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Form 990-PF

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

OMB No 1545-0052 2009

For calendar year 2009, or tax year beginning 12-30 , 2009, and ending 11-30 , 20 10 C Check at that apply Indian tetum India tetum Address change Name change			of the Treasury venue Service		Note The f				a Private Found				ato.		2009
G Check all that apply Institut return Institut return of a former public chanty Final return Address change Nome change Nome change Nome change Stabel. Nome change				ax v		oundation may be ab	ne ti	J use a						11-	30 20 10
Liberth IS Libert IS				T	1		lı	nitial re			-	a	Final return		30 ,20 10
Use the IRS tabel. Other view. TEE CHAN DESARGOURAR FOUNDATION Number of mail is not delivered to street address) Roominute Programme Roominute Roominute Programme Roominute			,	r	Amended retu	urn 🗀	_	_	•		•	:hange			
Number of the direct (P P O bits number (mails in onlideword to street address) Roombord Telephone number (see page 10 of the instructions)	U	se the	IRS Name of four	ndati	on		_	-	<u>~</u>			A Employer	identification num	ber	
Otherwise, print		label	THE CHAP	I D	ESAIGOUDAR F	OUNDATION						77-01350	35		
or type. See Specific Instructions. Page Page	С		ise, Number and				vere	d to sti	reet address)	Rooi	m/suite			0 of th	e instructions)
Content Section Sect		•	720 T D	NA	GAR				(408)771-0972						
Control page Cont	Se			stat	e, and ZIP code				KARNATKA					ding, c	heck here .
Section 9947(a)(1) nonexampt chariable trust Other taxable private foundation Fair market value of all assets at J Accounting method and of year (from Part II, cot (c), Other (specify) Fair market value of all assets at J Accounting method and of year (from Part II, cot (c), Other (specify) Fair II, column (d) must be on cash basis Fisher methods section 507(b)(1)(b), cleak here and states comparison of the section 507(b)(1)(b), cleak here and states of anomals in column (g), (c), and (g) may not increasantly equal here amounts in column (g), (c), and (g) may not increasantly equal here amounts in column (g), (c), and (g) may not increasantly equal here amounts in column (g), (c), and (g) may not increasantly equal here amounts in column (g), (c), and (g) may not increasantly equal here amounts in column (g), (c), and (g) may not increasantly equal here amounts in column (g), (c), and (g) may not increasantly equal here amounts in column (g), (c), and (g) may not increasantly equal here amounts in column (g), (c), and (g) may not increasantly equal here amounts in column (g), (c), and (g) may not increasantly equal here amounts in column (g), (c), and (g) may not increasantly equal here amounts in column (g), (c), and (g) may not increasantly equal here amounts in column (g), (c), and (g) may not increasantly equal here amounts in column (g), (c), and (g),	<u>in</u>	structi	ons. BANGALOR	RΕ,	Ind1a 56007	8						D 1 Foreign	organizations check	here	▶ □
Section 4947(a)(1) nonexempt charatable trust	H (Check	type of organization	n	X Se	ection 501(c)(3) e	xe	mpt pr	ivate foundation			2 Foreign o	organizations meeting	ng the	85% test
end of year (from Part II, cot (c), inter 6) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		Sect	tion 4947(a)(1) non	exe	empt charitable t	trust		Other	taxable private foun	datio	on]			
end of year (from Part II, col (c), Imperity in the foundation in a file scenario formation in the file of Part I, column (of) must be on cash basis. Part I Analysis of Revenue and Expenses (the folial of analysis of Revenue and Expenses) (the folial of analysis of Revenue and Expenses per the folial of the folial	I F	Fair ma	arket value of all as	sset	ts at	J Accounting r	net	hod	X Cash	Ac	ccrual	E If private for under section	undation status was on 507(b)(1)(A), che	termi	nated e
Malysis of Revenue and Expenses (the total of amounts in columns (b), (c), and (q) may not necessarily equal the amounts in columns (b), (c), and (q) may not necessarily equal the amounts in columns (b), (c), and (q) may not necessarily equal the amounts in columns (b), (c), and (q) may not necessarily equal the amounts in columns (b), (c), and (q) may not necessarily equal the amounts in columns (b), (c), and (q) may not necessarily equal the amounts in columns (b), (c), and (q) may not necessarily equal the amounts in columns (b), (c), and (q) may not necessarily equal to the necessary of the interest (c) Adjusted net income (c) Adjusted net	•	end of	year (from Part II,	col	(c),	Other (sp	ec	ify) _				1			
### amounts in columns (b), (c), and (q) may not necessary equal bearing the amounts in column (e) lose page 11 of the instructions) 1	_								be on cash basis)			under sect	oation is in a 60-moi ion 507(b)(1)(B), ch	nin leri eck he	re
amounts in columns (b), (c), and (a) nay not necessary equal the summation column (c) (see page 11 of the instructions) (cash hasas only) 1 Contributions, gifs, grants, etc. received (attach schedule) 2 Check X if the foundation is not required to statich Sch B 3 interest on savings and temporary cash investments 4 Dividends and interest from socurities 8,763	Pa	art I	Analysis of I	٦e	venue and E	xpenses (The	tota	l of	(a) Revenue and						
