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Department of the Treasury

Short Form 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)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

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

OMB No 1545-1150

2009

Open to Public Inspection

inte	IIIAI Neveli	TUE SETVICE	L	The organization may have to too a topy or the return to the organization				
Α	For the	e 2009 calend	ar year,	or tax year beginning 01 JANUARY , 2009, and endi	ing 31 D	ECEM	BER	, 20 09
В	ima IDC						entification	number
	Address	change	use IRS label or	BITSAA INTERNATIONAL INC		22	2-3835037	
님	Name ch	•	print or	Number and street (or P O box, if mail is not delivered to street address) Room/su	ırte E Telep	hone nu	ımber	
H	Initial ret		type See	243 BUENA VISTA AVE APT 1801		40	8-368-8528	3
H	Amende		Specific Instruc-	City or town, state or country, and ZIP + 4	F Grou	ıp Exer	nption	
d		ion pending	tions.	SUNNYVALE CA 94086	Num	ber 🕨	•	
_	• Sec	ction 501(c)(3)	organiz	rations and 4947(a)(1) nonexempt charitable trusts must attach G A	Accounting Mo	ethod.	✓ Cash	☐ Accrual
				, , , , , , , , , , , , , , , , , , , ,	Other (specify)			_
_					Check ▶ □		rganization	nis not
	Websi	ite· > www	.bitsaa.	1	required to att			
-					990-EZ, or 990		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,
_	Check			zation is not a section 509(a)(3) supporting organization and its gross receipts			re than \$2	5.000 A
				turn is not required, but if the organization chooses to file a return, be sure to				0,000. 71
T				e 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Form		· \$		
_	Part I			enses, and Changes in Net Assets or Fund Balances (See			for Part	13
, =	1	•		s, grants, and similar amounts received		1	7 101 1 011	68570
)	'2		. •	evenue including government fees and contracts		2		
,	3					3		
:	4		•			4		1643
		Investmen			6729			
	5a			· · · · · · · · · · · · · · · · · · ·	9368			
	b	Less: cost	or othe	basis and sales expenses		E		-2639
d	2 C	Cam or (10	ss) iron	vities (complete applicable parts of Sonedule G). If any amount is from gaming, check	horo N	5c		-2039
Revenue	6)	(liele P			
Š	a		•	purcluϕ†@\\$ 1 2 2010 O of contributions				
Œ	· .	reported o	n line 1	$\begin{bmatrix} \ddots & \ddots $		数		
	þ	Less: aire	ct expe	ses other than-fundraising expenses				
	_c			s) from special events and activities (Subtract line 6b from line 6a) .		6c		
	7a			entory, less returns and allowances		27		
	b							
	C	-		ss) from sales of inventory (Subtract line 7b from line 7a)		7c		
	8	Other reve	-)	8		
_	9			dd ines 1, 2, 3, 4, 5c, 6c, 7c, and 8	<u>.</u> ▶	9		67574
	10			r amounts paid (attach schedule)		10		39867
	11	•		r for members		11		
ď	3 12			mpensation, and employee benefits		12		
2	13			and other payments to independent contractors		13		6149
Fynonsp	14	•	• .	utilities, and maintenance		14		
Ц				ons, postage, and shipping		15		5338
	16			describe See Schedule O)	16		8304
_	17	Total exp	enses.	Add lines 10 through 16	<u> Þ</u>	17		59658
Ų	3 18		•	for the year (Subtract line 17 from line 9)		18		7916
Not Accete	19			d balances at beginning of year (from line 27, column (A)) (must a		4		
Š	ξ	•	_	e reported on prior year's return)		19		100450
ţ	20		-	net assets or fund balances (attach explanation)		20		14437
	21			d balances at end of year. Combine lines 18 through 20		21		122803
8	Part-II	Balanc	e She	ets. If Total assets on line 25, column (B) are \$1,250,000 or more, file				
				(A) Beginning of	-	-,	d of year
		Cash, savings	s, and II	vestments	10	00450		122803
		and and buil	dıngs .				23	·
2		Other assets (•				24	
2	25 T	otal assets			10	0450		122803
2		otal liabilitie					26	
	7 N	let assets o	r fund l	palances (line 27 of column (B) must agree with line 21)	10	00450	27	122803

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Cat No 106421

Form **990-EZ** (2009)





