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Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0052

| For | calend | dar year 2009, or tax year beginning | | , and ending | | <u> </u> |
|--------------------|----------------|--|---|---------------------------|---|---|
| | | all that apply: Initial return | Initial return of a fo | rmer public charity | Final retur | |
| | | Amended return | Address chang | · | Name change | |
| Hee | the II | Name of foundation | | | A Employer identificatio | n number |
| | abel. | | | | | |
| | erwis | e, INDIA FOUNDATION | | | 23-7300230 |) |
| | print | Number and street (or P O box number if mail is not de | livered to street address) | Room/suite | B Telephone number | |
| | r type | C DOOD COODIDGE NOME | | | (517)351- | 5508 |
| | Spec ructio | ne City of towii, State, and ZIP code | | | C If exemption application is | |
| | | EAST LANSING, MI 488 | | | D 1. Foreign organization | |
| H_(| _ | type of organization: X Section 501(c)(3) ex | | | Foreign organizations m check here and attach or | computation |
| <u>_</u> | | | Other taxable private founda | | E If private foundation st | |
| | | rket value of all assets at end of year J Account | - | Accrual | under section 507(b)(1 | I)(A), check here |
| | | | her (specify) mn (d) must be on cash b | ageie) | F If the foundation is in a | |
| _ | ·\$ art l | 2,157,501. (Part I, colu Analysis of Revenue and Expenses | | | under section 507(b)(1 | (d) Disbursements |
| P | 47 L # | (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | for charitable purposes (cash basis only) |
| _ | 1 | Contributions, gifts, grants, etc., received | 21,849. | | N/A | (cash basis only) |
| | | Check fithe foundation is not required to attach Sch. B | 21,040. | | N/A | |
| | - | interest on savings and temporary cash investments | 487. | 487. | | STATEMENT 1 |
| | 1 - | Dividends and interest from securities | 36,829. | 36,829. | | STATEMENT 2 |
| | 1 | Gross rents | 30,020 | 00,020 | | |
| | Ι. | Net rental income or (loss) | ···· | | | |
| 4 | 6a | Net gain or (loss) from sale of assets not on line 10 | 70,776. | | | |
| Ž | Ь | Gross sales price for all assets on line 6a 834,544. | | | " | |
| Revenue | 7 | | | 70,776. | | |
| æ | 8 | Net short-term capital gall RECEIVED | | | | |
| | 9 | Income modifications RECEIVED | | | <u> </u> | |
| | 10a | and allowances | 0 | | | |
| | b | Less Cost of goods & UL 1 9 2010 |) SS | | | _ |
| | l . | Gross profit or (loss) | | | | |
| | 11 | Other income OGDEAL 113 | 2 100 041 | 100 000 | | <u> </u> |
| _ | | Total. Add lines 1 through GDEN, UT | 129,941. | 108,092. | | |
| | 1 | Compensation of officers, directors, trustees, etc | 0. | 0. | | 0. |
| | ı | Other employee salaries and wages Pension plans, employee benefits | | | | - |
| ses | | Legal fees STMT 3 | 3,269. | 3,269. | | 0. |
| ŠUŠ | | Accounting fees STMT 4 | 12,000. | 9,600. | | 2,400. |
| Expen | | Other professional fees STMT 5 | 24,323. | 24,323. | | 0. |
| Ve | 17 | Interest | 1,616. | 1,616. | | 0. |
| and Administrative | 18 | Taxes | • | • | | |
| ist | 19 | Depreciation and depletion | | | | |
| <u> </u> | 20 | Occupancy | | | | |
| ₹ ₹ | 21 | Travel, conferences, and meetings | 6,590. | 5,272. | | 1,318. |
| and | 22 | Printing and publications | | | | |
| 9 6 | 23 | Other expenses STMT 6 | 43,840. | 33,617. | | 10,223. |
| rati | 24 | Total operating and administrative | _ | | | |
| Operating | | expenses. Add lines 13 through 23 | 91,638. | 77,697. | | 13,941. |
| | 25 | Contributions, gifts, grants paid | 62,831. | | | 62,831. |
| | 1 | Total expenses and disbursements | 454 455 | BB 60- | | F. C. D. C. |
| | | Add lines 24 and 25 | 154,469. | 77,697. | | 76,772. |
| ! | 1 | Subtract line 26 from line 12: | 24 520 | | | |
| 1 | 1 | Excess of revenue over expenses and disbursements | -24,528. | 30,395. | | + |
| , | 1 | Net investment income (if negative, enter -0-) | | | N/A | |
| 0225 | | Adjusted net income (if negative, enter -0-) | L | | 1 N/A | |

923501 02-02-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

*Form 990-PF (2009) INDIA FOUNDATION 23-7300230 Page 2 Attached schedules and amounts in the description Beginning of year End of year Part II Balance Sheets column should be for end-of-year amounts only (a) Book Value (b) Book Value (c) Fair Market Value 1 Cash - non-interest-bearing 150,184. 103,538 103,538. 2 Savings and temporary cash investments 3 Accounts receivable ► Less: allowance for doubtful accounts 4 Pledges receivable ► Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations 474,773. 488,025. 789,511. **b** Investments - corporate stock STMT 7 c Investments - corporate bonds 11 Investments - land, buildings, and equipment, basis Less accumulated depreciation 12 Investments - mortgage loans STMT 8 876,705. 870,366 1,254,054. 13 Investments - other 21,097 14 Land, buildings, and equipment basis 21,097 Less accumulated depreciation STMT 9 17,725 10,398 15 Other assets (describe ► ACCRUED INTEREST 10,398. 1,472,327 1,519,387 2,157,501. 16 Total assets (to be completed by all filers) 51,351 28,819 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 3,000 3,000 22 Other habilities (describe ► DEPOSITS 54,351 31.819 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. Assets or Fund Balances 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted **▶** X Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 1,675,678 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund -210,642. 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances 1,465,036. 1,519,387 31 Total liabilities and net assets/fund balances 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) 1,465,036. 2 Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 4 508. Decreases not included in line 2 (itemize) 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 440,508.