1 Contributions, gifts, grants, etc., received (attach schedule)						•			expenses per					et	
2 Check	_		·						DOOKS	_ _			nicone		
3 Interest on savings and temporary cash investments. 4 Dividends and interest from secunties. 5 Gross rents. 5 Hot rental incomparations) [1] [1] [2] [2] [3] [4] [4] [4] [4] [4] [4] [4] [4] [4] [4		ſ	 1							\perp	·				
4 Dividends and interest from securities 8,763 8,763 5 Gross rents 9 5 Gross rents 9 5 Net gain or (loss) from sale of assets including 10 (10 (10 sec) from sale of assets including 10 (10 sec) from ine 12 (10 sec) from			, L.							\perp					
Sa Gross rents Sa Net rental income of (tites) Net r			-							_					
B b Net rental incomergri(toss)							• •	• •	8,76	53		8,763			
Sample S							• •	• •							
Description Company						<u> </u>				-					
Note			1 -			101			(21,9)	86)					
B	е	1	FIGU		_		,74	17		-			<u> </u>		
10a Gross sales ass refreshed 10a Gross profit or (loss) (attach schedule) 10 11 Other income (attach schedule) 12 Total Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 Legal fees (attach schedule) 17 State (attach schedule) 18 Taxes (attach schedule) 19 Depreciation (attach schedule) 10 Total persion plans, employee benefits 10 STM109 11 Total persion plans, employee benefits 10 STM109 11 Total persion plans, employee benefits 10 STM109 11 Total persion plans, employee benefits 12 Total persion plans, employee benefits 15 STM109 16 Legal fees (attach schedule) 17 STM109 18 Taxes (attach schedule) 19 Depreciation (attach schedule) 10 Depreciation (attach schedule) 11 Total persion plans, employee benefits 12 Total persion plans, employee benefits 13 Taxes (attach schedule) 14 Total persion plans, employee benefits 15 Total persion plans, employee benefits 16 Legal fees (attach schedule) 17 Total persion plans, employee benefits 18 Taxes (attach schedule) 19 Depreciation (attach schedule) 10 Total version plans, employee benefits 11 Total persion plans, employee benefits 12 Total persion plans, employee benefits 13 Taxes (attach schedule) 14 Total persion plans, employee benefits 15 Total persion plans, employee benefits						10)	• •	• •		+					
10a Gross sales ess ref		1				<u>∵</u>	•	• •		-			21	,560	
b Less Cosi of goods sold		1					• •	• •					-		
C Gross profit or (loss) (attach schedule) C Other income (attach schedule) C Other income (attach schedule) C Other employee salaries and wages C Other employee salaries and wages C Other professional fees (attach schedule) STM107 T T T T T T T T T			(-+-					
11		_	-			L .				+					
12 Total Add lines 1 through 11		1	•		•	•				+					-
13 Compensation of officers, directors, trustees, etc		1	•		•				(13.2)	231		0 762	31	560	
A d d d d d d d d d d d d d d d d d d		13							(13,2.	- 3/		0,703	21	, 500	
15 Pension plans, employee benefits STM107 Total expenses and disbursements STM108 Total expenses and disbursements	Δ	14													
16a Legal fees (attach schedule)	d	15													
Country fees (attach schedule)	- 1	16a	Legal fees (attach	sc	hedule)				7	5		75			
c Other professional fees (attach schedule)		b	Accounting fees (atta	ch schedule) .				1,50	0					
Trace and the state of the instructions of the	ps	С	Other professiona	l fe	es (attach sche	dule)	5 I I	1109	6,43	7					
Taxes (attach schedule) (see page 14 of the instructions) Deprectation (attach schedule) and depletion. Coccupancy Travel, conferences, and meetings Printing and publications. Cother expenses (attach schedule)	rr						5 TIA	1110							
1	t t						ons) .	62	2		622			
ge 20 Occupancy										\perp					
Printing and publications Dither expenses (attach schedule)		ļ								_ _					
Description		1							65	0		650			
Total operating and administrative expenses. Add lines 13 through 23	qb	Ì				CTI				-	_				
Add lines 13 through 23		ì			•	• • • • • • • • •	•	• •	2,28	7		2,287			
25 Contributions, gifts, grants paid	S	24													
26 Total expenses and disbursements. Add lines 24 and 25 . 35,671 11,571 24,100 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements . (48,894) b Net investment income (if negative, enter -0-)	S	25										_ 11,571			
27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements . (48,894) b Net investment income (if negative, enter -0-)		l .													
a Excess of revenue over expenses and disbursements	_					. Aud illies 24 and	u 2	J .	35,67	1		11,571			24,100
b Net investment income (if negative, enter -0-)		ì				nd dishumaman	te								
c Adjusted net income (if negative, enter -0-)									(48,89	94)					
		i			-					-		0			
For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.	For								instructions				21,		Form 990-PF (2009

