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

2016

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.

OMB No. 1545-0052

Internal F		e Service	▶ Informa	ition about Fo	orm 990-PF and its separate	instructions is at www.	ı.irs.	gov/form990pf.	Open to Public inspection
For ca	enda	r year 2016 or	tax year begin	ıning	, 2016	, and ending		,	
			DOSHI FO	UNDATIO	ON CONTRACTOR OF THE PROPERTY		A	Employer identification 81-4721779	
		EY CIRCLE INGTON, I					8	Telephone number (see (312) 855-4	
J. 2		2.102011, 2.	_ 00010				c		n is pending, check here PX
G Ch	eck a	Il that apply:	X Initial retu		Initial return of a forr	mer public charity	D	1 Foreign organizations,	check here >
			Final retur	,	Amended return Name change			2 Foreign organizations of	neeting the 85% test, check
H Ch	eck ty	pe of organiza			1(c)(3) exempt private f	foundation	1	here and attach compu	tation ►
لا			1) nonexempt	charitable	trust Other taxable	private foundation	E	If private foundation st under section 507(b)(1	atus was terminated
		t value of all asset II, column (c), line		J Acc	counting method: XC Other (specify)	ash Accrual	F		
▶ \$			0,000.		column (d) must be or	n cash basis)	<u> </u>	under section 507(b)(1	60-month termination (B), check here ▶
Part	IJ <u>Ą</u>	nalysis of R	Revenue and	di	(a) Revenue and	(b) Net investme	nt	(c) Adjusted net	(d) Disbursements
	CC	olumns (b), (c)	ne total of amo , and (d) may i	not neces-	expenses per books	income		income	for charitable purposes
		arily equal the ee instructions	amounts in coi 5).)	iumn (a)		}		j	(cash basis only)
	1		ants, etc., received (attac		250,000.				
	2	Check ► if the	foundation is not required	d to attach Sch. B					
	3	_	d temporary cash investm	nents				L	
	5 4	Dividends and interest	from securities .	•••••					
		Net rental income or (loss).							
R	6a	Net gain or (loss) from	sale of assets not on lin	ne 10 ,				<u> </u>	
R E V E N U	│ <u> </u> 。	Gross sales price assets on line 6a	· · · · · ———						
Ē	8		ncome (from Part IV pital gain						
	9	Income modification	ons						
Ε	10 a	Gross sales less returns and							
	ь	allowances Less: Cost of	·				-,-,		
	ء ا	goods sold Gross profit or (loss) (attach schedule)		<u> </u>			 	
	11	Other income (atta	ach schedule) .			····.			
	12	Total Addition	1 #		250.000			ļ,	,
			1 through 11		<u>250,000.</u> 0.		0.)
	14	Other employee s	salaries and wages.						
	15	•	nployee benefits						
Â			schedule)						
Ti.	c	Other professional fees	(attach Sch)					 	
O I	17-	Interest							
E TO	18	Taxes (attach schedule) Depreciation (attach	(ta histra)				_		
A AC	ا ا	schedule) and dep	eletion		ļ			İ	
N Y		Occupancy							
- T	21 -22°	Travel, conference							
A E!	23	Other expenses (a					_	 	
E N	_ ـ								
S E e	24	Total operating ar expenses. Add line	nd administrative es 13 through 23						
3	25	•	ents pard						
!	26	Total expenses ar Add lines 24 and 2			0.		0.		0.
	27	Subtract line 26 fro	om line 12:		0.		··		
	a	Excess of revenue	e over expenses ts		250,000.				
	Ь		come (if negative, e		230,000.		Ō.	 	
			me (if negative, ent	· '				C	7.

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

250,000.