923511 02-02-10

| (a) List and descr 2-story brick wa | ribe the kind(s) of property sol irehouse; or common stock, 20 | d (e.g., real estate, 00 shs. MLC Co.) | | (b) How a P - Pur D - Doi | cquired chase nation | (c) Date ac (mo., day | quired , yr.) | (d) Date sold (mo., day, yr.) |
|---|---|---|--------------------------------------|-------------------------------------|----------------------------|---------------------------------------|--|---|
| 1a | | | | | | | | |
| b SEE ATTACHED | STATEMENT | | | | | <u> </u> | | _ |
| <u>c</u> | | | | | | | | |
| <u>d</u> e | | | | | - | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | | t or other basis xpense of sale | | | | n or (loss) f) minus (| |
| a | | | | | | | | |
| b | | | | | | | | |
| d | | | | | | · · · · · · · · · · · · · · · · · · · | | |
| e 834,544. | | | 763,76 | 8. | | | | 70,776. |
| Complete only for assets showing | ng gain in column (h) and own | ed by the foundation | | | | I) Gains (Col | . (h) gain i | |
| (i) F.M.V. as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | . , , | cess of col. (1) col. (j), if any | | | l. (k), but no Losses (fi | t less than | -0-) or |
| a | | | | - | | | | |
| <u> </u> | | | | | | | | |
| <u>c</u> | | | | | | | | |
| d e | | | | - | <u> </u> | | | 70,776. |
| <u> </u> | C If goin place | onter in Dort Libra | | $\overline{}$ | | | | 70,770. |
| Capital gain net income or (net ca | • | enter in Part I, line inter -0- in Part I, line | 7 | <u>}</u> | ļ | | | 70,776. |
| Net short-term capital gain or (los If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8 | | (5) and (6): | | } | | | N/A | |
| | nder Section 4940(e |) for Reduced | Tax on Net | Invest | ment In | come | -1/ | |
| For optional use by domestic private | e foundations subject to the se | ction 4940(a) tax on | net investment in | come.) | | | | |
| f section 4940(d)(2) applies, leave t | hie nart hlank | | | | | | | |
| | | | | | | | | |
| Vas the foundation liable for the sec | | | = | od? | | | | Yes X No |
| "Yes," the foundation does not qua Enter the appropriate amount in | | | | <u>s</u> | | | | |
| (a) Base period years Calendar year (or tax year beginni | (b |) | Net value of nor | (c) | e-use asset | s (c | Distrib | (d) ution ratio ided by col. (c)) |
| 2008 | | 137,921. | | 2,2 | 20,91 | ·- ·- | (-, | .062101 |
| 2007 | | 109,556. | | | 56,82 | | | .050795 |
| 2006 | | 75,510. | | | 39,38 | | | .037956 |
| 2005 | | 12,375. | | | 59,41 | | | .007885 |
| 2004 | | 31,195. | | 1,4 | <u>12,78</u> | 0. | | .022081 |
| Total of line 1, column (d) Average distribution ratio for the | E year base period - divide the | total on line 2 by F | | of woore | | 2 | | .180818 |
| the foundation has been in existe | | total on line 2 by 5, | or by the number | ui yeais | | 3 | | .036164 |
| Enter the net value of noncharitat | ole-use assets for 2009 from P | art X, line 5 | | | | 4 | <u>. </u> | 1,998,482. |
| 6 Multiply line 4 by line 3 | | | | | - | 5 | | 72,273. |
| Enter 1% of net investment incom | ne (1% of Part I, line 27b) | | | • | | 6 | | 304. |
| Add lines 5 and 6 | | | | | | 7 | | 72,577. |
| Enter qualifying distributions fror | n Part XII, line 4 | | - | | | 8 | <u>-</u> | 76,772. |
| If line 8 is equal to or greater than See the Part VI instructions. | n line 7, check the box in Part \ | /I, line 1b, and comp | olete that part using | g a 1% tao | rate. | | | |
| 923521 02-02-10 | | | | | | | Fo | orm 990-PF (2009) |

