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## **Return of Private Foundation**

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

For	r calen	dar year 2016 or tax year beginning 12/07	7	, 2016, a	nd ending	12/31	<b>, 20</b> 16
Na	me of fo	undation			A Employe	er identification number	ər
VY	UHA, I	NC.				81-4656022	
		d street (or P O box number if mail is not delivered to street address)		Room/suit	e <b>B</b> Telephor	ne number (see instruct	ions)
360	01 SW	160TH AVENUE		250	L	(305) 982-5656	3
Cıt	y or tow	n, state or province, country, and ZIP or foreign postal code		-	C If exemp	tion application is pend	ıng, check here ▶
MIF	RAMAR	, FL 33027					
G	Check		of a former	oublic cha	arity D 1. Foreig	n organizations, check	here ▶ [
		Final return Amended r			2. Foreig	n organizations meeting	the 85% test.
		Address change  Name char	<u> </u>		check	here and attach compu	itation ►
		type of organization:  Section 501(c)(3) exempt p			section 5	foundation status was 507(b)(1)(A), check here	terminated under . ► [
		on 4947(a)(1) nonexempt charitable trust			on_j	(-)(-)(-)(-)(-)	
1		narket value of all assets at J Accounting method	: [✓] Cash	∐ Accrι	F II the low	ndation is in a 60-mont	
		f year (from Part II, col. (c), Other (specify)			under se	ction 507(b)(1)(B), chect	k here ► L
_	line 16		on cash basis	<del>)</del>		τ	
P	art I	Analysis of Revenue and Expenses	(a) Revenue		) Net investment	(c) Adjusted net	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	expenses p books	ei ,	income	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	11,00	0.000			(January)
	2	Check ► ☐ if the foundation is <b>not</b> required to attach Sch. B	11,00	-			
	3	Interest on savings and temporary cash investments		6	6		
	4	Dividends and interest from securities	*	<del>-                                    </del>	<u> </u>		
	5a	Gross rents	<u> </u>	-+	<del></del> -	<del></del>	
	ь	Net rental income or (loss)			<del></del>		<del></del>
Ð	6a	Net gain or (loss) from sale of assets not on line 10		0		-	<del>.</del>
Revenue	/b	Gross sales price for all assets on line 6a					
Ş	/7	Capital gain net income (from Part IV, line 2)			0	/	
<b>.</b>	8	Net short-term capital gain				100	
_/	9	Income modifications				DI CECE	
	10a	Gross sales less returns and allowances 0			//	5/ NOI	ED
/	b	Less: Cost of goods sold 0			/	L 000 2	70/
/	С	Gross profit or (loss) (attach schedule)		0		00:	17 /8/
	11	Other income (attach schedule)		0	0	DEALO	161
	12	Total. Add lines 1 through 11	11,00	0,006	6	, 66	* \ <b>\</b>
Ś	13	Compensation of officers, directors, trustees, etc.	<u> </u>	_			
Se	14	Other employee salaries and wages					
Še	15	Pension plans, employee benefits					
Expenses	16a	Legal fees (attach schedule)		0	0	<del> </del>	
-	b	Accounting fees (attach schedule)		0	0	<del></del>	
ij	C	Other professional fees (attach schedule)		0	0	0	
štr	17	Interest		0	<u>-</u>	0	ļ
ī.	18	Depreciation (attach schedule) and depletion		0	0	<del></del>	
Operating and Administrative	19 20	Occupancy		<del>-  </del>		<del> </del>	<del></del>
Ä	21	Travel, conferences, and meetings		<del>-  -</del>	<del></del>	<del>                                     </del>	<del> </del>
þ	22	Printing and publications				<u> </u>	
a	23	Other expenses (attach schedule)		0	0	0	
Ĭ	24	Total operating and administrative expenses.			<u> </u>	<u> </u>	<u> </u>
Ē		Add lines 13 through 23		o	0	0	
þe	25	Contributions, gifts, grants paid					
0	26	Total expenses and disbursements. Add lines 24 and 25		0	0	0	(
	27	Subtract line 26 from line 12:					
	а	Excess of revenue over expenses and disbursements	11,00	0,006		_	
	b	Net investment income (if negative, enter -0-) .			6		
	c	Adjusted net income (if negative, enter -0-)				0	