6

	DULARI DOSHI FOUNDATI			31-4721779	Page 3
	osses for Tax on Investment Inc		(h) How accoursed	(C) Date acquired	(d) Date sold
2-story brick warel	e the kind(s) of property sold (e.g., r nouse; or common stock, 200 shares	MLC Company)	(b) How acquired P — Purchase D — Donation	(mo , day, yr.)	(mo , day, yr)
la N/A			D DOINGIN		
b					
С					
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa		(h) Gain or (e) plus (f) n	
8				<u>-</u>	
<u>b</u>		_ 			
<u> </u>	 				
	 				
	wing gain in column (h) and owned t	w the foundation on 12/31	isa	40.000.40.4	
(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	g	(1) Gains (Col ain minus col. (k), t an -0-) or Losses (fi	out not less
8					
b					
<u>c</u>					
d					
<u> </u>	<u> </u>				
2 Capital gain net income or (ne	et capital loss) If gain, also If (loss), en	enter in Part I, line 7 ter -0- in Part I, line 7	2		
3 Net short-term capital gain or	(loss) as defined in sections 1222(5) and (6):			
If gain, also enter in Part I, Iir	ne 8, column (c) (see instructions)	f (loss), enter -0-	_ }		
ın Part I, line 8	<u></u>	<u> </u>	3		
	Section 4940(e) for Reduced Tax				
(For optional use by domestic priva	te foundations subject to the section	4940(a) tax on net investi	nent income.)	N/A	
If section 4940(d)(2) applies, leave	this part blank.				
	ection 4942 tax on the distributable a alify under section 4940(e). Do not c		pase period?	Yes	No
	in each column for each year; see t		ing any entries	 	
	(b)	(c)		(d)	
(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use as	sets	Distribution (col. (b) divided	
2015					
2014					
2013					
2012					_ ,
2011					
2. Total of line 1. column (d)			2	ļ	
2 Total of line 1, column (d)				 	
3 Average distribution ratio for t number of years the foundation	the 5-year base period- divide the to in has been in existence if less than	tal on line 2 by 5, or by the 5 years	<u>3</u>		
4 Enter the net value of noncha	ritable-use assets for 2016 from Par	t X, line 5	4		
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investment in	come (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		
8 Enter qualifying distributions f	rom Part XII, line 4		8		
If line 8 is equal to or greater Part VI instructions.	than line 7, check the box in Part VI	, line 1b, and complete tha	at part using a	1% tax rate. Se	e the

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Form 990-PF (2016) PARAG AND DULARI DOSHI FOUNDATION 81-4721779	Page 4
Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948- see instructions)	
1'a 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,	<u> </u>
check here > and enter 1% of Part 1, line 27b	
c 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-)	<u> </u>
3 Add lines 1 and 2	0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	0.
5 Tax based on investment incomeSubtract line 4 from line 3. If zero or less, enter -0:	0.
6 Credits/Payments:	
a 2016 estimated tax pmts and 2015 overpayment credited to 2016	
b Exempt foreign organizations— tax withheld at source	
c Tax paid with application for extension of time to file (Form 8868)	
d Backup withholding erroneously withheld	43°.
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, enteramount owed	0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter theamount overpaid	
11 Enter the amount of line 10 to be: Credited to 2017 estimated tax PRefunded 11	
Rativil A Statements Regarding Activities	
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	Yes No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes	1 1
(see Instructions for the definition)?	b X
If the answer is 'Yes' to1a 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 fileForm 1120-POL for this year?	c X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	1
(1) On the foundation > \$ 0. (2) On foundation managers > \$ 0. e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	
foundation managers > \$. () <u></u>
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.	
2. Has the foundation made any changes, not provide the reported to the IPS, in its governing instrument, articles	j
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	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	
b If 'Yes,' has it filed a tax return or Form 990-T for this year?4	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	
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? 6	_ X
7 Did the foundation have at least \$5,000 in assets at any time during the year?If 'Yes,' complete Part II, col. (c), and Part XV	X
8a Enter the states to which the foundation reports or with which it is registered (see instructions)	
IL	
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	b X
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? 'Yes,' complete Part XIV	X
10 Did any persons become substantial contributors during the tax year? 'Yes,' attach a schedule listing their names	
and addresses. SEE STATEMENT 1 10 BAA Forms	990-PF (2016)