10580713 788987 1089004

| Form | 990-PF | | INDIA | FOU | JNDATI | ON | | | | | | | <u> 23-</u> | 7300 | 230 | | Page 4 |
|------|-----------|---|----------------|----------|----------------|----------------|----------------------|----------------|----------|-----------------|---------------------------------------|------------|-------------|---------|---------|----------|------------------|
| | rt VI | | | | | | ne (Section | | | | 940(e), | or 4 | 948 | - see i | nstru | ction | ıs) |
| 1a | Exempt | operating founda | itions descr | ıbed ın | section 4940 |)(d)(2), ched | ck here 🕨 🖳 | and ente | r "N/A | on line 1. |) | | | | | | |
| | | ruling or determii | | | | | ach copy of lett | | | | | | | | | | |
| b | Domest | ic foundations th | at meet the | section | 4940(e) req | uirements ir | n Part V, check h | here 🕨 📗 | X. | and enter 1% | , } | } | 1 | | | 3 | 04. |
| | of Part I | l, line 27b | | | | | | | | | | | | | | | |
| C | All other | r domestic found | ations enter | 2% of | line 27b. Exe | mpt foreign | organizations e | enter 4% of | Part | i, line 12, co | l.(b) 丿 | | | İ | | | |
| 2 | Tax und | ler section 511 (d | lomestic sed | ction 49 | 947(a)(1) trus | sts and taxa | ble foundations | only. Othe | rs eni | ter -0-) | | | _2_ | | | | 0. |
| 3 | Add line | es 1 and 2 | | | | | | | | | | . | 3 | | | <u>3</u> | 04. |
| 4 | Subtitle | A (income) tax (i | domestic se | ction 4 | 947(a)(1) tru | ists and taxa | ible foundations | s only. Othe | ers en | ter -0-) | | | 4 | | | | 0. |
| 5 | Tax bas | ed on investmen | it income. S | Subtrac | t line 4 from | line 3. If zer | o or less, enter | - 0- | | | | | 5 | | | 3 | 04. |
| 6 | Credits/ | Payments: | | | | | | 1 | | | | | | | | | |
| a | 2009 es | stimated tax paym | ents and 20 | 008 ove | erpayment cr | edited to 20 | 09 | . | 6a | _ | 8 | 06. | | | | | |
| | | foreign organizat | | | | | | | 6b | | | | | | | | |
| | | d with application | | | me to file (Fo | rm 8868) | | | 6c | | | | | | | | |
| | | withholding error | | | | | | . L | 6d | | | | | | | _ | |
| | | edits and paymer | | | - | | _ | | | | | | 7 | | | <u>8</u> | <u>06.</u> |
| | | ny penalty f or und | | | | | | 20 is attache | ed | | | | 8 | ļ | | | |
| | | e. If the total of lir | | | - | | | | | | | | 9 | | | | |
| | | yment. If line 7 is | | | | • | | rpaid | | | 1 | | 10 | | | <u> </u> | 02. |
| | | e amount of line | | | | | <u> </u> | | | 502. | Refunde | d ▶ | 11 | L | | | <u>0.</u> |
| | | A Statem | | | | | | | | | | | | | | V | <u> </u> |
| 1a | _ | the tax year, did t | he foundation | on atte | mpt to influer | ice any natio | onal, state, or lo | ocal legislati | 10 חסו | did it partici | pate or int | ervene | ın | | | Yes | |
| | | itical campaign? | | | | | | _ | | | | | | | 1a | | X |
| b | | end more than \$ | | | | | | | | | | | | | 1b | | <u>X</u> |
| | | nswer is "Yes" | | | | | | ities and c | opie | s of any ma | tenals pu | blishe | d or | | | | |
| | | ited by the four | | | | he activitie | S. | | | | | | | | ١. | | |
| | | foundation file Fo | | | | | | | | | | | | | 1c | | <u>X</u> |
| d | | e amount (if any) | | | | | | | | | | _ | | | | | |
| | | the foundation. | | | | | | | | | | 0. | | | İ | | |
| е | | e reimbursement | t (if any) pai | | _ | during the y | ear for political | l expenditur | e tax | imposed on | foundatior | 1 | | | | ' | |
| _ | _ | ers. ▶ \$ | | | <u>) .</u> | | | | _ | | | | | | _ | | 47 |
| 2 | | foundation enga | - | | | | y been reported | to the IRS | ? | | | | | | 2 | | <u>X</u> |
| | | ," attach a deta | | | | | - IDC | | | | 6 . | | _ | | | | |
| 3 | | foundation made | - | | | | | | trume | ent, articles o | i incorpora | ation, o | ır | | | | v |
| 4- | - | or other similar i | | | | | | _ | | | | | | | 3_ | | <u> </u> |
| | | foundation have the factor of | | | | | or more during | y ule year? | | | | | N | 7/3 | 4a_ | <u> </u> | |
| | | | | | | | raation during t | the year? | | | | | 1/ | I/A | 4D 5 | | X |
| Э | | ere a liquidation, t , • <i>attach the sta</i> | - | | | | _ | ine year ? | | | | | | | - | | |
| c | | requirements of s | | - | = | | | ticfied oithe | · · | | | | | | | | |
| O | | nguage in the gov | | | - | UII | rough 4545) sa | insuen einie | | | | | | | | | |
| | - | ate legislation tha | - | | | ına inetrumi | ant en that no m | nandatoru d | liracti | one that conf | flict with th | ne etate | law | | } | | |
| | | in in the governin | | | is the govern | ing insuum | siit so tilat ilo il | nanuaiory u | iii GGU | ons mar com | iict with ti | ic saic | ICT AA | | 6 | x | |
| 7 | | foundation have | - | | ecets at any | time during | the year? | | | | | | | | 7 | X | |
| • | | ," complete Par | | | _ | unic during | inc year - | | | | | | | • | | -43 | |
| Ω» | - | , <i>complete Far</i> ne states to which | | | | which it is re | enistered (see ir | nstructions | \ | | | | | | | | |
| Ja | MI | o suitos to Willell | are rounda | | , | on It is it | agiatarau (aua II | | , - | | | | | | | | |
| h | | nswer is "Yes" to I | ine 7 has th | he foun | dation furnis | hed a conv | of Form 990-PF | to the Atto | rnev | General (or d | esignate) | | | | | | |
| U | | state as required | | | | | | | ····y | aonorai (or u | voigilato) | | | | 8b | x | |
| Q | | oundation claimin | _ | | | | · · | | nn 40 | 142(1)(3) or 4 | 942(1)(5) f | or cale | ndar | | 35 | | |
| • | | 09 or the taxable | | | | | | | | | (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | J. Juio | | | 9 | | х |
| 10 | - | persons become | | | | | • | | | | d addresses | S | TMT | 10 | 10 | Х | _ - _ |
| | | | | ., . | | | | | | | | | | | | | |

