u> </u> | | <u> </u> | |
| c Adjusted net income (if negative, enter | -0-) | | | | | | | 5 000 PE (00 | |

| Part II | | Ralance Shoots | Attached schedules and amounts in the description column should be for end-of-year | | E | End of year | | |
|-----------------------------|--------|--|--|---|------------------|-----------------------|--|--|
| _ | ait ii | | amounts only (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value | | |
| ı | 1 | Cash - non-interest-bear | ing | | | | | |
| - 1 | 2 | Savings and temporary | cash investments | | 3,800,49 | 91. 3,800,491. | | |
| - } | | Accounts receivable | | | | | | |
| ŀ | | Less allowance for dou | btful accounts ► | | | | | |
| - { | 4 | Pledges receivable | | | | | | |
| - [| | Less allowance for dou | btful accounts ▶ | | | | | |
| - [| | | | | | | | |
| - [| | | officers, directors, trustees, and other | | | | | |
| ı | | disqualified persons (at | tach schedule) (see instructions) | | | | | |
| | | | receivable (attach schedule) | | | | | |
| | | | btful accounts ▶ | | | | | |
| छ | | | e | | | | | |
| Assets | 1 | | eferred charges | | | | | |
| A | 1 | | e government obligations (attach schedule). | 1 | | | | |
| i | | | stock (attach schedule) ATCH 2 | | 6,944,23 | 33. 6,937,375. | | |
| i | | | bonds (attach schedule) | | | | | |
| | 11 | investments - land, building | s, | | | | | |
| | | and equipment basis Less accumulated deprecia | ation > | | | | | |
| - 1 | | (attach schedule) | lane | , | | | | |
| - 1 | | | loans | | | | | |
| | 14 | Land, buildings, and | | | | | | |
| | | equipment basis Less accumulated deprecia | ation 🕨 | <u></u> | | | | |
| Į | | (attach schedule) Other assets (describe ▶ | | | | | | |
| [| | | completed by all filers - see the | | | | | |
| | - | | page 1, item I) | | 10,744,7 | 24. 10,737,866 | | |
| + | | | | <u> </u> | 10,744,77 | 24. | | |
| - } | | | accrued expenses | | | | | |
| တ | | | | | | | | |
| Ë | | | | | | | | |
| Liabilities | | | ors, trustees, and other disqualified persons | | | | | |
| æ. | | | otes payable (attach schedule) | | 101,8 | 5.7 | | |
| _ | 22 | Other liabilities (describe | e►ATCH 3) | | 101,0 | 5/. | | |
| - } | 23 | Total liabilities (add line | es 17 through 22) | 0.1 | 101,8 | 5.7 | | |
| \dashv | | | low SFAS 117, check here. ▶ | | 101,0 | <u> </u> | | |
| ဖွ | | | 24 through 26 and lines 30 and 31. | | | | | |
| ည | | • | J | | | | | |
| <u>ē</u> | 24 | | | | | | | |
| 8 | 25 | | | | | | | |
| Net Assets or Fund Balances | 26 | • | not follow SFAS 117. | | | | | |
| 2 | | | | | | | | |
| 5 | | | plete lines 27 through 31. | | | į | | |
| र | 27 | | cipal, or current funds | | | - | | |
| Se | 28 | | r land, bldg, and equipment fund | } | 10 (42 0 | <u> </u> | | |
| As | 29 | | ulated income, endowment, or other funds | <u> </u> | 10,642,8 | | | |
| et | 30 | | d balances (see instructions) | <u> </u> | 10,642,8 | 87. | | |
| Z | 1 | | net assets/fund balances (see | _ | 10 744 7 | 2.4 | | |
| | | | nggs in Not Appets on Fund Pale | 0. | 10,744,7 | 24. | | |
| | | | nges in Net Assets or Fund Bala | | must pare a must | | | |
| 1 | | | palances at beginning of year - Part | | | | | |
| _ | | | ed on prior year's return) | | | 1 0 642 967 | | |
| 2 | Ente | amount from Part I | , line 27a | • • • • • • • • • • • • • • • | | 2 10,642,867 | | |
| 3 | Othe | er increases not inclu | ded in line 2 (itemize) ▶ | | | 3 | | |
| | | | | • | | 4 10,642,867 | | |
| | | reases not included in | | n line 5) D-3 H 1 1 | <u> </u> | 5 10 642 967 | | |
| _6 | TOTA | ii net assets or fund t | palances at end of year (line 4 minus | s line 5) - Part II, column (| b), line 30 | 6 10,642,867 | | |