Part	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	year
	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	(10,203)	40,985	40,985
2	Savings and temporary cash investments			
3	Accounts receivable			<u>-</u>
	Less allowance for doubtful accounts			
4	Pledges receivable			
	Less allowance for doubtful accounts			
5				
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons (attach schedule) (see page 16 of the			
A	instructions)			
s 7				
S	Loss allowance for doubtful accounts b			
e t g	Less allowance for doubtful accounts			
s i	Inventories for sale or use			
9	Prepaid expenses and deferred charges			
	a Investments - U.S. and state government obligations (attach schedule)			
1	b Investments - corporate stock (attach schedule) SEM137.	655,229	554,100	522,540
	c Investments - corporate bonds (attach schedule)			
11				
	Less accumulated depreciation (attach schedule)			
12	Investments - mortgage loans			
13	Investments - other (attach schedule)			
14	Land, buildings, and equipment basis			
	Less accumulated depreciation (attach schedule)			
15				
16			·	
į	nstructions Also, see page 1, item I)	645,026	595,085	563,525
L 17			3,3,7003	303,323
1 48	Grants payable			
a 10	Deferred revenue			
20	· · · · · · · · · · · · · · · · · · ·	2.004		
24	Mortgages and other notes payable (attach schedule)	3,984	2,937	
1 22	· · · · · · · · · · · · · · · · · ·			
e	/ <u>/</u>			
s 23		3,984		
	Foundations that follow SFAS 117, check here			
N E 24	and complete lines 24 through 26 and lines 30 and 31.			
e 🔼	Unrestricted			
t n 25	Temporarily restricted			
d 26	Permanently restricted			
A	Foundations that do not follow SFAS 117, check here X	j		
S B	and complete lines 27 through 31			
e a 27	Capital stock, trust principal, or current funds			
t a 28	Paid-in or capital surplus, or land, bldg, and equipment fund			
s n 29	Retained earnings, accumulated income, endowment, or other funds	641,042	592,148	
C 30	Total net assets or fund balances (see page 17 of the			
o s	instructions)	641,042	592,148	
31	Total liabilities and net assets/fund balances (see page 17		3,2,113	
	of the instructions)	645,026	595,085	
Part I			595,085	
	al net assets or fund balances at beginning of year - Part II, column (a), lir		——— т	
				_
	-of-year figure reported on prior year's return)		- 	641,042
	er amount from Part I, line 27a			(48,894)
3 Oth	er increases not included in line 2 (itemize)		3	
	I lines 1, 2, and 3	• • • • • • • • • • • • • • • • • • • •	4	592,148
	creases not included in line 2 (itemize)		5	
6 Tota	al net assets or fund balances at end of year (line 4 minus line 5) - Part II,	column (b), line 30	6	592,148