		<u>-4721779</u>	<u> </u>	Р	age 5
Pa	Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' attach schedule (see instructions)		11	Yes	No X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified pe advisory privileges? If 'Yes,' attach statement (see instructions)	rson had	12		Х
	Did the foundation comply with the public inspection requirements for its annual returns and exemption appli Website address	cation?	13	X	
14	The books are in care of BUSINESS AND PROF. CONSULTANTS Telephone no.	847-49 015	8-8	80	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu dform 1041 - Check here		N/A		
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authorit bank, securities, or other financial account in a foreign country?			Yes	N/A No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,'		16		X
FDS5	enter the name of the foreign country		{		
:Kai	Statements Regarding Activities for Which Form 4720 May Be Required			V [NI-
1.	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies. During the year did the foundation (either directly or indirectly).			Yes	No
• •	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			į	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	_ 1			
	(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)?	X No			
	(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.)	X No			
b	of any answer is 'Yes' to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?][1 b	N	A A
	Organizations relying on a current notice regarding disaster assistance check here	• [] ·			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 201.6?		1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	ĺ	į.		
8	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?	X No			
	If 'Yes,' list the years ► 20 _ , 20 _ , 20				-1-
C	Are there any years listed in 2a for which the foundation isot 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.)		2 b	N	/A
c	If the provisions of section 4942(a)(2) are being applied tany of the years listed in 2a, list the years here.				
3 a	▶ 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business	[]			
		X No			
b	olf 'Yes,' did it have excess business holdings in 2016 as a result (1) any purchase by the foundation or disqualified persons after May 26, 1969(2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016.)			: ; 	
			3 b	_N	<u>/A</u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4 a		Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of				
	the tax year beginning in 2016?		4 b		X
BAA		For	m 99 0	-PF (2	2016)

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Part VIEB Statements Regarding Activities	for Which Form 4720	May Be Required (d	continued)							
5'a During the year did the foundation pay or incu	r any amount to:									
(1) Carry on propaganda, or otherwise attempt	ot to influence legislation	n (section 4945(e)).?		No						
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	ation drive?		— — —	No						
(3) Provide a grant to an individual for travel, study, or other similar purposes?										
(4) Provide a grant to an organization other t in section 4945(d)(4)(A)? (see instructions	han a charitable, etc., o s)	rganization described	Yes 🛚	No						
(5) Provide for any purpose other than religio educational purposes, or for the prevention	us, charitable, scientific in of cruelty to children	, literary, or or animals.?	Yes X	No						
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53.4945 or in (see instructions)?		qualify under the except ling disaster assistance		5b N/A						
Organizations relying on a current notice rega										
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	the foundation claim exsibility for the grant?	emption from the	N/A Yes	No						
If 'Yes,' attach the statement required by Reg		• •								
6a Did the foundation, during the year, receive a on a personal benefit contract?			Yes X	No						
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870.	iums, airectly or indirec	ily, on a personal bene	III CONTRACT!	бы Х						
•	dalian a nach ta a nech	.bitad tau abaltar tuana								
7a At any time during the tax year, was the found				No Section 1						
b If 'Yes,' did the foundation receive any proces										
and Contractors	ctors, Trustees, Foun	idation Managers, n	ignly Paid Employee	!5,						
	n management their c	romposetton (con last								
1 List all officers, directors, trustees, foundation										
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances						
PARAG DOSHI	PRESIDENT	0.	0.	0.						
5 HACKNEY CIRCLE SOUTH BARRINGTON, IL 60010	0									
DULARI DOSHI	VICE PRESIDE	0.	0.	0.						
	1	U.	0.	0.						
5 HACKNEY CIRCLE	0									
SOUTH BARRINGTON, IL 60010	SECRETARY									
ANJALI DOSHI	_	0.	0.	0.						
5 HACKNEY CIRCLE	0									
SOUTH BARRINGTON, IL 60010	CECEDAMA DI									
ANISH DOSHI	SECRETARY	0.	0.	0.						
5 HACKNEY CIRCLE	0									
SOUTH BARRINGTON, IL 60010										
2 Compensation of five highest-paid employee		luded on line-isee inst		r'NONE.'						
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances						
NONE										
										
		ļ								
				·						
Total number of other employees paid over \$50,000	TEEA02051 12	nene		0 Earn 990 PE (2016)						

