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Form 990-PF

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

Department of the Treasury Internal Revenue Service

For calendar year 2009, or tax year beginning 06/09/09, and ending 12/31/09 Final return Initial return Initial return of a former public charity G Check all that apply Name change Address change Amended return A Employer identification number Name of foundation Use the IRS 27-0341131 label. VISWANATH FOUNDATION, INC. Telephone number (see page 10 of the instructions) Otherwise. print 908-419-4298 Number and street (or P O box number if mail is not delivered to street address) Room/suite 11 TAMARACK ROAD or type. If exemption application is pending, check here See Specific City or town, state, and ZIP code 1. Foreign organizations, check here Instructions. NJ 08820 **EDISON** 2. Foreign organizations meeting the Check type of organization | X | Section 501(c)(3) exempt private foundation 85% test, check here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated under section 507(b)(1)(A), check here J Accounting method Cash X Accrual Fair market value of all assets at end of year (from Part II, col (c), Other (specify) If the foundation is in a 60-month termination 0 under section 507(b)(1)(B), check here line 16) ▶ \$ (Part I, column (d) must be on cash basis Part I Analysis of Revenue and Expenses (The (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable expenses per total of amounts in columns (b), (c), and (d) may not necessanly equal books income income purposes the amounts in column (a) (see page 11 of the instructions)) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 1 Check ▶ X If the foundation is **not** required to attach Sch B 2 Interest on savings and temporary cash investments 3 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain 9 Income modifications Gross sales less returns & allowances 10a Less Cost of goods sold b Gross profit or (loss) (attach schedule) c Other income (attach schedule) 11 0 n 12 Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc 13 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) Accounting fees (attach sche Other professional fees (8 17 18 19 20 Travel, conference 21 22 Printing and publications 23 Other expenses (att sch) Total operating and administrative expenses. 0 Add lines 13 through 23 0 Contributions, gifts, grants paid 0 0 0 0 Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12 0 Excess of revenue over expenses and disbursements 0 Net investment income (if negative, enter -0-) 0 Adjusted net income (if negative, enter -0-)

_	D = -4 II	Ralance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of year							
	Part II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value							
	1	Cash—non-interest-bearing										
	2	Savings and temporary cash investments	h 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 (attach schedule) (see page 16 of the										
		instructions)										
	7	Other notes and loans receivable (att schedule)										
		Less allowance for doubtful accounts ▶	-									
ţ	8	Inventories for sale or use										
Assets	9	Prepaid expenses and deferred charges										
As	10a	Investments—U S and state government obligations (attach schedule)										
	ь	Investments—corporate stock (attach schedule)										
	С	Investments—corporate bonds (attach schedule)										
	11	Investmentsland, buildings, and equipment basis										
		Less accumulated depreciation (attach sch.)										
	12	Investments—mortgage loans										
	13	Investments—other (attach schedule)										
	14	Land, buildings, and equipment basis										
		Less accumulated depreciation (attach sch.)										
	15	Other assets (describe ▶)										
	16	Total assets (to be completed by all filers—see the										
		instructions. Also, see page 1, item I)	0	0	0							
	17	Accounts payable and accrued expenses										
G	18	Grants payable										
ë	19	Deferred revenue										
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons										
<u>.</u>	21	Mortgages and other notes payable (attach schedule)										
_	22	Other liabilities (describe ▶)										
_	23	Total liabilities (add lines 17 through 22)	0	0								
es		Foundations that follow SFAS 117, check here ► X and complete lines 24 through 26 and lines 30 and 31.										
		Unrestricted										
Ē	25	Temporanly restricted										
ä	26	Permanently restricted										
or Fund Balanc		Foundations that do not follow SFAS 117, check here ▶ and complete lines 27 through 31.										
5	27	Capital stock, trust principal, or current funds										
Š	28	Paid-in or capital surplus, or land, bldg, and equipment fund		· · · · · · · · · · · · · · · · · · ·								
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds										
As	30	Total net assets or fund balances (see page 17 of the										
et		instructions)	0	0								
Z	31	Total liabilities and net assets/fund balances (see page 17										
_	L.,	of the instructions)	0	O								
_	Part II	I 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 a	gree with									
	end-o	end-of-year figure reported on prior year's return)										
2	Enter	Enter amount from Part I, line 27a										
3		ıncreases not included in line 2 (itemize) ▶		3	<u> </u>							
4		nes 1, 2, and 3		4	<u>, </u>							
		ases not included in line 2 (itemize)		5								
6	6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30											