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

| orm 990-PF (2009) INDIA FOUNDATION | | | <u>23-73002</u> | 30 Page 6 |
|--|--|-----------------------------------|--|-------------------------------|
| Part VII-B Statements Regarding Activities for Which I | Form 4720 May Be R | lequired (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 | |
| (2) Influence the outcome of any specific public election (see section 4955); o | r to carry on, directly or indire | ctly, | | |
| any voter registration drive? | | | s X No | |
| (3) Provide a grant to an individual for travel, study, or other similar purposes | ? | | s X No | |
| (4) Provide a grant to an organization other than a charitable, etc., organizatio | | | | |
| 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 nurnoses, or fo | • • | | |
| the prevention of cruelty to children or animals? | or caucational purposes, or it | | s X No | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und | for the exceptions described in | | 3 22 100 | |
| | | i negulations | N/A | 5b |
| section 53.4945 or in a current notice regarding disaster assistance (see instru | • | • | | 50 |
| 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 | | | <u> </u> | |
| expenditure responsibility for the grant? | | /A | 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 | | | |
| a personal benefit contract? | | Ye | s X No | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | ersonal benefit contract? | | | 6b X |
| If "Yes" to 6b, file Form 8870. | | | | |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s | helter transaction? | Ye | es 🗶 No 📙 | |
| b If yes, did the foundation receive any proceeds or have any net income attribut | | | | 7b |
| Part VIII Information About Officers, Directors, Trust | ees, Foundation Ma | nagers, Highly | / | |
| Faid Employees, and Contractors | | | | |
| List all officers, directors, trustees, foundation managers and their | | | (.65 | |
| (a) Name and address | (b) Title, and average hours per week devoted | (c) Compensation (If not paid, | (d) Contributions to employee benefit plans | (e) Expense account, other |
| (a) Name and address | to position | enter -0-) | and deferred compensation | allowances |
| SHRIKUMAR PODDAR | PRESIDENT/TSR | | | |
| 2601 COCHISE LANE | | | | |
| OKEMOS, MI 48864 | 0.00 | 0. | 0. | 0. |
| MAYURIKA PODDAR | VICE-PRES | | | |
| 2601 COCHISE LANE | | | | |
| OKEMOS, MI 48864 | 0.00 | 0. | 0. | 0. |
| DANIEL J. WARMELS | SECRETARY | | | |
| 3505 COOLIDGE ROAD | | | | |
| EAST LANSING, MI 48823 | 0.00 | 0. | 0. | 0. |
| PED SIMMONS | DIRECTOR | | | |
| 5587 PERIWINKLE LANE | | | | |
| EAST LANSING, MI 48823 | 0.00 | 0. | 0. | 0. |
| 2 Compensation of five highest-paid employees (other than those inc | | | | |
| | (b) Title, and average hours per week | | (d) Contributions to employee benefit plans and deferred | (e) Expense account, other |
| (a) Name and address of each employee paid more than \$50,000 | hours per week devoted to position | (c) Compensation | and deferred compensation | account, other allowances |
| NONE | dovotod to position | | compensation | uno manoso |
| NONE | | | | |
| ****** | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | - |
| | | | | |
| P. J. | | | | 1 |
| Total number of other employees paid over \$50,000 | | | | 000 DE (2000) |

Total. Add lines 1 through 3

10580713 788987 1089004

| P | Minimum Investment Return (All domestic foundations must complete this part. Foreign four | ndations, | see instructions.) |
|----|---|---------------|---------------------------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | · · · · · · · · · · · · · · · · · · · |
| a | Average monthly fair market value of securities | 1a | 1,881,699. |
| b | Average of monthly cash balances | 1b | 136,819. |
| C | Fair market value of all other assets | 1c | 10,398. |
| d | Total (add lines 1a, b, and c) | 1d | 2,028,916. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) . 1e 0 • | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 2,028,916. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 30,434. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 1,998,482. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 99,924. |
| Р | postributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.) | d certain | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 99,924. |
| 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 | 304. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 99,620. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 99,620. |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0. |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 99,620. |
| P | art XII Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| а | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 76,772. |
| b | Program-related investments - total from Part IX-B | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| а | Suitability test (prior IRS approval required) | 3a | |
| b | Cash distribution test (attach the required schedule) | 3ъ | |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 76,772. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | | |
| | income. Enter 1% of Part I, line 27b | 5 | 304. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 76,468. |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of | qualifies for | the section |

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2008 | (c) 2008 | (d) 2009 |
|--|---------------|----------------------------|-------------|--------------|
| 1 Distributable amount for 2009 from Part XI, | | | | |
| line 7 | j | | | 99,620. |
| 2 Undistributed income, if any, as of the end of 2009 | | | <u>-</u> | |
| a Enter amount for 2008 only | | | 0. | |
| b Total for prior years: | | | | |
| | | 0. | | |
| 3 Excess distributions carryover, if any, to 2009: | | | ; | |
| a From 2004 | İ | | | |
| b From 2005 | | | | |
| c From 2006 | | | | |
| d From 2007 308. | | | | |
| e From 2008 26,875. | 05 100 | | | |
| f Total of lines 3a through e | 27,183. | | | |
| 4 Qualifying distributions for 2009 from | | | | |
| Part XII, line 4: ►\$ 76,772. | | | 0 | |
| a Applied to 2008, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior | | ^ | | |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | 0. | | | |
| (Election required - see instructions) | 0. | | | 76 772 |
| d Applied to 2009 distributable amount | 0. | | | 76,772. |
| e Remaining amount distributed out of corpus | 22,848. | | | 22,848. |
| Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a)) | 22,848. | | | 22,040. |
| 6 Enter the net total of each column as indicated below: | | | | |
| 2 Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 4,335. | | | |
| 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 | | | | <u> </u> |
| 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 | 4,335. | | | |
| O Analysis of line 9: | | | | - |
| a Excess from 2005 | | | | |
| b Excess from 2006 | | | | |
| c Excess from 2007 | | | | |
| d Excess from 2008 4,335. | | | | |
| e Excess from 2009 | | | | |