Page 3

| | and Losses for Tax on Inved describe the kind(s) of property sold (| | (b) How acquired | (c) Date acquired | (d) Date sold |
|---|--|---|------------------------------|---|---------------|
| | rick warehouse, or common stock, 200 | . • . | P - Purchase D - Donation | (mo,day,yr) | (mo, day, yr) |
| 1 a SEE PART IV SCHE | DULE | | | | |
| b | | | | | |
| <u> </u> | | | ļ | <u> </u> | |
| <u>d</u> | | | ļ | ļ | |
| <u>e</u> | | (a) Cook as other house | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | ļ | (h) Gain or (lo | |
| a b | | | | | |
| c | | ļ | | | |
| d | , | | | | |
| Complete only for assets s | showing gain in column (h) and owned | thy the foundation on 12/21/69 | } | | |
| Complete only for assets s | | | | Gains (Col (h) ga (k), but not less to | |
| (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 | | Losses (from co | |
| a | | | _ | | |
| <u>b</u> | | | | | |
| d d | | | | | |
| e | | | | | |
| | (If a | ain, also enter in Part I, line 7 | | | |
| 2 Capital gain net income | or (net capital loss) | loss), enter -0- in Part I, line 7 | 2 | | 115,093. |
| Net short-term capital g | ain or (loss) as defined in sections | • | | | |
| - | Part I, line 8, column (c) (see ins | | } } | | |
| Part I, line 8 | | | 3 | | 0. |
| Part V Qualification I | Jnder Section 4940(e) for Re | duced Tax on Net Investment I | ncome | | |
| | the section 4942 tax on the distrit not qualify under section 4940(e) | butable amount of any year in the b | ase pend | od? | Yes No |
| | | ear, see the instructions before mak | Ing any e | ntries | |
| (a) | (b) | (c) | ling arry e | (d) | |
| Base period years Calendar year (or tax year beginning in) | Adjusted qualifying distributions | Net value of nonchantable-use assets | 1 | Distribution ra (col (b) divided by | |
| 2015 | | | <u> </u> | | |
| 2014 | | | | | |
| 2013 | | | | | |
| 2012 | | | <u> </u> | | |
| 2011 | <u> </u> | <u> </u> | | | |
| i, | | , | 1 | | |
| | | | | | |
| | | ide the total on line 2 by 5, or by the | | | |
| number of years the for | undation has been in existence if le | ess than 5 years | 3 | | |
| Enter the net value of n | oncharitable-use assets for 2016 | from Part X, line 5 | 4 | | |
| Multiply line 4 by line 3 | | | 5 | | |
| 6 Enter 1% of net investn | nent income (1% of Part I, line 27b) |) | 6 | | |
| 7 Add lines 5 and 6 | | | 7 | | |
| 8 Enter qualifying distribution of the second of the se | itions from Part XII, line 4 greater than line 7, check the bo | x in Part VI, line 1b, and complete | 8 that pa | rt using a 1% t | ax rate See t |

| | tVI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948- see in | | | age -v |
|-----|--|-------------|-------------------|--|
| - | Exempt operating foundations described in section 4940(d)(2), check here | | | |
| | Date of ruling or determination letter (attach copy of letter if necessary - see instructions) | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check | | 2,2 | 69. |
| | here and enter 1% of Part I, line 27b | | | |
| С | All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of | | | |
| | Part I, line 12, col (b) | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | | |
| 3 | Add lines 1 and 2 | | 2,2 | 69. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4 | | | 0. |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0 | | 2,2 | 69. |
| 6 | Credits/Payments | | | |
| а | 2016 estimated tax payments and 2015 overpayment credited to 2016 6a | | | |
| b | Exempt foreign organizations - tax withheld at source | | | |
| C | Tax paid with application for extension of time to file (Form 8868) 6c | | | |
| d | Backup withholding erroneously withheld | | | |
| 7 | Total credits and payments Add lines 6a through 6d | | | 0. |
| 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 | | 2,2 | 69. |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | | |
| 11 | Enter the amount of line 10 to be Credited to 2017 estimated tax ▶ Refunded ▶ 11 | | | |
| Pai | t 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 | | Yes | No |
| | participate or intervene in any political campaign? | 1a | | X |
| þ | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see | | | } |
| | Instructions for the definition)? | 1b | | X |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials | | | |
| | published or distributed by the foundation in connection with the activities | | | |
| | Did the foundation file Form 1120-POL for this year? | <u>1c</u> | | X |
| đ | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | | | |
| | (1) On the foundation ▶ \$ (2) On foundation managers ▶ \$ | | | 1 |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed | | | } |
| | on foundation managers \$ | | | ,, |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | _2 | | X |
| | If "Yes," attach a detailed description of the activities | | | |
| 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 | | X |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a | | X |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | 4b | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | | X |
| _ | If "Yes," attach the statement required by General Instruction T | | | ļ |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either | | | l |
| | By language in the governing instrument, or | | | ŀ |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions that | | X | |
| _ | conflict with the state law remain in the governing instrument? | 7 | 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 | - '- | | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) | | } | 1 |
| _ | | ł | | |
| D | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General | 8b | X | |
| 9 | (or designate) of each state as required by General Instruction G? If "No," attach explanation | · | ^ `- | t |
| J | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or | | | 1 |
| | 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," | 9 |] | X |
| 40 | complete Part XIV | | | |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses . ATCH. 4 | 10 | Х | |
| _ | | | A DE | |