	AN DESAIGOUDAR FOUNDATION LOSSES for Tax on Inves			77-03	35035 Page
(a) List and describe the	kind(s) of property sold (e.g., real estate, or common stock, 200 shs. MLC Co.)		(b) How acquired P-Purchase	(c) Date acquired (yr mo , day)	(d) Date sold (yr, mo, day)
			D-Donation		
1a STOCKS - SCHEDULE AVA:	LLABLE		P	VARIOUS	VARIOUS
c			 		
d					
e					
(e) Gross sates price	(f) Depreciation allowed (or allowable)	(g) Cost or of plus expens			Gain or (loss) is (f) minus (g)
a 671,747			693,733		(21,986)
b					
C		-			
d					
e Constitution of the cons			40/04/00		
Complete only for assets showing (i) F M V as of 12/31/69	g gain in column (n) and owned to	by the foundation of (k) Excess over col (j)	of col (i)	col (k), but	(Col (h) gain minus not less than -0-) or (from col (h))
3	83 01 12/31/03	uver cor ()	, ii aliy		
a b					(21,986)
c					
d				<u> </u>	
е					
2 Capital gain net income or (net ca		o enter in Part I, lii nter -0- in Part I, lii		2	(21,986)
Net short-term capital gain or (los	, ,,,				(21/300/
If gain, also enter in Part I, line 8	, column (c) (see pages 13 and 1	7 of the instruction	ns) \		
If (loss), enter -0- in Part I, line 8			<i>s</i>	3	21,560
	er Section 4940(e) for Rec				
For optional use by domestic private section 4940(d)(2) applies, leave to a the foundation liable for the sec	nis part blank			·	Yes X No
"Yes," the foundation does not qua			•		
Enter the appropriate amount in				naking any entries	
(a) Base period years	(b)		(c)		(d) histribution ratio
Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of n	oncharitable-use as:		b) divided by col (c))
2008	35,09	90	481,2	258	0 072913
2007	47,64	10	_688,4	129	0.069201
2006	41,52		911,0		0 045577
2005 2004	40,45		888,		0 045536
2004	41,10	00_	875,	852	0 046926
? Total of line 1, column (d)				2	0.000150
Average distribution ratio for the					0 280152
number of years the foundation h		· ·	=	3	0 05603
,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			0 03003
Enter the net value of noncharita	ble-use assets for 2009 from Par	t X, line 5		4	522,068
Multiply line 4 by line 3				5	29,251
Enter 1% of net investment incom	ne (1% of Part I, line 27b)			6	
7 Add lines 5 and 6		• • • • • • • • • • • • • • • • • • • •		7	29,251
B Enter qualifying distributions from					24,100
If line 8 is equal to or greater that	n line 7, check the box in Part VI,	line 1b, and comp	olete that part us	ing a 1% tax rate	See the
Part VI instructions on page 18					

	,				
Form	990-PF (2009) THE CHAN DESAIGOUDAR FOUNDATION	77-013	35035		age 4
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the chartest and the chart				uge -
	Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1 ☐			,	
ıa	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)				
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			0
U	here I 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 58				
b	Exempt foreign organizations - tax withheld at source				
c	Tax paid with application for extension of time to file (Form 8868) 6c				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d	7			E 0
8	Enter any penalty for underpayment of estimated tax. Check here	8			_58
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			
11		11			58
_	Enter the amount of line 10 to be Credited to 2010 estimated tax 58 Refunded 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
14	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		· 'a	+-	1
	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		. 18	 	
	published or distributed by the foundation in connection with the activities		•		
С	Did the foundation file Form 1120-POL for this year?		. 1c	1	x
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	• • • •	. 10	-	1-
u	(1) On the foundation \$\\$ (2) On foundation managers \$\\$		ĺ		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		1		
C	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			
•	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?			 	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?			-	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			+	X
J	If "Yes," attach the statement required by General Instruction T	• • • •	. ⊢ <u>.</u>	-	+^-
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
•	By language in the governing instrument, or		ļ	1	
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that 				
	conflict with the state law remain in the governing instrument?		. 6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II col (c), and the state have a state as the state have a			X	1
, 8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the	rdii XV•	· -	^	
va	instructions) CA				
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		— İ		
b	· · · · · · · · · · · · · · · · · · ·		0.	v	
9	(or designate) of each state as required by General Instruction G? If "No," attach explanation		. 8b	X	+
J	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page				
	TOTALITY OF COLORS OF ALL AND OF THE TAXABLE YEAR DESIRINING IT 2009 (See Instructions for Part XIV on page		1		1

10

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

	990-PF (2009) THE CHAN DESAIGOUDAR FOUNDATION 77-01350	35	<u>P</u>	age 5
Pa	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	_12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address N/A			
14	The books are in care of CHAN DESAIGOUDAR Telephone no	408-7	71-09	72
	Located at ▶ 739 J P NAGAR, India ZIP+4 ▶			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041-Check here			▶ □
	and enter the amount of tax-exempt interest received or accrued during the year			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)	Ì		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2009?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1		
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2009?			
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	İ		
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see page 20 of the instructions)	2b		Х
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	• • • • • • • • • • • • • • • • • • • •			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
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, Form 4720, to determine if the	-		
	foundation had excess business holdings in 2009)	3b		i
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	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?	4b		Х

