

# See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



### Form 990-PF

Department of the Treasury Internal Revenue Service

# **Return of Private Foundation**

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

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052 2009

| For calendar year 2009, or               | rax year beginning   |                              | , and ending        |  | <del> </del>                              |
|--|--|------------------------------|---------------------|--|---|
| G Check all that apply                   | Initial return   |                              | rmer public charity | Final return   |   |
|  | Amended return   | Address chan                 |                     | Name change  | numbor                                    |
| Use the IRS Name of four                 | ndation  |                              | :                   | A Employer identification                                | number                                    |
| label.                                   | ISHNARPAN FOUND  | απτ∩N                        |                     | 23-2629257   |   |
|  | reet (or PO box number if mail is not de                               |                              | Room/suite          | B Telephone number                                       | <del></del>                               |
| <b>P</b> ······                          | NT DRIVE   | inverse to succe address,    | Thousand .          | 218-288-12   | 0.0                                       |
| Soo Spositio                             | state, and ZIP code  |                              |                     | C if exemption application is p                          |   |
| Instructions YARDLE                      |  | 44                           |                     | D 1. Foreign organizations                               |   |
| H Check type of organizati               |  |                              |                     | Foreign organizations me<br>check here and attach co     | eting the 85% test,                       |
|  |  | Other taxable private founda | ation               |  |   |
| Fair market value of all as              |  |                              | Accruat             | E If private foundation state<br>under section 507(b)(1) |   |
| (from Part II, col. (c), lir             |  | ther (specify)               | 7,00,00             | F If the foundation is in a                              |   |
| (110111 Fart II, COI. (C), III  ▶\$      |  | mn (d) must be on cash i     | basis)              | under section 507(b)(1)                                  |   |
|  | enue and Expenses<br>its in columns (b), (c), and (d) may not          | (a) Revenue and              | (b) Net investment  | (c) Adjusted net   | (d) Disbursements                         |
| (The total of amoun                      | its in columns (b), (c), and (d) may not<br>he amounts in column (a) ) | expenses per books           | income              | income   | for charitable purposes (cash basis only) |
| <del></del>                              | ts, grants, etc , received   | 5000.                        |                     |  |   |
| 1  | te foundation is not required to attach Sch. B                         |                              |                     |  |   |
| 3 Interest on savings a cash investments |  |                              |                     |  |   |
|  | erest from securities  | 4760.                        | 4760.               | 4760.  | Statement 1                               |
| 5a Gross rents                           |  |                              |                     |  |   |
| D Net rental income or                   | · (loss)   |                              |                     |  |   |
| 63 Not goin or (loca) fro                | m sale of assets not on line 10  |                              |                     |  |   |
| Gross sales price fo                     |  |                              |                     |  |   |
| 0  | ome (from Part IV, line 2)   | rombo office thebroador      | 0.                  |  |   |
| 8 Net short-term ca                      |  |                              |                     | 0.   |   |
| 9 Income modificat                       | · •  | ,                            |                     |  |   |
| 10a Gross sales less ret                 |  |                              |                     |  |   |
| D Less Cost of goods                     | sold   |                              |                     |  |   |
| c Gross profit or (I                     |  |                              |                     |  |   |
| 11 Other income                          | •  |                              |                     |  |   |
| 12 Total Add lines                       | 1 through 11   | 9760.                        | 4760.               | 4760.  |   |
| 13 Compensation of of                    | ficers, directors, trustees, etc.                                      | 0.                           | 0.                  | 0.   | 0.  |
| 14 Other employees                       | salaries and wages RF  | CEIVED                       |                     |  |   |
| 15 Pension plans, ei                     | mbiovee benefits   |                              |                     |  |   |
| 16a Legal fees                           | 70N 1887   | 000                          |                     |  |   |
| b Accounting fees                        | NON 12   |                              |                     |  |   |
| c Other profession                       |  | O'S                          |                     |  |   |
| 17 Interest                              | l OG   | DEN UT                       |                     |  |   |
| Taxes                                    | Stmt-2   | 95.                          | 0.                  | 0.   | 0.  |
| 19 Depreciation and                      | depletion  |                              |                     |  |   |
| 20 Occupancy                             |  |                              |                     |  |   |
| 77 < 21 Travel, conference               | ces, and meetings  |                              |                     |  |   |
| 22 Printing and pub                      |  |                              | 252                 |  |   |
| 23 Other expenses                        | Stmt 3   | 35.                          | 363.                | 0.   | 0.  |
| স্ট্র 24 Total operating :               | and administrative   | 100                          | 262                 |  |   |
|  | ines 13 through 23   | 130.                         | 363.                | 0.   | 0.<br>8740.                               |
|  | · ·  | 8740.                        |                     |  | 8/40.                                     |
| <b>-</b>                                 | and disbursements.   | 0070                         | 262                 | 0.   | 8740.                                     |
|  | <del></del>  | 8870.                        | 363.                | <u> </u>   | 0/40.                                     |
| 27 Subtract line 26 t                    |  | 890.                         |                     |  |   |
|  | over expenses and disbursements  | 690.                         | 4397.               |  |   |
|  | ncome (if negative, enter -0-)   |                              | 437/                | 4760.  | <b></b>                                   |
| 200004                                   | OME (if negative, enter -0-)   | Ant Notice and the instance  | tions               | 4700.  | Form <b>990-PF</b> (2009)                 |