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form **990-PF** (2016)

	net II	Attached schedules and amounts in the description column	Beginning of year	End o	f year
	art,il	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	0	11,000,006	11,000,006
	3	Accounts receivable ►			
	ļ	Less: allowance for doubtful accounts	0	0	0
	4	Pledges receivable			
		Less: allowance for doubtful accounts	0	0	0
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)	0	0	0
	7	Other notes and loans receivable (attach schedule)0			
		Less: allowance for doubtful accounts0	0	0	0
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ĕ	10a	Investments—U.S. and state government obligations (attach schedule)	. 0	0	0
	b	Investments—corporate stock (attach schedule)	0	0	. 0
	C	Investments—corporate bonds (attach schedule)	0	0	0
	11	Investments—land, buildings, and equipment: basis0			
		Less: accumulated depreciation (attach schedule) 0	0	0	0
	12	Investments-mortgage loans			
	13	Investments—other (attach schedule)	0	0	0
	14	Land, buildings, and equipment: basis0	·		
		Less: accumulated depreciation (attach schedule) 0	0	0	0
	15	Other assets (describe ▶ )	0	0	0
	16	Total assets (to be completed by all filers—see the			
_	ļ. <u> </u>	ınstructions. Also, see page 1, item I)	0	11,000,006	11,000,006
	17	Accounts payable and accrued expenses			
S	18	Grants payable			
Liabilities	19	Deferred revenue			
<u>=</u>	20	Loans from officers, directors, trustees, and other disqualified persons	0	0	
Ë	21	Mortgages and other notes payable (attach schedule)	0	0	
	22	Other liabilities (describe ► )  Total liabilities (add lines 17 through 22)	0	0	
_	23		0		
S		Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.			
ဦ	24	Unrestricted			
Balances	25	Temporarily restricted			1
	26				
힏	20	Permanently restricted			
Net Assets or Fund	<b> </b>	and complete lines 27 through 31.			
5	27	Capital stock, trust principal, or current funds			
ts	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
Se	29	Retained earnings, accumulated income, endowment, or other funds		11,000,006	
As	30	Total net assets or fund balances (see instructions)	0	11,000,006	
et	31	Total liabilities and net assets/fund balances (see		.,,555,556	
Z		ınstructions)	0	11,000,006	
Pε	rt III	Analysis of Changes in Net Assets or Fund Balances			
	Tota	I net assets or fund balances at beginning of year-Part II, colui			
		of-year figure reported on prior year's return)			0
2	Ente	r amount from Part I, line 27a		2	11,000,006
3	Othe	er increases not included in line 2 (itemize) ▶		3	0
4		lines 1, 2, and 3		4	11,000,006
5	Decr	reases not included in line 2 (itemize) ► I net assets or fund balances at end of year (line 4 minus line 5)—F		5	0
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5)—F	Part II, column (b), lin	e 30 <b>6</b>	11,000,006