| Pai | /II-A Statements Regarding Activities (continued) | | |
|-----|--|--------------|----------------|
| `11 | any time during the year, did the foundation, directly or indirectly, own a controlled entity within the | Yes | 1 |
| | eaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) | Ч | X |
| 12 | d the foundation make a distribution to a donor advised fund over which the foundation or a disqualified | | V |
| | rson had advisory privileges? If "Yes," attach statement (see instructions) | | X |
| | d the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 ebsite address N/A | | <u> </u> |
| 14 | e books are in care of ▶ FOUNDATION SOURCE Telephone no ▶ 800-839-1 | 754 | |
| | cated at ▶ 501 SILVERSIDE ROAD, SUITE 123 WILMINGTON, DE ZIP+4 ▶ 19809~137 | 7 | |
| 15 | ection 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here |) | ٠ ــــا |
| 16 | any time during calendar year 2016, did the foundation have an interest in or a signature or other authority | Yes | No |
| | er a bank, securities, or other financial account in a foreign country? | 5 | _x |
| | e the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of | | |
| | e foreign country | | |
| Pa | II-B Statements Regarding Activities for Which Form 4720 May Be Required | | |
| | le Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | Yes | No |
| 1a | uring the year did the foundation (either directly or indirectly) | | |
| | Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No | l l | |
| |) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a | | f |
| | disqualified person? | 1 | |
| |) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No | | |
| |) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | Į. | II. |
| | Transfer any income or assets to a disqualified person (or make any of either available for | ll l | ll l |
| | the benefit or use of a disqualified person)? | 1 | |
| | Agree to pay money or property to a government official? (Exception. Check "No" if the |)) | ı (|
| | 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) | II. | |
| ŀ | any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | | |
| • | ction 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | b | |
| | rganizations relying on a current notice regarding disaster assistance check here | | |
| , | d the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that | į | 1 |
| | ere not corrected before the first day of the tax year beginning in 2016? | c | Х |
| 2 | exes on failure to distribute income (section 4942) (does not apply for years the foundation was a private | | |
| _ | perating foundation defined in section 4942(j)(3) or 4942(j)(5)) | | |
| ā | the end of tax year 2016, did the foundation have any undistributed income (lines 6d and | ļ | |
| | e, Part XIII) for tax year(s) beginning before 2016? | | |
| | "Yes," list the years | } | ď |
| 1 | e there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) | 1 | Щ |
| | elating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to | | |
| | years listed, answer "No" and attach statement - see instructions) | b | <u> </u> |
| | the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | | |
| | | ï | l II |
| 38 | d the foundation hold more than a 2% direct or indirect interest in any business enterprise | - 1 | |
| | any time during the year? | | |
| 1 | "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or | | |
| | squalified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the | | |
| | ommissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of | | |
| | e 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the | | |
| | undation had excess business holdings in 2016) | ь | |
| 4: | | а | Х |
| | d the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its | | |
| | | ь | χ |

| Pa | Statements Regarding Activities | or which Form | 4/20 May Be Req | uirea (continuea) | | |
|-------------|---|---|---|---|------------|-----------------------|
| 5a | During the year did the foundation pay or incur any amou | int to | | | | |
| | (1) Carry on propaganda, or otherwise attempt to influen | nce legislation (section | n 4945(e))? | Yes X No | , | |
| | (2) Influence the outcome of any specific public elec- | ction (see section 4 | 955), or to carry on | · | | |
| | directly or indirectly, any voter registration drive? | | | | , [] | |
| | (3) Provide a grant to an individual for travel, study, or ot | | | | , | |
| | (4) Provide a grant to an organization other than a | , , | | | [] | |
| | section 4945(d)(4)(A)? (see instructions) | | | | , [] | |
| | (5) Provide for any purpose other than religious, chi | | | | | |
| | purposes, or for the prevention of cruelty to children of | | - | | , [] | |
| b | If any answer is "Yes" to 5a(1)-(5), did any of the | | | | , | |
| | Regulations section 53 4945 or in a current notice regard | ling disaster assistan | ce (see instructions)? | | 5b | |
| | Organizations relying on a current notice regarding disas | ter assistance check l | | | | |
| С | If the answer is "Yes" to question 5a(4), does the | | | | | |
| | because it maintained expenditure responsibility for the g | | • | | , | |
| | If "Yes," attach the statement required by Regulations sec | | | ·—· | | |
| 6a | Did the foundation, during the year, receive any fund | ds, directly or indire | ectly, to pay premium | ns | | |
| | on a personal benefit contract? | | | Yes X No | , | |
| b | Did the foundation, during the year, pay premiums, direct | | | ct? | 6b | X |
| | If "Yes" to 6b, file Form 8870 | | | | | |
| | At any time during the tax year, was the foundation a pa | • | • | | 1 1 | |
| | If "Yes," did the foundation receive any proceeds or hav | | | | | |
| Pa | rt VIII Information About Officers, Director and Contractors | s, Trustees, Fou | ndation Managers | s, Highly Paid Emp | oloyees, | |
| 1 | List all officers, directors, trustees, foundation m | anagers and their | compensation (see | instructions). | | |
| | (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) Expens | e account, owances |
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| | | [| | | | |
| | Compensation of five highest-paid employees | /other than the | a included as the | 4 000 1004 | ana) // :: | |
| 2 | "NONE," | (other than thos | e included on line | e i - see instructi | ons). If N | one, enter |
| | | (b) Title, and average | | (d) Contributions to employee benefit | (e) Eynens | se account, |
| (a) | Name and address of each employee paid more than \$50,000 | hours per week devoted to position | (c) Compensation | plans and deferred compensation | | owances |
| | | | | compensation | | |
| | NONE | Ì | | Ì | | |
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| Tota | I number of other employees paid over \$50,000 | | | | | |

Form 990-PF (2016) Page 7 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 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 **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 Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc 1 N/A 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 1 NONE All other program-related investments. See instructions 3 NONE

Total. Add lines 1 through 3 . .

| | 990-PF (2016) | | Page 8 |
|-----|---|--|-----------------------|
| Par | Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.) | gn found | ations, |
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., | | |
| | purposes | 1 | |
| | Average monthly fair market value of securities | 1a | 1,734,344. |
| b | Average of monthly cash balances | 1b | 480,061. |
| С | Fair market value of all other assets (see instructions) | 1c | |
| ď | Total (add lines 1a, b, and c) | 1d | 2,214,405. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | ļ | |
| | 1c (attach detailed explanation) | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | |
| 3 | Subtract line 2 from line 1d | 3 | 2,214,405. |
| 4 | Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see | 1 1 | |
| | instructions) | 4 | 33,216. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 | 5 | 2,181,189. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 32,777. |
| Par | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foun and certain foreign organizations check here ▶ and do not complete this part) | dations | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 32 , 777. |
| 2a | Tax on investment income for 2016 from Part VI, line 5 2a 2,269. | | |
| b | Income tax for 2016 (This does not include the tax from Part VI). 2b |] | |
| С | Add lines 2a and 2b | 2c | 2 , 269. |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 30,508. |
| 4 | Recoveries of amounts treated as qualifying distributions | | |
| 5 | Add lines 3 and 4 | 5 | 30,508. |
| 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 | 30,508. |
| Par | 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 | |
| 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 | - - | |
| - | 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 | 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 ca | | |
| | qualifies for the section 4940(e) reduction of tax in those years | | other the realisation |

