Citizen Audit.org

EXTENDED TO MAY 15, 2017

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.

| For calendar year 2015 or tax year beginning | UL 1, 2015 | , and ending | JUN 30, 2016 | 1 0,000,000,000 |
|--|---------------------------------------|---------------------------------------|---|---|
| Name of foundation | | | A Employer identification i | number |
| - | | | | |
| SAI HIRA RAM TRUST, INC. | | | 20-6129730 | |
| Number and street (or PO box number if mail is not delivered to s | treet address) | Room/suite | B Telephone number | |
| 4 DRIFT WAY | | | (973) 228-2 | |
| City or town, state or province, country, and ZIP or foreign | gn postal code | } | C If exemption application is per | nding, check here |
| ROSELAND, NJ 07068 | Instal sature of a fa | rmor public charity | D 1 Foreign organizations, | oback bara |
| G Check all that apply: Initial return Final return | Amended return | rmer public charity | U i roreigh organizations, | check here |
| Address change | Name change | | Foreign organizations mee check here and attach com | ting the 85% test, |
| | B) exempt private foundation | | E If private foundation statu | |
| Section 4947(a)(1) nonexempt charitable trust | Other taxable private founda | ition | under section 507(b)(1)(| |
| I Fair market value of all assets at end of year J Acco | unting method: X Cash | | F If the foundation is in a 6 | 0-month termination |
| (from Part II, col (c), line 16) | Other (specify) | | under section 507(b)(1)(| |
| | column (d) must be on cash b | pasis.) | | |
| Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may necessarily equal the amounts in column (a)) | ot (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
| 1 Contributions, gifts, grants, etc., received | 94,405. | | | |
| 1 Contributions, gifts, grants, etc., received 2 Check ► X if the foundation is not required to attach Sch E 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents | | | | |
| Interest on savings and temporary cash investments | | | | |
| 4 Dividends and interest from securities | } | | | |
| | | | | |
| b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 | | | | |
| Gross sales price for all assets on line 6a | | | | |
| 7 Capital gain net income (from Part IV, line 2) | | 0. | | |
| 8 Net short-term capital gain | | | | |
| D Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications Gross sales less returns | | | | |
| 10a Gross sales less returns 10a and allowances PECEIVED b Less Gost of goods sold | | · · · · · · · · · · · · · · · · · · · | | |
| Less dost of goods sold | | | | |
| c Gross profit or (loss) 11 Other nicone MAY 1 3 2017 | | | | |
| 11 Other income MAY 1 6 2017 | 94,405. | 0. | 0. | |
| | 0. | 0. | Ŏ. | 0. |
| 13 Compensation of orders adjusted the compensation of the complex compensation of the complex compensation of the compensatio | | | | |
| 15 Pension plans, employee benefits | | | | |
| 16a Legal fees | | <u> </u> | | |
| b Accounting fees STMT 1 | 2,700. | 0. | 0. | 2,700. |
| c Other professional fees | | | | |
| b Accounting fees c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses Add lines 13 through 23 | 115. | 0. | 0. | 115. |
| 19 Depreciation and depletion | 115. | <u> </u> | | |
| E 20 Occupancy | 23,225. | 0. | 0. | 23,225. |
| 21 Travel, conferences, and meetings | | | | |
| 22 Printing and publications | | | | |
| 23 Other expenses STMT 3 | 11,068. | 0. | 0. | 11,068. |
| 24 Total operating and administrative | 27 100 | | | 27 100 |
| expenses Add lines 13 through 23 | 37,108. | 0. | 0. | 37,108. |
| 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. | 0. | | | 0. |
| Add lines 24 and 25 | 37,108. | 0. | o. | 37,108. |
| 27 Subtract line 26 from line 12: | | | | |
| & Excess of revenue over expenses and disbursements | 57,297. | | | |
| b Net investment income (If negative, enter -0-) | | 0. | | |
| C Adjusted net income (if negative, enter -0-) | | <u> </u> | 0. | - 000 BE |
| 523501 11-24-15 LHA For Paperwork Reduction Act Notice, | see instructions. | 1 | 916 | Form 990-PF (2015) |

| For | m 99 | 0-PF (2015) SAI HIRA RAM TRUST, INC | | | 6129730 Page 2 |
|-----------------------------|--------------|--|--------------------|----------------|---------------------------|
| P | art | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | Beginning of year | End of | |
| Ė | | Column Should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash - non-interest-bearing | 60,330. | 3,729. | 3,729. |
| | | Savings and temporary cash investments | | | |
| | 3 | Accounts receivable | | | |
| | | Less: allowance for doubtful accounts | | | |
| | 4 | Pledges receivable | | | |
| | _ | Less: allowance for doubtful accounts ▶ | | | |
| | 5 | Grants receivable | | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | |
| | l _ | disqualified persons | | | |
| | 7 | Other notes and loans receivable | | | |
| | | Less: allowance for doubtful accounts | | | |
| Assets | 8 | Inventories for sale or use | | | |
| Ass | 9 | Prepaid expenses and deferred charges | | | |
| _ | | Investments - U.S. and state government obligations | | - | |
| | 1 | Investments - corporate stock | | | |
| | | Investments - corporate bonds | | | |
| | 111 | Investments - land, buildings, and equipment basis | | | |
| | 12 | Less accumulated depreciation | | | |
| | 13 | Investments - mortgage loans Investments - other | | | |
| | | Land, buildings, and equipment: basis | | | |
| | 14 | Less accumulated depreciation | ł | | |
| | 15 | Other assets (describe ► CAPITALIZED COSTS) | 93,444. | 207,342. | 207,342. |
| | | Total assets (to be completed by all filers - see the | | 201,342. | 201,342. |
| | 10 | instructions. Also, see page 1, item I) | 153,774. | 211,071. | 211,071. |
| _ | 17 | | | | <u> </u> |
| | 18 | Grants payable | | | |
| S | 19 | Deferred revenue | | | |
| Liabilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| abil | 21 | Mortgages and other notes payable | | | |
| ت | | Other liabilities (describe | | | |
| |] | | | | |
| | 23 | Total liabilities (add lines 17 through 22) | 0. | 0. | |
| | | Foundations that follow SFAS 117, check here | | | |
| | l | and complete lines 24 through 26 and lines 30 and 31 | | | |
| ces | 24 | Unrestricted | | | |
| a | 25 | Temporarily restricted | | | |
| 8 | 26 | } | | | |
| Net Assets or Fund Balances | ì | Foundations that do not follow SFAS 117, check here | | | |
| Ē | 1 | and complete lines 27 through 31. | | | |
| tsc | 27 | Capital stock, trust principal, or current funds | 0. | 0. | |
| SSe | 28 | Paid-in or capital surplus, or land, bldg., and equipment fund | 0. | 0. | |
| Ž | 29 | Retained earnings, accumulated income, endowment, or other funds | 153,774. | 211,071. | |
| Ž | 30 | Total net assets or fund balances | 153,774. | 211,071. | |
| | ١ | | 152 774 | 011 071 | |
| _ | 31 | Total liabilities and net assets/fund balances | 153,774. | 211,071. | |
| F | art | Analysis of Changes in Net Assets or Fund B | alances | | |
| 1 | Tota | I net assets or fund balances at beginning of year - Part II, column (a), line | 30 | | |
| ٠ | | st agree with end-of-year figure reported on prior year's return) | | 1 | 153,774. |
| 2 | - | r amount from Part I, line 27a | | 2 | 57,297. |
| | | er increases not included in line 2 (itemize) | | 3 | 0. |
| | | lines 1, 2, and 3 | | . 4 | 211,071. |
| | | eases not included in line 2 (itemize) | · | . 5 | 0. |
| 6 | Tota | l net assets or fund balances at end of year (line 4 minus line 5) - Part II, co | olumn (b), line 30 | 6 | 211,071. |
| | | | | | Form 990-PF (2015) |
| 52: 11 | 3511 24-1 | | | | |

