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Department of the Treasury

Internal Revenue Service

**Return of Organization Exempt From Income Tax** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

Α	For the	2008 calendar year, or tax year beginning DEC 1, 2008 and ending	<u>NOV 30, 2009</u>	
В	Check if	Please C Name of organization	D Employer identific	cation number
_	applicable	USE IRS VIVEK WELFARE AND EDUCATIONAL		
	Addres change	FOUNDATION, INC.		
	Name change	type Doing Business As	59-3	623323
	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/su	ite E Telephone numbe	r
	Termin- ation	Specific   5200 VINELAND ROAD, SUITE 200	(407	) 352-7275
	Amend return	city or town, state or country, and ZIP + 4	G Gross receipts \$	6,731,660.
	Applica	OKLANDO, FL 32011	H(a) Is this a group re	eturn
	pendin	F Name and address of principal officer BRAHAM AGGARWAL	for affiliates?	Yes X No
		9030 SOUTHERN BREEZE DR, ORLANDO, FL 3283	6 H(b) Are all affiliates inc	luded? Yes Mo
1	Tax-exe	mpt status X 501(c) ( 3 ) ◀ (insert no ) 4947(a)(1) or 527	If "No," attach a	list (see instructions)
J	Website	e:▶ N/A	H(c) Group exemptio	n number
K	Type of o	organization: X Corporation Trust Association Other ▶ L Yi	ear of formation: 1999 N	State of legal domicile: FL
P	art I	Summary		
ø	1 8	Briefly describe the organization's mission or most significant activities THE PURPO	OSE OF THIS O	RGANIZATION_
Governance	:	IS TO MAKE GRANTS TO FOUR SPECIFIED PUBLIC C	HARITIES AND	<del></del>
rne	2 (	Check this box 🕨 🔲 if the organization discontinued its operations or disposed of m	ore than 25% of its asset	S
ove.	3 1	Number of voting members of the governing body (Part VI, line 1a)	3	6
		fumber of independent voting members of the governing body (Part VI, line 1b)	4	4
Activities &	5	otal number of employees (Part V, line 2a)	5	0
<u>ķ</u>	6	Total number of volunteers (estimate if necessary)	6	0
Ċ	7a -	otal gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0.
٩	b 1	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
			Prior Year	Current Year
<b>o</b>	8	Contributions and grants (Part VIII, line 1h)		
nue	9 1	Program service revenue (Part VIII, line 2g)		
Revenue	10 !	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	102,126.	2,955,252.
<b>—</b>	11 (	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	973.	4,085.
_	12	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	103,099.	2,959,337.
	13 (	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	279,655.	88,657.
	14 8	Benefits paid to or for members (Part IX, column (A), line 4)		
S	15 9	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
Expenses	16a F	Professional fundraising fees (Part IX, column (A), line 11e)		
x	b b	Total fundraising expenses (Part IX, column (0) three 25)		
Ŵ	17 (	Other expenses (Part IX, column (A), lines 11a Fro. 17:241).	28,159.	593,728.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line	307,814.	682,385.
_	1 13 1	revenue less expenses subtract in the (with only in the 127 f) (177 f) 177 f	<204,715.	<u>&gt; 2,276,952.</u>
Net Assets or	<u> </u>	<u> </u>	Beginning of Year	End of Year
sets	ੂੰ 20 <sup>-</sup>	Fotal liabilities (Part X, line 16)  OGDEN, UT	49,937,236.	<u>52,214,637.</u>
t As	21	Total liabilities (Part X, line 26)	1,153.	1,602.
_	_	Net assets or fund balances Subtract line 21 from line 20	49,936,083.	52,213,035.
P	art II	Signature Block		
		Under penalties of perjury, I declare that I be seemined this refern, including accompanying schedules and statemer and complete. Declaration of preparer has any knowler bed on all information of which preparer has any knowler.	its, and to the best of my knowled dge	ge and belief, it is true, correct,
		MM -		2 10
Sig	yn		10-1	5-10
He	re	Signature of officer	Date	
		BRAHAM ACCARWAL SURESH GUPTA		
_		Type or print name and title		
Pai	.a	Preparer's Date		er's identifying number structions)
	parer's		æmployed ▶ L	
	Only	Firm's name (or / AVERETAT WARMUS DURKEE OSBURN HENNING yours if	G, PA EIN ►	
USI		self-employed), address and 1417 E. CONCORD STREET		
_		ZIP+4 ORLANDO, FL 32803	Phone no. ► (	<u>407)</u> <u>849-1569</u>
Ma	y the IF	S discuss this return with the preparer shown above? (see instructions)		X Yes No
832	001 12-18	LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate	instructions.	Form <b>990</b> (2008)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form 990 (2008)

orm	VIVEK WELFARE AND EDUCATIONAL 1990 (2008) FOUNDATION, INC 5	59-3623323	Page <b>2</b>
Pa	rt III Statement of Program Service Accomplishments (see instructions)		
1	Briefly describe the organization's mission THE ORGANIZATION IS A SUPPORTING ORGANIZATION TO FOUR SPE CHARITIES AND ORGANIZATIONS SUPPORTED BY THESE CHARITIES.		LIC
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  If "Yes", describe these new services on Schedule O.		X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes", describe these changes on Schedule O	Yes	X No
4	Describe the exempt purpose achievements for each of the organization's three largest program services by experiments for each of the organization's three largest program services by experiments for each formula for the largest program service report the amount of graph allocations to others, the total expenses, and revenue, if any, for each program service reported		
4a	(Code. ) (Expenses \$ 76,804. including grants of \$ 76,804.) (Reverge PAYMENT TO HINDU UNIVERSITY OF AMERICA TO PROVIDE VEDIC/FEDUCATION.		'RAL
4b	(Code ) (Expenses \$ 10,001. including grants of \$ 10,001.) (Reverse PAYMENT TO HINDU SWAYAMSEVAK TO PROVIDE VEDIC/HINDU CULTU		TON.
	PAIMENT TO HINDO SWATAMSEVAR TO PROVIDE VEDIC/HINDO COLIC	RAII EDUCAT	ION
4c	(Code ) (Expenses \$ 501. including grants of \$ 501.) (Reverence PAYMENT TO HINDU SWAYMSEVAK TO PROVIDE VEDIC/HINDU CULTURE)		ON.

4d Other program services (Describe in Schedule O)

4e Total program service expenses ►\$

of \$ 1,351.) (Revenue \$ 88,657. (Must equal Part IX, Line 25, column (B).) 1,351. including grants of \$ (Expenses \$

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		_X_
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4_		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice		i	
	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	_X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		X
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the US?	14a		X_
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity			
	located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	_X_	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		_X_
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K			
	If "No", go to question 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	_X_	
þ	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a		}	
	prior year? If "Yes," complete Schedule L, Part I	25b		<u>X</u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u>X</u> _
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial		1	
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		<u> </u>
		Form	990 /	วกกลา

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Form 990 (2008) FOUNDATION, INC.

Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		<u> X</u>
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		_X_
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		_X_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		_ X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		_X

Form **990** (2008)

Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter 0- of not applicable   1a	Form	990 (2008) FOUNDATION, INC. 59-36	2332	3 F	age 5
1a Enter the number reported in Box 3 of Form 1086, Annual Summany and Transmittal of U.S. Information Returns Enter 0- if not applicable 0. Deflor the number of Forms W26 included in line 1a. Enter 0- if not applicable 0. Deflor the organization comply with backup withholding rules for reportable gayments to vendors and reportable gamming (gambling) winnings to prize winners? 2a. Enter the number of employees reported on Form W3. Transmittal of Wage and Tax Statements. Red for the calendary are andring with or within the year covered by this return. Red for the calendary are andring with or within the year covered by this return. Red for the calendary are andring with or within the year covered by this return. Red for the return (see instructions). Red	_			<del>-</del>	
U.S. Information Returns Entire -0- if not applicable be Enter the number of Forms W-26 included in line 1a. Enter-0- if not applicable do be the remove of Forms W-26 included in line 1a. Enter-0- if not applicable do be the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) writings to prize winners?  See Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements.  If the form the calendar year ending with or within the year covered by this return.  Death of the calendar year ending with or within the year covered by this return.  Death of the sum of hese 1a and 2a is greater than 250, you may be required to e-file this return (see instructions).  Death of the sum of hese 1a and 2a is greater than 250, you may be required to e-file this return (see instructions).  Death of the sum of hese 1a and 2a is greater than 250, you may be required to e-file this return (see instructions).  Death of the sum of hese 1a and 2a is greater than 250, you may be required to e-file this return (see instructions).  Death of the sum of hese 1a and 2a is greater than 250, you may be required to e-file this return (see instructions).  Death of the sum of hese 1a and 2a is greater than 250, you may be required to e-file this return (see instructions).  Death of the sum of hese 1a and 2a is greater than 250, you may be required to e-file this return (see instructions).  Death of this sum of hese 1a and 2a is greater than 250, you may be required to e-file this return (see instructions).  Death of this sum of the su	,			Yes	No
b Enter the number of Forms W2G included in the 1a. Enter 0-lif not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gamthing) winnings to prize winners?  2a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax. Statements, filled for the callendar year and ending with or within the year covered by this return b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to 4-file this return (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 5b if "Yes;" has if filed a form 980-T for this year? If "No," provide an explanation in Schedule O 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  5b If "Yes;" has if filed a form 980-T for this year? If "No," provide an explanation in Schedule O 3b If "Yes," there the name of the foreign country   ▶ See the instructions for exceptions and filing requirements for Form 1D F 90-22 1, Report of Foreign Bank and Financial Accounts 5a Was the organization party to a prohibited tax shelter transaction of the "Yes" of upsets on 5 or 5, did the organization the Form 886F, Duel South by Yax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?  5b If "Yes," and the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7c Organizations that may receive deductible contributions under section 170(c).  8b If "Yes," indicate the number of Form 8282 filed during the year  7c If did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
C Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaining (gambling) winnings to prize winners?  2 Effect the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, gardleft of the calendar year ending with or within the year covered by this return.  5 If all least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)  3a. Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  1 If "Yes," sha filed a Form \$951 For this year? If "No," provide an explanation in Schedule 0  1 If "Yes," enter the name of the foreign country (such as a bank account, securities account, or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  2 If "Yes," enter the name of the foreign country the Schedule 1 If Yes," provide an explanation in Schedule 0  3 If "Yes," other shaped in the foreign country the organization have an interest in, or a signature or other authority over, a financial accountry and the stream of the foreign state in the stream of the foreign Bank and Financial Accountry (see the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accountry (see the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accountry (see the instructions for exceptions and filing requirements for Form 88671, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Schelter Transaction?  5 If "Yes," of the organization is that the was or is a party to a prohibited tax sheller transaction?  5 If "Yes," of the organization sheld that may receive deductible contributions under sets statement that such contributions or filing form 886		U.S. Information Returns. Enter -0- if not applicable	0		}
gambling) winnings to prize winners?  2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, lead for the calendar year ending with or within the year covered by this return.  b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1 and 2 as greater than 250, you may be required to refile this return. See instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  b If Yes, Than filed a Form 9951 For this year? If *No.* provide are explaination in Schedule 0  4a At any time during the calendar year, did the organization have an interest in, or a significance or other authority over, a financial account in a foreign country.  See the instructions for exceptions and filing requirements for Form 1D F 90.2 1, Report of Foreign Bank and Financial Accounts  5a Was the organization a party to a princhibed tax shelter transaction at any time during the tax year?  5b If Yes, "to question 5a or 5b, did the organization that it was or is a party to a princhibed tax shelter transaction?  c If "Yes," to question 5a or 5b, did the organization that it was or is a party to a princhibed tax shelter transaction?  c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7b Organizations that may receive deductible contributions under section 170(c).  9c Did the organization sell, exchange, or otherwise disposes of tangelie personal property for which it was required to file Form 8832?  1f Yes," did the organization notify the donor of the value of the goods or services provided?  7c Did the organization sell, exchange, or otherwise disposes of tangelie personal property for which it was required?  7d Did the organization sell, exchange, or otherwise disposes of tangelie personal property for which it was required?  9c Did the organization organiza	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0		'
Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return.  If the sum of lines 1s and 2s is greater than 250, you may be required to e-file this return (see instructions).  By the sum of lines 1s and 2s is greater than 250, you may be required to e-file this return.  If Yes, Thas if filed a Form 980-T for this year? If No. 7 provide an explanation in Schedule 0.  At any time during the calendar year, did the organization have an interest in, or a signisture or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If Yes, Tenter the name of the foreign country.  See the instructions for exceptions and filing requirements for Form TD F 90.22 1, Report of Foreign Bank and Financial Accounts.  Was the organization a party to a prohibited tax shelter transaction at any time during the fax year?  By did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  If Yes, "to question 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  If Yes, "to question 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  If Yes, "to question 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  If Yes, "to question 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  By If Yes, "did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  If Yes, "did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  If Yes, "did the organization notify the donor of the value of the goods or services provided?  If Yes, "did the organization or provide goods or services in e	С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
b If at least one is reported on hine 2a, did the organization file all required federal employment tax returns?  Note, If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  b If Yes, Thas filled a Form 990. For this year? If YmO, 'provide an explanation in Schedule O  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  b If Yes, Their the name of the foreign country ▶  See the instructions for exceptions and filing requirements for form TD F 90.22 1, Report of Foreign Bank and Financial Accounts  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b D d any taxable party notify the organization that vivas or is a party to a prohibited tax shelter transaction?  If Yes, If object of the organization file Form 88861, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?  B D the organization solicit any contributions that were not tax deductible?  B Uffer organization shell may receive deductible contributions under section 170(c).  C D off the organization shell may receive deductible contributions under section 170(c).  C D off the organization shell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  If Yes, If od the organization netty the donor of the value of the goods or services provided?  C D off the organization shell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  If Yes, Indicate the number of Forms 8282 filed during the year  C D off the organiz		(gambling) winnings to prize winners?	N/A 10		<u> </u>
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)  3 Dd the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  5 If "Yes," has if filed a Form 990-T for this year? If "No." provide an explanation in Schedule O  4 At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account?)  5 If "Yes," there the name of the foreign country   Yes.  5 See the instructions for exceptions and filing requirements for Form TD F 90.22 1, Report of Foreign Bank and Financial Accounts  5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5 Dd any stable party notify the organization that the vas or is a party to a prohibited tax shelter transaction?  5 Dd the organization Solid the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transactions?  6 Dd the organization solicit any contributions that were not tax deductible?  6 Dd the organization solicit any contributions that were not tax deductible?  7 Driganizations that may receive deductible contributions under section 170(c).  8 Dd the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?  7 Dd the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  8 Dd the organization, during the year, seceive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  9 Dd the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  9 Dd the organization make any taxable distributions und	<b>2</b> a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			}
Note. If the sum of lines 1a and 2a segreater than 250, you may be required to e-file this return (see instructions) 3a. Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 4b. If Yes,* has if filed a Form 990-T for this year? If Yes,* provide an explanation in Schedule 0 4b. At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country fisched as a bank account, securities account, or other financial account)?  b if Yes,* enter the name of the foreign country. ►  See the instructions for exceptions and filing requirements for Form TD F 90.22 1, Report of Foreign Bank and Financial Accounts 5a. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b. Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5c. If Yes,* to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax Exempt Entity Regarding Prohibited Tax Shelter Transaction?  5c. Did the organization solicit any contributions that were not tax deductible?  6c. Did the organization solicit any contributions that were not tax deductible?  6c. Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c. Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?  6d. If Yes,* indicate the number of Forms 8282 filed during the year  6 b If Yes,* indicate the number of Forms 8282 filed during the year  6 b If Yes,* indicate the number of Forms 8282 filed during the year  7 b If Yes,* indicate the number of Forms 8282 filed during the year  8 bection 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(a)  8 section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section		filed for the calendar year ending with or within the year covered by this return	0		ļ
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financial account in a foreign country (such as a bank account, securities account, or other financial account)?  b if "Yes," enter the name of the foreign country ▶  See the instructions for exceptions and filing requirements for Form TD F 90.22 1, Report of Foreign Bank and Financial Accounts  Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  c if "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?  6a Did the organization solicit any contributions that were not tax deductible?  6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?  b if "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  7 Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  7 Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  7 Did the organization and the supporting organizations maintaining donor advised funds and section 509(a)(3) supporting organizations, boats, airplanes, and other vehicles, did the organization file a Form 1998 as required?  N/A  9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.  a Did the organizat	b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	_3t		<u> </u>
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Financial Accounts  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5b X  c If "Yes," to question 5a or 5b, did the organization file Form 886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?  6a Did the organization solicit any contributions that were not tax deductible?  6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?  8 Did the organization neity the donor of the value of the goods or services provided?  9 Did the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  9 Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  1 Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  1 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  2 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  5 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  9 Section 501(c)(3	þ	If "Yes," enter the name of the foreign country	\		
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to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?  7			7t	<del>}</del>	}
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  f Por all contributions of qualified intellectual property, did the organization file Form 8899 as required?  f Por contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  f N X  Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  N/A  Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.  Did the organization make any taxable distributions under section 4966?  N/A  b Did the organization make a distribution to a donor, donor advisor, or related person?  N/A  Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  forces income from members or shareholders  Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  11b  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	С				
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benefit contract?  1 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  2 For all contributions of qualified intellectual property, did the organization file Form 8899 as required?  3 For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  4 N For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  5 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.  a Did the organization make any taxable distributions under section 4966?  b Did the organization make a distribution to a donor, donor advisor, or related person?  N/A  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10a  11b  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  12b  16 "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b		· · · · · · · · · · · · · · · · · · ·			
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?  h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.  a Did the organization make any taxable distributions under section 4966?  b Did the organization make a distribution to a donor, donor advisor, or related person?  N/A  Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  110a  Section 501(c)(12) organizations. Enter N/A  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  12a Interest the amount of tax-exempt interest received or accrued during the year N/A Interest Included.	e		7.		Y X
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a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b 11 Section 501(c)(12) organizations. Enter N/A a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	b	Did the organization make a distribution to a donor, donor advisor, or related person? N/A	4. <u>9t</u>		L
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  11 Section 501(c)(12) organizations. Enter N/A  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	10	Section 501(c)(7) organizations. Enter N/A	- 1		
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b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b					
			12	a	┼—
	<u>b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b		000	(0000)