Form **990-PF** (2016)

| Pa | Part XIII Undistributed Income (see instructions) | | | | | | | |
|----|--|--------|---------------------|---------------------------------------|--------------|--|--|--|
| | | (a) | (b) | (c) | (d) | | | |
| 1 | Distributable amount for 2016 from Part XI, | Corpus | Years prior to 2015 | 2015 | 2016 | | | |
| | line 7 | | | | 30,508. | | | |
| | Undistributed income, if any, as of the end of 2016 | | | | | | | |
| | Enter amount for 2015 only | | | | | | | |
| | Total for pnor years 20 14 ,20 13 ,20 12 | | | | | | | |
| | Excess distributions carryover, if any, to 2016 | 1 | | | | | | |
| | From 2011 | | | | | | | |
| | From 2012 | | | | | | | |
| | From 2013 | | | | | | | |
| | From 2014 | | | ı | | | | |
| | From 2015 | | | | | | | |
| | Total of lines 3a through e | | | | | | | |
| 4 | Qualifying distributions for 2016 from Part XII, line 4 > \$ | | | | | | | |
| | Applied to 2015, but not more than line 2a | | | , | | | | |
| | · · · | | | | | | | |
| n | Applied to undistributed income of prior years (Election required - see instructions) | | ļ | , | | | | |
| _ | Treated as distributions out of corpus (Election | | | | · | | | |
| · | required - see instructions) | | | | | | | |
| d | Applied to 2016 distributable amount | | | | | | | |
| | Remaining amount distributed out of corpus | | | | | | | |
| | Excess distributions carryover applied to 2016. | | | | | | | |
| | (If an amount appears in column (d), the same amount must be shown in column (a)) | | | | | | | |
| 6 | Enter the net total of each column as | | | ļ | | | | |
| | indicated below: | | | 1 | | | | |
| а | Corpus Add lines 3f, 4c, and 4e Subtract line 5 | | | | | | | |
| b | Prior years' undistributed income Subtract | | | | | | | |
| _ | line 4b from line 2b | | | | | | | |
| С | 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 | | | | | | | |
| G | Subtract line 6c from line 6b Taxable amount - see instructions | | | | | | | |
| е | Undistributed income for 2015 Subtract line | | | | | | | |
| | 4a from line 2a Taxable amount - see instructions | l | | | | | | |
| _ | | | | · · · · · · · · · · · · · · · · · · · | | | | |
| t | Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must be | | | | | | | |
| | distributed in 2017 | | | | 30,508. | | | |
| 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) | | | | | | | |
| 9 | Excess distributions carryover to 2017. | 0.1 | | | | | | |
| 40 | Subtract lines 7 and 8 from line 6a | | | | | | | |
| | Analysis of line 9 Excess from 2012 | | | | | | | |
| | Excess from 2012 | | | | | | | |
| | Excess from 2014 | | | | 1 | | | |
| | Excess from 2015 | | | | | | | |
| | Excess from 2016 | | | 1 | | | | |

| Pa | rt XIV Private Op | erating Foundations | (see instructions a | | on 9) | NOT APPLICABLE |
|----|---|---------------------------------------|------------------------|--|-------------------------|-------------------------|
| | If the foundation has | | | | | |
| | foundation, and the ruling | _ | | | <u> </u> | |
| b | Check box to indicate v | whether the foundation | is a private operating | foundation described in | section 4942(j |)(3) or 4942(J)(5) |
| • | | Tax year | | Prior 3 years | | |
| za | Enter the lesser of the ad- justed net income from Part | (a) 2016 | (b) 2015 | (c) 2014 | (d) 2013 | (e) Total |
| | I or the minimum investment | | | | | |
| | return from Part X for each year listed | | | | | † |
| b | 85% of line 2a | | | | | |
| | Qualifying distributions from Part | | | | | |
| · | XII, line 4 for each year listed . | | | | | |
| đ | Amounts included in line 2c not | | | | | |
| | used directly for active conduct of exempt activities | } | l | | | ļ |
| е | Qualifying distributions made | | | | | |
| | directly for active conduct of | | li . | | | |
| | exempt activities Subtract line 2d from line 2c | | | | | |
| 3 | Complete 3a, b, or c for the | | | | | |
| а | alternative test relied upon "Assets" alternative test - enter | l | | | | |
| _ | (1) Value of all assets | L | | | | |
| | (2) Value of assets qualifying | 1 | | | | |
| | under section 4942(j)(3)(B)(i) | L | | | | |
| b | "Endowment" alternative test- | 1 | | | | |
| | enter 2/3 of minimum invest- ment return shown in Part X | | | | | |
| | line 6 for each year listed | <u> </u> | | | | |
| C | "Support" alternative test - enter | ļ | 1 | | | |
| | (1) Total support other than gross investment income | | | , | | |
| | (interest, dividends, rents, | İ | | l | | |
| | payments on secunties loans (section 512(a)(5)), | | | | | 1 |
| | or royalties) | ļ | | <u> </u> | ļ | |
| | (2) Support from general public and 5 or more | <u> </u> | | | | |
| | exempt organizations as provided in section 4942 | | | | | |
| | (j)(3)(B)(m) | · · · · · · · · · · · · · · · · · · · | | | ļ | |
| | (3) Largest amount of sup- port from an exempt | | | | | |
| | organization | | | | | |
| Dа | (4) Gross investment income . rt XV Supplement | ntary Information (| Complete this part | only if the founds | tion had \$5 000 o | r more in assets at |
| Га | | uring the year - see | | only it the founda | don nad \$5,000 0 | i illore ili assets at |
| 1 | Information Regardin | | | | | |
| а | List any managers of | the foundation who I | nave contributed mor | e than 2% of the tota | al contributions recei | ved by the foundation |
| | before the close of any | y tax year (but only if th | ney have contributed r | nore than \$5,000) (S | ee section 507(d)(2)) | • |
| | VASANT RATH | HI | | | | |
| b | List any managers of | the foundation who | own 10% or more o | f the stock of a corp | oration (or an equal | ly large portion of the |
| | ownership of a partner | rship or other entity) o | f which the foundation | n has a 10% or greater | interest | |
| | | | | | | |
| | N/A | | | | | |
| 2 | Information Regardin | - | | • • | | |
| | Check here ► X if | the foundation only | makes contributions | to preselected char | itable organizations | and does not accept |
| | other conditions, com | | | ants, etc (see instruc | tions) to individuals | or organizations under |
| | The name, address, a | | | the person to whom on | phostone should be as | ddracaad |
| a | The hame, address, a | ind telephone number | or e-mail address or | the person to whom ap | plications should be at | Juressea |
| b | The form in which app | lications should be su | bmitted and informati | on and materials they | should include | |
| | | | | -, | | |
| | And a share of the | | | | | |
| С | Any submission deadl | unes | | | | |
| | | | | | | |
| _d | Any restrictions or I | imitations on awards | , such as by geogr | aphical areas, charit | able fields, kinds of | institutions, or other |
| | factors | | - | | • | |
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Part XV Supplementary Information (continued)