| | nd Losses for Tax on | | Income | | | | _20 | -0123 | 1730 | raye 3 |
|---|--|---|--------------------------------------|---------------|----------------------------|-----------------------|--------------|-----------------------------|----------------------|-----------------------|
| (a) List and descri | be the kind(s) of property sold (ehouse; or common stock, 200 | e.g., real estate, | <u> </u> | P | low at - Purc - Dona | liase |) Date aco | quired , yr.) | (d) Date (mo., da | |
| 1a | | | | - | Done | 1011 | | | | |
| b NON | IE | | | _ | | | | | | |
| C | · | | | | | | | | | |
| d | | | | | | | | | | |
| е | | | | <u></u> | | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | | st or other basis expense of sale | | | | | or (loss)) minus (g |) | |
| a | | | |] | | | | | | |
| b | | | | | | | | | | |
| C | | | | | | | | | | |
| <u>d</u> | | _ | | | | | | | | |
| Complete only for assets showing | r asia in column (h) and owned | hy the foundation | on 12/31/69 | | | (I) C | aunc (Col | (h) on n | | |
| Gomplete only for assets showing | (j) Adjusted basis | | cess of col. (I) | | | col. (k | c), but not | . (h) gain n t less than | -0-) or | |
| (i) F.M.V. as of 12/31/69 | as of 12/31/69 | | col. (j), if any | | | i | .osses (fr | om col. (h |)) ´ | |
| a | | | | | | | | | | |
| _b | | | | | | | | | | |
| C | | | | | | | | | | |
| d | | | | | | | | | | |
| <u>e</u> | | | | $\overline{}$ | | Γ | | | | |
| Capital gain net income or (net cap Net short-term capital gain or (loss if gain, also enter in Part I, line 8, c | utal loss) ¶ If (loss), enter s) as defined in sections 1222(5) | nter in Part I, line -0- in Part I, line) and (6): | 7 | } | 2_ | | | | <u> </u> | |
| If (loss), enter -0- in Part I, line 8 | olumn (c). | | | 1 | 3 | | | | | |
| Part V Qualification Ur | nder Section 4940(e) f | or Reduced | Tax on Net | Inv | estn | nent Inco | me | | | |
| If section 4940(d)(2) applies, leave thi Was the foundation liable for the secti If "Yes," the foundation does not qualit Lenter the appropriate amount in ea | on 4942 tax on the distributable y under section 4940(e). Do no | t complete this pa | art | | | | | | Yes | X No |
| (a) Base period years | (b) | | | (c) | | | | Distribi | d) ition ratio | |
| Calendar year (or tax year beginnin | g in) Adjusted qualifying | | Net value of no | onena | nable | | | of (p) divid | ded by col. | |
| 2014 | | 34,782. | | | - | 1,069. | | | 32.5 | 36950 |
| 2013 | | 28,029. 50,207. | | | | 5,800. 1,340. | | | | <u>32586</u> 27425 |
| 2012 | | 51,068. | | | + | $\frac{1,340}{7,792}$ | | | | 53901 |
| 2011 2010 | - | 31,589. | | | | 5,527. | | | | $\frac{33901}{15397}$ |
| 2010 | | 31,303. | | | | 5,567. | | | | <u> </u> |
| 2 Total of line 1, column (d) | | | | | | | 2 | | 54.0 | <u>66259</u> |
| 3 Average distribution ratio for the 5 the foundation has been in existen | | ital on line 2 by 5, | or by the number | r or ye | ars | | 3 | | 10.8 | 13252 |
| 4 Enter the net value of noncharitable | e-use assets for 2015 from Part | X, line 5 | | | | | 4 | | 7 | ,018. |
| | | | | | | | | | | |
| 5 Multiply line 4 by line 3 | | | | | | | 5 | | /3 | <u>,887.</u> |
| 6 Enter 1% of net investment incom | e (1% of Part I, line 27b) | | | | | | 6 | | | 0. |
| 7 Add lines 5 and 6 | | • | | | | | 7 | | 75 | <u>,887.</u> |
| 8 Enter qualifying distributions from | Part XII, line 4 | | | | | | 8 | | 37 | ,108. |
| If line 8 is equal to or greater than See the Part VI instructions. | line 7, check the box in Part VI, | line 1b, and comp | plete that part usir | ng a 1 | % tax | rate. | | | | |
| 523521 11-24-15 | | | | | | | | Fo | orm 990- | PF (2015 |