| | OUNDATION | | | | 7300230 Page 10 |
|---|----------------------------|-----------------------------|------------------------|-----------------------------|------------------------|
| Part XIV Private Operating Fo | oundations (see in | structions and Part VI | I-A, question 9) | <u> </u> | <u> </u> |
| 1 a If the foundation has received a ruling or | determination letter tha | t it is a private operating | | | |
| foundation, and the ruling is effective for | 2009, enter the date of | the ruling | . ▶∟_ | | |
| b Check box to indicate whether the found | ation is a private operati | ng foundation described | in section . | 4942(j)(3) or | 4942(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | |
| income from Part I or the minimum | (a) 2009 | (b) 2008 | (c) 2007 | (d) 2006 | (e) Total |
| investment return from Part X for | | | | | _ |
| each year listed | | | | | |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, | | | _ | | |
| line 4 for each year listed | | | | | |
| d Amounts included in line 2c not | | | | | |
| used directly for active conduct of | | | | | |
| exempt activities | | | | | |
| e Qualifying distributions made directly | | | | | |
| for active conduct of exempt activities. | | | | | |
| Subtract line 2d from line 2c | | | | | |
| 3 Complete 3a, b, or c for the | | | | | |
| alternative test relied upon: | | | | | |
| a "Assets" alternative test - enter: (1) Value of all assets | | | | | |
| V ., | | · | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b "Endowment" alternative test - enter | | } | | | |
| 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| c "Support" alternative test - enter: | | | | | |
| (1) Total support other than gross | | | | | |
| investment income (interest, | | | | | |
| dividends, rents, payments on | | | | | |
| securities loans (section 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public | | | | | |
| and 5 or more exempt | | | | | |
| organizations as provided in section 4942(j)(3)(B)(iii) | | | | | |
| (3) Largest amount of support from | . . | | | | |
| an exempt organization | | | | | |
| (4) Gross investment income | | | | - | |
| Part XV Supplementary Info | rmation (Comple | te this part only | if the foundat | ion had \$5,000 or | more in assets |
| at any time during t | | | | | |
| 1 Information Regarding Foundation | n Managers: | | | | |
| a List any managers of the foundation wh | o have contributed more | than 2% of the total con | tributions received by | the foundation before the | close of any tax |
| year (but only if they have contributed n | nore than \$5,000). (See s | section 507(d)(2).) | | | |
| SEE STATEMENT 11 | | | | | |
| b List any managers of the foundation wh | | | (or an equally large p | ortion of the ownership of | a partnership or |
| other entity) of which the foundation has | s a 10% or greater intere | st | | | |
| NONE | | | | | |
| 2 Information Regarding Contributi | on, Grant, Gift, Loan | , Scholarship, etc., P | rograms: | | |
| Check here 🕨 🔲 if the foundation o | nly makes contributions | to preselected charitable | organizations and do | oes not accept unsolicited | requests for funds. If |
| the foundation makes gifts, grants, etc. | (see instructions) to indi | viduals or organizations | under other condition | is, complete items 2a, b, c | , and d. |
| a The name, address, and telephone num | ber of the person to who | m applications should be | e addressed: | | |
| SHRIKUMAR PODDAR | | | | | |
| 2601 COCHISE LANE, O | KEMOS , MI | 48864 | | | |
| b The form in which applications should be SHORT LETTER GIVING | | • | | .T.S PI.EASE! | |
| c Any submission deadlines: | DUILLIA OF E | TOOLICI. NO | THOME CAL | | |
| APRIL 30 AND AUGUST | | | | <u> </u> | |
| d Any restrictions or limitations on awards | | | | | - \ |
| AS PER SECTION 509(A | .) (1) (2) (| OR (3) OR MI | EET 53.494 | (2(A)-3(A)) | B) |
| | | | | | |

923601 02-02-10

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager Recipient Foundation status of Purpose of grant or contribution Amount Name and address (home or business) recipient or substantial contributor a Paid during the year SEE STATEMENT 12 62,831. **▶** 3a Total b Approved for future payment NONE Total

923611 02-02-10

| Enter gross amounts unless otherwise indicated. | Unrelated b | usiness income | | y section 512, 513, or 514 | (e) |
|--|-----------------|-----------------|---------------|----------------------------|-------------------|
| green green anno anno anno anno maisteach. | (a) Business | (b) | (C) Exclu- | (d) | Related or exempt |
| 1 Program service revenue: | code | Amount | code | Amount | function income |
| a | | | | | |
| b | | | | | - " - |
| C | | | | | |
| d | | | | | |
| e | | | | | |
| | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash | | | | | |
| investments | | | 14 | 487. | |
| 4 Dividends and interest from securities | | | 14 | 36,829. | |
| 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 | | | ł | | |
| property | | | | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other | | | | | |
| than inventory | | | 18 | 70,776. | |
| 9 Net income or (loss) from special events | | | | | |
| O Gross profit or (loss) from sales of inventory | | | | | |
| 1 Other revenue: | | | | | |
| a | | | | | |
| b | | | | | |
| C | | | | | |
| d | | | | | |
| e | | | | | |
| 2 Subtotal. Add columns (b), (d), and (e) | | | 0. | 108,092. | |
| 3 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 108,092 |
| See worksheet in line 13 instructions to verify calculations.) | | | | | |
| Part XVI-B Relationship of Activities | to the Accon | nolishment of | Exemnt P | urposes | |
| Tielddollainp of Addaides | o ale Accoll | .p.normiciic OI | -xompt F | pooco | |

| Tine No. | the foundation's exempt purposes (other than by providing funds for such purposes). | iihiistiitietit oi |
|--------------------|---|--------------------------|
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| 923621 02-02-10 | | Form 990-PF (2009 |