Form 990 (2008) FOUNDATION, INC. 59-3623323 Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code )

Sec	tion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O See instructions		<u>.</u>	
1a		6	}	
b	Enter the number of voting members that are independent  1b	4	•	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	7		
_	officer, director, trustee, or key employee?	2	х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3	1	Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
	Does the organization have members, stockholders, or other persons who may elect one or more members of the	- <u>-</u> -		_==
	governing body?	7a		х
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	<b> </b>	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	10		
Ü	by the following:			
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?  SEE STATEMENT	8b		Х
9a	Does the organization have local chapters, branches, or affiliates?	9a	<b>-</b>	X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	36		
	and branches to ensure their operations are consistent with those of the organization?	9b	į	
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must	30	<u> </u>	
10	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	х	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	10		<del> </del>
• •	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11	1	х
Sec	tion B. Policies	<del></del> -		<u> </u>
			Yes	No
122	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	163	X
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	120		-22
b	to conflicts?	12b		
	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	125		
·	in Schedule O how this is done	12c	Į	
13	Does the organization have a written whistleblower policy?	13	<b></b> -	X
14	Does the organization have a written document retention and destruction policy?	14	<del> </del> -	X
15	Did the process for determining compensation of the following persons include a review and approval by independent	1-4	<u> </u>	- 21
10	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	1	İ	
2	The organization's CEO, Executive Director, or top management official?	15a	}	х
a b		15b		X
D	Describe the process in Schedule O (see instructions)	130	<del>                                     </del>	
160	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	}		}
ioa	taxable entity during the year?	16a		Х
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	104	<u> </u>	<u> </u>
U	in joint venture arrangements under applicable federal tax law, and taken steps to safequard the organization's			
	exempt status with respect to such arrangements?	4Ch		
Sec	tion C. Disclosure	16b	<u> </u>	
	List the states with which a copy of this Form 990 is required to be filed ▶FL			
17 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	o for		
10	public inspection. Indicate how you make these available. Check all that apply	e 101		
	Own website Another's website X Upon request			
40	· · · · ·	- اعلم سو		
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	ana tina	incial	
00	statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiz	ation	-	
	BRAHAM R. AGGARWAL - 407-352-7275			
	9030 SOUTHERN BREEZE DRIVE, ORLANDO, FL 32836			

FOUNDATION, INC

59-3623323

Form 990 (2008) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors** 

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter 0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A) Name and Title  Average hours per week  Week  (C) Position (check all that apply) Position	(F) Estimated amount of other compensation from the organization
hours (check all that apply) compensation compensation per from from from related the organizations	amount of other compensation from the organization
per 5 from from related	other compensation from the organization
week 8   the organizations	compensation from the organization
organization (W-2/1099-MISC)	from the organization
Transition of the state of the	organization
	and related
Individual trust Institutional trust Officer Officer Former Forme	organizations
BRAHAM AGGARWAL	_
DIRECTOR 3.00 X 0. 0.	0.
SURESH GUPTA	_
DIRECTOR 0.00 X 0.	0.
MARK BREWER	•
DIRECTOR 0.00 X 0.	0.
ABHINAV DWIVEDI	•
DIRECTOR 0.00 X 0.	0.
DR. CHANDRESH SARAIYA	•
DIRECTOR 0.00 X 0.	0.
NIKHIL JOSHI	•
DIRECTOR 0.00 X 0.	0.
	<del></del> -