Form 990-PF (2016) PARAG AND DULARI DOSHI FOUNDATION		21779 Page 7
Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	n Managers, Hignly Paid Employe	es,
3 Five highest-paid independent contractors for professional services (see i	nstructions), If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		<u> </u>
		<u> </u>
Total number of others receiving over \$50,000 for professional services		0
PartiX:A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic organizations and other beneficiaries served, conferences convened, research papers produced, etc.	al information such as the number of	Expenses
		
1 N/A		-l
		-
		 -
2		_
		-[
3		
"		-
		-
4		
		-
		-
Part X:BE Summary of Program-Related Investments (see instructions	5)	
Describe the two largest program-related investments made by the foundation du		Amount
1		
		-
N/A		-
2		
		-[
		-
All other program-related investments. See instructions		
3		
		-[
		-
Total. Add lines 1 through 3.		0.
BAA		Form 990-PF (2016)

Part X Minimum Investment Retusee instructions.)	irn (All domestic foundations must complete this part. Fo	oreign fo	oundations,
1 Fair market value of assets not used (c	or held for use) directly in carrying out charitable, etc., purposes:		
		1a	
	ee instructions)		
		1 d	0.
e Reduction claimed for blockage or othe		8	
1c (attach detailed explanation)	line 1 assets	اخــا	
		2	
3 Subtract line 2 from line 1d		3	
4 Cash deemed held for charitable activit (for greater amount, see instructions).	ies. Enter 1-1/2% of line 3	4	
5 Net value of noncharitable-use assets	Subtract line 4 from line 3. Enter here and on Part V, line.4	5	0.
6 Minimum investment return Enter 5% of	of line 5	6	Û.
Part XI Distributable Amount (see	e instructions) (Section 4942(j)(3) and (j)(5) private operations check here and do not complete this part.)	ting for	ındations
1 Minimum investment return from Part X	K, line 6	1	
2a Tax on investment income for 2016 from	m Part VI, line 5	F3. [3]	
b Income tax for 2016. (This does not inc	lude the tax from Part VI.)		
		2c	
3 Distributable amount before adjustment	s. Subtract line 2c from line 1	3	
4 Recoveries of amounts treated as quali	fying distributions	4	
5 Add lines 3 and 4		5	
	ee instructions)		
· ·	ract line 6 from line 5. Enter here and on Part XIII, line 1		0.
Part XII Qualifying Distributions (
1 Amounts paid (including administrative	expenses) to accomplish charitable, etc., purposes:	- 35	
a Expenses, contributions, gifts, etc.— tot	al from Part I, column (d), line 26	1a	
.	m Part IX-B		
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	le projects that satisfy the:	<u> </u>	
	le projects that satisfy the: ired)		
	ed schedule)	3 b	
4 Qualifying distributions Add lines 1a th	rough 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	0.
5 Foundations that qualify under section 6 Enter 1% of Part I, line 27b (see instruc	4940(e) for the reduced rate of tax on net investment income.	5	
	act line 5 from line 4	6	0.
	d in Part V. column (b), in subsequent years when calculating whethe	r the foun	
BAA	 		Form 990-PF (2016)

Fait Will Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(ଶ) 2016
1 Distributable amount for 2016 from Part XI, line 7.	7.			0.
2 Undistributed income, if any, as of the end of 2016:			and the second s	<u> </u>
a Enter amount for 2015 only			0.	
b Total for prior years: 20 , 20 , 20		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011		.		
b From 2012				
c From 2013		1		
d From 2014				
e From 2015				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2016 from Part				
XII, line 4: ▷ \$				
Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior years				
(Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required – see instructions)	0.			
d Applied to 2016 distributable amount				0.
Remaining amount distributed out of corpus.	0.			
5 Excess distributions carryover applied to 2016	0.			0.
(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 indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.	·		
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed				
income for which a notice of deficiency has been issued, or on which the section 4942(a)				
tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line 4a from				
line 2a. Taxable amount — see instructions		·	0.	
f Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must be				
distributed in 2017				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)				
may be required— see instructions)	0.		<u> </u>	
8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions).	0.			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	0.	;		
10 Analysis of line 9:		1		
a Excess from 2012	1	1		
b Excess from 2013	1	1		
c Excess from 2014		,		
d Excess from 2015	ĺ	-		1
e Excess from 2016		ģ		
BAA				Form 990-PF (2016)