| 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 here □ and enter 1% of Part I, 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-) 2 0. 3 Add lines 1 and 2 3 0. 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- 6 Credits/Payments: a 2015 estimated tax payments and 2014 overpayment credited to 2015 6a | orm 990 Part V | PF (2015) SAI HIRA RAM TRUST, INC. Excise Tax Based on Investment Income (Section 494) |)(a). 4 | 4940(| b). 4940(e |). or 4 | <u>20-</u> 948 | 6129 - see i | 730 nstru | ction | Page 4 |
|--|--------------------------|---|----------|---------------|------------------|--------------|-------------------|--|--------------|-------|---------------|
| Date of ruling or detarmation letter: | | | | | | <u>// -:</u> | | | | | |
| b Domestic foundations that meet the section 4940(e) requirements in Part V, check here | | | | | | | | ļ | | | |
| of Part I, line 27b And fuller demonstrict foundations enter 27k of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). Tax unders section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, Others enter -0-) And dines 1 and 2 Subdied 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. It zero or taxs, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. It zero or taxs, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. It zero or taxs, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. It zero or taxs, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. It zero or tax, enter -0- 6 Cerdish78/aprents: 2 2015 estimated tax payments and 2014 overpayment credited to 2015 5 Exempt foreign organizations: 1 as withheld at source 6- 6 Exempt foreign organizations: 1 as withheld at source 6- 6 Exempt foreign organizations: 1 as withheld at source 6- 6 Exempt foreign organizations: 1 as withheld at source 6- 6 Exempt foreign organizations: 1 as a facility or tax use. If the total clines 5 and 6 as more than line 7, enter amount overpaid 7 Total credits and payments. Add ines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Penalty organization of 1 line 7 is more than the total of lines 5 and 6, enter the amount overpaid 1 Overpayment if line 7 is more than the total of lines 5 and 6, enter the amount overpaid 1 Overpayment if line 7 is more than 100 during the year (either directly) for political purposes (see instructions for the definition)? 1 Dent the tax of the foundation and tempt to influence any national, state, or local legislation or directly of the definition of 1 line | | | | | | | 1 | | | | 0. |
| c. All other domestic foundations enter 2% of the 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 O 3 O 4 Subsitie 4 (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. It zero or less, enter -0 - 6 Credis/Payments: 2 O 5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0 - 6 Credis/Payments: 2 SUIS estimated tax payments and 2014 overpayment credited to 2015 5 Exempt foreign organizations - tax withheld all source 6 Tax pad with application for extension of time to file (Form 8868) 6 Exercit any penants of the 18 the 50 from 8868) 7 Total credits and payments. Add times 6 altroogh 60 8 Exercit any penants of the 18 the 50 from 8868 of the 18 | | | | u 011 | .0. 170 | ſ | <u> </u> | <u> </u> | | | |
| 2 Tax under section 51t (comestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2 0 0. Add tines 1 and 2 3 0.0. Subdite 4 (momestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 0.0. Subdite 4 (moment lax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 0.0. Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 5 0. Exceptio frequents: 2 015 estimated tax poyments and 2014 overpayment credited to 2015 5 5 6 0 0. Exempt foreign organizations - tax withhelid at source 6 6 0 0. Beach organization or extension of time to file (Form 8668) 6 0 0. Beach organization organizations - tax withhelid at source 6 6 0 0. Beach organization organizations - tax withhelid at source 6 0 0. Beach organization organizations - tax withhelid at source 6 0 0. Beach organization organizations - tax withhelid at source 6 0 0. Beach organization organizations - tax withhelid at source 6 0 0. Beach organization organization - tax withhelid at source 6 0 0. Beach organization organization - tax withhelid at source 6 0 0. Beach organization organization - tax withhelid at source 6 0 0. Beach organization organization - tax withhelid at source 6 0 0. Beach organization organization - tax withhelid at source 6 0 0. Beach organization organization - tax withhelid at source 6 0 0. Beach organization organization - tax withhelid at source 6 0 0. Beach organization organization - tax withhelid at source 6 0 0. Beach organization organization - tax withhelid at source 6 0 0. Beach organization organization - tax withhelid at source 6 0 0. Beach organization organization - tax withhelid at source 6 0 0. Beach organization organization - tax withhelid at source 6 0 0. Beach organization organization - tax with a company organization organizat | | | of Par | t I. line | 12 col (b) |) | | | | | |
| 3 | | | | | | , | , | | | | 0. |
| 4 Subulbe A (income) (ax (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- 6 Credis/Payments: 2 2015 estimated tax payments and 2014 overpayment credited to 2015 5 Exempt foreign organizations - tax withheld at source 6 Backup withholding erroneously withheld 7 Total credits and payments. Add lines 8a through 8d 6c 6 6d 7 7 Total credits and payments. Add lines 8a through 8d 7 Total credits and payments. Add lines 8a through 8d 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 220 is attached 8 Tax due. If the total of lines 5 and 8 more than fire. 7 enter amount owed 9 Tax due. If the total of lines 5 and 8 more than fire. 7 enter amount ower payle 10 Overpayment. If line 7 is more than the total of fines 5 and 6, enter the amount overpaid 11 Denter the amount of line. 10 to the Credited to 2015 estimated tax. 12 Durny the tax year, dot the foundation attempt to influence any national, state, or local legislation or did it paticipate or intervene in any political campagin? 1a Durny the tax year, dot the foundation attempt to influence any national, state, or local legislation or did it paticipate or intervene in any political campagin? 1a Durny the tax year, dot the foundation attempt to influence any national, state, or local legislation or did it paticipate or intervene in any political campagin. 1b Did spend more than \$100 during the year (either directly) into political purposes (see instructions for the definition)? 1 the answer is "Yes" to ta or 1b, attach a detailed description of the activities. 2 Did the foundation his Form 112P-DL for this year? 3 Line answer is "Yes" to a rib, attach a detailed description of the activities. 3 Has the foundation engaged in any activities that have not previously reported to the IRS? 1 "Yes," attach a detailed description of the activities. 3 Has the foundation have unrelated business pross income of \$1,000 or more dur | | · · · · · · · · · · · · · · · · · · · | | , | | | | | | | |
| 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- Credits/Payments: a 2015 estimated tax payments and 2014 overpayment credited to 2015 b Exempt foreign organizations - tax withheld at source 6 | | | thers e | nter -0- | ١ | | | | | | |
| 6. Credits/Payments: a 2015 estimated tax payments and 2014 overpayment credited to 2015 be Easempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) be Easempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) be Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached c Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached c Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached c Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached c Enter any penalty for underpayment of estimated tax. Payment of the form 2220 is attached c Enter any penalty for underpayment of estimated tax. Payment of the form 2220 is attached c Tax Ade. If the close if the form 2220 is attached c Tax Ade. If the control of the source of the form 2220 is attached c Tax Ade. If the control of the source of the form 2220 is attached c Tax Ade. If the control of the control of the set of the form 2220 is attached c Tax Ade. If the control of the control of the set of the source of the definition of the control of the control of the set of the | | • | | | , | | | | | _ | |