Part VIII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued) (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	Form	990-PF (2009) THE CHAN DESAIGOUDAR F	OUNDAT:	ION				77-01350	135	Pag	e 6
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e)?)	Pa	t VII-B Statements Regarding Activitie	s for V	Vhich Form	1 4720	May Be F	Required	(continued)			
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes?	5a	During the year did the foundation pay or incur any	amount	to							
directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes?		(1) Carry on propaganda, or otherwise attempt to in	fluence	legislation (se	ction 49	45(e))?	\dots	Yes X No			
(3) Provide a grant to an individual for travel, study, or other similar purposes?		(2) Influence the outcome of any specific public ele	ction (se	e section 495	5), or to	carry on,					
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 599(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions)		directly or indirectly, any voter registration drive	?				\sqcap	Yes X No			
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 599(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions)		(3) Provide a grant to an individual for travel, study	or othe	r sımılar purpo	ses? .			Yes X No			
(5) Provide for any purpose other than religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelity to children or animals?								_	1 1		
(5) Provide for any purpose other than religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelity to children or animals?		section 509(a)(1), (2), or (3), or section 4940(d)	(2)? (see	e page 22 of th	ne instru	ctions)	□	Yes X No		ł	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)?										.	
Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)?. Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)?. If the answer is "Yes" to question 53 (4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Organizations relying the statement required by Regulations section 53 4945-5(d) Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? At any time during the text year, was the foundation a party to a prohibited tax shelter transaction?. Yes X No By Mo If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees and Contractors List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). (a) Name and address (b) Title, and average (f) Compensation (d) Contributions to other allowand deferred compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). If none, enter "NONE" (c) Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). If none, enter "NONE" (d) Contributions to employee paid more than \$50,000 D) Thile, and average hours be rewest devoted to position (e) Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). (e) Expense accompensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). (f) Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions) of the reference of the reference of the proportion of the page 24 of the instructions of the reference of the referen		purposes, or for the prevention of cruelty to child	dren or a	anımals?			□	Yes X No			
Organizations relying on a current notice regarding disaster assistance check here	b	If any answer is "Yes" to 5a(1)-(5), did any of the train	nsactions	s fail to qualify	under th	ne exception	s described	ın			
c if the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?		Regulations section 53 4945 or in a current notice r	egarding	disaster assi	stance (see page 22	of the insti	ructions)?	5b		
because it maintained expenditure responsibility for the grant?		Organizations relying on a current notice regarding	disaster	assistance ch	eck her	e		▶ 🗍			
If "Yes," attach the statement required by Regulations section 53 4945-5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	С	If the answer is "Yes" to question 5a(4), does the fo	undation	n claim exemp	tion fron	n the tax					
On a personal benefit contract?		because it maintained expenditure responsibility for	the grai	nt?				Yes No			
on a personal benefit contract?		If "Yes," attach the statement required by Regulatio	ns sectio	on 53 4945-5(d	d)						
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6a	Did the foundation, during the year, receive any fun	ds, direc	thy or indirectly	y, to pay	premiums					
If "Yes" to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		on a personal benefit contract?					🗆	Yes X No			
Tax At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	b	Did the foundation, during the year, pay premiums,	directly	or indirectly, o	n a pers	onal benefit	contract?.		6b		X
b (f yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		If "Yes" to 6b, file Form 8870									
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees and Contractors 1 List all officers, directors, trustees, foundation managers and their componisation (see page 22 of the instructions). (a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (fir not paid, enter employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense acceptable and deferred compensation (a) Name and address of each employees (other than those included on line 1 - see page 23 of the instructions). (a) P NAGAR, Bahrain 10 0 0 0 2 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). If none, enter "NONE" (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense acceptable to position (fir not paid, enter of compensation) (d) Contributions to employee benefit plans and deferred compensation (e) Expense acceptable to position (e) Expense acceptable to position (fir not paid, enter of compensation) (d) Contributions to employee benefit plans and deferred compensation (e) Expense acceptable to position (e) Expense acceptable to position (e) Compensation (fir not paid, enter of compensation (g) Compensation (h) Contributions to employee benefit plans and deferred compensation (e) Expense acceptable to position (e) Expense acceptable to position (fir not paid, enter of compensation) (d) Contributions to employee to position (e) Compensation (fir not paid, enter of compensation (g) Compensation (g) Compensation (g) Compensation (g) Compensation (g) Compensation (g) Compensation (g) Compensation (g) Compensation (g) Compensation (g) Compensation (g) Compensation (g) Compensation (g) Compensation (g) Compensation (g) Compens	7a	At any time during the tax year, was the foundation	a party t	io a prohibited	tax she	lter transact	ion?.	Yes X No			
And Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). (a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense according to the plant of the	b	If yes, did the foundation receive any proceeds or h	ave any	net income at	tributabl	le to the tran	saction?	<u> </u>	7b		
1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). (a) Name and address (b) Title, and average heave for one province in the province of the instructions to the province of the position of the province of the province of the position of the province of the provin	Pa	rt VIII Information About Officers, Dire	ctors,	Trustees,	Found	lation Mai	nagers, F	lighly Paid I	Emplo	yees,	
(a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation employee benefit plans and deferred compensation (a) Expense according a position (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee paid more than \$50,000 (e) Expense according and deferred compensation (f) Contributions to employee and more than \$50,000 (g) Expense according and deferred compensation (h) Title, and average hours per week devoted to position (g) Compensation (g) Contributions to employee and more than \$50,000 (g) Expense according and deferred compensation (g) Contributions to employee benefit plans and deferred compensation (g) Expense according and the properties of the instructions. (g) Expense according and address of each employee paid more than \$50,000 (g) Expense according and address of each employee paid more than \$50,000 (g) Expense according and address of each employee paid more than \$50,000 (g) Expense according and address of each employee paid more than \$50,000 (g) Expense according and address of each employee paid more than \$50,000 (g) Expense according and address of each employee paid more than \$50,000 (g) Expense according and address of each employee paid more than \$50,000 (g) Expense according and address of each employee paid more than \$50,000 (g) Expense according and address of the instructions.		and Contractors		<u> </u>							
tal Name and address betweek devoted to position the remployee benefit plans and deferred compensation of the railowant other allowant of the railowant of the	1 L	ist all officers, directors, trustees, foundation mana					2 of the ins	tructions).			_
CHAN DESAIGOUDAR CHAN DESAIGOUDAR DIRECTOR DIRECTOR 10 0 0 ARRATHI DESAIGOUDAR 739 J P NAGAR, India 10 0 0 ARRATHI DESAIGOUDAR 739 J P NAGAR, Bahrain 10 0 0 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). If none, enter "NONE" (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (a) Expense according to the properties of the instructions of the i		(a) Name and address			(c) Co	mpensation paid, enter					
739 J P NAGAR, India 10 0 0 ARRATHI DESAIGOUDAR TRUSTEE 739 J P NAGAR, Bahrain 10 0 0 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). If none, enter "NONE" (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense accother allowand the rail of the rail owner.			devote	ed to position	·				Other		
ARARTHI DESAIGOUDAR TRUSTEE 10 0 0 0 0 2 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). If none, enter "NONE" (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (a) Expense according to the relation of the instructions.	CHAI	N DESAIGOUDAR	DIRECT	OR							
2 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). If none, enter "NONE" (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (a) Expense according to the instructions. (a) Expense according to the instructions of the instructions in the instruction in the instructions in the instruction in the instructions in the instructions in the instructions in the instructions in the instructions in the instructions in the instruction in the instructions in the instruction in the instru	739	J P NAGAR, India	ļ	10		0	<u> </u>	0			
2 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). If none, enter "NONE" (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense accontent allowance of the instructions of the instructions of the instructions of the instructions of the instructions of the instructions of the instructions.			TRUSTE	E	}						
If none, enter "NONE" (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense accontent allowance of the compensation o	739	J P NAGAR, Bahrain		10		0		0			0
If none, enter "NONE" (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense accontent allowance of the compensation o			1								
If none, enter "NONE" (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense accontent allowance of the compensation o			 -								
If none, enter "NONE" (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense accontent allowance of the compensation o											
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(a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (a) Expense acc other allowance and address of each employee paid more than \$50,000 and the plans and deferred compensation (a) Expense acc other allowance and the plans and deferred compensation and the plans and deferred compensation and the plans and deferred compensation and the plans and deferred compensation and the plans and deferred compensation and the plans and deferred compensation and the plans and deferred compensation and the plans and deferred compensation and the plans and deferred compensation and the plans and deferred compensation and the plans and deferred compensation and the plans and deferred compensation and the plans and deferred compensation and the plans and deferred compensation and the plans and the plans and the plans and the plans and the plans and the plans and the plant			than the	ose included (on line 1	i - see page	23 of the ir	istructions).			
(a) Name and address of each employee paid more than \$50,000 (b) Ittle, and average hours per week devoted to position (c) Compensation (d) Expense acc other allowand the results of t		Hone, enter NONE				T		C			
NONE devoted to position plans and obterior compensation differ allowant		(a) Name and address of each employee hard more than \$50.00	0			(a) Comoo	er	nployee benefit			
		(a) Name and address of each employee paid more than \$50,00				(c) Compe	į pie		other a	illowances	
	NON!	?									
Fotal number of other employees paid over \$50,000						ĺ		İ			
Fotal number of other employees paid over \$50,000											
Fotal number of other employees paid over \$50,000						1	ľ				
Fotal number of other employees paid over \$50,000											_
Fotal number of other employees paid over \$50,000				İ		1					
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	otal	number of other employees paid over \$50,000				<u></u> .	<u></u> .	<u></u>			