Form 990-PF (2016) PARAG AND DULARI				81-4721779	
Private Operating Foundation					N/A
1-a If the foundation has received a ruling or on is effective for 2016, enter the date of the	letermination lette ruling	r that it is a private	operating toundation	n, and the ruling	
b Check box to indicate whether the foundat	-			4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
income from Part I or the minimum investment return from Part X for each year listed	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
 Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c 			,		
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test— enter:				,	
(1) Value of all assets		 	 -		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)		ļ	<u> </u>		
minimum investment return shown in Part X, line 6 for each year listed.					
c 'Support' alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)			1 1 1 1		
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization	-				
(4) Gross investment income					
Part Supplementary Information	(Complete this	part only if the	foundation had	\$5,000 or more	in
assets at any time during th Information Regarding Foundation Management	<u> </u>	nstructions.)			
		ore than 2% of the	total contributions r	eceived by the found	dation before the
a List any managers of the foundation who have close of any tax year (but only if they have SEE STATEMENT 2	contributed more	than \$5,000). (See	section 507(d)(2))	•	
b List any managers of the foundation who ca partnership or other entity) of which the NONE	own 10% or more of foundation has a 1	of the stock of a cor 10% or greater interes	poration (or an equiest.	ally large portion of	the ownership of
2 Information Regarding Contribution, Gran Check here ► X if the foundation only makes requests for funds. If the foundation makes complete items 2a, b, c, and d.	nakes contributions s gifts, grants, etc.	s to preselected cha (see instructions) t	ritable organizations o individuals or orga	anizations under oth	
a The name, address, and telephone numbe	r or e-mail addres.	s of the person to w	hom applications sh	nould be addressed:	
b The form in which applications should be s	ubmitted and info	rmation and materia	is they should inclu	de:	
c Any submission deadlines:					
d Any restrictions or limitations on awards, s	uch as by geograp	phical areas, charital	ble fields, kinds of i	nstitutions, or other	factors:
RAA	TE	EA03101 12/16/16		F	orm 990-PE (2016)

Page 11

3 Grants and Contributions Paid During the Y	N/A			
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		
a Paid during the year	of Substantial Contribution			
Total	1	· · · · · · · · · · · · · · · · · · ·		`
b Approved for future payment Total			▶ 3b	