| | m 990-PF (2009) INDIA FOUNDATION | | 23-730 | | Page | <u>13</u> |
|-----------------|---|----------------------------------|--|--------------------|----------|--|
| P | art XVII Information Regarding Transfers To a Exempt Organizations | and Transactions a | nd Relationships With Nonch | aritable | | |
| 1 | Did the organization directly or indirectly engage in any of the following | ng with any other organization | n described in section 501(c) of | Y | es N | 0 |
| | the Code (other than section 501(c)(3) organizations) or in section 52 | 27, relating to political organi | zations? | | | |
| а | Transfers from the reporting foundation to a noncharitable exempt or | ganization of: | | | | |
| | (1) Cash | | | 1a(1) | _ X | ζ_ |
| | (2) Other assets | | | 1a(2) | | ζ_ |
| b | Other transactions: | | | | | _ |
| | (1) Sales of assets to a noncharitable exempt organization | | | 1b(1) | X | ζ_ |
| | (2) Purchases of assets from a noncharitable exempt organization | | | 1b(2) | X | ζ_ |
| | (3) Rental of facilities, equipment, or other assets | | | 1b(3) | <u> </u> | <u> </u> |
| | (4) Reimbursement arrangements | | | 1b(4) | <u> </u> | ζ |
| | (5) Loans or loan guarantees | | | 1b(5) | X | <u>. </u> |
| | (6) Performance of services or membership or fundraising solicitation | ons | | 1b(6) | X | |
| C | Sharing of facilities, equipment, mailing lists, other assets, or paid em | ployees | | 1c | <u> </u> | <u></u> |
| d | If the answer to any of the above is "Yes," complete the following sche | | | | S, | |
| | or services given by the reporting foundation. If the foundation receive | | e 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 noncharitable | e exempt organization | (d) Description of transfers, transactions, an | d sharing arran | gements | _ |
| _ | N/A | | | | | _ |
| | | | | | | _ |
| | | | | | <u> </u> | |
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| _ | | | | - | | — |
| — | | | | | | — |
| | | | | | | _ |
| | | •• | | | | — |
| | a Is the foundation directly or indirectly affiliated with, or related to, one | or more tay-evemnt organiz | rations described | | | _ |
| 28 | in section 501(c) of the Code (other than section 501(c)(3)) or in section | | eations described | Yes | X | ı |
| | o If "Yes," complete the following schedule. | uon ser - | | 165 | IV | .0 |
| | (a) Name of organization | (b) Type of organization | (c) Description of relation | iship | | _ |
| _ | N/A | | | | | _ |
| _ | | | | | | |
| | | | | | | |
| | | | | | | _ |
| | | | | | | |
| | Under penalties of perjury, I declare that I have examined this return, including account | | | is true, correct, | | |
| ı | and complete Declaration of preparer (other than taxpayer or Fuciary) is based on | 1 | | | | |
| | A Walkumar Polley | 7/12/2010 | PRESIDENT | | | |
| <u><u>e</u></u> | Signature of officer or trustee | Date | Title | | | |
| Sign Here | Preparer's | | self | arer's identifying | g number | |
| Siç | signature DANIEL WARMELS, CP Firm's name (or yours it sett-employed). 3505 COOLIDGE ROAD | | 7/12/10 employed ► | | | — |
| | Firm's name (or yours WARMELS & COMSTOCK, | PLLC | EIN ► | | | |
| | if self-employed), 3505 COOLIDGE ROAD | 1000 | 51 F 4 F | 251 5 | E 0 0 | |
| \Box | address, and ZIP code EAST LANSING, MI 48 | 8823 | | -351-5 | | |
| | | | ŀ | Form 990-F | - [[20[| JY) |

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2009

Employer identification number Name of the organization INDIA FOUNDATION 23-7300230 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 Form 990-PF X 501(c)(3) exempt private foundation 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.

| Schedule B (Fo | orm 990, 990-EZ, or 990-PF) (2009) | F | Page 1 of 1 of Part I mployer identification number |
|----------------|--|------------------------------|--|
| | FOUNDATION | | 23-7300230 |
| Part I | Contributors (see instructions) | | 23-7300230 |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributio | (d) |
| 1 | SHRIKUMAR PODDAR 2601 COCHISE LANE | \$10,90 | |
| | OKEMOS, MI 48864 | | (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributio | (d) Type of contribution |
| 2 | MAYURIKA PODDAR 2601 COCHISE LANE OKEMOS, MI 48864 | \$10,90 | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributio | (d) ns Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there Is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributio | (d) ns Type of contribution |
| | | \$ | Person Payroll Occupation (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributio | (d) ns Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part il if there is a noncash contribution.) |
| (a) No | (b) Name, address, and ZIP + 4 | (c) Aggregate contributio | (d) ns Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution) |

923452 02-01-10

Name of organization

INDIA FOUNDATION

23-7300230

| NDIA | FOUNDATION | 23- | <u>-7300230</u> |
|------------------------------|--|--|---------------------------|
| Part II | Noncash Property (see instructions) | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| 1 | 10 OUNCES OF GOLD | | |
| | | \$10,900. | 11/10/09 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| 2 | 10 OUNCES OF GOLD | | |
| | | \$\\$\\$\ | _11/10/09 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| 453 02-01 | | \$\$ | 0, 990-EZ, or 990-PF) (20 |

| Part IV Capital Gains and Los | sses for Tax on Investment Income | | | | |
|--|---|---|--|---|---------------------------------------|
| | describe the kind(s) of property soluck warehouse; or common stock, 2 | | (b) How acquired P - Purchase D - Donation | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo., day, yr.) |
| 1a 4% UK TREASURY | BOND | | | 09/26/08 | 03/07/09 |
| b 4.75% CWTH BAN | K BOND | | | | 10/30/09 |
| c 5% RABOBANK BOI | ND | | P | | 10/30/09 |
| d 2.5% DTE BANK | BOND | | P | | 10/30/09 |
| e 4.625% UBS JER | SEY BANK BOND | | P | VARIOUS | 10/30/09 |
| f 100 OZ GOLD | | | P | VARIOUS | 05/18/09 |
| g FOREIGN CURREN | CY EXCHANGE GAIN | | P | VARIOUS | VARIOUS |
| h | | | | - | |
| _i | | | | | |
| 1 | | | | | |
| k | | | | | |
| <u> </u> | | | | | |
| | | | | | |
| _n | | | | | |
| 0 | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | | Gain or (loss) lus (f) minus (g) | |
| a 162,124. | | 207,587. | | | -45,463. |
| b 144,462. | | 137,701. | | | 6,761. |
| c 125,391. | | 119,343. | | | 6,048. |
| d 132,947. | | 106,157. | | | 26,790. |
| e 149,661. | | 147,322. | | | 2,339. |
| f 92,500. | | 45,658. | | | 46,842. |
| g 27,459. | | | | | <u>27,459.</u> |
| h | | | | | |
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| n | | ļ. | | | |
| 0 | | 10/04/00 | | | |
| Complete only for assets snowin | ig gain in column (h) and owned by | 1 | (I) Los | ses (from col. (h)) of col. (h) gain ove | rool (k) |
| (i) F.M.V. as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col. (i) over col. (j), if any | | ot less than "-0-") | r coi. (k), |
| a | | | | | -45,463. |
| b | | | | | 6,761. |
| c | | | | | 6,048. |
| d | | | | | 26,790. |
| e | | | .= | | 2,339. |
| <u>f</u> | | | | | 46,842. |
| g | | | | | 27,459. |
| h | | | | | _ |
| <u> </u> | | | | | |
| | | | | | |
| <u>k</u> | | | | | |
| 1 | | | | | |
| m | | | | | |
| n | | | | | |
| 0 | | <u> </u> | | | |
| 2 Capital gain net income or (net ca | pital loss) { If gain, also enter if (loss), enter "-C | r in Part I, line 7 | 2 | | 70,776. |
| · | | , I | £ | | 70,770. |
| Net short-term capital gain or (los If gain, also enter in Part I, line 8, | | nd (6): | | | |
| If (loce) enter "-0-" in Part I line 9 | | ŗ l | | NT / 7 | |