Page 11

| 3 Grants and Contributions Paid Durin | g the Year or Appr | oved for F | uture Payment | |
|---|--|-------------|----------------------------------|--------|
| 3 Grants and Contributions Paid Durin Recipient Name and address (home or business) | If recipient is an individual, show any relationship to | Foundation | Purpose of grant or contribution | Amount |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | contribution | Amount |
| a Paid during the year | | | | |
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| | (2016) | | | | | Page 12 |
|-------------|---|----------------------|----------------------|-----------------------|--------------------------|---------------------------------------|
| Part XVI | -A Analysis of Income-Prod | ucing Act | vities | | | |
| Enter gross | amounts unless otherwise indicated | Unrela | ated business income | Excluded by | section 512, 513, or 514 | (e) Related or exempt |
| 1 Program | service revenue | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | function income (See instructions) |
| - | | | | | | (Oce manuchons) |
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| f | | | | | | |
| g Fees | and contracts from government agencies | | | | | |
| 2 Member | ship dues and assessments | | | 14 | 7. | |
| | on savings and temporary cash investments | | | 14 | 2,330. | |
| | ds and interest from securities | | | + | 2,330. | |
| | al income or (loss) from real estate | | | | | |
| | -financed property | | | + | | |
| | if income or (loss) from personal property. | | | | | |
| | vestment income | | | | | |
| | loss) from sales of assets other than inventory | | | 18 | -1,320. | |
| | ome or (loss) from special events | | | | | |
| | rofit or (loss) from sales of inventory | | <u> </u> | | | |
| 11 Other re | venue a | | <u> </u> | | | |
| b | | | | | | |
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| | | | | | | |
| e | L Add ashers (b) (d) and (c) | | | | 1,017. | |
| | Add columns (b), (d), and (e) dd fine 12, columns (b), (d), and (e) | | L | | | |
| (See works) | heet in line 13 instructions to verify calc | ulations) | | | 13 | 1,017. |
| Part XVI | | | ccomplishment of I | Exempt Pur | poses | |
| Line No. | Explain below how each activit | v for which | n income is reported | ın column (| e) of Part XVI-A contrib | uted importantly to the |
| • | accomplishment of the foundation | | | | | |
| | <u> </u> | | | | , | s) (See instructions) |
| | | | | | | s) (See instructions) |
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| | | | | | | s) (See instructions) |

| Form 99 | |)16) | THE VASA | NT AND PRABHA RAT | HI FOUNDA | TION 81-3 | 878588 | Pag | ge 13 |
|----------|---------|------------------------------|-------------------------|---|------------------|---|---------------|--------------|--------------|
| Part | XVII | Information R Exempt Orga | | nsfers To and Trans | sactions an | nd Relationships With N | onchari | itable | ; |
| 1 D | ld the | organization direct | tly or indirectly e | engage in any of the foll | lowing with a | ny other organization describe | ∍d | Yes | No |
| ır | section | on 501(c) of the Co | ode (other than s | section 501(c)(3) organiz | zations) or in s | section 527, relating to politic | al ∫ | | |
| | - | ations? | | | | | j | | |
| a T | ransfe | rs from the reporting | ng foundation to | a noncharitable exempt | organization of | f | | | ļ |
| (| 1) Casl | h | | | | | 1a(1) | 11 | X |
| - | • | er assets ansactions | | • | | • | 1a(2) | | X |
| t. | 11 Sale | es of assets to a no | oncharitable exer | not organization | | | 16(1) | | Х |
| | | | | · · · · · · · · · · · · · · · · · · · | | | | | Х |
| | | | | | | | 1 | | Х |
| | - | - | - | | | | | | Х |
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| | | | | | | | | L | Х |
| | | | | | | | | | Х |
| d If | the a | nswer to any of the | ne above is "Ye: | s," complete the followi | ng schedule | Column (b) should always s | how the | fair m | ıarket |
| | | | | | | . If the foundation received le | | | |
| | | | | | | of the goods, other assets, of | | | |
| (a) Line | no | (b) Amount involved | (c) Name of n | oncharitable exempt organizatio | | scription of transfers, transactions, and | sharing arra | angeme | nts |
| | | N/A | | | N/A | | | | |
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| 20 10 | , the f | aundation directly | Or undergothe off | illusted with as related A | | pre tax-exempt organizations | | | |
| | | | | | | on 527? | . 🗆 Y | es X | No |
| | | complete the follo | | | -,, 0, 000 | | | • | |
| | | (a) Name of organization | | (b) Type of organiza | ation | (c) Description of rela | ationship | | |
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| Sign | | 1 LH a L | /, _ | 1 | • 0 | | e IRS discu | | |
| Here | Sign | ature of officer or trustee | Ad | Date | Tutle / | / / | e preparer | shown Yes | |
| | Jagin | ataro or omoer or trustee | | 500 | TILLE (| President (see instr | Actions)? [/ | 7 1 162 | No |
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Phone no