59-3623323

	† VII Section A. Officers Directors Tr					- d I	اء: ا		Componented Empley		222	25		age (
<u> </u>	(A)	(B)	Tipic	уее		<u>na i</u> C)	nign	lest	(D)	(E)		-	(F)	
	Name and title	Average			۰۱ Posi		1		Reportable	Reportable		Fet	וד) timate	ad he
	Name and the	hours	(c	heck	-	-		ıly)	compensation	compensation	n		ount	_
		per	$\vdash$				Γ	Ė	from	from related			other	
		week	Individual trustee or director				뮵		the	organizations		comp		
			ste o	institutional trustee			Highest compensated employee		organization (W-2/1099-MISC)	(W-2/1099-MIS	<sup>()</sup>		om th anızat	
			lal tru	onalt	Officer	ploye	00 a		(,			-	relat	
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	Total	<u> </u>		ł	l		<u> </u>	l	0.		0.			0
2	Total number of individuals (including the	se in 1a) who re	ceiv	ed n	ore	tha	n \$1	00.	<del></del>	<u> </u>				
-	compensation from the organization						🗘 .	•••	,000		•			(
													Yes	No
3	Did the organization list any former office	r, director or tru	ıstee	, ke	y en	olqr	yee,	or l	highest compensated e	mployee on				
	line 1a? If "Yes," complete Schedule J for	such individual	'									3		X
4	For any individual listed on line 1a, is the s	•							•	the organization				
	and related organizations greater than \$15										_	4		X
5	Did any person listed on line 1a receive or				rom	any	y uni	relat	ted organization for serv	rices rendered to				
	the organization? If "Yes," complete Scheetion B. Independent Contractors	dule J for such	pers	on								5		_X
1	Complete this table for your five highest c	omnensated in	dene		nt c	ont	racto	ore f	that received more than	\$100,000 of com		tion fr		
'	the organization NONE	ompensated in	аср	Siluc		.0111	iaci	013	that received more than	\$100,000 or com	pensai		OIII	
	(A)	-							(B)			(C	1	
	Name and busines	s address							Description of	services	Co	mpen		n
										<del>-</del>		_		
2	Total number of independent contractors	(including thos	e in	1) wi	no re	ecei	ved	mo	re than \$100.000 in com	npensation				
_	from the organization	0					-	Ψ.		•				

FOUNDATION, INC. Form 990 (2008) 59-3623323 Page 9 Statement of Revenue Part VIII (D) Revenue (A) (C) (B) Related or Unrelated Total revenue excluded from tax under sections 512, exempt function business revenue revenue 513, or 514 Contributions, gifts, grants and other similar amounts 1 a Federated campaigns 1a 1b b Membership dues c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f Business Code Program Service Revenue f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 3,759,036. 3759036. other similar amounts) 4 Income from investment of tax-exempt bond proceeds Royalties (ı) Real (II) Personal 6 a Gross Rents **b** Less rental expenses c Rental income or (loss) 1,800 1,800. d Net rental income or (loss) (i) Securities (II) Other 7 a Gross amount from sales of 811,889.2156650. assets other than inventory b Less cost or other basis 1506721.2265602 and sales expenses <694832.**≥**108952. c Gain or (loss) d Net gain or (loss) <803,784.> <803,784.> 8 a Gross income from fundraising events (not Other Revenue including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b **b** Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold b Net income or (loss) from sales of inventory Business Code Miscellaneous Revenue 11 a MISCELLANEOUS INCOME 900099 2,285 2,285. d All other revenue 2,285. e Total. Add lines 11a-11d ,959,337. 0. 2959337. 0. Total Revenue Add lines 1h, 2g, 3, 4, 5, 8d, 7d, 8c, 9c, 10c, and 11e

Form 990 (2008)

FOUNDATION, INC.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must complete include amounts reported on lines 6b,	(A) Total expenses	not required to comple (B) Program service	(C) Management and	(D). (D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and	}			
	organizations in the U.S. See Part IV, line 21	88,657.	88,657.		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)	60 200		60 200	
а	Management	68,200.		68,200. 8,594.	
b		8,594.		8,594.	<del></del>
	Accounting				<del></del>
d	Lobbying	-			
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
9		297.		297.	
12	Advertising and promotion	291.		297.	
13	Office expenses		<del></del>		<del></del>
14	Information technology				
15	Royalties	1,040.		1,040.	<del></del>
16	Occupancy Travel	1,040.		1,040.	
17	Payments of travel or entertainment expenses			<del></del>	<del></del>
18	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
20 21	Payments to affiliates			-	<del></del>
21 22	Depreciation, depletion, and amortization				<del>-</del>
23	Insurance				
24 24	Other expenses, Itemize expenses not covered				
	above. (Expenses grouped together and labeled				
	miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	REAL ESTATE TAXES	364,535.		364,535.	
	ASSOCIATION DUES	67,876.		67,876.	
С	TATOMO ANOD	47,900.		47,900.	
d	TIMET TOTAL	25,345.		25,345.	
е	OT DANITHO	4,900.		4,900.	
f	411	5,041.		5,041.	
25	Total functional expenses Add lines 1 through 24f	682,385.	88,657.	593,728.	0.
26	Joint Costs. Check here   If following				
	SOP 98-2. Complete this line only if the organization	ļ		ļ	
	reported in column (B) joint costs from a combined	İ			
	educational campaign and fundraising solicitation			1	

FOUNDATION, INC.

Par	17	Dalance Sheet			
-			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash · non-interest-bearing	1,292,633.	1	81,552.
	2	Savings and temporary cash investments		2	2,574,265.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key			
		employees, or other related parties. Complete Part II of Schedule L		_ 5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
		Part II of Schedule L	16,548,005.	6	<u></u>
ţ	7	Notes and loans receivable, net	2,800,000.	7	2,800,000.
Assets	8	Inventories for sale or use		8	<del></del>
¥	9	Prepaid expenses and deferred charges	1,620.	9	4,000.
	10a	Land, buildings, and equipment cost basis 10a 45,978,912.			
	ь	Less accumulated depreciation Complete		ĺ	
		Part VI of Schedule D 10b	27,321,401.	10c	<u>45,978,912.</u>
	11	Investments - publicly traded securities	1,973,577.	11	500,000.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	0.	15	275,908.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	49,937,236.	16	52,214,637.
	17	Accounts payable and accrued expenses	1,153.	17	1,602.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
ijes	21	Escrow account liability Complete Part IV of Schedule D		21	
Lıabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II			
Ľ		of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable	<del></del>	24	
	25	Other liabilities Complete Part X of Schedule D	<del></del>	25	<del></del>
	26	Total liabilities. Add lines 17 through 25	1,153.	26	1,602.
		Organizations that follow SFAS 117, check here			
Ś		lines 27 through 29, and lines 33 and 34.			
2 E	27	Unrestricted net assets		27	
ala	28	Temporarily restricted net assets		28	
<u> </u>	29	Permanently restricted net assets		29	
Net Assets or Fund Balance	ļ	Organizations that do not follow SFAS 117, check here   X and	,		
ō		complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds	0.	30	0.
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0.
et '	32	Retained earnings, endowment, accumulated income, or other funds	49,936,083.	32	52,213,035.
2	33	Total net assets or fund balances	49,936,083.		52,213,035.
	34	Total liabilities and net assets/fund balances	49,937,236.	34	<u>52,214,637.</u>
Pa	<u>rt XI</u>	Financial Statements and Reporting	<del></del>		Yes No
	٨٥٥	ounting method used to prepare the Form 990 X Cash Accrual	Other		163 160
1		e the organization's financial statements compiled or reviewed by an independent a	=		2a X
2a		e the organization's financial statements complied or reviewed by an independent accountant?	accountant.		2a X 2b X
b		es" to lines 2a or 2b, does the organization have a committee that assumes respon	subility for oversight of the	audit	F
U		es to lines 2a or 2b, does the organization have a committee that assumes responsively, or compilation of its financial statements and selection of an independent according		, addit,	2c
32		result of a federal award, was the organization required to undergo an audit or auc		ile Aud	
Ju		and OMB Circular A-133?			3a X
b		es," did the organization undergo the required audit or audits?			3b
	1 12-18				Form <b>990</b> (2008)