Part		Losses for Tax on Investr		(b) How acquired	1	<del>,</del>
		e kind(s) of property sold (e g , real estates, or common stock, 200 shs MLC Co		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo , day, yr)
1a						
<u>b</u>						
<u>C</u>						
<u>d</u>						
<u>e</u>				<u></u>		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale		n or (loss) (f) minus (g)
a						···
<u> </u>						<del> </del>
<u>c</u>						
<u>d</u>						
<u>e</u>	0		la l	10/04/00		<u> </u>
	Complete only for assets sno	wing gain in column (h) and owned	<del></del>			(h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i) I (j), if any		it less than -0-) <b>or</b> from col. (h))
<u>a</u>				<del></del>		
b						
СС						
d		<del>-</del>				
е			<u></u>			
2	Capital gain net income o		also enter in Pa ), enter -0- in Pa		2	(
3	Net short-term capital gai	n or (loss) as defined in sections	s 1222(5) and (6)	١:	<del> </del>	
•		I, line 8, column (c) (see instru				
					3	,
Part		er Section 4940(e) for Red				<u></u>
(For o	ptional use by domestic pri	vate foundations subject to the	section 4940(a)	tax on net invest	tment income.)	
	No. 4040/47/07 No. 1044	a Abia wasa bilanda				
ıt sec	tion 4940(ď)(2) applies, leav	e this part blank.				
Was t	he foundation liable for the	section 4942 tax on the distribu	utable amount o	f any year in the I	base period?	☐ Yes ☐ No
If "Ye	s," the foundation does not	qualify under section 4940(e). [	Do not complete	this part.	•	
1	Enter the appropriate amo	ount in each column for each ye	ar; see the instr	uctions before m	akıng any entries.	
Cale	(a) Base penod years endar year (or tax year beginning in)	(b) Adjusted qualifying distribution	ns Net value o	(c) of noncharitable-use a		(d) tribution ratio divided by col (c))
	2015					
	2014					
	2013			<del></del>	-	
	2012					
	2011					
						<del></del>
2	Total of line 1, column (d)				.   2	
3		for the 5-year base period—div	ide the total on	line 2 by 5, or by	the	· · · · · · · · · · · · · · · · · · ·
		dation has been in existence if le			i i	
	·		•			
4	Enter the net value of non	charitable-use assets for 2016	from Part X, line	5	. 4	
5	Multiply line 4 by line 3				. 5	
6	Enter 1% of net investmen	nt income (1% of Part I, line 27t	<i>-1</i>		. 6	
U					.   -	
7	Add lines 5 and 6				. 7	
8	Enter qualifying distribution	ons from Part XII, line 4			. 8	
-		ater than line 7, check the box i				1% tax rate. See th
	Part VI instructions.		,	, comp.o.o		
		<del></del>		<del></del>		Form <b>990-PF</b> (2016
						10mm 200-F1 (201

Part		nstru	ıctio	ns)
1a '	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. )			
	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		0	<u> </u>
	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 3	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  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		0	
6	Credits/Payments:			
а	2016 estimated tax payments and 2015 overpayment credited to 2016   6a   0			i
b	Exempt foreign organizations—tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868) . 6c			
đ	Backup withholding erroneously withheld 6d			
7	Total credits and payments. Add lines 6a through 6d		0	
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here			L
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		0	
11 Dort	Enter the amount of line 10 to be: Credited to 2017 estimated tax    Refunded ▶ 11		0	
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		110
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	-"-	-	<u> </u>
	Instructions for the definition)?	1b		1
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			-
	published or distributed by the foundation in connection with the activities.			
C	Did the foundation file Form 1120-POL for this year?	1c		1
d	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		<b>-</b>
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
Ū	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		<b>-</b>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		7
ь	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		1
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or		]	
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	<u> </u>		
-		6	<b>✓</b>	
7 8a	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 Enter the states to which the foundation reports or with which it is registered (see instructions) ▶	7	✓	<del>                                     </del>
υa	DE. FL			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	<u> </u>		
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	1	<sup>-</sup>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	<del></del>	Ė	
-	4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"			[
	complete Part XIV	9	L	1
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10	✓	<u> </u>
	Fe	.m 90	10-PF	(2016)

Par	VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		1
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address   N/A	13	✓_	
14		5) 982	-5656	
	Located at ► 3601 SW 160TH AVE STE 250, MIRAMAR, FL ZIP+4 ►	3302	7	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here and enter the amount of tax-exempt interest received or accrued during the year <b>  15</b>			▶ □
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		1
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶			İ
Dori				<u> </u>
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required  File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a			165	140
14	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?   Yes   No	}	<b>.</b>	
	(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?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes Vo			
	(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.)			
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2016?	1c		1
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			ļ
D	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.	20		<del>                                     </del>
_	► 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	1		
	at any time during the year?			
b	If "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	ļ		l
	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.)		ļ	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b 4a	├	-
+a b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	70		+ *
_	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b	<b> </b>	1
				(004.0)