800-839-1754 Form **990-PF** (2016)

LAKE SUCCESS, NY

Schedule B

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

Schedule of Contributors

2016

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

asury Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990

Name of the organization
THE VASANT AND PRABHA RATHI FOUNDATION

Employer identification number

| | | 81-3878588 |
|---|---|---|
| Organization type (check on | e) | |
| Filers of: | Section: | |
| Form 990 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 990-PF | X 501(c)(3) exempt private foundation | |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundate | ition |
| | 501(c)(3) taxable private foundation | |
| Note: Only a section 501(c)(instructions | s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a | Special Rule See |
| General Rule | | |
| | on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributor Complete Parts I and II. See instruction contributions | |
| Special Rules | | |
| regulations under 13, 16a, or 16b, a | on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 and that received from any one contributor, during the year, total contribution of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 | or 990-EZ), Part II, line is of the greater of (1) |
| contributor, during | on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that g the year, total contributions of more than \$1,000 exclusively for religious, connal purposes, or for the prevention of cruelty to children or animals. Complete | haritable, scientific, |
| contributor, during contributions total during the year fo General Rule appl | on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that go the year, contributions exclusively for religious, charitable, etc., purposes, be dedomore than \$1,000. If this box is checked, enter here the total contribution or an exclusively religious, charitable, etc., purpose. Don't complete any of the lies to this organization because it received nonexclusively religious, charitable more during the year. | out no such ns that were received parts unless the le, etc , contributions |
| | at isn't covered by the General Rule and/or the Special Rules doesn't file Sch | |

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on 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 I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Employer identification number 81-3878588

| Part I | Contributors (See instructions) Use duplicate cop | pies of Part I if additional space is r | eeded |
|------------|---|---|---|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | RATHI, VASANT 4880 MURRIETA ST. | \$1 0,645,845. | Person X Payroll X |
| | CHINO, CA 91710 | | (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |

Employer identification number

| art II | Noncash Property (See instructions) Use duplicate copies | of Part II if additional space is nee | eded |
|---------------------------|--|--|----------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | TARGET CORPORATION | | |
| | TGT, 300 SH. | | |
| | | \$\$ | 12/19/2016 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | CME GROUP, INC | | |
| 1 | CME, 75 SH. | | |
| | | \$\$. | 12/19/2016 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| 1 | JP MORGAN CHASE JPM, 675 SH. | | |
| | orm, 673 Sn. | | N. |
| | | \$ 57,250. | 12/19/2016 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | CELGENE CORP CELG, 295 SH. | | |
| | | \$ | 12/19/2016 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| 1 | DANAHER CORP | | |
| | DHR, 300 SH. | | |
| | | \$\$. | 12/19/2016 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| 1 | GILEAD SCIENCES INC | | |
| 1 | GILD, 300 SH. | | l |
| | | \$ 22,328. | 12/19/2016 |

Employer identification number

| Part II | Noncash Property (See instructions) Use duplicate copies | of Part II if additional space is nee | eded |
|---------------------------|--|--|----------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | UNITEDHEALTH GROUP INC | | |
| 1 | UNH, 200 SH. | [| |
| | | \$32,516. | 12/19/2016 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | BOEING CO | _ | |
| 1 | BA, 400 SH. | | |
| | | \$62,434. | 12/19/2016 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| 1 | FORTIVE CORPORATION FTV, 150 SH. | | |
| | | \$\$. | 12/19/2016 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | GENERAL ELECTRIC CO | | |
| | GE, 1000 SH. | | |
| | | \$\$. | 12/19/2016 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | HONEYWELL INTL | | |
| | HON, 200 SH. | | |
| | | \$\$ | 12/19/2016 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | ALPHABET INC CL A | | |
| 1 | GOOGL, 50 SH. | | |
| | | \$\$. | 12/19/2016 |
| | | | |

Employer identification number

| a) No. from Part I | (b) Description of noncash property given | | (c) V (or estimate) see instructions) | (d) Date received |
|---------------------------|--|----|---|----------------------|
| 1 | ALPHABET INC CL C GOOG, 50 SH. | | | |
| | | \$ | 39,598. | 12/19/2016 |
| a) No. from Part I | (b) Description of noncash property given | | (c) IV (or estimate) see instructions) | (d) Date received |
| 1 | APPLE INC AAPL, 805 SH. | | | |
| | | \$ | 93,835. | 12/19/2016 |
| a) No. from Part I | (b) Description of noncash property given | | (c) IV (or estimate) See instructions) | (d) Date received |
| 1 | CISCO SYSTEMS INC CSCO, 400 SH. | _ | | |
| | | \$ | 12,282. | 12/19/2016 |
| a) No. from Part I | (b) Description of noncash property given | | (c) IV (or estimate) See instructions) | (d) Date received |
| 1 | MICROSOFT CORP MSFT, 800 SH. | | | |
| | | \$ | 50,476. | 12/19/2016 |
| (a) No. from Part I | (b) Description of noncash property given | | (c) IV (or estimate) See instructions) | (d) Date received |
| 1 | ADVANSIX INC ASIX, 8 SH. | | | |
| | | \$ | 176. | 12/19/2016 |
| a) No. from Part I | (b) Description of noncash property given | | (c) //V (or estimate) See instructions) | (d) Date received |
| 1 | DIAMOND HILL LONG SHORT FUND CLASS I DHLSX, 2865.091 SH. | | | |
| | BIRDLY 2003.031 011. | | | |