Form 990-PF (2009) THE CHAN DESAIGOUDAR FOUNDATION	77-0	135035 Page 7
Part VIII Information About Officers, Directors, Trustees, F and Contractors (continued)	oundation Managers, Highly P	aid Employees,
3 Five highest-paid independent contractors for professional services (see pa	age 23 of the instructions). If none, ente	r "NONE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		<u> </u>
Total number of others receiving over \$50,000 for professional services	·····	<u></u>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant s organizations and other beneficiaries served, conferences convened, research papers produced,		Expenses
1 N/A		
		0
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see pa	age 24 of the instructions)	
Describe the two largest program-related investments made by the foundation during the tax year		Amount
1 N/A		
		0
2		
All other program-related investments. See page 24 of the instructions		
3		
		<u> </u>
Total. Add lines 1 through 3		

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Form **990-PF** (2009)

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign for	undatio	ons,
	see page 24 of the instructions)		
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	497,797
b	Average of monthly cash balances	1b	32,221
C	Fair market value of all other assets (see page 24 of the instructions)	1c	. 0
d	Total (add lines 1a, b, and c)	1d	530,018
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	1 1	
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	530,018
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25 of		
	the instructions)	4	7,950
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	522,068
6	Minimum investment return. Enter 5% of line 5	6	26,103
Pa	rt XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private of	peratin	g
	foundations and certain foreign organizations check here and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	26,103
2a	Tax on investment income for 2009 from Part VI, line 5 2a	1	
b	Income tax for 2009 (This does not include the tax from Part VI)	1 1	
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	26,103
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	26,103
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	:	
	line 1	7	26,103
Pa	rt XII Qualifying Distributions (see page 25 of the instructions)		
			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a b	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	24,100
	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
3	purposes	2	
a	Amounts set aside for specific charitable projects that satisfy the		
b	Suitability test (prior IRS approval required)	3a	
4	Cash distribution test (attach the required schedule)	3b 4	
5	, , , , , , , , , , , , , , , , , , , ,	4	24,100
,	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	_	
6	Enter 1% of Part I, line 27b (see page 26 of the instructions)	6	
U	Adjusted qualifying distributions. Subtract line 5 from line 4		24,100
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether	er the fo	ouncation
	qualifies for the section 4940(e) reduction of tax in those years		

1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
	line 7				26,103
2	Undistributed income, if any, as of the end of 2009				
а	Enter amount for 2008 only			24,031	
b	Total for prior years,,				
3	Excess distributions carryover, if any, to 2009				
а	From 2004				
b	From 2005	İ			
С	From 2006				
d	From 2007				
е	From 2008				
f	Total of lines 3a through e	ľ			
4	Qualifying distributions for 2009 from Part XII,				
-	line 4 \ \$ 24,100				
а	Applied to 2008, but not more than line 2a			24,031	
b	Applied to undistributed income of prior years			24,031	
~	(Election required - see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election	· · · · · · · · · · · · · · · · · · ·			
C	required - see page 26 of the instructions)				
н	Applied to 2009 distributable amount				
d	· · · · · · · · · · · · · · · · · · ·				69
e	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:				
a	Corpus Add lines 3f, 4c, and 4e Subtract line 5.				
Ь	Prior years' undistributed income Subtract				
	line 4b from line 2b				 -
С	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				
	amount - see page 27 of the instructions		<u> </u>		
е	Undistributed income for 2008 Subtract line				
	4a from line 2a Taxable amount - see page				
	27 of the instructions				
f	Undistributed income for 2009 Subtract lines				
	4d and 5 from line 1 This amount must be				
	distributed in 2010				26,034
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				
	applied on line 5 or line 7 (see page 27 of the				
	instructions)				
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				
	Excess from 2005	İ			
ь	Excess from 2006				
c	Excess from 2007				
d	Excess from 2008				
	Excess from 2009				
e	LAUG33 HUIH 2003			1	