### **SCHEDULE A**

(Form 990 or 990-EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

### **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

VIVEK WELFARE AND EDUCATIONAL

2008 Open to Public Inspection

Employer identification number

OMB No 1545-0047

FOUNDATION, INC. 59-3623323 Part I Reason for Public Charity Status (All organizations must complete this part ) (see instructions) The organization is not a private foundation because it is (Please check only one organization) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H) A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2), (Complete the Part III ) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4), (see instructions) X An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h b Type II c Type III - Functionally integrated d \_\_\_\_ Type III - Other a X Type I By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes Nο the governing body of the supported organization? X 11g(i) A family member of a person described in (i) above? X 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the organizations the organization supports h (iii) Type of (iv) is the organization (v) Did you notify the (vi) Is the (i) Name of supported (ii) EIN (vii) Amount of organization organization in col. in col. (i) listed in your organization in col. organization support organized in the U.S.? (described on lines 1-9) governing document? (i) of your support? above or IRC section. Yes No Yes No (see instructions)) Yes No COMMUNITY FOUNDATION 059-31828867 X X X HINDU UNIVERSITY 059-29776917 X 76,804. X HINDU X AMERICAN FOU68-05515257 Х X EKAL VIDYALAY FOU77-05542487 X X X

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule A (Form 990 or 990-EZ) 2008

76.804.

Total

• Schedule A (Form 990 or 990-EZ) 2008						Page 2
Part II Support Schedule for 0	•		Sections 170	(b)(1)(A)(iv) an	d 170(b)(1)(A)(v	
(Complete only if you checked Section A. Public Support	the box on line :	5, 7, or 8 or Part I)				
Calendar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and	(6) 200 .	(5) 2000	10/2000	(4) 200.	(0) 2000	(I) Total
membership fees received (Do not						1
include any "unusual grants ")						
2 Tax revenues levied for the organ						
ization's benefit and either paid to		ļ		ļ		
or expended on its behalf						
3 The value of services or facilities						
furnished by a governmental unit to		1				1
the organization without charge						
4 Total. Add lines 1 - 3						
5 The portion of total contributions						
by each person (other than a						
governmental unit or publicly			ı			
supported organization) included						1
on line 1 that exceeds 2% of the		ļ	1			ı.
amount shown on line 11,				Ī		
column (f)						·
6 Public Support. Subtract line 5 from line 4		l	<u> </u>	}		
Section B. Total Support		·				· - <u> </u>
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006_	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4						
8 Gross income from interest,						
dividends, payments received on		ľ		)	}	
securities loans, rents, royalties				1		
and income from similar sources					-	
9 Net income from unrelated business		1				
activities, whether or not the						
business is regularly carried on		<del> </del>		ļ	ļ	
10 Other income Do not include gain						
or loss from the sale of capital		Ì		į		
assets (Explain in Part IV)	.,					-
11 Total support. Add lines 7 through 10	ata /aaa matriot	L	<u> </u>	<u> </u>	40	
12 Gross receipts from related activities,			ed foundly or fifth t	av vaar oo a saatu	12	<del></del>
13 First five years. If the Form 990 is for organization, check this box and stop	•	s ilist, second, triii	a, louren, or men e	ax year as a secur	on 501(c)(s)	▶□
Section C. Computation of Publi		rcentage				
14 Public support percentage for 2008 (II		<del>_</del>	column (fl)		14	%
15 Public support percentage from 2007			50.0 (1))		15	<u> </u>
16a 33 1/3% support test - 2008. If the o	•	•	n line 13. and line	14 is 33 1/3% or i		
stop here. The organization qualifies	-				,	<b>▶</b> □
<b>b 33 1/3% support test - 2007.</b> If the o		=		l line 15 is 33 1/39	% or more, check th	ns box
and stop here. The organization quali					,	
17a 10% -facts-and-circumstances test				e 13. 16a. or 16b.	and line 14 is 10%	or more.