Employer identification number

| art II | Noncash Property (See Instructions). Use duplicate copies | or Part II if additional space is nee | eded |
|---------------------------|---|--|----------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| 1 | ISHARES TR S & P MIDCAP 400 INDEX FD IJH, 1000 SH. | | |
| | | \$167,450. | 12/19/2016 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| 1 | ISHARE SP SMALL CAP 600 INDEX FD IJR, 1700 SH. | | |
| | | \$ 236,479. | 12/19/2016 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| 1 | AVALONBAY CMNTYS INC AVB, 380 SH. | | |
| | | \$\$66,072. | _12/19/2016 |
| (a) No. from Part I | (ხ) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| 11 | APPLE INC AAPL, 14000 SH. | | |
| | | \$1,589,070. | 12/09/2016 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| _1_ | BANK OF AMERICA CORP BAC, 25000 SH. | | |
| | | \$\$. | 12/09/2016 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | ALPHABET INC CL C GOOG, 2000 SH. | | |
| 1 | GOOG, 2000 Sh. | | I . |

Employer identification number

81-3878588

Part II Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed

| art II | Noncash Property (See Instructions). Use duplicate copie | s of Part II if additional space is nee | |
|---------------------------|--|--|--|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | JP MORGAN CHASE | | |
| 1 | JPM, 4682 SH. | | |
| | | | |
| | | \$ 397,127. | 12/09/2016 |
| a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | BLACKROCK HLTHSC OP C | | |
| 1 | SHSCX, 8390.884 SH. | | ı |
| | | | |
| | | \$ \$. | 12/09/2016 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | STARBUCKS CORP COM | | |
| 1 | SBUX, 1853 SH. | | |
| | | | |
| | | \$108,753. | 12/09/2016 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | ALASKA AIR GROUP INC | | |
| 1 | ALK, 1016 SH. | | |
| | THE TOTO BY. | | |
| | | \$ 89,388. | 12/08/2016 |
| | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | BANK OF AMERICA CORP | | |
| 1 | BAC, 1215 SH. | |] |
| | | | 1 |
| | | \$\$ | 12/08/2016 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | HELMERICH PAYNE | | |
| 1 | HP, 504 SH. | | |
| | | | |
| | | \$ 40,849. | 12/08/2016 |
| | L | | |

Employer identification number

81-3878588

Part II Noncash Property (See instructions) Use duplicate copies of Part II if additional space is needed. (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part i (See instructions) APPLE INC AAPL, 1807 SH. 1 198,363. 12/06/2016 (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part i (See instructions) CITIZENS FINANCIAL GROUP, INC CFG, 1695 SH. 1 58,503. 12/06/2016 (a) No. (c) (d) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions) BROADCOM LIMITED AVGO, 451 SH. 1 74,735. 12/06/2016 (a) No. (c) (d) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions) CUMMINS INC 1 CMI, 213 SH. 30,423. 12/06/2016 (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions) HOME DEPOT INC HD, 902 SH. 116,728. 12/06/2016 (a) No. (c) (d) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions) ISHARES DOW JONES US HEALTHCARE IYH, 222 SH. 1 31,733. 12/06/2016

Employer identification number

81-3878588

Part II Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed (a) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions) ISHARES NASDAQ BIOTECHNOLOGY IBB, 131 SH. 1 35,726. 12/06/2016 (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions) LAM RESEARCH CORP 1 LRCX, 891 SH. 91,711. 12/06/2016 (a) No. (c) (d) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions) MERCK & CO INC MRK, 2288 SH. 1 12/06/2016 137,280. (a) No. (c) (d) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions) O'REILLY AUTOMOTIVE INC ORLY, 475 SH. 1 131,767. 12/06/2016 (a) No. (c) (b) (d) from FMV (or estimate) Date received Description of noncash property given Part I (See instructions) POWERSHARES QQQ NASDAQ 100 1 QQQ, 763 SH. 89,069. 12/06/2016 (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part 1 (See instructions) PRICELINE.COM INCORPORATED PCLN, 150 SH. 1 12/06/2016 225,156.

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization THE VASANT AND PRABHA RATHI FOUNDATION

Employer identification number

| | | | |
|--------------------------|--|--|----------------------|
| a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | SPDR DOW JONES INDUSTRIAL AVERAGE ETF T | | |
| | DIA, 200 SH. | | |
| | | \$\$ | 12/06/2016 |
| a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | CONSUMER STAPLES SELECT SECTOR SPDR | _ | |
| | XLP, 564 SH. | | |
| | | \$ | 12/06/2016 |
| a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| - | WYNN RESORTS | | |
| 1 | WYNN, 99 SH. | | |
| | | \$ 9,952. | 12/06/2016 |
| 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 |
| | | _ | |
| | | | |
| | | | |

Employer identification number 81-3878588

| (10) the force ontroller | hat total more than \$1,000 for the | e year from any one contrit s completing Part III, enter th ear (Enter this information o | us described in section 501(c)(7), (8), or coutor. Complete columns (a) through (e) and e total of exclusively religious, charitable, etconce. See instructions.) ▶ \$ |
|---------------------------|-------------------------------------|---|--|
| (a) No from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| | Transferee's name, address, and 2 | (e) Transfer of gift | 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 |
| | Transferee's name, address, and 2 | (e) Transfer of gift | 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 a | 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 |
| | Transferrels and address and | (e) Transfer of gift | Delationable of transferent transferen |
| <u> </u> | Transferee's name, address, and | LIP + 4 | Relationship of transferor to transferee |
| | | | |

REVENUE

NET INVESTMENT INCOME 3,995. AND EXPENSES PER BOOKS

3,995.