| a 2015 estimated tax payments and 2014 overpayment credited to 2015 b Exempt foreign organizations - tax withheld at source 1 Tax paid with application for extension of time to file (Form 8868) 6 Backup withholding erroneously withheld 7 Total credits and payments. Add times 6a through 6d 7 Total credits and payments. Add times 6a through 6d 7 Total credits and payments. Add times 6a through 6d 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 hie 7, enter amount ower 100 overpayment (file 7 is more than the total of lines 5 and 8, enter in amount ower 11 the 100 obe. Credited to 2016 estimated tax. ► Refunded ► 10 Description of the 100 obe. Credited to 2016 estimated tax. ► Refunded ► 11 Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a 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? 1b Did is spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1b X Statements Texa the state of the foundation in connection with the activities. 1c Did the foundation hie Form \$120-Pol. for tims year? 2 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 2 In On the foundation in Provincial expenditures (section 4955) imposed during the year: 3 In Character the amount (if any) paid by the foundation during the year for political expenditure tax implosed on foundation managers. ► \$ 0. 2 (2) On foundation managers. ► \$ 0. \$ 2 X X In the foundation engaged in any activities that have not previously been reported to the iRS? 1 If Yes, attach a detailed description of the activities. 1 If Yes, attach a detailed description of the activi | | | | | | | | <u> </u> | | | |
| b Exempt foreign organizations - fax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 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 6 is more than here 7, enter amount over 6 10 Overpayment If (line 7 is more than the total of lines 5 and 6, enter fine amount overpaid 1 Enter the amount of line 10 to be. Credited to 2016 estimated tax. Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participates or interview in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participates or interview in any political campaign? 1b Did is 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. 2 Did the foundation if Porm 1120-POL for this year? 3 Ce Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. S | | | 6a | 1 | | | ŀ | | | | |
| E Tax goal with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 8 ☐ Overpayment if line 7 is more than the total of lines 5 and 8, enter the amount owed 9 ☐ Overpayment if line 7 is more than the total of lines 5 and 8, enter the amount owerpaid 10 Coverpayment 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 2016 eartinated tax ▶ Part VII-A Statements Regarding Activities 12 During the tax year, dot the foundation attempt to influence any national, state, or local legislation or did nt participate or intervene in any political campain? 12 Dut is spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 13 During the tax year, dot the foundation attempt to influence any national, state, or local legislation or did nt participate or intervene in any political campain? 2 Dut it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 14 If the answer is "Yes" to 1e or 1b, attach a detailed description of the activities. 15 Dut it spend more than \$100 during the year? 16 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 17 On the foundation. Part Part Part Part Part Part Part Part | | | | | | | | | | | |
| Backup withholding erroneously withhold Total cerdits and payments. Add lines 6 a through 6 d Total cerdits and payments. Add lines 6 a through 6 d Total cerdits and payments. Add lines 6 a through 6 d Total cerdits and payments. Add lines 5 and 8 is more than line 7, enter amount owed Selfer any penalty for underpayment of estimated tax. Check here If Form 2220 is attached Total cerdits and in the 10 lines 5 and 8 is more than line 7, enter amount owed Total cerdits and in the 10 lines 5 and 8 is more than line 7, enter amount overpaid Tenter the amount of line 10 to be: Gredited to 2016 estimated tax. Total cerdits and the 11 lines | | | 6c | 1 | | | ĺ | İ | | | |
| 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of sestimated tax. Check here | | • | _ | 1 | | | 1 | ł | | | |
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| 10 Overpayment If fine 7 is more than the total of fines 5 and 8, enter the amount of line 10 to be: Credited to 2016 estimated tax ► Refunded ► 11 Tenter the amount of line 10 to be: Credited to 2016 estimated tax ► Refunded ► 11 | | | | | | • | | | | | 0. |
| 11 Enter the amount of line 10 to be: Credited to 2016 estimated tax ▶ Refunded ▶ 11 Part VII-A Statements Regarding Activities Statement Regured by General Instruction of the definition)? In the sayer is the state sto which the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? In the sayer 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. In 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. In the foundation in the Form 1120-POL for this year? It is X X If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities. O | | | | | | | | | | | <u> </u> |
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| 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? 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV 7 X 8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ NJ b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation 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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV 9 X 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X | 6 Are | the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e | ither: | | | | | | | | |
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| 8a Enter the states to which the foundation reports or with which it is registered (see instructions) NJ b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation 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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV 9 X 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X | rem | ain in the governing instrument? | | | | | | | 6 | | <u>X</u> |
| NJ b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation 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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV 9 X 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X | 7 Did | the foundation have at least \$5,000 in assets at any time during the year? If "Yes," cor | nplete | Part II | , col (c), and | Part X\ | / | | _7_ | _X_ | |
| NJ b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation 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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV 9 X 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X | | | | | | | | | | | |
| b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation 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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV 9 X 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X | | | ns) 🕨 | · | | | | | | | |
| of each state as required by General Instruction G? If "No," attach explanation 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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X | | | Horney | / Gener | I (or designate | | | | | 1 | |
| 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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X | | · | | , 4011616 | n toi acsihiian | •1 | | | 8h | x | |
| year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X | | , | ection 4 | 1942/11/ | 3) or 4942/1/F |) for cal | ender | | 00 | ^ | - |
| 10 Did any persons become substantial contributors during the tax year? it "Yes," attach a schedule listing their names and addresses. 10 X | | | | | | , ioi oaii | uai | | | } | x |
| | - | | | | | | | | | | X |
| | .0 010 | any paradia department of the paradia deling the tax year in tes, attach a screen | nau(I) | H WIGHT HE | mas and addition | | | Fo | |)-PF | |