and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization

b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

Schedule A (Form 990 or 990-EZ) 2008

Scho	edule A (Form 990 or 990-EZ) 2008 rt III   Support Schedule for C	Organizations	Described in	Section 509(a)	(Complete only	/ if you checked the bo	Page 3 ox on line 9 of Part I.)
	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual grants ")	i					
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-					Ĭ	
	iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities					1	1
	furnished by a governmental unit to						
	the organization without charge					<b></b>	
6	Total. Add lines 1 - 5					ļ	
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons	<del></del>	<del> </del>	<u> </u>	<del> </del>	<del>}</del>	
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c	Add lines 7a and 7b						
_8_	Public support (Subtract line 7c from line 6)				<u> </u>		
Sec	tion B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	<del></del>	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here	r the organization'	s first, second, thu				
9 10a b c 11 12 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here	r the organization's	s first, second, thu	rd, fourth, or fifth t			
9 10a b c 11 12 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here	the organization's	s first, second, this  rcentage  ivided by line 13,	rd, fourth, or fifth t			zation, %
9 10a b 11 12 13 14 Sec 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here Extion C. Computation of Public support percentage for 2008 (Public support percentage from 2007)	the organization's ic Support Pe line 8, column (f) d 7 Schedule A, Part	s first, second, this ercentage livided by line 13, in IV-A, line 27g	rd, fourth, or fifth to		on 501(c)(3) organiz	zation,
9 10a b 11 12 13 14 Sec 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here extion C. Computation of Public support percentage from 2007 Extion D. Computation of Invexition D. Computation of Invexition in the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here	ic Support Pe line 8, column (f) d 7 Schedule A, Part stment Incom	s first, second, thusercentage livided by line 13, or IV-A, line 27g e Percentage	rd, fourth, or fifth to		on 501(c)(3) organiz	zation,  % %
9 10a b 11 12 13 14 See 15 16 See 17	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here  tion C. Computation of Public support percentage for 2008 (Public support percentage from 2007)  tion D. Computation of Investions.	ic Support Peline 8, column (f) d' Schedule A, Partstment Incom	s first, second, thus  rcentage livided by line 13, or  IV-A, line 27g  e Percentage  mn (f) divided by line	rd, fourth, or fifth to		on 501(c)(3) organiz	zation, % % %
9 10a b c 11 12 13 14 See 15 16 See 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here extion C. Computation of Public support percentage for 2008 (Public support percentage from 2007 investment income percentage from	r the organization's  ic Support Pe  line 8, column (f) d' Schedule A, Part  stment Incom  2007 Schedule A,	s first, second, this  rcentage  livided by line 13, in IV-A, line 27g  re Percentage  mn (f) divided by line Part IV-A, line 27h	rd, fourth, or fifth to	ax year as a secti	15 16 17 18	zation,
9 10a b c 11 12 13 14 See 15 16 See 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public support percentage for 2008 (Public support percentage from 2007) Investment income percentage from 31/3% support tests - 2008. If the	r the organization's  ic Support Pe  line 8, column (f) d  Schedule A, Part  stment Incom  2007 Schedule A, organization did r	s first, second, thus  rcentage  livided by line 13, or  IV-A, line 27g  re Percentage  mn (f) divided by line  Part IV-A, line 27h  not check the box	rd, fourth, or fifth to	ax year as a secti	15 16 17 18 33 1/3%, and line 1	zation,
9 10a 11 12 13 14 Sec 15 16 Sec 17 18 19a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public support percentage for 2008 (Public support percentage from 2007) Investment income percentage from 33 1/3% support tests - 2008. If the more than 33 1/3%, check this box a	ic Support Peline 8, column (f) d' Schedule A, Partstment Incom 2007 Schedule A, colum 2007 Schedule A, organization did rind stop here. The	s first, second, thus  rcentage  livided by line 13, if IV-A, line 27g  re Percentage  mn (f) divided by line  Part IV-A, line 27h  not check the box  re organization qual	rd, fourth, or fifth to	ax year as a section of the section	15 16 17 18 33 1/3%, and line 1 zation	2ation,
9 10a 11 12 13 14 Sec 15 16 Sec 17 18 19a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here Extion C. Computation of Public support percentage for 2008 (Public support percentage from 2007) Investment income percentage from 133 1/3% support tests - 2008. If the more than 33 1/3%, check this box as 133 1/3% support tests - 2007. If the	ic Support Pelline 8, column (f) dy Schedule A, Partstment Incom 2007 Schedule A, organization did rand stop here. The organization did r	s first, second, this ercentage livided by line 13, if V-A, line 27g ee Percentage mn (f) divided by line 27h not check the box e organization qualinot check a box or	rd, fourth, or fifth to column (f)) on line 14, and line lifies as a publicly so	e 15 is more than supported organia, and line 16 is m	15 16 17 18 33 1/3%, and line 1 zation fore than 33 1/3%,	zation, % % % % 17 is not and
9 10a 11 12 13 14 Sec 15 16 Sec 17 18 19a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public support percentage for 2008 (Public support percentage from 2007) Investment income percentage from 33 1/3% support tests - 2008. If the more than 33 1/3%, check this box a	ic Support Peline 8, column (f) of Schedule A, Part Stment Incom 2007 Schedule A, organization did reck this box and seck  s first, second, this  rcentage livided by line 13, in the example of the example	rd, fourth, or fifth to column (f)) on line 14, and line lifies as a publicly so line 14 or line 19a anization qualifies	ax year as a section of the supported organics, and line 16 is mas a publicly supported supported organics.	on 501(c)(3) organization  15 16  17 18  33 1/3%, and line 1 zation ore than 33 1/3%, ported organization	zation, % % % % 17 is not and	

# Schedule D (Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008
Open to Public Inspection

Name of the organization

VIVEK WELFARE AND EDUCATIONAL FOUNDATION, INC.

Employer identification number 59-3623323

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the						
	organization answered "Yes" to Form 990, Part IV, lin								
		(a) Donor advised funds	(b) Funds and other accounts						
1	Total number at end of year								
2	Aggregate contributions to (during year)								
3	Aggregate grants from (during year)								
4	Aggregate value at end of year								
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor adv	sed funds						
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No						
6	Did the organization inform all grantees, donors, and donor a	_	e used only						
	for charitable purposes and not for the benefit of the donor	or donor advisor or other impermissible p	rivate benefit? Yes No						
Par									
1	Purpose(s) of conservation easements held by the organizat								
	Preservation of land for public use (e.g., recreation or		storically important land area						
	Protection of natural habitat Preservation of certified historic structure								
	Preservation of open space								
2									
	of the tax year		<b>,</b>						
	•		Held at the End of the Year						
а	Total number of conservation easements		2a						
b	Total acreage restricted by conservation easements	2b							
С	c Number of conservation easements on a certified historic structure included in (a)  2c								
d									
3									
	year ▶								
4									
5									
	enforcement of the conservation easements it holds?								
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶								
7									
8									
	and section 170(h)(4)(B)(ii)?								
9									
	include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for								
	conservation easements								
Pai	t III Organizations Maintaining Collections of		Other Similar Assets.						
	Complete if the organization answered "Yes" to Form	1990, Part IV, line 8.							
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in its revenue statement and I	balance sheet works of art, historical						
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pi	ublic service, provide, in Part XIV, the text of						
	the footnote to its financial statements that describes these	items							
b	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and bala	nce sheet works of art, historical treasures,						
	or other similar assets held for public exhibition, education, e	or research in furtherance of public servic	e, provide the following amounts relating to						
	these items								
	(i) Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$						
	(ii) Assets included in Form 990, Part X		► \$ ► \$						
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financi	al gain, provide						
	the following amounts required to be reported under SFAS 1	116 relating to these items							
а	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$						
b	Assets included in Form 990, Part X		► \$ ► \$						