3,995.

3,995.

TOTALS

INVESTMENT MANAGEMENT SERVICES

DESCRIPTION

ATTACHMENT

81-3878588

ATTACHMENT

- CORPORATE STOCK PART II FORM 990PF,

| ENDING <u>FMV</u> | 90,150. 39,623. 1,582,230. 74,987. 105,440. 1,924,001. 67,317. 579,352. 62,272. 79,723. 34,146. 120,88. 60,571. 23,352. 72,859. 8,045. 31,600. 233,784. 31,997. 34,765. |
|----------------------|---|
| ENDING BOOK VALUE | 176. 89,388. 1,608,049. 102,7274. 102,752. 1,881,267. 62,434. 74,735. 34,493. 12,282. 58,679. 58,679. 73,174. 73,174. 8,207. 31,855. 23,486. 23,486. 23,486. 31,733. 31,733. |
| | |
| DESCRIPTION | ADVANSIX INC ALASKA AIR GROUP INC ALPHABET INC CL A ALPHABET INC CL C AMAZON COM ANHEUSER BUSCH COS INC APPLE INC AVALONBAY CMNTYS INC BANK OF AMERICA CORP BOEING CO BROADCOM LIMITED CLIGENE CORP CISCO SYSTEMS INC CME GROUP, INC CME GROUP, INC CME GROUP, INC CME GROUP, INC CME GROUP, INC CONSUMER STAPLES SELECT SECTOR DANAHER CORP DIAMOND HILL LONG SHORT FUND C FORTIVE CORPORATION GENERAL ELECTRIC CO GILEAD SCIENCES INC HELMERICH PAYNE HOME DEPOT INC HOME SWALL CAP 600 INDEX ISHARES NASDAQ BIOTECHNOLOGY ISHARES NASDAQ BIOTECHNOLOGY ISHARES TR S & P MIDCAP 400 IN JP MORGAN CHASE |

81-3878588

FORM 990PF, PART II - CORPORATE STOCK

| ENDING <u>FMV</u> | 95,157. 135,401. 49,712. 132,245. 90,400. 219,909. 39,502. 102,879. 21,669. | 6,937,375. |
|----------------------|---|------------|
| ENDING BOOK VALUE | 92,656. 138,014. 50,476. 131,767. 89,069. 225,156. 38,444. 108,753. 23,124. | 6,944,233. |
| DESCRIPTION | LAM RESEARCH CORP MERCK & CO INC MICROSOFT CORP O'REILLY AUTOMOTIVE INC POWERSHARES QQQ NASDAQ 100 PRICELINE.COM INCORPORATED SPDR DOW JONES INDUSTRIAL AVER STARBUCKS CORP COM TARGET CORPORATION UNITEDHEALTH GROUP INC | TOTALS |

| 2016 FORM 9 | 990-PF |
|-------------|--------|
|-------------|--------|

THE VASANT AND PRABHA RATHI FOUNDATION

81-3878588

ATTACHMENT 3

FORM 990PF, PART II - OTHER LIABILITIES

DESCRIPTION

ENDING BOOK VALUE

OUTSTANDING OPTIONS

101,857.

TOTALS

101,857.

THE VASANT AND PRABHA RATHI FOUNDATION
FORM 990-PF - PART IV

| 1 OKN 330-F1 | - LWIST IA |
|-------------------------------------|----------------------------|
| CAPITAL GAINS AND LOSSES FOR | R TAX ON INVESTMENT INCOME |

| Kınd of F | | NS AND LO | | ription | | P | Date acquired | Date sold |
|--------------------------------|-----------------------|----------------|-------------------|-------------------|--------------------|----|------------------|-----------|
| Gross sale | Depreciation | Cost or | FMV | Adj basis | Excess of | 11 | Gain | |
| price less expenses of sale | allowed/ allowable | other basis | as of 12/31/69 | as of 12/31/69 | FMV over adj basis | | or (loss) | _ |
| 372,173. | | PUBLICLY-TRA | ADED SECURI | ries | | | 115,093. | |
| TOTAL GAIN(L | oss) | | | | • • • • • • • | | 115,093. | |
| | | | | | | | | |
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THE VASANT AND PRABHA RATHI FOUNDATION

2016 FORM 990-PF

FORM 990PF, PART VII-A, LINE 10 - SUBSTANTIAL CONTRIBUTORS

NAME AND ADDRESS

RATHI, VASANT 4880 MURRIETA ST. CHINO, CA 91710

RATHI, PRABHA 4880 MURRIETA ST. CHINO, CA 91710

ATTACHMENT 4

| THE VASANT AND PRABHA RATHI FOUNDATION | N 2016 FORM 990-PF | | | 81-3878588 |
|--|---|--------------|---|---|
| FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES | ERS, DIRECTORS, AND TRUSTEES | | ATTACH | ATTACHMENT 5 |
| NAME AND ADDRESS | TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION | COMPENSATION | CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS | EXPENSE ACCT AND OTHER ALLOWANCES |
| VASANT RATHI FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377 | PRES / DIR / SEC / TREAS 1.00 | .0 | | · o |
| | GRAND TOTALS | 0. | Ö | 0. |