2009 DEPRECIATION AND AMORTIZATION REPORT FORM 990-PF PAGE 1

990-PF

| Current Year Deduction | 0. | |
|-----------------------------|--|---|
| Current Sec 179 | 0 | |
| Accumulated Depreciation | 21,097. | |
| Basis For Depreciation | 21,097. | |
| Reduction In Basis | 0 | , |
| Bus % Excl | | - |
| Unadjusted Cost Or Basis | 21,097. | |
| S S | 21 | |
| Life | | |
| Method | 200DB | |
| Date Acquired | 100599200DB5.00 | |
| Description | 11999 VAN * TOTAL 990-PF PG 1 DEPR | • |
| Asset | H | |

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

| FORM 990-PF INTEREST ON SAV | INGS A | ND TEM | PORARY C | ASH IN | VESTMENTS | STATEMENT | 1 |
|----------------------------------|--------|-----------------------|---------------------------|--------|------------------------------|---------------------|------------|
| SOURCE | | | | | | AMOUNT | |
| MERRILL LYNCH ROTHSCHILD BANK | | | | | | 4 | 9. 78. |
| TOTAL TO FORM 990-PF, PART I | , LINE | 3, CO | LUMN A | | | 4 | 87. |
| FORM 990-PF DIVIDENT | DS ANI | INTER | EST FROM | SECUE | RITIES | STATEMENT | 2 |
| SOURCE | | GROSS | AMOUNT | | TAL GAINS | COLUMN (A AMOUNT |) |
| MERRILL LYNCH ROTHSCHILD BANK | | | 19. 36,810. | | 0. | 36,8 | 19. 10. |
| TOTAL TO FM 990-PF, PART I, | LN 4 | | 36,829. | | 0. | 36,8 | 29. |
| FORM 990-PF | | LEGAL | FEES | | | STATEMENT | 3 |
| DESCRIPTION | EXP | (A) ENSES BOOKS | (B) NET INV MENT IN | | (C) ADJUSTED NET INCOM | | |
| LEGAL FEES | | 3,269. | 3 | ,269. | | | 0. |
| TO FM 990-PF, PG 1, LN 16A | | 3,269. | 3 | ,269. | | | 0. |
| FORM 990-PF | AC | CCOUNTI | NG FEES | | | STATEMENT | 4 |
| DESCRIPTION | EXPI | (A) ENSES BOOKS | (B) NET INV MENT IN | | (C) ADJUSTED NET INCOM | | |
| ACCOUNTING FEES | 1 | L2,000. | 9 | ,600. | | 2,4 | 00. |
| TO FORM 990-PF, PG 1, LN 16B | 1 | L2,000. | 9 | ,600. | | 2,4 | 00. |

| FORM 990-PF C | THER PROFES | SIONAL FE | ES | | STATEMENT | 5 |
|--|------------------------------|-----------------------------|--------------------|------------------------------|------------------|-----|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVE MENT INC | | (C) ADJUSTED NET INCOM | | |
| INVESTMENT MANAGEMENT FEE | 24,323. | 24,323. | | | | 0. |
| TO FORM 990-PF, PG 1, LN 16C | 24,323. | 24, | 323. | | | 0. |
| FORM 990-PF | OTHER E | XPENSES | | | STATEMENT | 6 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVE MENT INC | | (C) ADJUSTED NET INCOM | | |
| MANAGEMENT FEE OFFICE EXPENSE PROGRAM-VILLAGE INDIA | 42,000. 21. 1,819. | - | 600. 17. 0. | | 8,40 1,81 | 4. |
| TO FORM 990-PF, PG 1, LN 23 | 43,840. | 33, | 617. | | 10,22 | 23. |
| FORM 990-PF | CORPORAT | E STOCK | | | STATEMENT | 7 |
| DESCRIPTION | | | B00 | K VALUE | FAIR MARKET | T |
| 48.77 SH FIRST EAGLE GOLD CL 26741.286 SH GAMCO GOLD FUND | | | 1,048. 486,977. | 1,30 788,20 | | |
| TOTAL TO FORM 990-PF, PART II | , LINE 10B | | 488,025. | | 789,511. | |
| FORM 990-PF | OTHER INV | ESTMENTS | - 1177 | | STATEMENT | 8 |
| DESCRIPTION | | LUATION ETHOD | воо | K VALUE | FAIR MARKE | T |
| BONDS-ROTHSCHILD 630 OZ GOLD | | | | 570,052. 300,314. | 561,53 692,54 | |
| TOTAL TO FORM 990-PF, PART II | | · | | 870,366. | 1,254,0 | |

STATEMENT 11

| FORM 990-PF DEPRECIATION OF ASSE | rs not held for | INVESTMENT | STATEMENT | 9 |
|------------------------------------|------------------------|-----------------------------|------------|----|
| DESCRIPTION | COST OR OTHER BASIS | ACCUMULATED DEPRECIATION | BOOK VALUI | E |
| 1999 VAN | 21,097. | 21,097. | | 0. |
| TOTAL TO FM 990-PF, PART II, LN 14 | 21,097. | 21,097. | | 0. |
| | FANTIAL CONTRIBU | UTORS | STATEMENT | 10 |
| NAME OF CONTRIBUTOR | ADDRESS | | | |
| SHRIKUMAR & MAYURIKA PODDAR | 2601 COCHISE 1 | | | |
| | | | | |