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Form 990-PF (2015)

| orm 990-PF (2015) SAI HIRA RAM TRUST, INC. | 4700 Mary Dr. F | 5 | 20-6129 | <u>/30</u> | Page 6 |
|---|---|-----------------------------|--|-----------------|------------------------|
| Part VII-B Statements Regarding Activities for Which F | -orm 4/20 May Be F | Required (contin | ued) | | |
| •5a During the year did the foundation pay or incur any amount to: | | | | | İ |
| `(1) Carry on propaganda, or otherwise attempt to influence legislation (section | · · · · | | es 🗶 No 📗 | - 1 | |
| (2) Influence the outcome of any specific public election (see section 4955); o | r to carry on, directly or indire | | | | |
| any voter registration drive? | | · | 8 X No | ŀ | |
| (3) Provide a grant to an individual for travel, study, or other similar purposes | ? | . L Yo | es 🗶 No | | |
| (4) Provide a grant to an organization other than a charitable, etc., organization | n described in section | | | | } |
| 4945(d)(4)(A)? (see instructions) | | Y | es 🗶 No 📗 | | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, | or educational purposes, or f | for | | | |
| the prevention of cruelty to children or animals? | | Y | s X No | | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und | der the exceptions described i | in Regulations | ĺ | ļ | |
| section 53.4945 or in a current notice regarding disaster assistance (see instru | ctions)? | | N/A | 5b | |
| Organizations relying on a current notice regarding disaster assistance check h | ere | | | | |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr | om the tax because it maintai | ıned | | | |
| expenditure responsibility for the grant? | N | I/A 🔲 Y | es 🔲 No 📗 | 1 | |
| If "Yes," attach the statement required by Regulations section 53.4945 | 5-5(d). | | | | |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to p | pay premiums on | | İ | | |
| a personal benefit contract? | • | Y | s X No | | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | ersonal benefit contract? | | | 6b | X |
| If "Yes" to 6b, file Form 8870. | | | İ | | |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s | helter transaction? | ☐ Y | s X No | 1 | |
| b If "Yes," did the foundation receive any proceeds or have any net income attribu | | | N/A | 7b | |
| Part VIII Information About Officers, Directors, Trusto | | nagers, Highl | | | |
| Paid Employees, and Contractors | | | | | |
| List all officers, directors, trustees, foundation managers and their | compensation. | | | | |
| | (b) Title, and average hours per week devoted | (c) Compensation | (d) Contributions to employee benefit plans and deferred | (e) | Expense ount, other |
| (a) Name and address | to position | (If not paid, enter -0-) | and deferred compensation | acco | ount, other owances |
| | • | | , | 1 | |
| | | | | | |
| SEE STATEMENT 4 | | 0. | О. | _ | 0. |
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| | | | | | |
| Compensation of five highest-paid employees (other than those inc | luded on line 1). If none, | enter "NONE." | | | |
| | (b) Title, and average | - | (d) Contributions to employee benefit plans and deferred | (e) | Expense |
| (a) Name and address of each employee paid more than \$50,000 | hours per week devoted to position | (c) Compensation | and deferred compensation | acco | ount, other owances |
| NONE | | | | 1 | |
| | | | | | |
| | | - | | 1 | |
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| | | 1 | | | |
| otal number of other employees paid over \$50,000 | | | | | 0 |
| Case | - | •• | Form | n QQ ∩_l | PF (2015) |
| | | | rull | . 550-1 | · • (2015) |

| Form 990-PF (2015) SAI HIRA RAM TRUST, INC. 20- | 6129730 Page 7 |
|--|---------------------------|
| Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) | |
| 3 Five highest-paid independent contractors for professional services. 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 Part IX-A Summary of Direct Charitable Activities | ▶ 0 |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | Expenses |
| 1 DEVELOPMENT AND ASSISTANCE IN THE ADVANCEMENT OF RELIGIOUS BELIEFS FOR THE ORGANIZATION. PROVIDE A PLACE OF OCCUPANCY FOR THE ORGANIZATON'S MEMBERS TO DISCUSS RELIGION. | 151,006. |
| 2 | |
| 3 | |
| 4 | |
| Part IX-B Summary of Program-Related Investments | |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. | Amount |
| 1 N/A | |
| 2 | |
| | |
| All other program-related investments. See instructions. 3 | _ |
| Total Add Inco 1 through 2 | 0. |
| Total. Add lines 1 through 3 | Form 990-PF (2015) |

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Form **990-PF** (2015)

37,108.

5

6

income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2014 | (c) 2014 | (d) 2015 |
|--|---------------|--|---|---------------------------|
| 1 Distributable amount for 2015 from Part XI, | | | <u> </u> | |
| line 7 | | | | 351. |
| 2 Undistributed income, if any, as of the end of 2015 | 1 | | | i |
| a Enter amount for 2014 only | | | 0. | |
| b Total for prior years: | | 0 | | |
| 3 Excess distributions carryover, if any, to 2015: | | 0. | | <u> </u> |
| a From 2010 31, 313. | ļ | | | |
| b From 2011 50, 678. | | | | |
| c From 2012 49,640. | Ì | | | |
| d From 2013 27,739. | | | | |
| e From 2014 34,729. | | | | |
| f Total of lines 3a through e | 194,099. | | | |
| 4 Qualifying distributions for 2015 from | 194,099. | | | |
| Part XII, line 4: > \$37,108. | | |] | |
| a Applied to 2014, but not more than line 2a | | | ο. | |
| b Applied to undistributed income of prior | | | | |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | | | <u>, , , , , , , , , , , , , , , , , , , </u> | |
| (Election required - see instructions) | 0. | l | | |
| d Applied to 2015 distributable amount | | | | 351. |
| e Remaining amount distributed out of corpus | 36,757. | | | 331. |
| 5 Excess distributions carryover applied to 2015 | 0. | ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- · | | 0. |
| (If an amount appears in column (d), the same amount must be shown in column (a)) | | | | <u> </u> |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 230,856. | | ļ | |
| b Prior years' undistributed income. Subtract | | | | |
| line 4b from line 2b | | 0. | | |
| e 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 2014. Subtract line | } | | _ | |
| 4a from line 2a. Taxable amount - see instr. | | <u>. </u> | 0. | |
| f Undistributed income for 2015. Subtract | | | 1 | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2016 | | | <u> </u> | 0. |
| 7 Amounts treated as distributions out of | | | | |
| corpus to satisfy requirements imposed by | | | 1 | |
| section 170(b)(1)(F) or 4942(g)(3) (Election | 0 | | | |
| may be required - see instructions) | 0. | | | |
| 8 Excess distributions carryover from 2010 | 21 212 | | | |
| not applied on line 5 or line 7 | 31,313. | | | |
| 9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a | 199,543. | | | |
| · ' | 133,343. | | | |
| 10 Analysis of line 9: a Excess from 2011 50,678. | | | 1 | 1 |
| b Excess from 2012 49,640. | | | | |
| c Excess from 2013 27,739. | | | | |
| d Excess from 2014 34,729. | | | | |
| e Excess from 2015 36,757. | | | | |
| 522581 11-24-16 | | | | Form 990-PF (2015) |