· Ontice	330-12 (2003)					rage Z
Par	III Statement of Program Service Accom	plishments (See the instri	uctions for Part II	1.)		Expenses
What is the organization's primary exempt purpose? See Schedule O (attached) Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for 4947(a)(1) trusts, optional						
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise organizations and section manner, describe the services provided, the number of persons benefited, and other relevant information for 4947(a)(1) trusts, optional						
manner, describe the services provided, the number of persons benefited, and other relevant information for 4947(a)(1) true						
each	program title.	·				
28	a. Tuition Scholarships: to enable 7 students to pay	all or part of their tuition fees	at BITS-Pilani = \$4	1775	 	
20	b. Travel Scholarships: to enable 8 students to trave					
	c. Graduation Application Assistance Scholarship: to					4000
		includes foreign grants, che		_, ▶ ☑_	28a	13380
29	Alumni Grant for Research & Development in the fiel					
	(Alumni aid to assist students to develop humanoid	robots and participate in Rob	oGames 2009 held	l in 		
	San Francisco, CA)					
		includes foreign grants, chi		▶ 🗸	29a	3940
30	Grant for Anitha Asokan (BITS Class of 2004-2008) &	Divya Nawale (BITS Class o	f 2002-2006)			
	Anitha Asokan: alumni aid to assist medical treatme	nt (recover from Balo's conc	entric sclerosis) = \$	14721		
	Divya Nawale: alumni aid to enable participation in E	xpedition to Antarctica = \$12	251		İ	
	(Grants \$ 15972) If this amount	includes foreign grants, chi	eck here	. ▶ 🗸	30a	15972
31	Other program services (attach schedule)					
	, ,	includes foreign grants, che	eck here	. ▶ 🗸	31a	5790
32	Total program service expenses (add lines 28a t				32	39082
Par						
		(b) Title and average	(c) Compensation	(d) Contributio		(e) Expense
	(a) Name and address	hours per week devoted to position	(if not paid, enter -0)	employee benefit deferred compe	plans &	
CD K	othari	devoted to position	enter -oj	delerred compe	isauon	Other allowances
		Trustee, President, 1				
	alnut Street Lexington MA 02421		-0-	 		<u> </u>
	Raju Reddy 45711 Vineyard Ave Fremont CA 94539 -0-					
			-0-			ļ
	p Tripathy	Secretary, CEO, 4				
4302	College Main St #510 College Station TX 77801	,,,	-0-	ļ		
	hik Subramanian	Treasurer, CFO, 4				
243 I	Buena Vista Ave Apt 1801 Sunnyvale CA 94086	Treasurer, or o, 4	-0-	<u></u>		
Raje	sh Chelapurath	Tructon CIO 2				
5434	Judalon Ln Houston TX 77056	Trustee, CIO, 2	-0-			
Puni	ta Pandey				-	
PO E	lox 577 Campbell CA 95009	Trustee, 1	-0-			
Sara	th Kolla					
	Congdon St Middletown CT 06457	Trustee, 1	-0-			
	pak Sharma					
	Nicholas Drive Mountain View CA 94043	Trustee, 1	ـ٥ـ	ł		
	nna Hegde			 		
		Trustee, 1	-0-			
	apore Bhushan					
		Trustee, 1				
	Springvale Road Great Falls VA 22066		-0-	<u> </u>		
	njan Bose	Trustee, 1		1		
	Pontius Ave North Seattle WA 98109		-0-	ļ		
	y Mokkrala	Trustee, 1		}		
	7 Via Ventana Way Los Altos CA 94022		-0-			
Adity	/a Mathur	Trustee, 1				
2909	Covington St West Lafayette IN 47906	1143600, 1	-0-			
Char	ndra Bhople	Trustee 1		ł		
1940	0 Sorenson Ave Apt 107 Cupertino CA 95014	Trustee, 1	-0-	<u> </u>		
Arun	Aravind	500.4				
2400	E Cary St Apt 104 Richmond VA 23223	COO, 4	-0-			
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Part	Other Information (Note the statement requirements in the instructions for Part V.)		_	
			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		✓
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		✓
3 5	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but			
	not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.		 	
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b	l	✓
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a			
b	Did the organization file Form 1120-POL for this year?	37b		1
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		1
ь	If "Yes," complete Schedule L, Part II and enter the total amount involved			
39	Section 501(c)(7) organizations. Enter:	1		
а	Initiation fees and capital contributions included on line 9			,
b	Gross receipts, included on line 9, for public use of club facilities	1		١,
	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:	1		'
40a	section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit		~ -	⁻
	transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		1
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on			
Ū	organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		!	
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		
41	List the states with which a copy of this return is filed. ▶ NJ			
42a		108-36	8-852	8
	Located at ▶ 243 Buena Vista Ave Apt 1801 Sunnyvale CA ZIP + 4 ▶	940	086	
b	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		Yes	No
	account)?	42b		1
	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.			
_		42c		~ ~
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ▶	420	L	
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year		•	▶ ∐
				r
			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of		<u> </u>	
	Form 990-EZ	44		✓
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If			
	"Yes," Form 990 must be completed instead of Form 990-EZ	45	<u> </u>	_ ✓
	For	m 990	D-EZ	(2009)