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	VII-B	Statements Regarding Activities	s for V	Vhich Form	4720	May Be R	equir	ed (contir	nued)			- ago
5a	During th	ne year did the foundation pay or incur a	•									
		on propaganda, or otherwise attempt		•	•	• •	•	Yes Yes	✓ No			
		ence the outcome of any specific publi										
		tly or indirectly, any voter registration di							<b>☑</b> No			
	(4) Provi	de a grant to an individual for travel, stude a grant to an organization other that on 4945(d)(4)(A)? (see instructions)	n a cha	ırıtable, etc.,	organız	ation desc	ribed ir	1	✓ No			
	<b>(5)</b> Provi	de for any purpose other than religious oses, or for the prevention of cruelty to	, charit	able, scientif	ic, litera	ary, or educ	ationa	1	☑ No			
b		swer is "Yes" to 5a(1)-(5), did any of the							ibed in			
	=	ons section 53.4945 or in a current notice	-	-		•		•		5b		
		ations relying on a current notice regardi							▶□	ł		
С	because	swer is "Yes" to question 5a(4), does to it maintained expenditure responsibility	for the	grant? .					□ No			
60	-	attach the statement required by Regula										
6a		oundation, during the year, receive any sonal benefit contract?							✓ No			
b	•	oundation, during the year, pay premiur						□ . ••		6b		
-		to 6b, file Form 8870.	,	out or mano	o.i.y, oii	a percenta	5011011	COOMILION		55		Ť
7a		ne during the tax year, was the foundation	a party	to a prohibite	d tax sh	elter transac	tion?	Yes	✓ No			l
		did the foundation receive any proceed								7b		
Pari		Information About Officers, Direct and Contractors	tors, 1	rustees, F	ounda	tion Mana	agers,	Highly P	aid Er	nploy	ees,	
1		officers, directors, trustees, foundation	n mana	agers and th	eir cor	npensation	(see i	nstruction	ns).			_
		(a) Name and address	hou	e, and average irs per week ed to position	(lf i	mpensation not paid, nter -0-)	empl	Contributions byee benefit   erred compe	plans	(e) Expe	nse ac allowar	
DR. A	MEET VOH	IRA	1	DENT/DIREC								
3601 5	SW 160TH	AVENUE, 250, MIRAMAR, FL 33027	TOR, 1	.0		0			0			0
						- <del></del>			ĺ			
					-							
												_
2	Comper	sation of five highest-paid employed	es (oth	er than tho	se incl	uded on li	ne 1—	see instr	uctions	). if n	one,	ente
	(a) Name and	d address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to p	week	(c) Compe	nsation	(d) Contribution employee plans and compens	benefit leferred	(e) Expe	nse ac allowar	
NONE					_							
				-		<u> </u>		<b></b>				
						I			1			

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

Par	VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid En and Contractors (continued)	ployees,
3	Five I	nighest-paid independent contractors for professional services (see instructions). If none, enter "NON	
		(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON	 E		(-,
			_
otai	numbe	r of others receiving over \$50,000 for professional services	
Pari	t IX-A	Summary of Direct Charitable Activities	
List	t the four anization:	dation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of sand other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1		The state of the s	
'			
2			
_			
3			
•			
•			•
4			
	IX-B	Summary of Program-Related Investments (see instructions)	
	scribe the	two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1			
2			
ΔIL	other pro-	gram-related investments. See instructions	
	omer bro	Irani-related investments See instructions	
3			
otal	Add In	nes 1 through 3	
	. ,	les i tillough s	

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Part	X Minimum Investment Return (All domestic foundations must complete this part. Fore	ign foun	dations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	11,000,006
С	Fair market value of all other assets (see instructions)	1c	
d	<b>Total</b> (add lines 1a, b, and c)	1d	11,000,006
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	11,000,006
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	165,000
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4	5	10,835,006
6	Minimum investment return. Enter 5% of line 5	6	37,005
Part	XI Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating f		
	and certain foreign organizations check here ▶ □ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	37,005
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016. (This does not include the tax from Part VI.)   2b	1	
С	Add lines 2a and 2b		0
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	37,005
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	37,005
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	37,005
Down		1 , 1	
Part	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	0
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:	├ <del>-</del> ┼-	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	0
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	<del>-</del>	
	Enter 1% of Part I, line 27b (see instructions)	5	
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		
	qualifies for the section 4940(e) reduction of tax in those years.	a witerije	i die louridation

Form **990-PF** (2016)