| 1 s. al the foundation has recoved a ruling or determination letter that it is a private operating foundation, and the ruling is effective of 2015, after the date of the ruling foundation of the subjects of the subject of the subje | | A RAM TRUST | | | | 29730 Page 10 |
|---|--|--|-----------------------------|-----------------------------|---------------------------------------|---------------------------|
| foundation, and the ruling is effective for 2015, enter the date of the ruling 2 a First he lesser of the adjusted met immoration described in section 4942(1)(3) or 4942(1)(5) 2 a First he lesser of the adjusted met immore from Part X1 for examinating more from Part X1 for examinating more from Part X1 for exact year listed 8 5% of line 2 a Causilying dark buttons from Part X1, him 4 for each year sisked A Amounts encloded in line 2 a not used of excitor of each year sisked A Amounts encloded in line 2 a not used directly for active conflict of exempt activities Coulsilying destributions made derectly for active conflict of exempt activities Coulsilying destributions made derectly for active conflict of exempt activities Subtraced line 2 for form line 2 a situation to the conflict of exempt activities Subtraced line 2 form line 2 a situation to the conflict of exempt activities 3 alternative test exists approximate the conflict of exempt activities 3 alternative test exists approximate the conflict of exempt activities and the conflict of exempt activities and the conflict of exempt activities and the conflict of exempt activities 4 Support alternative test - exists 2 of minimum measurement return 1 of a support activities and the conflict of exempt | Part XIV Private Operating F | oundations (see in | structions and Part V | I-A, question 9) | N/A | |
| S Owner box to midicale whether the foundation is a grivate operating foundation described in section 3 4942(NJS) or 4942(NJS) or 1942 as a corner from Part for the minimum was seriment reflored to the minimum (a) 2015 (b) 2014 (c) 2013 (d) 2012 (e) Total was resulted to 18 xyser intend (a) 2015 (b) 2014 (c) 2013 (d) 2012 (e) Total 2015 (b) 2014 (c) 2013 (d) 2017 (e) Total 2015 (b) 2014 (c) 2013 (d) 2017 (e) Total 2015 (b) 2014 (c) 2013 (d) 2017 (e) Total 2015 (b) 2014 (c) 2013 (d) 2017 (e) Total 2015 (b) 2014 (c) 2013 (d) 2017 (e) Total 2015 (c) 2018 (d) 2018 (d) 2014 (e) 2013 (d) 2017 (e) Total 2015 (e) 2018 (e) 2 | 1 a If the foundation has received a ruling of | r determination letter that | t it is a private operating | | | |
| 2 a Enter the lesser of the adjusted net recome from Part X for section from Part X for section from Part X for section from Part X for section from Part X for section from Part X for section from Part X for section from Part X for section from Part X for section from Part X for section from Part X for section from Part X for section from Part X for section from Part X for section from Part X for section from Part X for section from Part X for from Part X for section from Part X for section from Part X for from Part X for section from Part X for sectio | foundation, and the ruling is effective for | r 2015, enter the date of t | the ruling | ▶ | | |
| Income from Part I to the minimum (a) 2015 (b) 2014 (c) 2013 (d) 2012 (e) Total minimums interest in the Part X for each year listed b 85% of line 2a Chashying destributions from Part XII, line 4 for each year listed on Highly and ship to the control of the co | b Check box to indicate whether the found | lation is a private operatii | ng foundation described | in section | 4942(J)(3) or 49 |)42(j)(5) |
| Invisional return from Part XI for each year licited 8 80% of line 23 C Qualishing distributions from Part XII, limited for each year licited A monuter included in line 25 and used directly for active conduct of exempt activities. Subtractive and 25 active conduct of exempt activities. Subtractive and 25 active conduct of exempt activities. Subtractive and 25 active conduct of exempt activities. Subtractive and 25 active conduct of exempt activities. Subtractive and 25 active conduct of exempt activities. Subtractive and 25 active conduct of exempt activities. Subtractive activities and activities are activities and activitie | 2 a Enter the lesser of the adjusted net | | | | | |
| each year listed 8 8% of the 2e Coulshym distributions from Part XII, her 4 for each year listed Amounts michigated in the 2-not used decity for active conduct of exempt activities Coulshym distributions made decity for active conduct of exempt activities. Subtract line 2d from time 2c Complete 8a, for or for the alternative test relied ignor: Asserts' afformative test - enter: (1) Value of all assets (2) Value of all assets (2) Value of all assets (2) Value of all assets (3) Value of all assets (1) Value of all assets (1) Value of all assets (2) Value of all assets (3) Value of all assets (3) Value of all assets (4) Value of all assets (5) Value of all assets (1) Value of all assets (1) Value of all assets (2) Value of all assets (3) Value of all assets (1) Value of all assets (1) Value of all assets (2) Value of all assets (3) Value of all assets (4) Value of all assets (5) Value of all assets (6) Value of all assets (7) Value of all assets (8) Value of all assets (8) Value of all assets (8) Value of all assets (9) Value of all assets (1) Value of all assets (1) Value of all assets (1) Value of all assets (1) Value of all assets (1) Value of all assets (1) Value of all assets (1) Value of all assets (1) Value of all assets (1) Value of all assets (1) Value of all assets (1) Value of all assets (1) Value of all assets (1) Value of all assets (1) Value of all assets (2) Valu | income from Part I or the minimum | (a) 2015 | (b) 2014 | (c) 2013 | (d) 2012 | (e) Total |
| 8.85% of time 2s Qualifying distributions from Part XII, fine 4 for such year islated A Amounts included in line 2s not used directly for active conduct of exempl activities Clualifying distributions made directly for active conduct of exempt activities Subtract line 2d drom line 2s Complete 3s, b, or of to the alternative test - enters (1) Value of assets qualifying under school 4942()(3)(8)(b) 5 Endowment alternative test - enters (2) Value of assets qualifying under school 4942()(3)(8)(b) 5 Endowment alternative test - enters (2) Value of assets qualifying under school 4942()(3)(8)(b) 5 Endowment alternative test - enters (2) Value of assets qualifying under school 4942()(3)(8)(b) 5 Endowment alternative test - enters (3) Value of assets qualifying under school 4942()(3)(8)(b) 5 Endowment alternative test - enters (3) Value of assets qualifying under school 4942()(3)(8)(b) 5 Endowment alternative test - enters (3) Value of assets qualifying under school 4942()(3)(8)(b) 5 Endowment alternative test - enters (1) Total pupport other them gross understand income (officers), some in Part X V Supplementary test - enters (3) Endowment alternative test - enters (3) Endowment alternative test - enters (4) Endowment alternative test - enters (4) Endowment alternative test - enters (4) Endowment alternative test - enters (4) Endowment alternative test - enters (4) Endowment (4) Endowment (4) Endowment (4) | investment return from Part X for | | | | | |