Enter gross amounts unless otherwi			d business income	Eveluded by	section 512, 513, or 514	
•	se muicateu.	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (See instructions.)
1 Program service revenue:			-	code		
· =		 		- 		·
C		╄				
d	 -	 				
e				+		
í	·	\vdash		+		
g Fees and contracts from gover	nment agencies	 		+ +		
2 Membership dues and assessr	-			+ +		
3 Interest on savings and temporary cash				+-+		
4 Dividends and interest from se	curities		·			
5 Net rental income or (loss) fro	m real estate:			V-		
a Debt-financed property			·			
b Not debt-financed property						
6 Net rental income or (loss) from perso	nal property					
7 Other investment income						
8 Gain or (loss) from sales of assets other	•					
9 Net income or (loss) from spec						
O Gross profit or (loss) from sale	es of inventory .					
1 Other revenue:			<u></u>	4		
a		ļ				
Ь		 				
·				+		
C						
c d		-		+-+		
c d e						
d e 12 Subtotal. Add columns (b), (d)	, and (e)				12	
d e Subtotal. Add columns (b), (d) Total. Add line 12, columns (b)	, and (e)), (d), and (e)	· · · · ·				0
subtotal. Add columns (b), (d) Total. Add line 12, columns (b) See worksheet in line 13 instruction	, and (e)), (d), and (e) ns to verify calculat	ions.)				0
e 2 Subtotal. Add columns (b), (d) 3 Total. Add line 12, columns (b) ee worksheet in line 13 instruction art (VEB Relationship of Add)	, and (e) o), (d), and (e) ns to verify calculat ctivities to the Ad	ions.) ccomplishm	nent of Exempt Pur	rposes	<u> </u>	
Subtotal. Add columns (b), (d) Total. Add line 12, columns (b) worksheet in line 13 instruction Relationship of Additional accomplishment of the first	, and (e) o), (d), and (e) ns to verify calculat ctivities to the Ad	ions.) ccomplishm	nent of Exempt Pur	rposes	<u> </u>	
e 2 Subtotal. Add columns (b), (d) 3 Total. Add line 12, columns (b) iee worksheet in line 13 instruction art XVEB Relationship of Add	, and (e) o), (d), and (e) ns to verify calculat ctivities to the Ad	ions.) ccomplishm	nent of Exempt Pur	rposes	<u> </u>	
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Subtotal. Add columns (b), (d) Total. Add line 12, columns (b) ee worksheet in line 13 instruction Relationship of Ad ine No. Explain below how each accomplishment of the f	, and (e) o), (d), and (e) ns to verify calculat ctivities to the Ad	ions.) ccomplishm	nent of Exempt Pur	rposes	<u> </u>	
Subtotal. Add columns (b), (d) Total. Add line 12, columns (b) ee worksheet in line 13 instruction Relationship of Ad ine No. Explain below how each accomplishment of the f	, and (e) o), (d), and (e) ns to verify calculat ctivities to the Ad	ions.) ccomplishm	nent of Exempt Pur	rposes	<u> </u>	
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Subtotal. Add columns (b), (d) Total. Add line 12, columns (b) ee worksheet in line 13 instruction Relationship of Ad ine No. Explain below how each accomplishment of the f	, and (e) o), (d), and (e) ns to verify calculat ctivities to the Ad	ions.) ccomplishm	nent of Exempt Pur	rposes	<u> </u>	
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Subtotal. Add columns (b), (d) Total. Add line 12, columns (b) ee worksheet in line 13 instruction Relationship of Ad ine No. Explain below how each accomplishment of the f	, and (e) o), (d), and (e) ns to verify calculat ctivities to the Ad	ions.) ccomplishm	nent of Exempt Pur	rposes	<u> </u>	
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Subtotal. Add columns (b), (d) Total. Add line 12, columns (b) ee worksheet in line 13 instruction Relationship of Ad ine No. Explain below how each accomplishment of the f	, and (e) o), (d), and (e) ns to verify calculat ctivities to the Ad	ions.) ccomplishm	nent of Exempt Pur	rposes	<u> </u>	
Subtotal. Add columns (b), (d) Total. Add line 12, columns (b) ee worksheet in line 13 instruction Relationship of Ad ine No. Explain below how each accomplishment of the f	, and (e) o), (d), and (e) ns to verify calculat ctivities to the Ad	ions.) ccomplishm	nent of Exempt Pur	rposes	<u> </u>	
Subtotal. Add columns (b), (d) Total. Add line 12, columns (b) ee worksheet in line 13 instruction Relationship of Ad ine No. Explain below how each accomplishment of the f	, and (e) o), (d), and (e) ns to verify calculat ctivities to the Ad	ions.) ccomplishm	nent of Exempt Pur	rposes	<u> </u>	
Subtotal. Add columns (b), (d) Total. Add line 12, columns (b) ee worksheet in line 13 instruction Relationship of Ad ine No. Explain below how each accomplishment of the f	, and (e) o), (d), and (e) ns to verify calculat ctivities to the A	ions.) ccomplishm	nent of Exempt Pur	rposes	<u> </u>	
Subtotal. Add columns (b), (d) Total. Add line 12, columns (b) ee worksheet in line 13 instruction Relationship of Ad ine No. Explain below how each accomplishment of the f	, and (e) o), (d), and (e) ns to verify calculat ctivities to the A	ions.) ccomplishm	nent of Exempt Pur	rposes	<u> </u>	
Subtotal. Add columns (b), (d) Total. Add line 12, columns (b) worksheet in line 13 instruction Relationship of Additional accomplishment of the first	, and (e) o), (d), and (e) ns to verify calculat ctivities to the A	ions.) ccomplishm	nent of Exempt Pur	rposes	<u> </u>	
Subtotal. Add columns (b), (d) Total. Add line 12, columns (b) worksheet in line 13 instruction Relationship of Additional accomplishment of the first	, and (e) o), (d), and (e) ns to verify calculat ctivities to the A	ions.) ccomplishm	nent of Exempt Pur	rposes	<u> </u>	
Subtotal. Add columns (b), (d) Total. Add line 12, columns (b) Bee worksheet in line 13 instruction Relationship of Addition. Explain below how each accomplishment of the fi	, and (e) o), (d), and (e) ns to verify calculat ctivities to the A	ions.) ccomplishm	nent of Exempt Pur	rposes	<u> </u>	
Subtotal. Add columns (b), (d) Total. Add line 12, columns (b) Bee worksheet in line 13 instruction Relationship of Addition. Explain below how each accomplishment of the fi	, and (e) o), (d), and (e) ns to verify calculat ctivities to the A	ions.) ccomplishm	nent of Exempt Pur	rposes	<u> </u>	
Subtotal. Add columns (b), (d) Total. Add line 12, columns (b) See worksheet in line 13 instruction Relationship of Addition. Explain below how each accomplishment of the fi	, and (e) o), (d), and (e) ns to verify calculat ctivities to the A	ions.) ccomplishm	nent of Exempt Pur	rposes	<u> </u>	
Subtotal. Add columns (b), (d) Total. Add line 12, columns (b) Bee worksheet in line 13 instruction Relationship of Addition. Explain below how each accomplishment of the fi	, and (e) o), (d), and (e) ns to verify calculat ctivities to the A	ions.) ccomplishm	nent of Exempt Pur	rposes	<u> </u>	