PART XV - LINE 1A

LIST OF FOUNDATION MANAGERS

NAME OF MANAGER

FORM 990-PF

SHRIKUMAR PODDAR MAYURIKA PODDAR

| | AND CONTRIBUTIONS DURING THE YEAR | STATI | EMENT 12 |
|--|--|-------------------|----------|
| RECIPIENT NAME AND ADDRESS | RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT | | AMOUNT |
| CITY OF EAST LANSING, EAST LANSING PRIME TIME 819 ABBOT ROAD EAST LANSING, MI 48823 | INDIAN SENIOR PROGRAMS | GOVERNMENT | 250. |
| DHARMA MEGHA 2601 COCHISE LANE OKEMOS, MI 48864 | RELIGIOUS | CHURCH | 3,500. |
| FELLOWSHIP FOR TODAY 2400 E LAKE LANSING ROAD EAST LANSING , MI 48823 | RELIGIOUS | CHURCH | 250. |
| INDIA HOUSE OF WORSHIP 1428 CHILTON DRIVE SILVER SPRING , MD 20904 | RELIGIOUS | CHURCH | 500. |
| LANSING ART GALLERY 113 S WASHINGTON SQUARE LANSING , MI 48933 | EDUCATION | PUBLIC CHARITY | 300. |
| PAX CHRISTI MICHIGAN 815 SPARROW AVENUE LANSING , MI 48910 | PEACE EDUCATION | PUBLIC CHARITY | 250. |
| VAISHNAVA CENTER FOR ENLIGHTENMENT 3505 COOLIDGE ROAD EAST LANSING , MI 48823 | RELIGIOUS | CHURCH | 45,000. |
| MICHIGAN PEACE TEAM | PEACE EDUCATION | PUBLIC CHARITY | 600. |

| INDIA FOUNDATION | | | 23-7300230 |
|--|--------------|-------------------|------------|
| MOTHER'S TRUST 6676 122ND AVENUE GANGES, MI 49408 | RELIGIOUS | CHURCH | 180. |
| SAVE THE CHILDREN 54 WILTON ROAD WESTPORT, CT 06880 | HUMANITARIAN | PUBLIC CHARITY | 10,000. |
| JAIN SOCIETY OF GREATER DETROIT 29278 W. 12 MILE ROAD FARMINGTON, MI 48334 | RELIGIOUS | CHURCH | 251. |
| GREATER LANSING FOOD BANK PO BOX 16224 LANSING, MI 48901 | HUMANITARIAN | PUBLIC CHARITY | 1,000. |
| HUMAN KINDNESS FOUNDATION PO BOX 61619 DURHAM, NC 27715 | HUMANITARIAN | PUBLIC CHARITY | 500. |
| CRISTO REY CHURCH 201 W. MILLER ROAD LANSING, MI 48911 | HUMANITARIAN | CHURCH | 250. |
| TOTAL TO FORM 990-PF, PART XV, LI | INE 3A | | 62,831. |

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 you | u are filing for an Automatic 3-Month Extension, complete only Part I and check this box | | . • X | | | | |
|-------------------------------|--|--------------------------------|---|--|--|--|--|
| | If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) | | | | | | |
| Do not | complete Part II unless you have already been granted an automatic 3-month extension on a previously file | ed For | m 8868 | | | | |
| Part | Automatic 3-Month Extension of Time. Only submit original (no copies needed). | | | | | | |
| A corpo Part I o | oration required to file Form 990-T and requesting an automatic 6-month extension - check this box and comnly | plete | . • | | | | |
| | er corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an acome tax returns. | exten | sion of time | | | | |
| noted to (not au you mu | onic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic tomatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consist submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files gov/efile and click on e-file for Chanties & Nonprofits. | cally if | (1) you want the additional ated Form 990-T. Instead, | | | | |
| Туре о | Name of Exempt Organization | Employer identification number | | | | | |
| print | | | | | | | |
| File by th | INDIA FOUNDATION | 2 | 3-7300230 | | | | |
| due date filing you | for Number, street, and room or suite no. If a PO box, see instructions. 3505 COOLIDGE ROAD | | | | | | |
| return Se instructio | 6 | | · · · · · · · · · · · · · · · · · · · | | | | |
| | EAST LANSING, MI 48823 | | | | | | |
| Check | type of return to be filed (file a separate application for each return). | | | | | | |
| | Form 990 | 27 069 | | | | | |
| Tele If th | WARMELS & COMSTOCK PLLC books are in the care of ▶ 3505 COOLIDGE ROAD - EAST LANSING, MI 4 phone No ▶ 517-351-5508 FAX No. ▶ 517-351-5468 e organization does not have an office or place of business in the United States, check this box is is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this | s is fo | r the whole 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 | memb | ers the extension will cover. | | | | |
| _ I: | request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt AUGUST 15, 2010 , to file the exempt organization return for the organization named a for the organization's return for: X calendar year 2009 or , and ending, and ending | | The extension | | | | |
| 2 l | f this tax year is for less than 12 months, check reason: Initial return Final return | | Change in accounting period | | | | |
| | f this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any | | | | | | |
| - | nonrefundable credits See instructions | _3a | \$ 0. | | | | |
| | f this application is for Form 990-PF or 990-T, enter any refundable credits and estimated | 0. | s 806. | | | | |
| _ | ax payments made. Include any prior year overpayment allowed as a credit. Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, | 3b_ | \$ 806. | | | | |
| | deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). | | | | | | |
| | See instructions | 3c | \$ 0. | | | | |
| | | | | | | | |
| Cautic | n. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form | 8879- | EO for payment instructions. | | | | |
| LHA | For Privacy Act and Paperwork Reduction Act Notice, see Instructions. | | Form 8868 (Rev. 4-2009) | | | | |

923831 05-26-09

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