| 1  | 10  |      | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | Beginning of year | End o                                 | f year      |
|--|-----|------|--|-------------------|---------------------------------------|-------------|
| 2 Sweeps and temporary cash investments 3 Accounts receivable  Less, allowance for doubtful accounts Less allowance for doubtful accounts  5 Grants receivable  5 Receivables due from officers, directors, trustess, and other doqualified persons 7 Other receivable of the doubtful accounts  5 Reverables for size of use  5 Reverables for size of use  6 Investments - 15 and state government obligations 1 Investments - 15 and state government obligations 1 Investments - 15 and state government obligations 1 Investments - 10 and state government obligations 1 Investments - corporate stace, 1 Investments - corpo  |     | arı  | column should be for end-of-year amounts only  | (a) Book Value    |                                       |             |
| Lass allowance for doubtful accounts ▶ Less allowance for doubtful accounts ▶ Less allowance for doubtful accounts ▶ Saratir receivable B Receivables due from officers, directors, Intoless, and other disparatified persons 7 Other receivable persons 9 Prepade separes and deferred charges 10 Prepade separes and deferred charges 11 Integrates separes and deferred charges 11 Integrates separes and deferred charges 12 Integrates copposate stock c c investments - corporate stock c c  |     | 1    | Cash - non-interest-bearing  | 16600.            | 21600.                                | 21600.      |
| Less allowance for deubthal accounts   Less allowance for deubthal accounts   Less allowance for deubthal accounts   S Grants receivable   Receivables clue from officers, directors, fusiless, and other   disqualified persons   7 core new actives receivable   Less allowance for doubthal accounts   Less allowance for doubthal acco |     | 2    | Savings and temporary cash investments   |                   |                                       |             |
| Periodes receivable   Periodes receivable   Periodes receivable (and control accounts   Security    |     | 3    | Accounts receivable  | -                 | , III                                 |             |
| S. Grains receivable  5. Grains receivable  6. Receivables due from officers, directors, trustees, and other  disqualified persons  7. Other new because meanable  1. Sess allowance for objubil accounts  1. Sess allowance for objubility  1. Ses  |     |      | Less. allowance for doubtful accounts  |                   |                                       |             |
| 5 Grints receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 The one an universe movine Less altowance for doubtful accounts 2 Inventories for sale or use 9 Prepara despenses and deferred charges 19 Prepara despenses and deferred charges 10 Investments - US and state government obligations 11 Investments - corporate bonds 12 Investments - corporate bonds 13 Investments - corporate bonds 14 Land, bouldings, and equipment base   |     | 4    | Pledges receivable ▶   |                   |                                       |             |
| Recarables due from offices, directors, fusities, and other disqualified persons   |     |      | Less allowance for doubtful accounts   |                   |                                       |             |
| general disqualified parsons 7 Other note avoids measure Less allowance for doubtful accounts ▶ 10 inventories for sale or use 9 Prepared supposes and defired changes 10 prepared supposes and defired changes 11 inventories to corporate bonds 12 inventories to corporate bonds 13 inventories to corporate bonds 14 Land, buildings, and equipment basis ▶ 15 Other assets (describe ▶ 16 Total assets (describe ▶ 17 Accounts payable and accrued expenses 18 Grants payable and accrued expenses 19 Deferred revenue 20 Liber shoulties, and other incluse, and other documents 21 Inventories and other incles payable 22 Other labelities (add times 17 through 22) 23 Total intellities (add times 17 through 22) 24 Foundations that follow SFAS 117, check here and complete lines 27 through 31 and complete lines 30 and 31.  22 Foundations that follow SFAS 117, check here and complete lines 27 through 31 and complete lines 27 through 31 and complete lines 27 through 31 and complete lines 30 and 31.  22 Foundations that do not follow SFAS 117, check here and complete lines 30 and 31.  23 Total retarsets or fund balances  24 Part III Analysis of Changes in Net Assets or Fund Balances  17 Total intellities and ret assets fund balances  27 Report and the as  |     | 5    | Grants receivable  |                   |                                       |             |
| To Come rease real laters arrangels Less allowance for doubtful accounts ▶  8 Inventions for sale or use years and deterred charges 10 Investments - US and sate year year and the present of bligations 11 Investments - corporate stock 11 Investments - corporate bonds 11 Investments - comporate bonds 11 Investments - mortgage loans 12 Investments - mortgage loans 13 Investments - other Stock place in the sale of  |     | 6    | Receivables due from officers, directors, trustees, and other  |                   |                                       |             |
| Less allowance for doubthal accounts    8 Inventioners to risa or use 9 Praparal expenses and deterred charges 10 Investments - Us and state government obligations b Investments - Corporate bonds 11 Investments - Corporate bonds 12 Investments - Corporate bonds 13 Investments - Ortifique doans 13 Investments - Ortifique doans 15 Corporate bonds 16 Corporate bonds 16 Corporate bonds 17 Accounts payable and accrued expenses 18 Grants payable and accrued expenses 19 Deferred revenue 20 Loans town officers, function, function, functions, functions, and other independence 21 Investments - Ortification of the function |     |      | disqualified persons   |                   |                                       |             |
| Solution   Section   Sec   |     | 7    | Other notes and loans receivable   |                   |                                       |             |
| b Investments - corporate stock c Investments - corporate stock corporate stoc |     |      | Less allowance for doubtful accounts   |                   |                                       |             |
| b Investments - corporate stock c Investments - corporate stock corporate stoc | ţ   | 8    | Inventories for sale or use  |                   |                                       |             |
| b Investments - corporate stock c Investments - corporate stock corporate stoc | SSe | 9    | Prepaid expenses and deferred charges  |                   |                                       |             |
| c investments - corporate bonds  11 investments - two tunidegs, and equipment basis  Less accomulated generation  12 investments - mortgage loans  13 investments - mortgage loans  13 investments - other  15 Other assets (describe ► )  16 Total assets (fobe completed by all filters)  17 Accounts payable and accrued expenses  18 Grants payable  19 Deferred revenue  20 Leans from filters, directors, treatees, and other disqualified persons  21 Mortgages and other notes payable  22 Other liabilities (describe ► )  23 Total liabilities (describe ► )  24 Unrestricted  25 Temporarily restricted  26 Permanently restricted  27 Foundations that folious SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.  28 Pad-in or capital surplus, or land, bidg, and equipment fund  28 Pad-in or capital surplus, or land, bidg, and equipment fund  29 Retained earnings, accumulated moome, endowment, or other funds  30 Total riel assets or fund balances  1 Total reassets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27  3 Other increases not included in line 27 (femize) ► See Statement 4  5 See Statement 4  5 See Statement 4  5 See Statement 4   | ⋖   | 10a  | Investments - U S and state government obligations   |                   |                                       |             |
| Investments - und buildings, and equipment basis   Less accompliated programs  |     | b    | Investments - corporate stock  |                   |                                       |             |
| Less accompleted deprecation    |     | C    | Investments - corporate bonds  |                   |                                       |             |
| 12 Investments - other   Stmt 5   67403.   62423.   0.   |     | 11   | Investments - land, buildings, and equipment basis   |                   |                                       |             |
| 13 Investments - other   Stmt 5   67403   62423   0     14 Land, buildings, and equipment basis   Less azumulated depression     15 Other assets (describe   )       16 Total assets (to be completed by all filers)   84003   84003   21600     17 Accounts payable and accrued expenses       18 Grants payable           19 Deferred revenue         20 Loans from officers, directors, fusities, and other disqualified persons       21 Mortgages and other notes payable         22 Other liabilities (describe   )       23 Total liabilities (describe   )         24 Unrestricted         25 Temporarily restricted         26 Permanently restricted         27 Capital stock, trust principal, or current funds       28 Paral-nor capital surplus, or land, blidy, and equipment fund       29 Retained earnings, accumulated income, endowment, or other funds       20 Retained earnings, accumulated income, endowment, or other funds       30 Total net assets or fund balances       4 Add lines 1, 2, and 3       5 Decreases not included in line 2 (termize)       4 B4893       5 Decreases not included in line 2 (termize)       5 See Statement 4       6 Faundations asset and sequence of the control of the sequence of the     |     |      | Less. accumulated depreciation   |                   |                                       |             |
| 14 Land, buildings, and equipment basis  |     | 12   |  |                   |                                       |             |
| tess accumulated depreciation  15 Other assets (describe   |     | 13   | Investments - other Stmt 5   | 67403.            | 62423.                                | 0.          |
| 15 Other assets (describe  |     | 14   | Land, buildings, and equipment basis   | _                 |                                       |             |
| 16 Total assets (to be completed by all filers)  17 Accounts payable and accrued expenses 18 Grants payable and accrued expenses 19 Deterred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (add lines 17 through 22)  23 Total liabilities (add lines 17 through 22)  24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Foundations that do not follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.  27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bidg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances  1 Total liabilities and net assets/fund balances  1 Total ret assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (ftermize) ▶ 3 Occreases not included in line 2 (ftermize) ▶ 5 See Statement 4 5 88493. 5 Decreases not included in line 2 (ftermize) ▶ 5 See Statement 4 5 8870.   |     | İ    | Less accumulated depreciation  |                   |                                       |             |
| 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officens, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe ▶  23 Total liabilities (add lines 17 through 22)  Chrestricted 25 Temporarily restricted 26 Permanently restricted 27 Temporarily restricted 28 Permanently restricted 29 Pard-in or capital stock, trust principal, or current funds 29 Retained earnings, accumulated income, endowment, or other funds 30 Total rel assets or fund balances 31 Total liabilities and net assets/fund balances  1 Total net assets or fund balances in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year - Part III, column (a), line 30 (must agree with end-ot-year figure reported on prior year's return) 26 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 3 Decreases not included in line 2 (itemize) ▶ 3 See Statement 4 5 870.   |     | 15   | Other assets (describe)  |                   |                                       |             |
| 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officens, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe ▶  23 Total liabilities (add lines 17 through 22)  Chrestricted 25 Temporarily restricted 26 Permanently restricted 27 Temporarily restricted 28 Permanently restricted 29 Pard-in or capital stock, trust principal, or current funds 29 Retained earnings, accumulated income, endowment, or other funds 30 Total rel assets or fund balances 31 Total liabilities and net assets/fund balances  1 Total net assets or fund balances in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year - Part III, column (a), line 30 (must agree with end-ot-year figure reported on prior year's return) 26 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 3 Decreases not included in line 2 (itemize) ▶ 3 See Statement 4 5 870.   |     |      |  |                   |                                       |             |
| 18   Grants payable   19   Deferred revenue   20   Loans from officers, directors, trustees, and other disqualified persons   21   Mortgages and other notes payable   22   Other liabilities (describe  |     | 16   | Total assets (to be completed by all filers)   | 84003.            | 84023.                                | 21600.      |
| 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disquabified persons 21 Mortgages and other notes payable 22 Other liabilities (describe ▶ 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0  |     | 17   |  |                   |                                       |             |
| 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe ►  23 Total liabilities (add lines 17 through 22)  Conditions that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.  Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Temporarily restricted 28 Pard-in or capital surplus, or land, bldg , and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances  1 Total net assets or fund balances at beginning of year - Part III, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  1 Total net assets or fund balances at beginning of year - Part III, column (a), line 30 Conditions and the surplus of the surplu  |     | 18   | · ·  |                   | · · · · · · · · · · · · · · · · · · · |             |
| 23 Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.  24 Unrestricted  25 Temporarily restricted  26 Permanently restricted  27 Capital stock, trust principal, or current funds  28 Paid-in or capital surplus, or land, bidg , and equipment fund  29 Retained earnings, accumulated income, endowment, or other funds  30 Total net assets or fund balances  1 Total liabilities and net assets/fund balances  1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other inacidities (add lines 17 through 22)  5 Decreases not included in line 2 (itemize)  See Statement 4  5 870.   | es  | 19   | Deferred revenue   |                   |                                       |             |
| 23 Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.  24 Unrestricted  25 Temporarily restricted  26 Permanently restricted  27 Capital stock, trust principal, or current funds  28 Paid-in or capital surplus, or land, bidg , and equipment fund  29 Retained earnings, accumulated income, endowment, or other funds  30 Total net assets or fund balances  1 Total liabilities and net assets/fund balances  1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other inacidities (add lines 17 through 22)  5 Decreases not included in line 2 (itemize)  See Statement 4  5 870.   | ij  | 20   |  |                   |                                       |             |
| 23 Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.  24 Unrestricted  25 Temporarily restricted  26 Permanently restricted  27 Capital stock, trust principal, or current funds  28 Paid-in or capital surplus, or land, bidg , and equipment fund  29 Retained earnings, accumulated income, endowment, or other funds  30 Total net assets or fund balances  1 Total liabilities and net assets/fund balances  1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other inacidities (add lines 17 through 22)  5 Decreases not included in line 2 (itemize)  See Statement 4  5 870.   | iat | 1    |  |                   |                                       |             |
| Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.  Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg , and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances 31 Total liabilities and net assets/fund balances  Part III Analysis of Changes in Net Assets or Fund Balances  Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize)   See Statement 4 5 870.  | _   | 22   | Other liabilities (describe  |                   |                                       |             |
| Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.  Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg , and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances 31 Total liabilities and net assets/fund balances  Part III Analysis of Changes in Net Assets or Fund Balances  Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize)   See Statement 4 5 870.  |     |      |  |                   | _                                     |             |
| and complete lines 24 through 26 and lines 30 and 31.  24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances  1 Total liabilities and net assets/fund balances  1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  20 Enter amount from Part I, line 27a 31 Other increases not included in line 2 (itemize)  20 See Statement 4  31 See Statement 4  32 See Statement 4  33 Other increases not included in line 2 (itemize)  34 Add lines 1, 2, and 3  35 Decreases not included in line 2 (itemize)  36 Universified  37 Universtricted  38 Universtricted  48 Universtricted  58 Universtricted  58 Universtricted  58 Universtricted  58 Universtricted  58 Universtricted  58 Universtricted  69 Permanently restricted  70 Universtricted  70 Universtr | _   | 23   |  | U .               | <u> </u>                              |             |
| 24 Unrestricted   25 Temporarily restricted   26 Permanently restricted   27 Temporarily restricted   28 Permanently restricted   28 Permanently restricted   29 Permanently restricted   29 Permanently restricted   29 Permanently restricted   20   20   20   20   20   20   20   2   |     |      |  |                   |                                       |             |
| 31 Total liabilities and net assets/fund balances   84003.   84023.     Part III   Analysis of Changes in Net Assets or Fund Balances     Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)   1   | ģ   | ١    | •  |                   |                                       |             |
| 31 Total liabilities and net assets/fund balances   84003.   84023.     Part III   Analysis of Changes in Net Assets or Fund Balances     Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)   1   | ĕ   | 1    |  |                   |                                       |             |
| 31 Total liabilities and net assets/fund balances   84003.   84023.     Part III   Analysis of Changes in Net Assets or Fund Balances     Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)   1   | ala | i    | •  |                   | <del> </del>                          |             |
| 31 Total liabilities and net assets/fund balances   84003.   84023.     Part III   Analysis of Changes in Net Assets or Fund Balances     Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)   1   | Ā   | 26   |  |                   |                                       |             |
| 31 Total liabilities and net assets/fund balances   84003.   84023.     Part III   Analysis of Changes in Net Assets or Fund Balances     Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)   1   | 5   | ı    | •  |                   |                                       |             |
| 31 Total liabilities and net assets/fund balances   84003.   84023.     Part III   Analysis of Changes in Net Assets or Fund Balances     Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)   1   | 5   |      |  | ۱ ،               | ^                                     |             |
| 31 Total liabilities and net assets/fund balances   84003.   84023.     Part III   Analysis of Changes in Net Assets or Fund Balances     Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)   1   | ets |      |  |                   |                                       |             |
| 31 Total liabilities and net assets/fund balances   84003.   84023.     Part III   Analysis of Changes in Net Assets or Fund Balances     Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)   1   | Ass |      |  | 1                 |                                       |             |
| 31 Total liabilities and net assets/fund balances   84003.   84023.     Part III   Analysis of Changes in Net Assets or Fund Balances     Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)   1   | et/ | I    |  |                   |                                       |             |
| Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶  5 See Statement 4  5 870.  | Z   | 30   | I Oral liet desers of infin paralices  | 04003.            | 04023.                                |             |
| Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶  5 See Statement 4  5 870.  |     | 21   | Total liabilities and not assets found balances  | 84003             | 84023                                 |             |
| 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ►  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ►  5 See Statement 4  5 84003.  84003.   |     |      |  | •                 | 040231                                |             |
| (must agree with end-of-year figure reported on prior year's return)     1     84003.       2 Enter amount from Part I, line 27a     2     890.       3 Other increases not included in line 2 (itemize)     3     0.       4 Add lines 1, 2, and 3     4     84893.       5 Decreases not included in line 2 (itemize)     See Statement 4     5     870.   | P   | art  | Analysis of Changes in Net Assets or Fund E  | Balances          |                                       |             |
| (must agree with end-of-year figure reported on prior year's return)     1     84003.       2 Enter amount from Part I, line 27a     2     890.       3 Other increases not included in line 2 (itemize)     3     0.       4 Add lines 1, 2, and 3     4     84893.       5 Decreases not included in line 2 (itemize)     See Statement 4     5     870.   | 1   | Tota | I net assets or fund balances at beginning of year - Part II. column (a) line                                  | 30                |                                       |             |
| 2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize)  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize)  5 See Statement 4  2 890.  4 84893.   | •   |      |  | · ••              | 1                                     | 84003.      |
| 3 Other increases not included in line 2 (itemize) ► 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 5 See Statement 4 5 870.   | 2   | •    |  |                   | <del></del>                           |             |
| 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) See Statement 4 5 84893.  |     |      | _  |                   | <del></del>                           | <del></del> |
| 5 Decreases not included in line 2 (itemize) ► See Statement 4 5 870.  |     |      |  |                   |                                       |             |
| 0.4000   |     |      |  | See St            | <u> </u>                              | 870.        |
|  |     |      |  |                   |                                       | 84023.      |