°c

Part VI

Part V	Section 501(c)(3) organizations and s 501(c)(3) organizations and section 494 and complete the tables for lines 50 an	ection 4947(a)(1) no 7(a)(1) nonexempt ch d 51.	nexempt charitable trusts mus	ole trusts only. A st answer question	ll secti ns 46-	on -49b	
	Did the organization engage in direct or indirect				$\overline{}$	es N	<u>o</u>
	candidates for public office? If "Yes," complete S				46	 -	<u>/</u>
	Did the organization engage in lobbying activities				47 48	-+	<u>/</u>
	Is the organization a school as described in sectio				48 49a		<u>/</u>
	Did the organization make any transfers to an exif "Yes," was the related organization a section 5		-		49b		7
	Complete this table for the organization's five his					s and k	ey
	employees) who each received more than \$100,0	000 of compensation fro	om the organization.	If there is none, en	ter "No	ne."	
·	(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	acco	xpense ount and illowance	es_
		·-·					
							_
·							
- f	Total number of other employees paid over \$100	0.000	· I				
	(a) Name and address of each independent contractor	paid more than \$100,000	(b) Ty	pe of service	(c) Com	pensatio	<u></u>
							_
d	Total number of other independent contractors e	each receiving over \$10	0,000 ▶				_
	Under penalties of penury, I declare that I have examine and belief, it is true, correct, and complete Declaration	ed this return, including according of preparer (other than officer	npanying schedules and st) is based on all informatio	atements, and to the bes	st of my k any know	nowledg vledge	je
Sign Here	Signature of officer			07 N6 V	201	<u> </u>	
		3RAM ANIAN	CHIEF	FINANCIAL	0 <i>f</i>	-FIC	છ
Paid Proper	Preparer's signature	Date	Check if self- employed ▶	Preparer's identifying nui	mber (See	instruction	ıs)
Prepare Use On	r rimits nameror			IN ►			_
May th	e IRS discuss this return with the preparer show	n above? See instructio		▶ [Yes	☐ No	
				Fo	m 990	- EZ (20	009)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047 Open to Public

Department of the Treasury Inspection Internal Revenue Service Name of the organization Employer identification number **BITSAA INTERNATIONAL INC** 3835037 Reason for Public Charity Status (All organizations must complete this part) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives: (1) more than 331/3 % of its support from contributions, membership fees, and gross 9 receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 33/3 % 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 Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 a 🗍 Type I c Type III-Functionally integrated d Type III-Other e 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 II, Type III, or Type III supporting f Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 11g(i) and (iii) below, the governing body of the supported organization? 11g(ii (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s) (iv) Is the organization (i) Name of supported (ii) EIN (iii) Type of organization (v) Did you notify (vi) is the (vii) Amount of (described on lines 1-9 in col (i) listed in your the organization in organization in col support organization above or IRC section governing document? col (i) of your (i) organized in the (see instructions)) support? US? Yes