Form 990-PF (2016) PARAG AND DULARI DOSHI FOUNDATION 81-472

Part VIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

							200.00
relatin	ig to political organizati	ions?	gage in any of the following than section 501(c)(3) o		ner organization or in section 5	n 327,	Yes No
_	· · ·		noncharitable exempt org				1.0
٠.			• • • • • • • • • • • • • • • • • • • •				1a(1) X
	ther assets transactions:		· ···· ···· · · · · · · · · · · · · ·				1a(2) X
(1) Sa	ales of assets to a none	charitable exem	pt organization				. 1b(1) X
(2) Pu	urchases of assets fron	n a noncharitabl	e exempt organization				1b(2) X
(3) Re	ental of facilities, equip	ment, or other a	assets				1b(3) X
(4) Re	eimbursement arranger	ments					1b(4) X
	oans or loan guarantee:						
• •	~		or fundraising solicitation				
		•	, other assets, or paid em				
any tra	ansaction or sharing ar	rangement, sho	omplete the following sche the reporting foundation w in column(d) the value of	of the goods, o	other assets, or	r services recei	ved.
(a) Line no.	(b) Amount involved	(c) Name of r	concharitable exempt organization	1 (d)	Description of trans	sfers, transactions,	and sharing arrangements
N/A		<u> </u>					
						· 	
							
							
							
			· · · · · · · · · · · · · · · · · · ·				
							
							
			·				
							
							
							
2a is the	foundation directly or i	indirectly affiliate	ed with, or related to, one er than section 501(c)(3))	or more tax-	exempt organiz	ations	Yes XNo
	s,' complete the following	-	er than section sort(c)(s))	or in section.	J2/3		Ties VIII0
	(a) Name of organization		(b) Type of organiza	ation		Description of	ralationship
	(a) Name of Organization	"	(b) Type of organiza	ation:	(0,	Description of	relationship
N/A							
				+			
1				<u> </u>			
Sign Correct	r penalties of perjury, I declare that it, and complete Declaration of pr	It have examined this is reparer (other than taxp.	return, including accompanying schedu ayer) is based on all information of wh	nch preparer has any	and to the best of my knowledge. RESIDENT	knowledge andr belief,	May the IRS discuss this return with the preparer shown below (see ms/juctions).2.
Sig	nature of officer or trustee		Date	Title			X Yes No
	Print/Type preparer's nam	18	Preparer's signature		Date	Check	IT PTIN
Paid	LINDA M. CUM	MINGS, CPA	. 1			self-employed	P00237467
			PROFESSIONAL CON	סייוא מיי דווט	LTD.		-3821474
Preparer	_		GSTEN ROAD, SUIT		, 1110.	30	JULIAIA
Jse Only	· —			E 363		Phone no. (8	A7\ A00_000
	_ I Di	EERFIELD,	IL 60015-5293			rione no. (8	47) 498-8880
BAA							Form 990-PF (2016)