923511 02-02-10

|  |                   | sses for Tax on In                                      |  |                                    |  | -                       |                        | <u> </u>                       | 3237 10g00                         |
|--|-------------------|---|--|------------------------------------|--|-------------------------|------------------------|--------------------------------|------------------------------------|
| (a) List and   | describe the ki   | nd(s) of property sold (e g<br>or common stock, 200 shs | , real estate,                           | moone                              | P -  | ow acquired<br>Purchase | (c) Date a<br>(mo , da |                                | (d) Date sold<br>(mo., day, yr)    |
| <del> </del>   |                   |   |  |                                    | U  | - Donation              |                        |                                |                                    |
| <u>1a</u><br>b   | NONE              | <del>-</del>  |  |                                    | <del> </del>                                     | -                       |                        |                                |                                    |
| C  |                   |   |  |                                    | <del>                                     </del> |                         |                        |                                |                                    |
| d  |                   |   |  |                                    | 1  |                         |                        |                                |                                    |
| 6  | -                 |   |  |                                    |  |                         |                        |                                |                                    |
| (e) Gross sales price  | (1)               | Depreciation allowed (or allowable)                     |  | t or other basis<br>xpense of sale |  |                         |                        | ain or (loss)<br>s (f) minus ( |                                    |
| a  |                   |   |  |                                    |  |                         |                        |                                |                                    |
| b  |                   |   |  |                                    |  |                         |                        |                                |                                    |
| <u>C</u>   |                   |   |  |                                    |  |                         |                        |                                |                                    |
| d  |                   | <u> </u>  |  |                                    |  |                         |                        |                                | <del> </del>                       |
| <u>e</u>   |                   |   | L  |                                    |  |                         |                        |                                |                                    |
| Complete only for assets s                                     | howing gain in    | column (h) and owned by                                 | (  |                                    | -  |                         |                        | iol (h) gain<br>not less thai  |                                    |
| (i) FMV as of 12/31/69   |                   | (j) Adjusted basis<br>as of 12/31/69                    |  | cess of col (I)<br>col (J), if any |  |                         |                        | (from col (                    |                                    |
| <u>a</u>   |                   | ·   |  |                                    |  |                         |                        |                                |                                    |
| <u>b</u>   |                   |   |  |                                    |  |                         |                        |                                |                                    |
| C  |                   |   |  |                                    |  |                         |                        |                                |                                    |
| <u>d</u>   |                   |   |  |                                    |  |                         |                        |                                | <del></del>                        |
| <u>e</u>   |                   |   |  |                                    |  | <u> </u>                |                        |                                |                                    |
| 2 Capital gain net income or (                                 | net capital loss  | If gain, also enter<br>If (loss), enter -0              | r in Part I, line '<br>- in Part I, line | 7<br>7                             | }[   | 2                       |                        |                                |                                    |
| 3 Net short-term capital gain if gain, also enter in Part I, I | ine 8, column (   | ined in sections 1222(5) ar                             |  |                                    | }  |                         |                        |                                |                                    |
| If (loss), enter -0- in Part I,                                | ine 8             | Section 4940(e) for                                     | Poducod                                  | Tay on Not                         | t Inv  | stment inc              | ome                    |                                |                                    |
|  |                   |   |  |                                    | -  |                         | OITIC                  |                                |                                    |
| (For optional use by domestic (                                | private foundati  | ons subject to the section 4                            | 494U(a) tax on                           | net investment ii                  | ncome  | )                       |                        |                                |                                    |
| If section 4940(d)(2) applies, le                              | eave this part b  | ank   |  |                                    |  |                         |                        |                                |                                    |
| Was the foundation liable for th                               | na cantion 4042   | tay on the dictributable an                             | nount of any ve                          | ar in the bace ne                  | rind2  |                         |                        |                                | Yes X No                           |
| If "Yes," the foundation does no                               |                   |   |  |                                    | illou ,  |                         |                        |                                |                                    |
| 1 Enter the appropriate amou                                   |                   |   |  |                                    | ies  |                         |                        |                                |                                    |
| (a)  |                   | (b)   |  |                                    | (c)  |                         |                        | 044                            | (d)                                |
| Base periód years<br>Calendar year (or tax year be             | S<br>eainnina in) | Adjusted qualifying dis                                 | tributions                               | Net value of no                    |  | ıtable-use assets       | ŀ                      |                                | pution ratio<br>rided by col. (c)) |
| 2008   | · g g/            |   | 6066.                                    | -                                  |  | 20422                   |                        | ·                              | .297033                            |
| 2007   |                   |   | 15845.                                   |                                    |  | 13835                   | •                      |                                | 1.145284                           |
| 2006   |                   |   | 7569.                                    |                                    |  | 75567                   | •                      | •                              | .100163                            |
| 2005   |                   |   | 7054.                                    | -                                  |  | 69071                   |                        |                                | .102127                            |
| 2004   |                   |   | 2448.                                    |                                    |  | 41388                   | •                      |                                | .059148                            |
|  |                   |   |  |                                    |  |                         |                        |                                | ·                                  |
| 2 Total of line 1, column (d)                                  |                   |   |  |                                    |  |                         | 2                      |                                | 1.703755                           |
| 3 Average distribution ratio fo                                | or the 5-year ba  | se period - divide the total                            | on line 2 by 5,                          | or by the numbe                    | r of ye  | ars                     |                        |                                |                                    |
| the foundation has been in                                     | existence if less | s than 5 years  |  |                                    |  |                         | 3                      |                                | .34075                             |
|  |                   |   |  |                                    |  |                         |                        |                                |                                    |
| 4 Enter the net value of nonch                                 | nantable-use as   | sets for 2009 from Part X,                              | line 5                                   |                                    |  |                         | 4                      |                                | 75550                              |
|  |                   |   |  |                                    |  |                         |                        |                                |                                    |
| 5 Multiply line 4 by line 3                                    |                   |   |  |                                    |  |                         | 5                      |                                | 25744                              |
|  |                   |   |  |                                    |  |                         |                        |                                |                                    |
| 6 Enter 1% of net investment                                   | income (1% of     | Part I, line 27b)                                       |  |                                    |  |                         | 6                      |                                | 44.                                |
|  |                   |   |  |                                    |  |                         |                        |                                | 05500                              |
| 7 Add lines 5 and 6  |                   |   |  |                                    |  |                         | 7                      | ļ                              | 25788                              |
| 8 Enter qualifying distribution                                | is from Part VII  | line 4  |  |                                    |  |                         | 8                      |                                | 8740                               |
| If line 8 is equal to or greate                                |                   |   | 1b, and comp                             | lete that part usi                 | ng a 1°  | % tax rate              |                        | I                              | <u> </u>                           |
| See the Part VI instructions                                   |                   |   |  |                                    |  |                         |                        |                                |                                    |

Form **990-PF** (2009)

KRISHN02

b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2009)

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form **990-PF** (2009)

X

3b

4a

Yes X No

N/A

during the year?