# VIVEK WELFARE AND EDUCATIONAL Schedule D (Form 990) 2008 FOINDATION. INC.

		LON, INC.								5 Page 2
Par	t III   Organizations Maintaining C	ollections of A	rt, Hist	orical Tr	easures, d	or Othe	<u>er Simila</u>	<u>r Asse</u>	ts (conti	nued)
` з	Using the organization's accession and other	records, check any	of the f	ollowing tha	t are a signif	icant use	of its colle	ction ite	ms (chec	k all
	that apply).									
а	Public exhibition	d	ı 🔲 i	Loan or exc	hange progr	ams				
b	Scholarly research	е								
c	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how th	ev further ti	he organizat	ion's exe	mot purpos	se in Par	t XIV	
5	During the year, did the organization solicit of				-				• • • • • • • • • • • • • • • • • • • •	
J	to be sold to raise funds rather than to be ma				· ·		400000		Yes	☐ No
Par	t IV Trust, Escrow and Custodial					ered "Ye	s" to Form	990 Par		
	reported an amount on Form 990, Par	-	- 00p.	oto ii organi	zation anow	0,00	0 10 / 0////	000, r ui	,	0, 0.
10	Is the organization an agent, trustee, custodi		tion for	contribution	e or other as	ceate not	included			
ıa	on Form 990, Part X?	an or other intermet	alary lor	Continuation	is or other at	33013 1101	moladed		Yes	☐ No
<b>L</b>	of If "Yes," explain the arrangement in Part XIV and complete the following table.									
D	Amount									
_	Decimalize balance						4-		Amoun	<u> </u>
	Beginning balance						1c			
	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance						1f		¬	
	Did the organization include an amount on Fo	orm 990, Part X, line	217						Yes	∟ No
	If "Yes," explain the arrangement in Part XIV	<del> </del>								
Pai	t V Endowment Funds. Complete n								T	
	}	(a) Current year	<b>(b)</b> P	rior year_	(c) Two yea	rs back	(d) Three ye	ars back	(e) Four	years back
1a	Beginning of year balance			-						
b	Contributions								ļ	
С	Investment earnings or losses				<u> </u>				<u> </u>	
d	Grants or scholarships								ļ	
е	Other expenditures for facilities								Į	
	and programs									
f	Administrative expenses								L	
g	End of year balance									
2	Provide the estimated percentage of the year end balance held as									
а	D. I.I. and I.I. and I.									
b	Permanent endowment ► %									
С	<del></del>	 %								
За	a Are there endowment funds not in the possession of the organization that are held and administered for the organization									
	by	J					J		Γ	Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
h	If "Yes" to 3a(ii), are the related organizations	s listed as required o	n Sched	dule R?					3b	
4	Describe in Part XIV the intended uses of the	· ·							<u> </u>	
Pai	rt VI Investments - Land, Building				. Part X. line	10			_	
	Description of investment	(a) Cost or o			or other	I	epreciation		(d) Book	c value
	possiplion of invostment	basis (investr			(other)	(0,5	оргоонилоп		( <b>u</b> ) 500.	· value
	Land	45,978,			(		<del></del>	1	5 97	8,912.
1a h	Land	=3,5,6,	<u> </u>						<u> </u>	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
b	Buildings	<del></del>		_						<del></del>
C	Leasehold improvements					<del>                                     </del>		-+		
d	Equipment	<del> </del>		<u> </u>		<b></b> -		<del></del>		
	Other			lm= 40/-13		L			E 07	0 010
<u>i ota</u>	I. Add lines 1a-1e (Column (d) should equal Fo	<u>эпп 990, Рап X, Coll</u>	<u>ımn (B), </u>	ипе тU(C).)				<b>2</b> 4	<u>:3,3/8</u>	8,912.

Schedule D (Form 990) 2008 FOUNDATION, INC. 59-3623323 Page **3** Part VII Investments - Other Securities. See Form 990, Part X, line 12 (a) Description of security or category (c) Method of valuation (b) Book value (including name of security) Cost or end-of-year market value Financial derivatives and other financial products Closely-held equity interests Other Total (Col (b) should equal Form 990, Part X, col (B) line 12.) Part VIII Investments - Program Related. See Form 990, Part X, line 13 (c) Method of valuation (b) Book value (a) Description of investment type Cost or end-of-year market value Total (Col (b) should equal Form 990, Part X, col (B) line 13.) Part IX Other Assets. See Form 990, Part X, line 15 (b) Book value (a) Description Total. (Column (b) should equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. See Form 990, Part X, line 25 (a) Description of liability (b) Amount Federal income taxes

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Total. (Column (b) should equal Form 990, Part X, col (B) line 25)

VIVEK WELFARE AND EDUCATIONAL FOUNDATION, INC. 59-3623323 Page 4 Schedule D (Form 990) 2008 Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements 2,959,337. Total revenue (Form 990, Part VIII, column (A), line 12) 682,385. 2 2 Total expenses (Form 990, Part IX, column (A), line 25) 2,276,952. 3 3 Excess or (deficit) for the year. Subtract line 2 from line 1 4 4 Net unrealized gains (losses) on investments Donated services and use of facilities 5 6 Investment expenses 6 7 Prior period adjustments 7 8 Other (Describe in Part XIV) 8 Total adjustments (net) Add lines 4-8 9 2,276,952 Excess or (deficit) for the year per financial statements. Combine lines 3 and 9 10 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains on investments 2a Donated services and use of facilities 2b c Recoveries of prior year grants 2c Other (Describe in Part XIV) 2ď e Add lines 2a through 2d 2e Subtract line 2e from line 1 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) 4b c Add lines 4a and 4b Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities 2a **b** Prior year adjustments 2b c Losses reported on Form 990, Part IX, line 25 2c 2d d Other (Describe in Part XIV) Add lines 2a through 2d 2e Subtract line 2e from line 1 3 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) 4b c Add lines 4a and 4b 4c Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) Part XIV Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

SCHEDULE 1			Ć					OMB No 1545-0047
(Form 990)			Governi	rants and Other Assistance to Organizations, Governments, and Individuals in the U.S.	e to Organizations luals in the U.S.	võ.		5008
Department of the Treasury Internal Revenue Service		► Compl	➤ Complete if the organizatio	in answered "Yes," on F	," on Form 990, Pa m 990.	ganization answered "Yes," on Form 990, Part IV, lines 21 or 22.  Attach to Form 990.		Open to Public Inspection
Name of the organization	n VIVEK WELFARE FOUNDATION, IN	ARE AND	EDUCATIONAL					Employer identification number 59 - 36 23 3 23
Part   General Info	General Information on Grants and Assistance	Assistance						
1 Does the organiza	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	stance, and the select	
criteria used to aw	criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	nce? edures for monit	oring the use of grant	funds in the United	States			Yes X No
art II	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	vernments and	Organizations in the	• United States. C	omplete if the orga	Inization answered "Y	es" on Form 990, Part	IV, line 21, for any
recipient tha	recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	000 Check this	box if no one recipier	it received more th	an \$5,000 Use Pa	irt IV and Schedule I-1	(Form 990) if addition	al space is needed
1 (a) Name and add or gove	1 (a) Name and address of organization or government	( <b>b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HINDU UNIVERSITY OF AMERICA,	F AMERICA, INC.							THE ORGANIZATION IS ORGANIZED AS A SUPPORTING
113 ECONLACKHATCHEE ORLANDO, FL 32825	TRAIL	59-2977691	501(C)(3)	75,000	0			ORGANIZATION TO FOUR NAMED CHARITIES WITH THE
	SANGH-USA, INC.						•	ORGANIZED AS A SUPPORTING
121 HATHRONE CT								ORGANIZATION TO FOUR
+		770/701-70	20T(C)(3)	100 001	0			NAMED CHARITIES WITH THE
2 Enter total number 3 Enter total number	Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations	government org	anizations					
LHA For Privacy Act a	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.  SEE PART IV FOR COLUMN (H) DESCRIPTI	on Act Notice, s	ee the Instructions f JUMN (H) DE	nstructions for Form 990. (H) DESCRIPTIONS	ro			Schedule I (Form 990) 2008

FOUNDATION, INC.

Schedule I (Form 990) 2008 FOUNDATION, INC.