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

Schedule of Contributors

| 2010

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.
➤ Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

2016

OMB No. 1545-0047

PARAG AND DULARI DOSHI FOUNDATION 8		81-4721779			
Organization type(check one):					
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number) organization				
	4947(a)(1) nonexempt charitable trustnot treated as a pr	vate foundation			
	527 political organization				
Form 990-PF	X 501(c)(3) exempt private foundation				
1 01111 330-11		de ferradaksan			
	4947(a)(1) nonexempt charitable trust treated as a priva	ite roungation			
	501(c)(3) taxable private foundation				
Check if your organization is covered by the Gen	eral Ruleor a Special Rule.				
Note. Only a section 501(c)(7), (8), or (10) orga	nization can check boxes for both the General Rule and a Sp	pecial Rule. See instructions.			
General Rule X For an organization filing Form 990, 990-EZ property) from any one contributor. Complete	, or 990-PF that received, during the year, contributions total te Parts I and II. See instructions for determining a contribute	ling \$5,000 or more (in money or or or total contributions.			
Special Rules					
under sections 509(a)(1) and 170(b)(1)(A)(v	I(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% supportion, that checked Schedule A (Form 990 or 990-EZ), Part II, III le year, total contributions of the greater of)(\$5,000 or (2) 2%0-EZ, line 1. Complete Parts I and II.	ne 13, 16a, or 16b, and that			
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, total contributions of more than \$1,00@xclusively 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, contributionsexclusively 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 exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless theeneral Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year					

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

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

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).

	B (FOITH 350, 350-EZ, OF 350-FF) (2016)	Tay	
-			rriployer identification number 1–4721779
PERM	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PARAG AND DULARI DOSHI 5 HACKNEY CIRCLE	\$250,0	Person X Payroll Noncash
	SOUTH BARRINGTON, IL 60010	-	(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ - \$	Person
(a) Number	(b) Name, address, and ZIP + 4	(c) Total	noncash contributions.) (d) Type of contribution
		contributions	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash
			(Complete Part II for noncash contributions.)
RAA	TEEANTON DRINGING	Schodule B (Ed	200 990 990-F7 or 990-PE) (2016

from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Part I		(see instructions)	
		\$	
(a) No. from Part	(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
		s	

	(Form 990, 990-EZ, or 990-PF) (2016)		Page 1 to 1 of Part III		
eme of organ	Ization AND DULARI DOSHI FOUNDATION		Employer Identification number 81-4721779		
ar:III	Exclusively religious, charitable, etc., co or (10) that total more than \$1,000 for the y the following line entry. For organizations concontributions of \$1,000 or less for the year. (El Use duplicate copies of Part III if additional sp	ear from any one contributor. Con npleting Part III, enter the total of nter this information once. See in	described in section 501(c)(7), (8), implete columns (a) through (e) and inclusively religious, charitable, etc.,		
(a) No. from Part !	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	N/A				
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				
(a) No. from Part I	Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				
(a) lo. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	(e) Transfer of gift				
	Transfer of gift Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e)			
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				

2016

FEDERAL STATEMENTS

PAGE 1

CLIENT 27021

PARAG AND DULARI DOSHI FOUNDATION

81-4721779

8/01/17

01:33PM

STATEMENT 1 FORM 990-PF, PART VII-A, LINE 10 SUBSTANTIAL CONTRIBUTORS DURING THE TAX YEAR

NAME OF SUBSTANTIAL CONTRIBUTOR

ADDRESS OF SUBSTANTIAL CONTRIBUTOR

PARAG AND DULARI DOSHI

5 HACKNEY CIRCLE SOUTH BARRINGTON, IL 60010

STATEMENT 2 FORM 990-PF, PART XV, LINE 1A FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

PARAG DOSHI DULARI DOSHI