| Couplets by, for city conductor of sempt activities. Subtract in a discretify in active conduct of sempt activities. Subtract in a 2d from line 2 or outside directly for active conduct of sempt activities. Subtract in a 2d from line 2 or of sempt activities. Subtract line 2d from line 2 or of the salterative test relad upon. Complete by, for city conductives and conductives. Subtract line 2d from line 2 or of the salterative test relad upon. Complete by, for city conductives and conductives. Subtract line 2d from line 2 or of the salterative test relad upon. Complete by, for city conductives. Complete by, for city conductives. Subtract line 2 or of the salterative test ones. Complete by, for city conductives. Complete by, for city conductives. Complete by, for city conductives. Subtract line 2 or of the salterative test ones. Subtract line 2 or of the salterative test ones. Subtract line 2 or of the salterative test ones. Conductives and s | each year listed | | ĺ | Ì | | |
| Inter 4 for such year leated 4 Amounts michaded mine 2c not used directly for active conduct of exempt activates 6 Usuallying distributions made directly for active conduct of exempt activates. Subtract he 2d from time 2c 3 Complete 3a, b, or c for the alternative test - enter: (1) Yallue of assets qualitying under section 492(I)(3)(8)(1)(1) 5 Endowment alternative test - enter: (2) Value of assets qualitying under section 492(I)(3)(8)(1)(1) 5 Endowment alternative test - enter: (3) Ornaminamin resistance return return return return return resistance return ret | b 85% of line 2a | | | | | |
| Inter 4 for such year leated 4 Amounts michaded mine 2c not used directly for active conduct of exempt activates 6 Usuallying distributions made directly for active conduct of exempt activates. Subtract he 2d from time 2c 3 Complete 3a, b, or c for the alternative test - enter: (1) Yallue of assets qualitying under section 492(I)(3)(8)(1)(1) 5 Endowment alternative test - enter: (2) Value of assets qualitying under section 492(I)(3)(8)(1)(1) 5 Endowment alternative test - enter: (3) Ornaminamin resistance return return return return return resistance return ret | c Qualifying distributions from Part XII. | | | | | |
| A Amounts included in line 2s not used directly for active conduct of exempt activities. © Gualitying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2s Complete 3a, or 5 or the alternative last relate; (1) Value of all assets (2) Value of all assets qualifying under section 4942(0)(3)(2)(3) Endowment State view of upon: "Section 4942(0)(3)(2)(3)(3)(3)(3)(3)(3)(3)(3)(3)(3)(3)(3)(3) | , , | | } | 1 | | 1 |
| used directly for active conduct of exempt activities Cualilying distributions made directly for active conduct of exempt activities Subtract in 24 from line 25 Complete 3a, b, or c for the attended upon: * Assets' alternative lest - enter: (1) Yalue of assets qualilying under section 492(()(3)(b)()) * Endowment' alternative test - enter: (2) Value of assets qualilying under section 492(()(3)(b)()) * Endowment' alternative test - enter: (3) of mnamm investment return shown in Part X, line 6 for each year losted * Support alternative test - enter: (1) Total support other than gross investment income (interest, dividents, citiss, payments on 512(a)(5)), or royaltes) (2) Support alternative test - enter: (1) Total support other than gross investment income (interest, dividents, citis, payments on 512(a)(5)), or royaltes) (2) Support alternative test - enter: (3) Total support other than gross investment income (interest, dividents, citis, payments on 512(a)(5)), or royaltes) (2) Support alternative test - enter: (3) I alternative test - enter: (4) Gross coverstment encome Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) 1 Information Regarding Foundation Manager: a List any managers of the foundation Manager: a List any managers of the foundation had seen the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. NONE b List any managers of the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gits, grants, etc. see instructions is to represent other conditions, complete terms 2a, b, c, and d. a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed: b The form in which applications should be submitted and information and materials they s | · · | | | | | |
| exempt activatives • Qualitying distributions made directly for active conduct of exempt activates. Subtract line 2 of from line 2 c Complete 3d, or c for the alternative lest rated upon of the alternative lest rated upon of the alternative lest rated upon of the alternative lest rated upon of the control of the alternative lest rated upon of the control of the c | | | } | | | |
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| NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here ► X if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed: b The form in which applications should be submitted and information and materials they should include: c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: | b List any managers of the foundation wh | | | (or an equally large por | tion of the ownership of a p | artnership or |
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| Check here X if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed: b The form in which applications should be submitted and information and materials they should include: c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: | | | | | | |
| the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed: b The form in which applications should be submitted and information and materials they should include: c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: | | | | | | |
| a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed: b The form in which applications should be submitted and information and materials they should include: c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: | | | | | | |
| b The form in which applications should be submitted and information and materials they should include: c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: | | ` | | | | 0. |
| c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: | a The name, address, and telephone num | ber or e-mail address of | the person to whom app | lications should be addr | essed: | |
| c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: | | | | | | |
| d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: | b The form in which applications should t | pe submitted and informa | ition and materials they s | should include: | | |
| d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: | c Any submission deadlines: | | | | | |
| | · · · · · · · · · · · · · · · · · · · | | -1 | londo et esta e | - Alban facts | |
| 523601 11-24-15 | a Any restrictions or limitations on award | s, such as by geographic | ai areas, charitable fields | s, kinas of institutions, o | r otner tactors: | |
| | 523601 11-24-15 | | | | | Form 990-PF (2015) |