Total

Par						and 170(b)(1)(A)(vi)
	(Complete only if you chec	ked the box o	on line 5, 7, c	or 8 of Part I.)		
	tion A. Public Support					r 	
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")	25756	34995	30063	63356	68570	222740
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	25756	34995	30063	63356	68570	222740
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						76763
_	shown on line 11, column (f) Public support. Subtract line 5 from line 4.						145977
<u>6</u>	tion B. Total Support					L	143377
	lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	, , , , , , , , , , , , , , , , , , , ,	25756	34995	30063	63356	68570	222740
7 8	Amounts from line 4	382	699	1793	1747	1643	6264
9	Net income from unrelated business activities, whether or not the business is regularly carried on	:					
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	172		326	-652	-2639	-2793
11	Total support. Add lines 7 through 10 .	[I				<u> </u>	226211
12	Gross receipts from related activities, etc.	(see instructio	ns)			12	0
13	First five years. If the Form 990 is for organization, check this box and stop he	re	<u> </u>	d, third, fourth,	· ·		n 501(c)(3) ▶ □
	tion C. Computation of Public Su					 	C4.5
14	Public support percentage for 2009 (line		=	, column (f))		14	64.5 %
15	Public support percentage from 2008 Sci		•			15	47.7 %
16a	331/3 % support test-2009. If the organi						
	and stop here. The organization qualifies						
þ	331/3 % support test—2008. If the organization						
	box and stop here. The organization qua	•		•			
17a	10%-facts-and-circumstances test—20 more, and if the organization meets the "f organization meets the "facts-and-circum	acts-and-circun	nstances" test,	check this box	and stop here.	Explain in Part	IV how the
b	10%-facts-and-circumstances test—2008 more, and if the organization meets the "facts-and-circumstances" facts-and-circumstances the "facts-and-circumstances" facts and facts an	acts-and-circum ances" test. The	stances" test, c organization qua	heck this box a difies as a public	and stop here. By supported or	Explain in Part ganization	IV how the
18	Private foundation. If the organization did	i not check a bo	x on line 13, 16a	a, 16D, 1/a, or 1	7 D, Check this !	oox and see inst	tructions 🕨 🔲

	•							
Sched	dule A (Form 990 or 990-EZ) 2009							Page 3
Pai	Support Schedule for Organ (Complete only if you checke	nizations De	escribed in S n line 9 of Pa	section 509(a art I.)	1)(2)			
	tion A. Public Support		,					
Ca	llendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e)	2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")							
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 business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5							
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
С	Add lines 7a and 7b							
8	Public support (Subtract line 7c from line 6)							
	tion B. Total Support		,	,	,	T.		·
Ca	ılendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e)	2009	(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 (less section 511 taxes) from businesses acquired after June 30, 1975							
11	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							
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)							
13	Total support. (Add lines 9, 10c, 11, and 12)							
14	First five years. If the Form 990 is for toganization, check this box and stop I	nere		nd, third, fourtl	h, or fifth tax y	ear as	a section	on 501(c)(3)
	tion C. Computation of Public Sup							
15 16					15 16		<u>%</u> %_	

15	Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%		
16	Public support percentage from 2008 Schedule A, Part III, line 15	16	%		
Sec	tion D. Computation of Investment Income Percentage				
17	Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) .	17	%		
18	Investment income percentage from 2008 Schedule A, Part III, line 17	18	%_		
19a					
b	331/3 % support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 1 line 18 is not more than 331/3 %, check this box and stop here. The organization qualifies as a publicly				
20	Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box	ox and	d see instructions 🕨 🔲		
	Sch	edule <i>F</i>	(Form 990 or 990-EZ) 2009		

1	Page	4

Part IV	Supplemental Part II, line 17a	Information. Co a or 17b; and Pa	omplete this rt III, line 12.	part to provide Provide any of	the explanation ther additional in	s required by Par formation. See in	t II, line 10; structions.
Part II, Lin	e 10: Other incon	ne of (\$2639) - Sal	le of investme	nts with cost \$9	368 for \$6729 - T	D Ameritrade Inves	stments
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SCHEDULE O (Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990.

Open to Public Inspection

3835037

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Employer identification number Name of the organization **BITSAA INTERNATIONAL INC** 22