Part	XIII ,Undistributed Income (see instruction	ons)		·	
		(a)	(b)	(c)	(d)
1	Distributable amount for 2016 from Part XI,	Corpus	Years prior to 2015	2015	2016
	line 7				37,005
2	Undistributed income, if any, as of the end of 2016:				
а	Enter amount for 2015 only				
b	Total for prior years: 20 12 ,20 13 ,20 14				
3	Excess distributions carryover, if any, to 2016:				
а	From 2011				
b	From 2012	1			'
c	From 2013				1
ď	From 2014				
e	From 2015	1			
f	Total of lines 3a through e	. 0			
4	Qualifying distributions for 2016 from Part XII,				
•	line 4: ▶ \$ 0				1
а	Applied to 2015, but not more than line 2a .			· ō	
b	Applied to undistributed income of prior years	<del></del>			
_	(Election required—see instructions)		o		!
С	Treated as distributions out of corpus (Election				<u> </u>
·	required—see instructions)	0			
4	Applied to 2016 distributable amount				0
d	Remaining amount distributed out of corpus	0			
e					
5	Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same				0
	amount must be shown in column (a).)				ı
6	Enter the net total of each column as				I
O	indicated below:				,
_		o			
a b	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 Prior years' undistributed income. Subtract	\			
U	line 4b from line 2b		اه		
			- 0		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has				ļ
	been issued, or on which the section 4942(a)				1
	tax has been previously assessed				į
d	Subtract line 6c from line 6b. Taxable				
u	amount—see instructions		0		
_	Undistributed income for 2015. Subtract line		- 0		
е	4a from line 2a. Taxable amount—see				
	instructions			o	
f	Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must be		ļ		
	distributed in 2017				27.005
7					37,005
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section				i
	170(b)(1)(F) or 4942(g)(3) (Election may be				į
	required—see instructions)	اه			ì
8	Excess distributions carryover from 2011 not				
•	applied on line 5 or line 7 (see instructions).	o			i
9	Excess distributions carryover to 2017.	<u> </u>			
9	Subtract lines 7 and 8 from line 6a	0	1		!
10	Analysis of line 9:	<del></del>			
10	1				1
a	Excess from 2012 Excess from 2013				! 
b					,
C	Excess from 2014				
d	Excess from 2015				ş
е	Excess from 2016				

Form 99	90-PF (2016)					Page <b>10</b>
Part	XIV Private Operating Founda	tions (see instr	uctions and Part	VII-A, question !	9)	
1a '	If the foundation has received a ruling			private operating		
	foundation, and the ruling is effective fo		_			
b	Check box to indicate whether the four		e operating founda		ection	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	Ţ. <u></u>	(e) Total
	investment return from Part X for	(a) 2016	<b>(b)</b> 2015	(c) 2014	(d) 2013	
	each year listed				<b></b>	ļ
	85% of line 2a				<u> </u>	<del> </del>
C	Qualifying distributions from Part XII,					
	line 4 for each year listed		<del>                                      </del>	<del> </del>		
a	Amounts included in line 2c not used directly for active conduct of exempt activities				<u> </u>	
e	Qualifying distributions made directly					
	for active conduct of exempt activities.					
_	Subtract line 2d from line 2c			<u> </u>		
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test-enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under					
L	section 4942(j)(3)(B)(i)					
þ	"Endowment" alternative test-enter / of minimum investment return shown in					
	Part X, line 6 for each year listed		ļ	<del>-</del>		
С	"Support" alternative test – enter:					
	(1) Total support other than gross				į	
	investment income (Interest, dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)				<del> </del>	<del> </del>
	(2) Support from general public and 5 or more exempt					
	organizations as provided in			1	1	
	section 4942(j)(3)(B)(iii)		<del>-</del>	<del>                                     </del>		
	an exempt organization					
	(4) Gross investment income		-			<del> </del>
Part		on (Complete ti	nis part only if t	he foundation h	nad \$5.000 or m	ore in assets at
	any time during the year-					
1	Information Regarding Foundation	Managers:				
а	List any managers of the foundation					by the foundation
	before the close of any tax year (but o	only if they have c	ontributed more th	nan \$5,000). (See s	section 507(d)(2).)	
DR AN	MEET VOHRA, PRESIDENT					
b						arge portion of the
	ownership of a partnership or other en	ntity) of which the	toundation has a	10% or greater int	terest.	
		<del></del>				
2	Information Regarding Contribution			-		
	Check here ► ☐ If the foundation					
	unsolicited requests for funds. If the f other conditions, complete items 2a,		gins, grants, etc.	(see instructions)	to individuals or o	rganizations under
			ddroop of the pero			
	The name, address, and telephone nu MEET VOHRA, 3601 SW 160TH AVENUE, S				cations should be	addressed:
b	The form in which applications should	be submitted an	d information and	materials they sho	ould include:	<del></del>
	STATEMENT)			, , , , , , , , , , , , , , , , , , ,		
						_
С	Any submission deadlines:					
N/A						
d	Any restrictions or limitations on av	vards, such as b	y geographical a	reas, charitable f	ields, kinds of ins	stitutions, or other
	factors:					
(SEE	STATEMENT)					
						Earm QQA-PF (2016)