Partily Capital Gains an	nd Losses for Tax on Investmen	nt Income							
(a) List and describe	te the kind(s) of property sold (e g , real estate, shouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)					
1a N/A									
b									
C									
d									
8		T							
(e) Gross sales price	(f) Depreciation allowed (or allowable)	107	other basis nse of sale	(h) Gain or (loss) (e) plus (f) minus (g)					
a		1							
b									
_ C									
_d									
Complete only for agents showing	gain in column (h) and owned by the fou	ndation on 12/31/69							
(i) F M V as of 12/31/69	(y) Adjusted basis as of 12/31/69	(k) Exces	s of col (i)	col (k), but r	ol (h) gain minus not less than -0-) or (from col (h))				
	as of 12/31/69	Over cor	(j), if any		(,)				
<u>a</u>		-							
b									
<u>c</u>									
d									
Capital gain net income or (net cap	pital loss) If gain, also enter in If (loss), enter -0- in	•		2					
	s) as defined in sections 1222(5) and (6)	_			,				
_	column (c) (see pages 13 and 17 of the ir	nstructions)							
If (loss), enter -0- in Part I, line 8	1 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			3					
	der Section 4940(e) for Reduce			ie					
(For optional use by domestic private t	foundations subject to the section 4940(a) tax on net investme	ent income)						
If section 4940(d)(2) applies, leave this	s part blank				N/A				
	on 4942 tax on the distributable amount of		e penod? Y	es 🗌 No	N/A				
	fy under section 4940(e) Do not complete								
1 Enter the appropriate amount in ea	ach column for each year, see page 18 o	f the instructions befo	ore making any entrie	s					
(a) Base period years Calendar year (or tax year beginning	(b) Adjusted qualifying distribution	ns Net value	(c) of noncharitable-use ass		(d) distribution ratio divided by col (c))				
2008									
2007									
2006									
2005									
2004									
2 Total of line 1, column (d)				2					
•	year base period—divide the total on line	e 2 by 5, or by the							
number of years the foundation ha	as been in existence if less than 5 years			3					
4 Enter the net value of noncharitab	4								
5 Multiply line 4 by line 3	5								
6 Enter 1% of net investment incom	6								
7 Add lines 5 and 6				7					
8 Enter qualifying distributions from	8								
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions on page 18 Form 990-PF (20)									

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<u>Pa</u>	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the in	structions	<u> </u>		
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			
	here ▶ ☐ and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of				
	Part I, line 12, col (b)				_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	· - · · · ·		. 0
3	Add lines 1 and 2	3			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	_4			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			0
6	Credits/Payments				
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a				
b	Exempt foreign organizations—tax withheld at source				
С	Tax paid with application for extension of time to file (Form 8868) 6c 6c				
d	Backup withholding erroneously withheld 6d 6d				-
7	Total credits and payments Add lines 6a through 6d	7			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			
<u> 11 </u>	Enter the amount of line 10 to be Credited to 2010 estimated tax Refunded	11			
	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19				
	of the instructions for definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities	37/3		-	
С	Did the foundation file Form 1120-POL for this year?	N/A	· <u>1c</u>	-	-
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				1
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$	_			
8	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				Ì
	on foundation managers \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
•	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of		_	ĺ	•
4.	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	N/A	4a	 -	<u> </u>
þ	If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year?	IN / PA		 	x
5	• • •		5		 ^
6	If "Yes," attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied outpor		1		
0	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or By state logislation that effectively amonds the government as that no mandaton directions that				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remains in the governing instrument?	N/A			ł
7	conflict with the state law remain in the governing instrument? Did the foundation have at least \$5,000 in constant any time distinct the year? If "Yee " complete Best II, and (a), and Best YV	-	7		X
	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		-		<u>├</u>
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) NJ				
h.					
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	N/A			-
9	(or designate) of each state as required by General Instruction G? if "No," attach explanation	M/M	8b	\vdash	\vdash
J	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		}	l	İ
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page		_		x
10	27)? If "Yes," complete Part XIV Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		9	\vdash	 ^
10			40		x
	names and addresses		10 Form 99		
				- I I	(4003)