| Form 990-PF (2009) THE KRISHNARPAN FOUNDATI   | ON                                 |                             | 23-26292                                       | 57   | Page 6               |
|---|------------------------------------|-----------------------------|--|--|----------------------|
| Part VII-B   Statements Regarding Activities for Which F  | Form 4720 May Be F                 | Required (contin            | ued)   |  |                      |
| 5a During the year did the foundation pay or incur any amount to  |                                    |                             |  |  | -                    |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section   | 1 4945(e))?                        | Ye                          | s X No   |  | 1                    |
| (2) Influence the outcome of any specific public election (see section 4955), o   | r to carry on, directly or indire  |                             |  |  |                      |
| any voter registration drive?   |                                    |                             | s X No   |  |                      |
| (3) Provide a grant to an individual for travel, study, or other similar purposes   | ?                                  | Ye                          | s X No   |  |                      |
| (4) Provide a grant to an organization other than a charitable, etc., organization  | n described in section             |                             | - I  |  |                      |
| 509(a)(1), (2), or (3), or section 4940(d)(2)?  |                                    | Ye                          | s X No   |  |                      |
| (5) Provide for any purpose other than religious, charitable, scientific, literary,   | or educational purposes, or f      |                             | <u> </u>                                       |  |                      |
| the prevention of cruelty to children or animals?   |                                    | Ye                          | s X No   |  |                      |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc  | der the exceptions described i     | n Regulations               | /-   |  |                      |
| section 53 4945 or in a current notice regarding disaster assistance (see instru  | ctions)?                           |                             | · — –  | 5b   |                      |
| Organizations relying on a current notice regarding disaster assistance check h   |                                    |                             |  |  |                      |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi  |                                    | . —                         |  |  |                      |
| expenditure responsibility for the grant?   |                                    | /A Ye                       | s L No   |  |                      |
| If "Yes," attach the statement required by Regulations section 53.494   |                                    |                             |  |  |                      |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to   | pay premiums on                    |                             | ( <del>)</del>                                 |  |                      |
| a personal benefit contract?  |                                    | Ye                          | s X No   |  | v                    |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p   | ersonal benefit contract?          |                             |  | 6b   | X                    |
| If "Yes" to 6b, file Form 8870  |                                    |                             | s X No   |  |                      |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s  |                                    | TE                          |  | 7b   | <del></del>          |
| b If yes, did the foundation receive any proceeds or have any net income attribute.    Doct Mile   Information About Officers, Directors, Trust |                                    | nagore Highly               |  | / 0  |                      |
| Part VIII Paid Employees, and Contractors   | ees, roundation ma                 | inagers, migni              | ,  |  |                      |
| 1 List all officers, directors, trustees, foundation managers and their   | compensation.                      |                             |  |  |                      |
|   | (b) Title, and average             | (c) Compensation            | (d) Contributions to<br>employee benefit plans | (e   | Expense count, other |
| (a) Name and address  | hours per week devoted to position | (If not paid,<br>enter -0-) | and deterred compensation                      |  | llowances            |
| MUKUND SHETH  | DIRECTOR                           |                             |  |  |                      |
| 966 HUNT DR   |                                    |                             |  |  |                      |
| YARDLEY PA  | 3.00                               | 0.                          | 0.   |  | 0.                   |
|   | DIRECTOR                           | 1                           |  |  |                      |
| 966 HUNT DR   |                                    |                             |  |  | _                    |
| YARDLEY PA  | 2.00                               | 0.                          | 0.   |  | 0.                   |
|   | DIRECTOR                           |                             |  |  |                      |
| US 301 SOUTH OF WILSON  |                                    |                             |  |  |                      |
| NC  | 1.00                               | 0.                          | 0.   |  | 0.                   |
|   | DIRECOTR                           |                             |  |  |                      |
| 1366 CORNEROB RD  | 1 00                               |                             | 0  |  | ^                    |
| BENSALEM PA  2 Compensation of five highest-paid employees (other than those inc  | 1.00                               | 0.                          | 0.   |  | 0.                   |
| 2 Compensation of five highest-paid employees (other than those inc   | (b) Title, and average             | enter NONE.                 | (d) Contributions to                           | le   | e) Expense           |
| (a) Name and address of each employee paid more than \$50,000   | hours per week                     | (c) Compensation            | employee benefit plans<br>and deferred         | acc  | count, other         |
| NONE  | devoted to position                |                             | compensation                                   | -  | llowances            |
| HOND  |                                    |                             |  |  |                      |
|   |                                    |                             |  | <del>                                     </del> |                      |
|   | 1                                  |                             |  |  |                      |
|   |                                    |                             |  |  |                      |
|   | 1                                  | 1                           |  |  |                      |
|   |                                    |                             |  |  |                      |
|   |                                    |                             |  |  |                      |
|   |                                    |                             |  |  |                      |
|   |                                    | l                           |  |  |                      |
| Total number of other employees paid over \$50,000  |                                    | ···                         | <u> </u>                                       |  | 0                    |

| P       | Minimum Investment Return (All domestic foundations must co   | omplete this part. Foreign four     | dations, see i    | nstructions.) |
|---------|---|-------------------------------------|-------------------|---------------|
| 1       | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,   | purposes                            |                   |               |
| а       | Average monthly fair market value of securities   |                                     | 1a                | 57601.        |
|         | Average of monthly cash balances  |                                     | 1b                | 19100.        |
|         | Fair market value of all other assets   |                                     | 10                |               |
|         | Total (add lines 1a, b, and c)  |                                     | 1d                | 76701.        |
|         | Reduction claimed for blockage or other factors reported on lines 1a and  |                                     |                   |               |
| -       | 1c (attach detailed explanation)  | 0.                                  |                   |               |
| 2       | Acquisition indebtedness applicable to line 1 assets  |                                     | 2                 | 0.            |
| 3       | Subtract line 2 from line 1d  |                                     | 3                 | 76701.        |
| 4       | Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see in   | structions)                         | 4                 | 1151.         |
| 5       | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part \  | i                                   | 5                 | 75550.        |
| 6       | Minimum investment return Enter 5% of line 5  |                                     | 6                 | 3778.         |
|         | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) foreign organizations check here  X and do not complete this part ) | ) private operating foundations an  | d certain         |               |
| 1       | Minimum investment return from Part X, line 6   |                                     | 1                 |               |
| 2a      | Tax on investment income for 2009 from Part VI, line 5  |                                     |                   |               |
| b       | Income tax for 2009 (This does not include the tax from Part VI)  |                                     |                   |               |
| C       | Add lines 2a and 2b   |                                     | 2c                |               |
| 3       | Distributable amount before adjustments Subtract line 2c from line 1  |                                     | 3                 |               |
| 4       | Recoveries of amounts treated as qualifying distributions   |                                     | 4                 |               |
| 5       | Add lines 3 and 4   |                                     | 5                 |               |
| 6       | Deduction from distributable amount (see instructions)  |                                     | 6                 |               |
| 7       | Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, lin  | ne 1                                | 7                 |               |
| <u></u> | art XII Qualifying Distributions (see instructions)   |                                     |                   |               |
| 1       | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes   |                                     |                   | 8740.         |
| а       | Expenses, contributions, gifts, etc - total from Part I, column (d), line 26  |                                     | 1a                | 0,40.         |
| þ       |   |                                     | 1b                |               |
| 2       | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.   | , purposes                          | 2                 | <del></del>   |
| 3       | Amounts set aside for specific charitable projects that satisfy the   |                                     |                   |               |
| а       |   |                                     | 3a                | <del></del>   |
| b       | Cash distribution test (attach the required schedule)   |                                     | 3b                | 0740          |
| 4       | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part  |                                     | 4                 | 8740.         |
| 5       | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment  | t                                   |                   | 0             |
|         | income Enter 1% of Part I, line 27b   |                                     | 5                 | 0.            |
| 6       | Adjusted qualifying distributions. Subtract line 5 from line 4  |                                     | _6                | 8740.         |
|         | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca<br>4940(e) reduction of tax in those years             | alculating whether the foundation ( | qualifies for the | section       |

Part XIII Undistributed Income (see instructions)

|   | (a)<br>Corpus                         | (b)<br>Years prior to 2008   | (c)<br>2008                            | (d)<br>2009 |
|---|---------------------------------------|--|--|-------------|
| 1 Distributable amount for 2009 from Part XI, line 7  |                                       |  |  | 0.          |
| 2 Undistributed income, if any, as of the end of 2009   |                                       | n nii  |  |             |
| a Enter amount for 2008 only  |                                       |  | 0.                                     |             |
| b Total for prior years   |                                       |  |  |             |
|   |                                       | 0.   |  |             |
| 3 Excess distributions carryover, if any, to 2009   |                                       |  |  |             |
| a From 2004   |                                       |  |  |             |
| b From 2005   |                                       |  |  |             |
| c From 2006   |                                       |  |  |             |
| d From 2007   |                                       |  |  |             |
| e From 2008   |                                       |  |  |             |
| f Total of lines 3a through e   | 0.                                    |  |  |             |
| 4 Qualifying distributions for 2009 from  |                                       |  |  |             |
| Part XII, line 4 ► \$ N/A   |                                       |  | _                                      |             |
| a Applied to 2008, but not more than line 2a  | · · · · · · · · · · · · · · · · · · · | to construct the second | 0.                                     |             |
| b Applied to undistributed income of prior  |                                       | _  |  |             |
| years (Election required - see instructions)  |                                       | 0.   | tari temanahan                         |             |
| c Treated as distributions out of corpus  | _                                     |  |  |             |
| (Election required - see instructions)  | 0.                                    | - allianisma a amb allianistanta   |  |             |
| d Applied to 2009 distributable amount  |                                       |  |  | 0.          |
| e Remaining amount distributed out of corpus  | 0.                                    |  |  |             |
| 5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))      | 0.                                    |  |  | 0.          |
| 6 Enter the net total of each column as Indicated below   |                                       |  |  |             |
| 2 Corpus Add lines 3f, 4c, and 4e Subtract line 5   | 0.                                    |  |  |             |
| b Prior years' undistributed income Subtract  |                                       |  |  | ,           |
| line 4b from line 2b  |                                       | 0.   |  |             |
| c Enter the amount of prior years'  |                                       |  | ······································ |             |
| undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed |                                       | 0.   |  |             |
| d Subtract line 6c from line 6b Taxable   |                                       |  |  |             |
| amount - see instructions   |                                       | 0.   |  |             |
| e Undistributed income for 2008 Subtract line   |                                       |  |  |             |
| 4a from line 2a Taxable amount - see instr  |                                       |  | 0.                                     |             |
| f Undistributed income for 2009 Subtract  |                                       |  |  |             |
| lines 4d and 5 from line 1. This amount must  |                                       |  |  |             |
| be distributed in 2010  |                                       |  |  | 0.          |
| 7 Amounts treated as distributions out of   |                                       |  |  |             |
| corpus to satisfy requirements imposed by   |                                       |  |  |             |
| section 170(b)(1)(F) or 4942(g)(3)  | 0.                                    |  |  |             |
| 8 Excess distributions carryover from 2004  |                                       |  |  |             |
| not applied on line 5 or line 7   | 0.                                    |  |  |             |
| 9 Excess distributions carryover to 2010.   |                                       |  |  |             |
| Subtract lines 7 and 8 from line 6a   | 0.                                    |  |  |             |
| 10 Analysis of line 9   |                                       |  |  |             |
| a Excess from 2005  |                                       |  |  |             |
| b Excess from 2006  |                                       |  |  |             |
| c Excess from 2007  |                                       |  |  |             |
| d Excess from 2008  |                                       |  |  |             |
| e Excess from 2009  |                                       |  |  |             |