	XV Supplementary Information (co	ntinued)			
3	Supplementary Information (co Grants and Contributions Paid During	g the Year or Approv	ed for Fut	ure Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient		
а	Paid during the year	,			
			}		
			Į Į		
			}		
			}		
			}		
			l [		
					).
	Total				3a
b	Approved for future payment		<u> </u>	<u> </u>	<u> </u>
			}		
			}		
			]		
_	Total	<u> </u>			3b

Pa	rt XVI-A	Analysis of Income-Producing A	ctivities	_	_	_	_
		nounts unless otherwise indicated.		siness income	Excluded by secti	on 512, 513, or 514	(e)
			(a)	(b)	(c)	(d)	Related or exempt function income
1	Program	service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions.)
•	a	scivice revenue.			-		
	b						
	c						
	d						
	е						
	f						
	g Fees	and contracts from government agencies					
2		ship dues and assessments					
3		n savings and temporary cash investments			14	_6	
4		s and interest from securities		·			
5		al income or (loss) from real estate:					
		-financed property			<del> </del>		
•		lebt-financed property					<u> </u>
6 7		restment income		<del></del>	-		
8		oss) from sales of assets other than inventory	-		-		<del></del>
9	•	me or (loss) from special events					
10		ofit or (loss) from sales of inventory		<del> </del>			
11		venue: a					
	L.						
12	Subtotal.	Add columns (b), (d), and (e)				6	
13	Total. Ac	dd line 12, columns (b), (d), and (e)		<i>.</i>		13	6
<b>13</b> (See	Total. Ac workshee	dd line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculation	 ns.)			13	6
13 (See Pa	Total. Ac workshee rt XVI-B	dd line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculation  Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa	Total. Ac workshee rt XVI-B	dd line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculation	ns.) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa	Total. Ac workshee rt XVI-B	dd line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculation  Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa	Total. Ac workshee rt XVI-B	dd line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculation  Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp	t Purposes		
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13 (See Pa	Total. Ac workshee rt XVI-B	dd line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculation  Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp	t Purposes		
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13 (See Pa	Total. Ac workshee rt XVI-B	dd line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculation  Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp	t Purposes		
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13 (See Pa	Total. Ac workshee rt XVI-B	dd line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculation  Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa	Total. Ac workshee rt XVI-B	dd line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculation  Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes		

Part	VAII		ın negarding Trai rganizations	nsters 10	and Irans	acuor	is and i	Relations	snips w	iui Non	cnantat	ole	
1	Did 1		directly or indirectly	engage in	any of the fo	llowing	with an	v other or	nanizatio.	n decorl	bod	Yes	No
•			ne Code (other than									1.00	-
		nizations?			. (-),(-) 9		<b>-, -</b>		.,	,			1
а	Tran	sfers from the re	porting foundation t	o a noncha	ırıtable exem	not orga	nization	of:			1		
		Cash	=								. 1a(1	si l	Ī
	(2)	Other assets .									. 1a(2	_	1
b	Othe	er transactions:											
	(1) S	Sales of assets to	a noncharitable exc	empt orgar	nization .						. 1b(1	)	1
	(2) F	Purchases of asse	ets from a noncharit	able exem	pt organization	on					. 1b(2		1
	(3) F	Rental of facilities	s, equipment, or othe	er assets							. 1b(3	)[	1
			rrangements								. 1b(4	)	1
	• •	oans or loan gua									. 1b(5		<b>✓</b>
			ervices or membersi						· • • ·		. 1b(6	<u>}</u>	1
			equipment, mailing li								. <u>1c</u>	لــل	<u> </u>
			of the above is "Ye ther assets, or serv										
			on or sharing arrang										
(a) Line		(b) Amount involved	(c) Name of nonc					ription of tran					
1-4	-		, , , , , , , , , , , , , , , , , , ,				(4, 500						
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2a	is the	e foundation dire	ectly or indirectly af	filiated with	h, or related	to, one	e or mo	re tax-exe	empt orga	nization	s		
	desc	ribed in section 5	501(c) of the Code (c	other than s	section 501(d	c)(3)) or	in section	on 527? .				s 🕢 I	No
b	lf "Y∈	s," complete the	following schedule	·									
		(a) Name of organi	Ization	(1	) Type of organ	ization			(c) Desc	nption of n	elationship		
								<del> </del>					
<del></del>	l lead -	y nanatting of nature !	declare that I have examine	ard this return is	neludino eccomo	anvina ani	nedules see	statoments	and to the t-	of of my be	owledge end	haliaf 4	io true
Sign			aration of preparer (other th										_
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1616		nature of officer or trus	<del></del>	<u></u>	) // 50// Date (	Title	INEIA1				instructions)?		
		Print/Type preparer		Prepagens	signature			Date			PTIN		===
Paid		BRITTNEY KOCA		1915	uttren	YK	ocas	11/6/2		Check self-employ	If j	132060	)3
Prepa			CROWE HORWATH	 LLP				111012	Firm's 1		35-092		<del>-</del>
Jse C	nıy	11111101110	401 EAST LAS OLAS		1100, FORT I	LAUDER	RDALE, F	L 33301-42			(954) 202		
				<u></u>					1	·-	Form 99		(2016)