Did the foundation hold more than a 2% direct or indirect interest in any business enterprise

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

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

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?

the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

n/a

Yes

X No

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X

3b

4a

at any time during the year?

foundation had excess business holdings in 2009)

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Total. Add lines 1 through 3

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

qualifies for the section 4940(e) reduction of tax in those years

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_Pa	rt XIII Undistributed Income (see page 26 of	the instructions)		 -	
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
_	line 7				0
2	Undistributed income, if any, as of the end of 2009	:			
а	Enter amount for 2008 only				
þ	Total for prior years 20 , 20 , 20		 		
3	Excess distributions carryover, if any, to 2009				
-	From 2004	-			
þ	From 2005	4			
C	From 2006	4			
d	From 2007	_			
9	From 2008	-			
f	Total of lines 3a through e		<u> </u>		
4	Qualifying distributions for 2009 from Part XII,				
	line 4 ▶ \$			-	
а	Applied to 2008, but not more than line 2a	,			
b	Applied to undistributed income of prior years				
	(Election required—see page 26 of the instructions)				
C	Treated as distributions out of corpus (Election				
	required—see page 26 of the instructions)				
d	Applied to 2009 distributable amount				
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2009				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				, ,
	Pnor years' undistributed income Subtract				,
_	line 4b from line 2b				
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				
d	Subtract line 6c from line 6b Taxable				
u	amount—see page 27 of the instructions				
_	Undistributed income for 2008 Subtract line				
٠	4a from line 2a Taxable amount—see page				
	27 of the instructions				
f					
•	4d and 5 from line 1 This amount must be				
	distributed in 2010				o
7	Amounts treated as distributions out of corpus				
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
	instructions)				
8	Excess distributions carryover from 2004 not				
0	applied on line 5 or line 7 (see page 27 of the				
o	Instructions)				14,0
9	Excess distributions carryover to 2010.				•
40	Subtract lines 7 and 8 from line 6a		 		
10	Analysis of line 9				
a	Excess from 2005	\dashv			
b	Excess from 2006				
C	Excess from 2007	\dashv			
d	Excess from 2008	_			
A	Excess from 2009	I	1		İ

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Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year N/A 3a **b** Approved for future payment N/A Total ▶ 3b