Page 10

| Part XIV Private Operating F  | oundations (see Insti          | ructions and Part VII-      | A, question 9)               |                              |                 |
|---|--------------------------------|-----------------------------|------------------------------|------------------------------|-----------------|
| 1 a If the foundation has received a ruling o   | r determination letter that it | is a private operating      | //                           |                              |                 |
| foundation, and the ruling is effective fo  | r 2009, enter the date of the  | ruling                      |                              | 01/02                        |                 |
| <b>b</b> Check box to indicate whether the found  | lation is a private operating  | foundation described in     |                              | 942(J)(3) or 4942            | <u>(j)(</u> 5)  |
| 2 a Enter the lesser of the adjusted net  | Tax year                       |                             | Prior 3 years                |                              | 4-1-            |
| income from Part I or the minimum   | (a) 2009                       | (b) 2008                    | (c) 2007                     | (d) 2006                     | (e) Total       |
| investment return from Part X for   | 2770                           | 1001                        | 600                          | 2212                         | 7704            |
| each year listed  | 3778.                          | 1021.                       | 692.                         | 2213.                        | 7704.           |
| b 85% of line 2a  | 3211.                          | 868.                        | 588.                         | 1881.                        | 6548.           |
| c Qualifying distributions from Part XII,   | 9740                           | 6066                        | 15045                        | 7569.                        | 38220.          |
| line 4 for each year listed   | 8740.                          | 6066.                       | 15845.                       | 7309.                        | 30220           |
| d Amounts included in line 2c not   |                                |                             |                              |                              |                 |
| used directly for active conduct of   | 0.                             | 0.                          | 0.                           | 0.                           | 0.              |
| exempt activities   | -                              | 0.                          | •                            |                              |                 |
| e Qualifying distributions made directly  |                                |                             |                              |                              |                 |
| for active conduct of exempt activities   | 8740.                          | 6066.                       | 15845.                       | 7569.                        | 38220.          |
| Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon   | 6740.                          | 0000.                       | 13043.                       | 7309.                        | 30220           |
| <ul> <li>a "Assets" alternative test - enter</li> <li>(1) Value of all assets</li> </ul>  | 84023.                         | 84003.                      | 78659.                       | 77480.                       | 324165.         |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i)   | 84023.                         | 84003.                      | 78659.                       | 77480.                       | 324165.         |
| b "Endowment" alternative test - enter<br>2/3 of minimum investment return<br>shown in Part X, line 6 for each year<br>listed                     |                                |                             |                              |                              | 0.              |
| c "Support" alternative test - enter  |                                |                             |                              |                              |                 |
| (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) |                                |                             |                              |                              | 0.              |
| (2) Support from general public   |                                |                             |                              |                              |                 |
| and 5 or more exempt<br>organizations as provided in<br>section 4942(j)(3)(B)(iii)  |                                |                             |                              |                              | 0               |
| (3) Largest amount of support from  |                                |                             |                              |                              |                 |
| an exempt organization  |                                |                             |                              |                              | 0,              |
| (4) Gross investment income   |                                |                             | <u></u> -                    |                              | 0.              |
| Part XV Supplementary Info  |                                |                             | f the foundation             | had \$5,000 or more          | e in assets     |
| at any time during t  | the year-see the in            | structions.)                |                              |                              |                 |
| 1 Information Regarding Foundation  | on Managers:                   |                             |                              |                              |                 |
| a List any managers of the foundation wh<br>year (but only if they have contributed r   |                                |                             | ibutions received by the f   | oundation before the close   | of any tax      |
| None  |                                |                             |                              |                              |                 |
| b List any managers of the foundation who other entity) of which the foundation ha  |                                | stock of a corporation (    | or an equally large portion  | of the ownership of a part   | nership or      |
| None  |                                |                             |                              |                              |                 |
| 2 Information Regarding Contribut<br>Check here ► X if the foundation of  | only makes contributions to    | preselected charitable of   | organizations and does no    |                              | ts for funds If |
| the foundation makes gifts, grants, etc   | (see instructions) to individ  | luals or organizations ur   | nder other conditions, cor   | nplete items 2a, b, c, and d |                 |
| a The name, address, and telephone num  | ber of the person to whom      | applications should be a    | addressed                    |                              |                 |
| <b>b</b> The form in which applications should l  | pe submitted and information   | on and materials they sh    | ould include                 | <del></del>                  |                 |
| c Any submission deadlines  |                                |                             |                              |                              |                 |
| d Any restrictions or limitations on award  | s, such as by geographical     | areas, charitable fields, l | kınds of institutions, or ot | her factors                  |                 |
|   |                                |                             |                              |                              |                 |

KRISHN02

| Part XV Supplementary Information            | (continued)  |                         |                                  |                         |
|--|--|-------------------------|----------------------------------|-------------------------|
| 3 Grants and Contributions Paid During the Y | ear or Approved for Future   | Payment                 | <u> </u>                         |                         |
| Recipient                                    | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of | Purpose of grant or contribution | Amount                  |
| Name and address (home or business)          | or substantial contributor   | recipient               |                                  |                         |
| a Paid during the year                       |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
| See Statement 7                              |  |                         |                                  |                         |
| Total  |  |                         | <b>&gt;</b> 3a                   | 8740                    |
| b Approved for future payment                |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
| None   |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
|  |  |                         |                                  |                         |
| Tabl   |  | L                       | <b>▶</b> 3b                      | 0                       |
| <b>Total</b><br>923611 02-02-10              |  | <del></del>             | <u>► 3D</u>                      | orm <b>990-PF</b> (2009 |

| Part XVI-A | Analysis of Income-Producing Activit | ies           |
|------------|--------------------------------------|---------------|
|            | t te coloto                          | d business in |

| Enter gross amounts unless otherwise indicated                | Unrelated        | business income |               | ded by section 512, 513, or 514 | (e)               |
|---|------------------|-----------------|---------------|---------------------------------|-------------------|
| g   | (a)              | (b)             | (c)<br>Exclu- | (d)                             | Related or exempt |
| 1 Program service revenue                                     | Business<br>code | Amount          | sion          | Amount                          | function income   |
|   |                  |                 |               |                                 |                   |
| ab  | _                |                 |               |                                 |                   |
| -   | _                | -               |               |                                 |                   |
| d   |                  | -               |               |                                 |                   |
| e   | 1                |                 |               |                                 |                   |
| 1   |                  |                 |               |                                 |                   |
| g Fees and contracts from government agencies                 |                  |                 |               |                                 |                   |
| 2 Membership dues and assessments                             |                  |                 |               |                                 |                   |
| 3 Interest on savings and temporary cash investments          |                  |                 |               |                                 |                   |
| 4 Dividends and interest from securities                      |                  |                 | 03            |                                 | 4760.             |
| 5 Net rental income or (loss) from real estate                |                  |                 |               |                                 |                   |
| a Debt-financed property                                      |                  |                 |               |                                 |                   |
| b Not debt-financed property                                  |                  |                 |               |                                 |                   |
| 6 Net rental income or (loss) from personal                   |                  |                 |               |                                 |                   |
| property  |                  |                 |               |                                 |                   |
| 7 Other investment income                                     |                  |                 |               |                                 |                   |
| 8 Gain or (loss) from sales of assets other                   |                  |                 |               |                                 |                   |
| than inventory  | <u> </u>         |                 |               |                                 |                   |
| 9 Net income or (loss) from special events                    |                  |                 |               |                                 |                   |
| 10 Gross profit or (loss) from sales of inventory             |                  |                 |               |                                 |                   |
| 11 Other revenue  |                  |                 |               |                                 |                   |
| a   |                  |                 |               |                                 |                   |
| b   |                  |                 |               |                                 |                   |
| C   |                  |                 |               |                                 |                   |
| d   | 1                |                 |               |                                 |                   |
| 8   |                  |                 |               |                                 |                   |
| 12 Subtotal Add columns (b), (d), and (e)                     |                  | (               | ).            | 0.                              | 4760.             |
| 13 Total. Add line 12, columns (b), (d), and (e)              | <del></del>      |                 |               | 13                              | 4760.             |
| (See worksheet in line 13 instructions to verify calculations | )                |                 |               | _                               |                   |

#### Relationship of Activities to the Accomplishment of Exempt Purposes Part XVI-B

| Line No. | Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) |                  |              |                              |  |  |  |  |  |  |
|----------|--|------------------|--------------|------------------------------|--|--|--|--|--|--|
| 4        |  |                  | ·            | ENTITIES EIGHTER DOMESTIC OR |  |  |  |  |  |  |
|          |  |                  |              | RELIGIOUS PURPOSES.          |  |  |  |  |  |  |
| 8        | WILL ASSIST  |                  |              | ENTITIES EIGHTER DOMESTIC OR |  |  |  |  |  |  |
|          | FOREIGN FOR  | EDUCATIONAL, HEA | ALTHCARE AND | RELIGIOUS PURPOSES.          |  |  |  |  |  |  |
|          |  |                  |              |                              |  |  |  |  |  |  |
|          |  |                  |              |                              |  |  |  |  |  |  |
|          |  |                  |              |                              |  |  |  |  |  |  |
|          |  |                  |              |                              |  |  |  |  |  |  |
|          |  |                  |              |                              |  |  |  |  |  |  |
|          |  |                  |              |                              |  |  |  |  |  |  |
|          |  |                  |              |                              |  |  |  |  |  |  |
|          |  |                  |              |                              |  |  |  |  |  |  |
|          |  |                  |              |                              |  |  |  |  |  |  |
|          |  |                  |              |                              |  |  |  |  |  |  |
|          |  |                  |              |                              |  |  |  |  |  |  |
|          |  |                  |              |                              |  |  |  |  |  |  |
|          |  |                  |              |                              |  |  |  |  |  |  |
|          |  |                  |              |                              |  |  |  |  |  |  |
|          |  |                  |              |                              |  |  |  |  |  |  |