## Schedule B

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

**Schedule of Contributors** 

OMB No 1545-0047

► Attach to Form 990, Form 990-EZ, or Form 990-PF. Department of the Treasury ► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990. Internal Revenue Service **Employer identification number** Name of the organization VYUHA, INC. 81-4656022 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one

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).

contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific. literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such

contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Cat No 30613X

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)	Page
Name of organization	Employer identification number
VYUHA, INC.	81-4656022

Part I	needed.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DR AMEET VOHRA  3601 SW 160TH AVENUE, SUITE 250  MIRAMAR, FL 33027	\$ 11,000,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	Name, address, and ZIP + 4	Total contributions	(d) Type of contribution
			Person
(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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization VYUHA, INC.

Employer identification number 81-4656022

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

Name of or				Employer identification number				
VYUHA, IN				81-4656022				
Part III	(10) that total more than \$1,000 for the following line entry. For organization contributions of \$1,000 or less for the the following line entry.	ne year from any one con ns completing Part III, ente year. (Enter this information	tributor. Complete or the total of exclusi	columns (a) through (e) and vely religious, charitable, etc.,				
(a) No.	Use duplicate copies of Part III if addition	onai space is needed.						
from Part I			(d) Des	scription of how gift is held				
_								
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
-								
] .								
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	scription of how gift is held				
-								
			_					
	(e) Transfer of gift							
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
-	Transferee 3 name, address, and	207 7 7	Relationship of transferor to transferee					
-								
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	scription of how gift is held				
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	scription of how gift is held				
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Supplemental Inform	nation Supplemental Information. additional information (see instructions).					
Return Reference - Identifier	Explanation					
FORM 990 PF, PART XV, LINE 2B - FORM AND INFORMATION	VYUHA, INC DOES NOT CURRENTLY REQUIRE AN APPLICATION FORM FROM AN ORGANIZATION IN ORDER FOR THAT ORGANIZATION TO BE CONSIDERED FOR A GRANT OR CONTRIBUTION. THE FOUNDATION WILL MAKE GRANTS TO PUBLIC CHARITIES DESCRIBED IN IRC SECTIONS 509(A)(1) AND 509(A)(2), GRANTEE ORGANIZATIONS ARE TO BE SELECTED BY THE FOUNDATION'S BOARD OF DIRECTORS, IN THE FUTURE, THE FOUNDATION EXPECTS TO DEVELOP A GRANT APPLICATION TEMPLATE TO BE UTILIZED BY ORGANIZATIONS SEEKING FUNDS					
FORM 990 PF PART XV, LINE 2D - RESTRICTIONS AND LIMITATIONS	TO BE CONSIDERED FOR A GRANT OR CONTRIBUTION, AN ORGANIZATION MUST BE A PUBLIC CHARITY AS DEFINED UNDER IRC SECTION 509(A)(1) AND 509(A)(2).					