Part XVI-A	Analysis of Income-Producing Act	ivities				
Enter gross amo	ounts unless otherwise indicated	Unrelate (a) Business code	(b) Amount	(c) Exclusion	d by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income (See page 28 of
1 Program sei	rvice revenue	- [code		the instructions)
a						
c						
d						
θ						
f				<u> </u>		
g Fees an	d contracts from government agencies					
2 Membership	dues and assessments		-			
3 Interest on s	savings and temporary cash investments					
4 Dividends a	nd interest from securities					
5 Net rental in	come or (loss) from real estate					
a Debt-fin	anced property					
b Not deb	t-financed property			<u> </u>		
	come or (loss) from personal property					
7 Other invest					_	
•	s) from sales of assets other than inventory			+		
	or (loss) from special events					,
	or (loss) from sales of inventory	-				· · · · · · · · · · · · · · · · · · ·
	ue a	-				
				+		
				+		
e				+		
	d columns (b), (d), and (e)	-		o	0	0
	ne 12, columns (b), (d), and (e)			<u> </u>	13	0
	in line 13 instructions on page 28 to verify calculation	ns)				
Part XVI-B			nt of Exempt Pu	irposes		
Line No. ▼	Explain below how each activity for which income accomplishment of the foundation's exempt purpor instructions.	is reported in col	umn (e) of Part XVI-A	contribute	ed importantly to the	he
N/A	,					
,						·
		·	·-		·	
					<u> </u>	
			<u> </u>			
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Pa	art XVII	Information Rega Exempt Organiza	_	nsfers To	and Trai	nsaction	s and	Relation	onship	s With No	ncharitable			
1	Did the or	ganization directly or indir	rectiv engage	in any of the	following v	vith any other	er orga	nization o	lescribed	j			Yes	No
•		501(c) of the Code (other											·	
	•	from the reporting founda	ation to a non	chantable exe	mot organ	uzation of								1
a		, -		CHAIRABIC CAC	mpt organ	ii.Ediloii oi						1a(1)		x
	(1) Cash													X
	(2) Other											1a(2)		_ ^
b	Other tran													
		of assets to a noncharita										1b(1)		X
	(2) Purch	nases of assets from a no	nchantable e	xempt organız	ation							1b(2)		X
	(3) Renta	al of facilities, equipment,	or other asse	ts								1b(3)		X
	(4) Reim	bursement arrangements										1b(4)		X
	(5) Loans	s or loan guarantees										1b(5)		X
	(6) Perfo	rmance of services or me	mbership or t	fundraising so	licitations							1b(6)		X
С	Sharing o	f facilities, equipment, ma	iling lists, oth	er assets, or p	paid emplo	yees						1c		X
d	If the ans	wer to any of the above is	"Yes," comp	lete the follow	ıng schedi	ule Column	(b) sh	ould alwa	ys show	the fair mark	et			
		he goods, other assets, or												
		iny transaction or sharing												
	(a) Line no	(b) Amount involved		of noncharitable							tions, and sharing	arrange	ments	
7														
.,			 											
			 				·				,			
														
			 							-				
			<u> </u>											
			ļ											
			<u> </u>				_			-				—
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			<u> </u>											
							<u> </u>							
_														
2 a		indation directly or indirectly in section 501(c) of the 0						organizati	ons			□ √.	es X	l No
				ian section se	, 1(0)(3), 0	i iii sectioni	JZ1 ·					□ '`		j
	it tes, c	complete the following sch (a) Name of organization	iedule	(b) Tvr	oe of organiz	zation				(c) Description (of relationship			
	N/A	(a) Name of organization		(6) 191	7C Or Organiz					(0) 5000, p.10.1	, roladoriorisp			
	N/A	···		 			 							
_				 										
				 										
		,,,,,,,		 			-							
		<i>_</i>		<u> </u>			<u> </u>							
	Under pen	alties of perjury, I declare that true, correct, and complete.	t I have examin	ed this return, in	icluding acco	ompanying so	hedules	and stater	nents, and	d to the best of	my knowledge and	t ne		
	beller, it/is	true, correct, and complete L	Deciaration of pr	eparer (other th	an taxpayer	i I /	7 2		L L			yc		
	<u> </u>	(MM	110			FO VI	725	\perp $ $ $ $	_	PRESID	ENT			
9	Signa	ture of officer or trustee				Date			/ 1	itle				
9			∞					Date ,	,	Charles		rer's identif er (see Sig		nn.
Sign Here	ا_ہ	Preparer's	V Y	CPA				5/2	3/11	Check if self-employer		30 of the in		
5	ا عَامَ ا		CK M. SM	MITH, CPA	<u> </u>				111		P0	0046	<u> 5795</u>	5
, ,	Pai pai ie C	Firm's name (or yours if		BERG, S		COONE	Y &	MIG	LIOR	E, PC				
	Paid Preparer's Use Only	self-employed), address,		STREÉT :							EIN ▶ 23	-265	748	8
		and ZIP code	BENSA			020-20					Phone no 21	5-24	5-7	777