923621 02-02-10

| 1 Did the organization directly or indirectly reagage in any of the following with any other organizations?  1 Transfers from the reporting foundation to a noncharitable exempt organization of.  (1) Cash (2) Other assets (3) Select assets to a noncharitable exempt organization (3) Select assets to a noncharitable exempt organization (3) Select assets to a noncharitable exempt organization (3) Relatal of facilities, equipment, or other assets (4) Remotivement arrangements (5) Loans or being quarientees (6) Performance of services or insembership or fundraising solicitations (5) Loans for being quarientees (6) Performance of services or insembership or fundraising solicitations (7) If the asset or any of the above or "Sec." complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services green by the reporting foundation. If the foundation received less than fair market value in any transaction or shaning a rangement, show in column (d) the value of the goods, other assets, or services received (1) Amount involved (2) Name of reporting foundation in section 521?  (3) If Yes, complete the following schedule (1) Name of reporting foundation of resistances, and sharing arrangements, and sharing arrangements in Yes.  (4) Line to Quarie the following schedule (3) Name of organization (4) Description of resistances, and sharing arrangements  (5) Loans or foundation directly or indirectly sfiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 521?  (6) Line as (1) Performance or section 501(c) (3) or in section 521?  (7) If Yes, complete the following schedule (8) Name of organization (9) Performance or sections of relationship in the following schedule and statements, and to the best of my knowledge and ballet, it is bus, comed, and complete Declaration or inspect (both the history or declaraging based or all information of which respect to the production.          | ۲       | <u>art,XVII</u> Information Regarding Transfers To a<br>Exempt Organizations        | and Transactions ar                 | nd Relationships With Nonc                  | haritable         | •           |          |
|--|---------|---|-------------------------------------|---|-------------------|-------------|----------|
| the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?  Transfers from the reporting foundation to a noncharitable exempt organization of.  (1) Cash  (2) Other assets  (1) Sales of assets to a noncharitable exempt organization  (1) Sales of assets to an anoncharitable exempt organization  (2) Purchase of assets from a noncharitable exempt organization  (3) Rental of facilities, equipment, or other assets  (4) Reminiscrations arrangements  (5) Loans or loan guarantees  (6) Partonname or sample or organizations  (7) Reminiscration or sample organization organi | 1       |   | on with any other organization      | described in section 501/c) of              |                   | Vas         | No       |
| a Transfers from the reporting foundation to a noncharitable exempt organization of.  (1) Cash  (2) Other assets  10 Other transactions  (2) Purchases of assets from a noncharitable exempt organization  (2) Purchases of assets from a noncharitable exempt organization  (3) Rental of catellates, ecumpment, or other assets  (4) Remindusament arrangements  (5) Loans or than guarantees  (6) Performance of services or membership or fundraising solicitations  (7) Summary of the advisers of the services or membership or fundraising solicitations  (8) Performance of services or membership or fundraising solicitations  (9) Performance of services or membership or fundraising solicitations  (9) Performance of services or membership or fundraising solicitations  (9) Performance of services or membership or fundraising solicitations  (9) Performance of services or membership or fundraising solicitations  (9) Performance of services or membership or fundraising solicitations  (9) Performance of services or membership or fundraising solicitations  (9) Performance of services or membership or fundraising solicitations  (9) Performance of services or membership or fundraising solicitations  (9) Performance of services or membership or fundraising solicitations  (10) Performance of services or membership or fundraising solicitations  (10) Performance of services or membership or fundraising solicitations  (10) Performance of services or membership or fundraising solicitations  (10) Performance of services or membership or fundraising solicitations  (10) Performance of services or membership or fundraising solicitations  (10) Performance of services or membership or fundraising solicitations  (10) Performance of services or membership or fundraising solicitations  (10) Performance or services or membership or fundraising solicitations  (10) Performance or services or membership or fundraising solicitations  (10) Performance or fundraising solicitations  (10) Performance or services or membership or fundraising solicitations  (10  | •       |   |                                     |   |                   | 163         | 140      |
| (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Rental organization (5) Loans or total guarantees (5) Loans or total guarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) It fills I X (8) Performance of services or membership or fundrasing solicitations (8) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance (9) Performance of services or membership or fundrasing solicitations (9) Amount involved (1) Name of organization (1) Amount involved (1) Name of organization (1) Description of resolution, services services received in section 501(c) of the Code (other than section 501(c)) or in section 501(c) of the Code (other than section 501(c)) or in section 501(c) organization (1) N/A   **Description of resolution of resolution shall receive the services of performance organization or section 501(c) organization (1) N/A  **Description of resolution shall receive the services of performance organization or section 501(c) organization (1) N/A  **Description of resolution shall receive the services of performance organization or section 501(c) organization (1) N/A  **Descri | а       |   | <u>=</u>                            |   |                   |             |          |
| (2) Other assets  (3) Other tonsactions  (1) Salks of assets to a noncharitable exempt organization  (3) Pertial of facilities, equipment, or other assets  (4) Reinbursement arrangements  (5) Loans or float guarantees  (5) Loans or float guarantees  (6) Performance of services or membership or fundrating solicitations  (6) Performance of services or membership or fundrating solicitations  (7) If the answer to any of this above in Yes, Complete the following schedule: Column (b) should always show the fair market value of the goods, other assets, or paid employees  (8) The answer to any of this above in Yes, Complete the following schedule: Column (b) should always show the fair market value of the goods, other assets, or paid employees  (9) Limit on White the sporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) Manual involved  (1) Amount involved  (1) Name of noncharitable exempt organization  (2) Name of noncharitable exempt organization  (3) Manual organization  (4) Description of trensfers, transactions, and sharing arrangements  (5) Limit organization  (6) Description of trensfers, transactions, and sharing arrangements  (a) Name of organization  (b) Amount involved  (c) Name of noncharitable exempt organization  (b) Type of organization  (c) Description of resistonship  (d) Description of resistonship  (e) Description of resistonship  (f) Description of resistonship  (g) Name of proparation of property interests are successed to an information of vision proparation and stationers, and the proparation of property interests are successed to an information of vision proparation are successed to a service organization of the proparation of property interests are successed to a service organization of the proparation of th |         | , -   | ga                                  |   | 1a(1)             |             | Х        |
| Description of relationships   State of assets to a nonchartable exempt organization   1961   X   1961   X   1962   X   1963   X   1963   X   1965   X     |         | • •   |                                     |   |                   |             |          |
| (2) Purchases of assets from a noncharitable exempt organization (3) Rental of Cacilities, equipment, or other assets (10) X (4) Rental organizations (5) Loans or foan guarantees (6) Performance of services or membership or fundratising solicitations (6) Performance of services or membership or fundratising solicitations (7) If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (10) Amount invoked (c) Name of noncharitable exempt organization (d) Description of trensfers, transactions, and sharing arrangements in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship  If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship  If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship  If the answer to any transactions of relationship  If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship  If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship  If the control of the control of the control of organization (b) Type of organization (c) Description of relationship  If the control of the control of the control of organization (c) Type of organization (c) Description of relationship  If the control of the control of the control of organization (c) Type of organization (c) Description of relationship  If the control of the control of organization (c) Type of organization (c) Description of re | þ       | Other transactions  |                                     |   |                   |             |          |
| (3) Rental of facilities, equipment, or other assets (4) Remibursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations (7) Loans or loan guarantees (8) Performance of services or membership or fundraising solicitations (8) Performance of services or membership or fundraising solicitations (9) Performance of services or membership or fundraising solicitations (9) In the answer to any of the above is "Yes", complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services generally the value of the goods, other assets as services sceneral (column (b) the value of the goods, other assets, or services sceneral (column (b) the value of the goods, other assets as services sceneral (column (b) the value of the goods, other assets as services sceneral (column (b) the value of the goods, other assets as services sceneral (column (b) the value of the goods, other assets as services sceneral (column (b) the value of the goods, other assets as services sceneral (column (b) the value of the goods, other assets as services sceneral (column (b) the value of the goods, other assets as services sceneral (column (b) should always show the fair market value of the goods, other assets as services sceneral (column (b) should always show the fair market value of the goods, other assets, or paid smarket value of the goods, other assets as services sceneral (column (b) should always show the fair market value of the goods, other assets, or paid smarket value on any transaction or starting assets as services as sceneral (column (b) should always show the fair market value of the goods, other assets, or paid swaps show the fair market value of the goods, other assets, or paid swaps show the fair market value of the goods, other assets, or paid swaps show the fair market value of the goods, other assets, or paid swaps show the fair market value of the goods, other assets, or saverage and saverage and saverage as a se |         | (1) Sales of assets to a noncharitable exempt organization                          |                                     |   | 16(1)             |             |          |
| (4) Reimbursement arrangements (5) Loans or toan guarantees (6) Performance of services or membership or fundraising solicitations (7) Performance of services or membership or fundraising solicitations (8) Performance of services or membership or fundraising solicitations (9) It is above in "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services received (9) Line not (b) Amount involved (1) Marie of inchangements (column) (a) the value of the goods, other assets, or services received (1) Line not (b) Amount involved (1) Marie of inchangements (column) (a) the value of the goods, other assets, or services received (1) Line not (b) Amount involved (1) Marie of inchangements (column) (a) Description of transfers, transactions, and sharing arrangements (a) Marie of inchangements (column) (colum |         | (2) Purchases of assets from a noncharitable exempt organization                    |                                     |   | 16(2)             |             |          |
| (S) Loans or loan guarantees (B) Performance of services or membership or fundraising solicitations (B) Performance of services or membership or fundraising solicitations (C) Sharing of facilities, sequipment, making lists, other assets, or paid employees (B) It was answer to any of the above is "Yes". Complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services diss than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (B) It was (D) Amount involved (C) Name of noncharitable exempt organization (B) Description of transfers, transactions, and sharing arrangements  N/A  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501 (c) of the Code (other than sections 501(c)(3)) or in section 501 (c) of the Code (other than sections 501(c)(3)) or in section 501 (c) of the Code (other than sections 501(c)(3)) or in section 501 (c) of the Code (other than sections 501 (c)(3)) or in section 501 (c) or the Code (other than sections 501 (c)(3)) or in section 501 (c) or the Code (other than sections 501 (c)(3)) or in section 501 (c) or the Code (other than sections 501 (c)(3)) or in section 501 (c) organization  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  Under penalties of populy, I declare that I have examined this return, including accompanying schedules and sittlements, and to the best of my knowledge and belief, it is tive, correct, and complete Organization of prepare (there than busy provided to the popular transfer or your penalties of popular transfer or your penalties of popular transfer or prepare (there than busy penalties to the popular transfer or your penalties of popular transfer or y |         | (3) Rental of facilities, equipment, or other assets                                |                                     |   | 16(3)             |             |          |
| (6) Performance of services or membership or fundrating solicitations  15(6) X  15 hamp of facilities, equipment, mailing lists, other assets, or paid employees  17 the answer to any of the above is "yes" complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.  (a) Line no (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transitions, and sharing amengements.  N/A  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52??  (b) If "Yes" complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship  N/A  Under penalties of pequity, I declare that I have exemised this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Checkenston of prepare plate than taxiper or following listed and all information of which prepare has any knowledge and belief, it is true, correct, and complete Checkenston of prepare plate than taxiper or following listed and all information of which prepare has any knowledge and belief, it is true, correct, and complete Checkenston of prepare plate than taxiper or following listed and all information of which prepare has any knowledge and belief, it is true, correct, and complete Checkenston of prepare plate than taxiper or following listed and all information of which prepare has any knowledge and belief, it is true, correct, and complete Checkenston of prepare plate than taxiper or following listed and all information of which prepare has any knowledge and belief, it is true, correct, and complete Checkenston o |         | (4) Reimbursement arrangements  |                                     |   | 10(4)             |             |          |
| to Sharing of facilities, equipment, mailing lists, other assets, or paid employees  d If the answer to any of the above is Yes, 'complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services raceived  (a) Line in (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements  N/A   |         | •   |                                     |   |                   |             |          |
| If the answer to any of the above is "Yes," complete the following schedule: Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (g) the value of the goods, other assets, or services received  (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements in SN/A  2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  (a) Name of organization (b) Type of organization (c) Description of relationship N/A  Under penalties of pepuly, Leadage that I have examined bits return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete the following schedules are distalled in the complete of the control of the code (other than taxings or of follows) broaders or all information of which more involved was any knowledge and belief, it is true, correct, and complete Description of peppear (ploter than taxings or of follows) broaders or all information of which more involved was any knowledge and belief, it is true, correct, and complete Description of peppear (ploter than taxings or of follows) broaders or all information of which more involved was any knowledge and belief, it is true, correct, and complete Description of peppear (ploter than taxings or of follows) broaders or all information of which more involved was any knowledge and belief, it is true, correct, and complete Description of peppear (ploter than taxings or of follows) broaders or all information of which more involved was any knowledge and belief, it is true, correct, and complete Description of peppear (ploter than taxings or of follows) broaders or all information of which  |         | <del>-</del>  |                                     |   |                   |             |          |
| or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received  (b) Amount involved  (c) Name of noncharitable exempt organization  (d) Description of transfers, transactions, and sharing arrangements  N/A  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  Under penalties of pergury, 1 declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of prepare (other than supplyer or fidulicing lib based on all information of which preparer has any knowledge  Signature of officia delivers.  Signature of officia delivers.  Preparer's identifying number of preparer (other than supplyer or fidulicing lab based on all information of which preparer has any knowledge  Signature of officia delivers.  Signature of officia delivers.  Signature of officia delivers.  Preparer's identifying number intermediate and statements, and to the best of my knowledge and belief, it is true, correct, set of the code (office than supplyer or fidulicing lab based on all information of which preparer has any knowledge  Signature of officia delivers.  Signature of officia delivers.  Preparer's identifying number intermediate and statements, and to the best of my knowledge and belief, it is true, correct, set of official delivers.  Signature of official delivers.  Signature of official delivers.  Preparer's identifying number intermediate and statements, and to the best of my knowledge and belief, it is true, correct, and the preparer has any knowledge and belief, it is true, correct, and the preparer has any knowledge and belief, |         |   | • •                                 |   |                   | Ļ           | <u> </u> |
| column (d) the value of the goods, other assets, or services received  (a) Line no  (b) Amount involved  (c) Name of noncharitable exempt organization  (d) Description of transfers, transactions, and sharing erringements  N/A  2a is the foundation directly or indirectly affliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)) or in section 527?  b if "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  Under penalties of perpury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or flaticing) to seed on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or flaticing) to seed on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or flaticing) to seed on all information of which preparer has any knowledge  Signature of office-office of the Code (other than taxpayer or flaticing) to seed on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or flaticing) to seed on all information of which preparer has any knowledge and belief, it is true, correct, and correctly one of the code (other than taxpayer or flaticing) to the preparer is interestingly in the preparer in the preparer is interestingly in the prepar | q       | · · · · · · · · · · · · · · · · · · ·   | • •                                 | -   |                   | ets,        |          |
| (8) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A  2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  3 if Yes, complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship  1   |         |   | ed less than fair market value      | in any transaction or snaring arrangeme     | nt, snow in       |             |          |
| N/A  2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  b if Yes, complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Occlaration of preparer (other than tax-payer or following the based on at information of which preparer has any knowledge  Signature of office-cal froster  Signature of office-cal froster  Preparer's Signature DILLE PATIEL & COMPANY, LLP  Firm's same (oryous, 2012 MORRIS AVE. Phone no 908-688-4234   | (a)     | · · · · · · · · · · · · · · · · · · ·   | a avamet examination                | (d) December of tweeter transmission        |                   |             |          |
| 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes  | (4)     |   | s exempt organization               | (u) Description of transfers, transactions, | and snanng an     | angeme      | ents —   |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   |         | N/A   |                                     |   |                   |             |          |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   |         |   |                                     |   |                   |             |          |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   |         |   | <del></del>                         |   |                   |             |          |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   |         |   | ·····                               |   |                   |             |          |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   |         |   |                                     |   |                   |             |          |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   |         |   |                                     |   |                   |             |          |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   |         |   |                                     |   |                   |             |          |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   |         |   |                                     |   |                   |             |          |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   | _       |   |                                     |   |                   |             |          |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   | _       |   |                                     |   |                   |             |          |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   |         |   |                                     |   |                   |             |          |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   |         |   | <del></del>                         |   |                   |             |          |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   |         |   | <del></del>                         |   |                   |             |          |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   |         |   |                                     |   |                   | <del></del> |          |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   | _       |   | <del></del>                         | <u> </u>                                    |                   |             |          |
| b If Yes, complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge  Signature of office-co triustee  Date  Title  Date  11/01/10  Check if self-employed, address, and ZIP code  Norris name (or yours its elemptoyed), address, and ZIP code  UNION , NJ 07083  | 28      |   |                                     | ations described                            | <b>г</b>          | <b>□</b> ▼  | ٦        |
| (c) Description of relationship  N/A  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge  Signature of office of trustee  Date  Title  Preparer's  Signature  Preparer's  Date  11/01/10  Firm's name (or yours identifying number employed)  address, and ZIP code  UNION, NJ 07083  Phone no 908-688-4234   |         | ,   | tion 52/7                           |   | Yes               | LA          | _l No    |
| Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) la based on all information of which preparer has any knowledge    Date  | 0       |   | (h) Type of organization            | (c) Description of relati                   | nnshin            |             |          |
| Under penaltites of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge  Signature of office of trustee  Date  Title  Preparer's signature  Firm's name (or yours if self-employed).  Address, and ZIP code  UNION, NJ 07083  Phone no 908-688-4234   | _       | · · · · · · · · · · · · · · · · · · ·   | (b) Type of organization            | (e) Bosonphon or rollan                     | ОПОПЪ             |             |          |
| and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge    Signature of office of trustee   Date   Title   | _       |   |                                     |   |                   |             |          |
| and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge    Signature of office of trustee   Date   Title   | _       | - · · · · · · · · · · · · · · · · · · ·   |                                     |   |                   |             |          |
| and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge    Signature of office of trustee   Date   Title   |         |   |                                     |   |                   |             |          |
| and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge    Signature of office of trustee   Date   Title   |         |   |                                     |   |                   |             |          |
| Signature of office of trustee    Date   Date   Title  | Ī       |   |                                     |   | it is true, come  | ct,         |          |
| Firm's name (or yours if self-employed). address, and ZIP code UNION , NJ 07083  EIN   2042 MORRIS AVE.  Phone no 908-688-4234   |         | and complete Declaration of preparer (other than taxpayer or fiduciary) is based on | all information of which preparer h | as any knowledge                            |                   |             |          |
| Firm's name (or yours if self-employed). address, and ZIP code UNION , NJ 07083  EIN   2042 MORRIS AVE.  Phone no 908-688-4234   |         |   | 1112110                             | 1 pls. len                                  |                   |             |          |
| Firm's name (or yours if self-employed). address, and ZIP code UNION , NJ 07083  EIN   2042 MORRIS AVE.  Phone no 908-688-4234   | <u></u> | Signature of office of trustee  |                                     |   |                   |             |          |
| Firm's name (or yours if self-employed). address, and ZIP code UNION , NJ 07083  EIN   2042 MORRIS AVE.  Phone no 908-688-4234   | ᇎ       | Preparer's NI   | Da                                  | te Check if Pro                             | eparer's identify | ying nun    | nber     |
| address, and Air-code UNION, NJ 0/1083 Phone no 908-688-4234   | ž       | p à É signature   |                                     |   |                   |             |          |
| address, and Air-code UNION, NJ 0/1083 Phone no 908-688-4234   |         | Firm's name (or yours DILLE PATEL & COMPA   | NY, LLP                             | EIN -                                       |                   |             |          |
| address, and Air-code UNION, NJ 0/1083 Phone no 908-688-4234   |         | 55 if self-employed), 2042 MORRIS AVE.  |                                     |   |                   | 422         | 4        |
|  | _1      | auuress, and zur code v UNION , NJ U/1983   | <del></del>                         | Phone no 908                                |                   |             |          |

# Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

## **Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

**Employer identification number** 

THE KRISHNARPAN FOUNDATION 23-2629257 Organization type (check one): Filers of: Section: 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** [X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** 🔟 For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). Schedule B (Form 990, 990-EZ, or 990-PF) (2009) LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Name of organization

Employer identification number

# THE KRISHNARPAN FOUNDATION

23-2629257

| Part I     | Contributors (see instructions)               |                             |   |
|------------|---|-----------------------------|---|
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4             | (c) Aggregate contributions | (d)<br>Type of contribution   |
| 1          | MUKUND SHETH  966 HUNT DR.  YARDLEY, PA 19067 | \$5000.                     | Person X Payroll  Noncash  (Complete Part II if there is a noncash contribution.) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4             | (c) Aggregate contributions | (d)<br>Type of contribution   |
|            |   | <b></b> \$                  | Person Payroll Noncash (Complete Part II if there is a noncash contribution.)     |
| (a)<br>No. | (b) Name, address, and ZIP + 4                | (c) Aggregate contributions | (d) Type of contribution  |
|            |   | <b>\$</b>                   | Person Payroll Noncash (Complete Part II rf there Is a noncash contribution.)     |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4             | (c) Aggregate contributions | (d) Type of contribution  |
|            |   | \$                          | Person Payroll Noncash (Complete Part II if there is a noncash contribution.)     |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4             | (c) Aggregate contributions | (d) Type of contribution  |
|            |   | <b>\$</b>                   | Person Payroll Noncash (Complete Part II if there is a noncash contribution.)     |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4             | (c) Aggregate contributions | (d)<br>Type of contribution   |
|            |   | \$                          | Person Payroll Noncash (Complete Part II if there is a noncash contribution.)     |

| Form 990-PF Dividend  | ls and | Inter                | est from                    | Secur        | rities                       | St | atement                    | 1   |
|---|--------|----------------------|-----------------------------|--------------|------------------------------|----|----------------------------|-----|
| Source  |        | Gross                | Amount                      |              | tal Gains<br>vidends         | С  | Column (A)<br>Amount       |     |
| MORGANSTANLEY   |        |                      | 4760.                       |              | 0.                           |    | 470                        | 60. |
| Total to Fm 990-PF, Part I,                                 | ln 4   |                      | 4760.                       |              | 0.                           | _  | 470                        | 60. |
| Form 990-PF   |        | Тах                  | es                          | <del>-</del> |                              | St | atement                    | 2   |
| Description   | Expe   | a)<br>enses<br>Books | (b)<br>Net Inverse ment Inc |              | (c)<br>Adjusted<br>Net Incom |    | (d)<br>Charital<br>Purpose |     |
| TAXES   |        | 95.                  |                             | 0.           |                              | 0. |                            | 0.  |
| To Form 990-PF, Pg 1, ln 18                                 |        | 95.                  |                             | 0.           |                              | 0. |                            | 0.  |
| Form 990-PF   | 0      | ther E               | xpenses                     |              |                              | St | atement                    | 3   |
| Description   | Expe   | a)<br>enses<br>Books | (b)<br>Net Inve<br>ment Inc |              | (c)<br>Adjusted<br>Net Incom |    | (d)<br>Charital<br>Purpos  |     |
| INVETMENT INTEREST  |        | 0.                   | *                           | 363.         |                              | 0. |                            | 0.  |
| FEES  |        | 35.                  |                             | 0.           |                              | 0. |                            |     |
| FEES To Form 990-PF, Pg 1, ln 23                            |        |                      |                             | 363.         |                              | 0. |                            | 0.  |
| FEES To Form 990-PF, Pg 1, ln 23 Form 990-PF Other Decrease |        | 35.                  | sets or                     | 363.         | Balances                     | 0. | atement                    | _   |
| To Form 990-PF, Pg 1, ln 23                                 | es in  | 35.                  | sets or 1                   | 363.         | Balances                     | 0. | atement<br>Amount          | 0.  |
| To Form 990-PF, Pg 1, ln 23  Form 990-PF Other Decrease     | ·      | 35.<br>35.<br>Net As |                             | 363.         | Balances                     | 0. | Amount                     | 0.  |