 Part XVI-A Analysis of Income-Producing Activities

| | l Unrelated t | usiness income | Excluded t | y section 512, 513, or 514 | (a) |
|--|---|----------------|-----------------------|----------------------------|---------------------------------------|
| nter gross amounts unless otherwise indicated. | (a) Business | (b) Amount | (C) Exclu- sion | (d) Amount | (e) Related or exempt function income |
| 1 Program service revenue. a | code | Amount | code | Amount | iditetion income |
| b | | | | | |
| d | | | | | |
| e | | | -++- | | |
| 1 | | | | | |
| g Fees and contracts from government agencies | | | | | |
| Membership dues and assessments | | | | | |
| Interest on savings and temporary cash | | | | | |
| investments | | | | | |
| Dividends and interest from securities | | | | | |
| Net rental income or (loss) from real estate: | | | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| Net rental income or (loss) from personal | } | | | | |
| property Other investment income | | | | | |
| Gain or (loss) from sales of assets other | | | | | |
| than inventory | 1 | |] [| | |
| Net income or (loss) from special events | | | _ | | |
| Gross profit or (loss) from sales of inventory | | | | | |
| Other revenue: | | | | | |
| a | _ | | | | |
| b | _ | | | | |
| ^ | | | | | |
| C | - - | | | | |
| d | , , | | | | |
| d | , , | | | | |
| eSubtotal. Add columns (b), (d), and (e) | , , | | 0. | | |
| d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) | | |). | | • |
| e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations. | | | | 13 | |
| d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities ine No. Explain below how each activity for which in | to the Accordance to the second come is reported in | nplishment of | Exempt P | 13 Jurposes | |
| d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities | to the Accordance to the second come is reported in | nplishment of | Exempt P | 13 Jurposes | |
| d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities ine No. Explain below how each activity for which in | to the Accordance to the second come is reported in | nplishment of | Exempt P | 13 Jurposes | |
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| d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities ine No. Explain below how each activity for which in | to the Accordance to the second come is reported in | nplishment of | Exempt P | 13 Jurposes | |
| d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities ine No. Explain below how each activity for which in | to the Accordance to the second come is reported in | nplishment of | Exempt P | 13 Jurposes | |
| d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities ine No. Explain below how each activity for which in | to the Accordance to the second come is reported in | nplishment of | Exempt P | 13 Jurposes | |
| d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities line No. Explain below how each activity for which in | to the Accordance to the second come is reported in | nplishment of | Exempt P | 13 Jurposes | |
| d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities line No. Explain below how each activity for which in | to the Accordance to the second come is reported in | nplishment of | Exempt P | 13 Jurposes | |
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| d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities ine No. Explain below how each activity for which in | to the Accordance to the second come is reported in | nplishment of | Exempt P | 13 Jurposes | |
| d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities ine No. Explain below how each activity for which in | to the Accordance to the second come is reported in | nplishment of | Exempt P | 13 Jurposes | |

Form 990-PF (2015)

P00182582

(973) 773-4111

Firm's EIN \triangleright 22-3261359

Phone no.

Paid

Preparer

Use Only

JOSEPH FERRER

Firm's name ► MARCHIONDA & FERRER,

CLIFTON, NJ 07013

Firm's address ▶ 950 CLIFTON AVE.

04/28/17

| FORM .990-PF | F ACCOUNTING FEES STATE | | | | |
|---|---|-----------------------------------|-------------------------------|---|--|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | |
| ACCOUNTING | 2,700. | 0. | 0. | 2,700. | |
| TO FORM 990-PF, PG 1, LN 16B | 2,700. | 0. | 0. | 2,700. | |
| - | | | | | |
| FORM 990-PF | TAX | ES | S1 | ATEMENT 2 | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | |
| NJ ANNUAL FILING FEES | 115. | 0. | 0. | 115. | |
| TO FORM 990-PF, PG 1, LN 18 | 115. | 0. | 0. | 115. | |
| FORM 990-PF | OTHER E | XPENSES | Si | CATEMENT 3 | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | |
| REPAIRS & MAINTENANCE INSURANCE UTILITIES OFFICE EXPENSE BANK CHARGES | 4,038. 3,374. 3,028. 590. 38. | | 0. 0. 0. 0. | 4,038. 3,374. 3,028. 590. 38. | |
| TO FORM 990-PF, PG 1, LN 23 | 11,068. | 0. | 0. | 11,068. | |

| | - LIST OF OFFICERS, DIRECTORS STATEMENT ES AND FOUNDATION MANAGERS | | | | | | |
|--|--|-------------------|---------------------------------|--------------------|--|--|--|
| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | COMPEN- SATION | EMPLOYEE BEN PLAN CONTRIB | EXPENSE ACCOUNT | | | |
| SURESH R. THANI 4 DRIFT WAY ROSELAND, NJ 07068 | PRESIDENT 10.00 | 0. | 0. | 0. | | | |
| DEEPAK MANJANI 4 DRIFT WAY ROSELAND, NJ 07068 | DIRECTOR 10.00 | 0. | 0. | 0. | | | |
| GHANSHAM SHAMDASANI 25 STONEBRIDGE CT LITTLE FALLS, NJ 07424 | DIRECTOR 10.00 | 0. | 0. | 0. | | | |
| NANDA H. MAHTANI 4 DRIFT WAY ROSELAND, NJ 07068 | DIRECTOR 10.00 | 0. | 0. | 0. | | | |
| KUMAR H. MAHTANI 4 DRIFT WAY ROSELAND, NJ 07068 | DIRECTOR 10.00 | 0. | 0. | 0. | | | |
| TOTALS INCLUDED ON 990-PF, I | PAGE 6, PART VIII | 0. | 0. | 0. | | | |