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22
Use Schedule I-1 (Form 990) if additional space is needed

Page 2

59-3623323

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	de the information	required in Part I, I	ine 2, and any other	additional information	
PART II, LINE 1, COLUMN (H):					
NAME OF ORGANIZATION OR GOVERNMENT:	- 1	UNIVERSITY	HINDU UNIVERSITY OF AMERICA,	A, INC.	
(H) PURPOSE OF GRANT OR ASSISTANCE:		SANIZATION	THE ORGANIZATION IS ORGANIZED AS	ZED AS A	
SUPPORTING ORGANIZATION TO FOUR NAMED	- 1	ITIES WITH	THE OPTIO	CHARITIES WITH THE OPTION TO DONATE	
TO OTHER 501(C)(3) ORGANIZATIONS.	FUNDS RI	SOUESTED B	FUNDS REQUESTED BY CHARITIES	S ARE	
REVIEWED AND APPROVED BY BOARD PRIOR TO DISBURSEMENT OF FUNDS	OR TO DIS	SBURSEMENT	OF FUNDS.		

INC.

Schedule I (Form 990) 2008 FOUNDATION, INC.  Part IV Supplemental Information	59-3623323 Page 2
SUPPORTING ORGANIZATION TO FOUR NAMED CHARITIES WITH T	HE OPTION TO DONATE
TO OTHER 501(C)(3) ORGANIZATIONS. FUNDS REQUESTED BY	CHARITIES ARE
REVIEWED AND APPROVED BY BOARD PRIOR TO DISBURSEMENT OF	F FUNDS.
	<del> </del>
	_
	<del></del>

### **SCHEDULE L**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### Transactions with Interested Persons

► Attach to Form 990 or Form 990-EZ.

► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, lines 38a or 40b.

Inspection

Schedule L (Form 990 or 990-EZ) 2008

OMB No 1545-0047

Employer identification number Name of the organization VIVEK WELFARE AND EDUCATIONAL 59-3623323 FOUNDATION, INC. Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only) To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (c) Corrected? 1 (a) Name of disqualified person (b) Description of transaction Yes PARK SQUARE ENTERPRISES, INC. MANAGEMENT FEES PAID TO PARK SQUA 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under 17,050. section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II Loans to and/or From Interested Persons. To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a (f) Approved (g) Written (a) Name of interested (b) Loan to or from (c) Original principal (e) in (d) Balance due by board or the organization? default? person and purpose agreement? amount committee? То From Yes No Yes Nο Yes No Total Part III Grants or Assistance Benefiting Interested Persons. To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27 (a) Name of interested person (c) Amount of grant or type (b) Relationship between interested person and the organization of assistance **Business Transactions Involving Interested Persons.** Part IV To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 28a, 28b, or 28c (e) Sharing of (b) Relationship between interested (a) Name of interested person (c) Amount of (d) Description of organization's person and the organization transaction transaction revenues? Yes No

SEE SCHEDULE O FOR SCHEDULE L CONTINUATIONS

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

### SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Information to Form 990**

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

VIVEK WELFARE AND EDUCATIONAL FOUNDATION, INC.

Employer identification number 59-3623323

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
ORGANIZATIONS SUPPORTED BY THESE SPECIFIC CHARITIES.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
VARIOUS
EXPENSES \$ 1351. INCLUDING GRANTS OF \$ 1351. REVENUE \$ 0.
FORM 990, PART VI, SECTION A, LINE 2: INDIVIDUALS WITH FAMILY
RELATIONSHIPS:
BRAHAM AGGARWAL, DIRECTOR
SURESH GUPTA, DIRECTOR
EXPLANATION OF RELATIONSHIP: FATHER-IN-LAW / SON-IN-LAW
FORM 990, PART VI, SECTION A, LINE 8B: THE ORGANIZATION DOES NOT HAVE ANY COMMITTEES.
FORM 990, PART VI, SECTION A, LINE 10: A DRAFT OF FORM 990 IS DISTRIBUTED TO BOARD MEMBERS TO REVIEW BEFORE FILING.
10 BORRD MEMBERS TO KEVIEW BELONE THEING.
FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS, POLICIES AND
FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST VIA US MAIL OR INSPECTION
AT OFFICE.
SCHEDULE L, PART I, EXCESS BENEFIT TRANSACTIONS:
(A) NAME OF PERSON: PARK SQUARE ENTERPRISES, INC.
(B) DESCRIPTION OF TRANSACTION: MANAGEMENT FEES PAID TO PARK SQUARE

### SCHEDULE O (Form 990)

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service ► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

VIVEK WELFARE AND EDUCATIONAL FOUNDATION, INC.

Employer identification number 59-3623323

ENTERPRISES,	INC.(35%	CONTROLLED	ENTITY	OF	SUBSTANTIAL	CONTRIBUTOR)
(C) CORRECTE						
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			**			
						700
				_		
_	- <del></del>	<del></del>				

Form 88 <u>68</u>	3 (Rev. 4-2009)			Page <u>2</u>				
• If you a	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo	x		<b>■</b> X				
•	ly complete Part II if you have already been granted an automatic 3-month extension on a previously filed		3868	-				
If you a	are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)							
Part II	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no c	opies r	eeded)					
-	Name of Exempt Organization	Empl	oyer identificati	on number				
Type or	VIVEK WELFARE AND EDUCATIONAL							
print	FOUNDATION, INC.	5	9-3623323	3				
File by the extended	Number, street, and room or suite no. If a P.O. box, see instructions	For IF	RS use only					
due date for filing the	5200 VINELAND ROAD, SUITE 200							
return See   City, town or post office, state, and ZIP code For a foreign address, see instructions								
instructions	ORLANDO, FL 32811							
Check ty	pe of return to be filed (File a separate application for each return).							
X Form 990 Form 990-EZ Form 990-T (sec 401(a) or 408(a) trust) Form 1041-A Form 5227 Form 8870								
For	m 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720	Fc	rm 6069					
STOP! D	o not complete Part II if you were not already granted an automatic 3-month extension on a previou	sly file	d Form 8868.					
	BRAHAM R. AGGARWAL							
• The h	poks are in the care of ▶ 9030 SOUTHERN BREEZE DRIVE - ORLANDO, F	יτ. 3	2836					
	none No ► 407-352-7275 FAX No ►	<u> </u>	2030					
	organization does not have an office or place of business in the United States, check this box							
		ie ie foi	the whole group	check this				
box ►_	If it is for part of the group, check this box			-				
	guest an additional 3-month extension of time until OCTOBER 15, 2010	memb	gro the extension	115 101				
	calendar year, or other tax year beginning, and ending	NOV	30, 2009	9				
	nis tax year is for less than 12 months, check reason Initial return Final return	$\overline{}$						
	If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period State in detail why you need the extension							
	DDITIONAL TIME IS NEEDED TO OBTAIN INFORMATION NECESS	ARY	TO PREPA	ARE A				
	OMPLETE AND ACCURATE RETURN.							
8a If ti	nis application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any							
noi	nrefundable credits. See instructions	8a	\$					
b If t	nis application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated							
tax	payments made Include any prior year overpayment allowed as a credit and any amount paid							
pr	eviously with Form 8868	8b	\$					
с Ва	lance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit							
wit	h FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	8c	_\$	N/A				
	Signature and Verification			_				
	alties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the orrect, and complete, and that I am authorized to prepare this form.	e best o	f my knowledge an	d belief,				
Signature	► Title ►	Date	<b>•</b>					