FORM 990 E. PART I, ITEM 10: SCHEDULE OF GRANTS (1) Alumni Grant for funding research & development in the field of Robotics in BITS-Pilani: \$3870 (specifically, to enable students to design humanoid robots and participate in RoboGames 2009, San Francisco, CA) (grant awarded to Prof. RK Mittal and his student-team (titled ACYUT), Department of Mechanical Engg at BITS-Pilani) (2) Alumni Grant to enable student participation in 'Expedition to Antarctica': \$1251 Awarded to DIVYA NAWALE (BITS-Pilani Class 2002-2006) living in 36 Ashford Road East Ham London E6 2AW (3) Allumni Grant to provide relief funds for recovery of BITS-Pilani Alum ANITHA ASOKAN: \$14721 Anitha Asokan (BITS Pilani Class 2002-2006), was diagnosed with Balo's Concentric Sclerosis. Her family requested the BITS Alumni community to assist with relief funds for her treatment. (4) Alumni Grant for renovation and expansion of the University (BITS-Pilani) Auditorium Audio System: \$3650 (5) TRAVEL SCHOLARSHIPS (total grant = \$6000, listed below is the names of students who received the scholarships) SUBRAMANIAN S (ID: 2005A3A4550P), ADTANI CHHAVI MOHAN (ID: 2005B5A3677P), ARPIT SHARMA (ID: 2005B5A8640P), BUCHI REDDY (ID: 2005PHXF012P), CHREIN JOSEPH (ID: 2005B5A3358P) UTTAM GANDHI (ID: 2005B5A4710P), PRASHANTH REDDY, GAURAV SINGH (6) TUITION SCHOLARSHIPS (total grant = \$4775, listed below is the names of students who received the scholarships) Vamsi Pendyala Memorial Scholarship - AKSHAY RASTOGI (Student ID: 2008A7PS028P) Hiralal Agarwal Scholarship - ASHUTOSH PANDEY (Student ID: 2008A4PS348P) Rakesh Chandra Scholarship - MOHIT ASUDANI (Student ID: 2007A7PS415P), DIVYA CHANDRA (ID: 2007A4PS368P) SS Seshadri Memorial Scholarship - DIVYA CHANDRA (Student ID: 2007A4PS368P) Bhushan Bhatia Scholarship - KUTCHARLAPATI SWAPNA (Student ID: 2006A2PS679P), SIVAGANGA PRASAD (Student ID: 2006C6PS402P) (7) GRADUATE APPLICATION SCHOLARSHIPS (total grant = \$3000, enabling students to apply to graduate schools) DEVDETITA AKHAWE (ID: 2005A7PS549P), PRITHWIRAJ MOWLIK (ID: 2005A7TS580P), RAJESH BASHIN (ID: 2005A7PS045P), SUBBASIP GHOSH (ID: 2006A7PS375P), ARVIND PAWAN R (ID: 2006B5A3404P), KEJRIWAL ANKITA ARVIND (ID: 2006A7PS360G)

Name of the organization BITSAA INTERNATIONAL INC	Employer identification number 22 3835037					
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FORM 990 EZ PART I, ITEM 10: SCHEDULE OF GRANTS (Cont'd from Page 1)						
9) Mantra Award (setup by Mantra Capital LLC) for students who show exceptional leadership potential: \$1000						
10) Other Grants: \$530						
the funds for all scholarships listed above are transferred from BITSAA International Inc to BITS-Pilani (the university).						
The University (BITS-Pilani) Student Welfare Division administers the disbursements	to students and					
any unused funds are retained by the University for later use.	······································					
FORM 990EZ PART I, ITEM 16: OTHER EXPENSES						
(1) BANK WIRE TRANSFER FEES & SERVICE FEES = \$276						
(2) Credit card processing fees (for receiving donations via our online portal) = \$1551						
(3) Web portal maintenance fee (charged by yourmembership.com) for hosting www.l	bitsaa.org = \$5940					
The web portal at www.bitsaa.org hosts the alumni directory and BITSAA's websit	e					
(4) Conference call charges for conducting weekly conference calls (HiDef Conference	sing Solutions) = \$537					
TOTAL OTHER EXPENSES: ITEM 16: \$8304						
FORM 990EZ PART III: ORGANIZATION'S PRIMARY EXEMPT PURPOSE						
To setup endowments, create scholarships, reward teaching & research at BIRLA INS	STITUTE OF TECHNOLOGY AND					
SCIENCE, PILANI, INDIA (BITS-Pilani); and						
To strengthen ties amongst alumni, current students, faculty and friends of the Institu	ute (RITS-Pilani)					
To Strength and alliongot areas, our estados as, according to the						
FORM 990EZ PART III, ITEM 31: OTHER PROGRAM SERVICES						
(1) Renovation & expansion of the audio system in BITS-Pilani Auditorium (University	y Auditorium) = \$3650					
(2) Career development & placement assistance workshop for students = \$1070						
(3) Mantra Award (setup by Mantra Capital LLC) for 9 students with exceptional leade						
ITEM 31(a): \$5720						
FORM 990EZ PART I, ITEM 20: OTHER CHANGES IN FUND BALANCES:						
Investment appreciation (unrealized) = \$14,437						