| Form 990-PF           | Other Investmen                                | Other Investments   |           | 5   |
|-----------------------|--|---------------------|-----------|-----|
| Description           |  | Valuation<br>Method | Book Val  | ue  |
| SMITH BARNEY          |  | Cost                | 624       | 23. |
| Total to Form 990-PF, | Part II, line 13                               |                     | 624       | 23. |
| Form 990-PF           | List of Substantial Cont<br>Part VII-A, Line 1 |                     | Statement | 6   |
| Name of Contributor   | Address  |                     |           |     |
| MUKUND SHETH          | 966 HUNT D                                     |                     |           |     |

|                                   | ts and Contributions id During the Year        | State               | ement 7 |
|-----------------------------------|--|---------------------|---------|
| Recipient Name and Address        | Recipient Relationship<br>and Purpose of Grant | Recipient<br>Status | Amount  |
| P.A.F.O.P                         | GENERAL SUPPORT                                | TAX EXEPMT          | 51.     |
| EKAL VIDHTALAYA FOUNDATION        | GENERAL SUPPORT                                | TAX EXEPMT          | 3650.   |
| CHILDREN HOSPITAL OF PHILADELPHIA | GENERAL SUPPORT                                | ТАХ ЕХЕРМТ          | 1000.   |
| LOWER MAKEFIELD TOWNSHIP          | GENERAL SUPPORT                                | ТАХ ЕХЕРМТ          | 25.     |
| ST.JUDE CHILDREN RESERCH          | GENERAL SUPPORT                                | TAX EXEPMT          | 500.    |
| NATIONAL BREAST CANCER RESERCH    | GENERAL SUPPORT                                | TAX EXEPMT          | 10.     |
| GAYATRI CHETNA CENTER             | GENERAL SUPPORT                                | ТАХ ЕХЕРМТ          | 151.    |
| VIDYA VIKAS CHARITABLE TRUST      | GENERAL SUPPORT                                | TAX EXEPMT          | 1001.   |

| THE KRISHNARPAN FOUNDATION        |                 | 23-        | -2629257 |
|-----------------------------------|-----------------|------------|----------|
| THE GEORGE WASHINGTON UNIVERSITY  | GENERAL SUPPORT | TAX EXEPMT | 500.     |
| POLICE CHIEFA ASSOCIATION         | GENERAL SUPPORT | ТАХ ЕХЕРМТ | 51.      |
| CHINMAYA MISSION                  | GENERAL SUPPORT | TAX EXEPMT | 51.      |
| SHARE & CARE FOUNDATION           | GENERAL SUPPORT | TAX EXEPMT | 400.     |
| S.B.C.FOUNDATION                  | GENERAL SUPPORT | TAX EXEPMT | 1250.    |
| NATIONAL WIDE LIFE FEDERATION     | GENERAL SUPPORT | TAX EXEPMT | 100.     |
| Total to Form 990-PF, Part XV, li | ne 3a           |            | 8740.    |

# Form **8868**

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No.,1545-1709

| •. If yo                           | ou are filing for an Automatic 3-Month Extension, complete only Part I and check this box   |          |                                   | <b>&gt;</b> X                   |
|------------------------------------|---|----------|-----------------------------------|---------------------------------|
|                                    | t complete Part II unless you have already been granted an automatic 3-month extension on a previously  | iled Fo  | orm 8868.                         |                                 |
| Part                               | Automatic 3-Month Extension of Time. Only submit original (no copies needed).   |          |                                   |                                 |
| A corp                             | oration required to file Form 990-T and requesting an automatic 6-month extension - check this box and co   | nplete   |                                   |                                 |
|                                    | only  | ·<br>    |                                   | ▶ □                             |
|                                    | er corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request a<br>income tax returns.  | n exte   | nsion of time                     |                                 |
| noted<br>(not at<br>you m          | onic Fiting (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extensi below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electror atomatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or cours submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic fire gov/efile and click on e-file for Charities & Nonprofits. | ically i | if (1) you want<br>lated Form 990 | the additional<br>)-T. Instead, |
| Туре                               | Name of Exempt Organization   | Emp      | oloyer identific                  | ation number                    |
| print                              |   | ۱.       |                                   |                                 |
| File by t                          | THE KRISHNARPAN FOUNDATION  | 1 2      | 23-26292                          | 57                              |
| due date<br>filing you<br>return S | "   966 HUNT DRIVE  |          |                                   |                                 |
| instructi                          |   |          |                                   |                                 |
| Check                              | t type of return to be filed (file a separate application for each return):   |          |                                   |                                 |
|                                    | Form 990 Form 990-T (corporation) Form 4  | 720      |                                   |                                 |
|                                    | Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 5   |          |                                   |                                 |
|                                    | Form 990-EZ Form 990-T (trust other than above) Form 6  |          |                                   |                                 |
| ,                                  | Form 990-PF   |          |                                   |                                 |
|                                    |   |          |                                   |                                 |
|                                    | MUKUND SHETH  |          |                                   |                                 |
|                                    | books are in the care of > 966 HUNT DRIVE - YARDLEY, PA 19067   |          |                                   |                                 |
|                                    | ephone No. ► 215-288-1200 FAX No. ►   |          |                                   | ,                               |
|                                    | ne organization does not have an office or place of business in the United States, check this box   |          |                                   | ▶ └                             |
|                                    | nis is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)   |          |                                   |                                 |
| box 🕨                              | If it is for part of the group, check this box 🕨 🔲 and attach a list with the names and EINs of all   | memb     | ers the extens                    | ion will cover.                 |
| -                                  | request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unit August 15, 2010 , to file the exempt organization return for the organization named a  |          | The extension                     |                                 |
|                                    | s for the organization's return for:  ► X calendar year 2009 or   |          |                                   |                                 |
| i                                  | <del></del>   |          |                                   |                                 |
|                                    | tax year beginning, and ending  |          | <u> </u>                          |                                 |
| 2                                  | f this tax year is for less than 12 months, check reason: Initial return Final return   |          | Change in acc                     | ounting period                  |
| 3a                                 | f this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any  | I        |                                   |                                 |
|                                    | nonrefundable credits. See instructions.  | 3a       | \$                                | 0.                              |
| b                                  | f this application is for Form 990-PF or 990-T, enter any refundable credits and estimated  |          |                                   |                                 |
| 1                                  | ax payments made. Include any prior year overpayment allowed as a credit.   | 3ь       | \$                                | 0.                              |
| c I                                | Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,   | 272      |                                   | _                               |
|                                    | deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).  |          |                                   |                                 |
|                                    | See instructions.   | 3с       | \$                                | 0.                              |
| Cautio                             | on. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form   | 8879-1   | FO for paymen                     | t instructions.                 |
|                                    | <del></del>   |          |                                   |                                 |
| LHA                                | For Privacy Act and Paperwork Reduction Act Notice, see Instructions.   |          | F0/m 88                           | <b>68</b> (Rev. 4-2009)         |

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

| Form 8868 (Rev 4-2009)   |               |              | Page 2            |
|--|---------------|--------------|-------------------|
| If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this be   | ox .          | _            | <b>▶</b> X        |
| Note-Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed   |               | 8868.        |                   |
| If you 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         | needed).     |                   |
| Name of Exempt Organization  | Emp           | oloyer iden  | tification number |
| Type or  | 1             |              |                   |
| THE KRISHNARPAN FOUNDATION   | $\frac{1}{2}$ | 23-2629      | 9257              |
| File by the extended due date for filing the   | For           | IRS use onl  | y<br>             |
| return See Instructions.  City, town or post office, state, and ZIP code. For a foreign address, see instructions.  YARDLEY, PA 19067-4244   |               |              |                   |
| Check type of return to be filed (File a separate application for each return):  |               |              |                   |
| Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A  | □ F           | om 5227      | Form 8870         |
| Form 990-BL X Form 990-PF Form 990-T (trust other than above) Form 4720  | F             | orm 6069     |                   |
| STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previou  | ısly file     | ed Form 88   | 68.               |
| MUKUND SHETH   |               |              |                   |
| • The books are in the care of ▶ 966 HUNT DRIVE - YARDLEY, PA 19067  |               |              |                   |
| Telephone No. ▶ 215-288-1200 FAX No. ▶   |               | <del></del>  | <del></del>       |
| • If the organization does not have an office or place of business in the United States, check this box  |               |              | <b>.</b> .        |
| If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the organization is found in the organization in the organization in the organization in the organization is found in the organization in | io io fo      | ur tha whala | group, check this |
| box . If it is for part of the group, check this box and attach a list with the names and EINs of all  |               |              |                   |
| 4 I request an additional 3-month extension of time until November 15, 2010.   | mem           | ers the ext  | ension is lot     |
| 5 For calendar year 2009, or other tax year beginning , and ending   |               |              |                   |
| 6 If this tax year is for less than 12 months, check reason: Initial return  |               | Change in a  | accounting period |
| 7 State in detail why you need the extension   |               | onango in    | accounting police |
| All information needed to file the return not availabl   | .e            |              |                   |
|  |               |              |                   |
| 8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any   |               |              |                   |
| nonrefundable credits. See instructions.   | 8a            | \$           | 0.                |
| b If this 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   |               |              |                   |
| previously with Form 8868  | 8ь            | \$           | 0.                |
| c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit  |               |              |                   |
| with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions  | 8c            | \$           | 0.                |
| Signature and Verification   |               |              |                   |
| Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the<br>It is true, correct, and complete, and that I am authorized to prepare this form  | best o        | f my knowled | ge and belief,    |
| Signature DI3-3-2018 Title Cla   | Date          | ▶ 8.         | -12-10            |
|  |               | Form         | 8868 (Rev 4-2009) |