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	If the foundation has received a ruling or					
	foundation, and the ruling is effective for	2009, enter the date	e of the ruling		<u> </u>	
,	Check box to indicate whether the found	ation is a private op	erating foundation de	scribed in section	4942(J)(3) or 4	942(յ)(5)
ı	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(0) 10121
	each year listed					
)	85% of line 2a			ļ. ————————————————————————————————————		
	Qualifying distributions from Part XII, line 4 for each year listed					
l	Amounts included in line 2c not used directly for active conduct of exempt activities					
١	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
	Complete 3a, b, or c for the alternative test relied upon					
ı	"Assets" alternative test - enter (1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
)	"Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
;	"Support" alternative test - enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalities)					
	(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					
t	XV Supplementary Information	on (Complete th	nis part only if th	e foundation had	\$5,000 or more in	assets at
	any time during the year	see page 28 o	f the instruction	s.)		
)	Information Regarding Foundation Man List any managers of the foundation who before the close of any tax year (but only NONE,	have contributed my if they have contrib	outed more than \$5,0	00) (See section 507(c	J)(2) Š	
,	List any managers of the foundation who ownership of a partnership or other entit				arge portion of the	
	NONE,					
	Information Regarding Contribution, Gr		, •			
	Check here \ if the foundation only unsolicited requests for funds. If the four organizations under other conditions, co	idation makes gifts,	grants, etc (see pag			
	The name, address, and telephone num	· ··		hould be addressed		
	The form in which applications should be	submitted and info	ormation and material	s they should include	<u> </u>	
	Any submission deadlines					

Part XV | Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual show any relationship to any foundation manager Foundation Recipient Purpose of grant or contribution status of Amount Name and address (home or business) or substantial contributor a Paid during the year SALINAS STORM CHILDRENS SPORT 147 ECHO VALLEY ROAD SALINAS CA 93907 NONE 150 KARNATAKA GOLF ASSOCIATION CADDY FUNDS POBOX 817 Bahraın NONE 250 MARY BRIDGES CHILDREN HOSPITAL CHILDREN HOSPITAL 409 SOUTH J STREET TACOMA 98415 NONE 200 THE RICHMOND FELLOWSHIP SOCIET MENTAL HEALTH BANGALORE Bahraın NONE 500 DEENA BANDHU SCHOLARSHIP FOREST COLONY Bahraın NONE 23,000 Total ····· 3а 24,100 **b** Approved for future payment Total 3b

	amounts unless otherwise indicated	Unrelated	business income	Excluded by se	ction 512, 513, or 514	(e) Related or exempt
1 Program	n convice revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See page 28 of the instructions)
	n service revenue	Code		code		
						-
_						
f						
g Fees	s and contracts from government agencies					
-	rship dues and assessments					
3 Interest	on savings and temporary cash investments .					
4 Dividen	ds and interest from securities					8,76
5 Net ren	tal income or (loss) from real estate					
a Debi	t-financed property					
b Not	debt-financed property					
6 Net ren	tal income or (loss) from personal property					
7 Other in	nvestment income					
8 Gain or	(loss) from sales of assets other than inventory					
9 Net inco	ome or (loss) from special events					
10 Gross p	profit or (loss) from sales of inventory					
11 Other re	evenue a					
•.						
_						
е						
12 Subtota	Add columns (b), (d), and (e)					8,76
42 Tc4-1	Add line 12, columns (b), (d), and (e)				13	8,76
is rotal.	(2), (2), (3)					97.00
(See works	heet in line 13 instructions on page 28 to verify of	alculations)				
	heet in line 13 instructions on page 28 to verify of I-B Relationship of Activities to the	alculations) Accompli	shment of Ex	empt Purpos	es	
See works	heet in line 13 instructions on page 28 to verify of I-B Relationship of Activities to the Explain below how each activity for which in	Accomplinations) Accomplinations is reported.	shment of Executed in column (e)	empt Purpose of Part XVI-A co	es ntributed importan	tly to the
See works Part XV	heet in line 13 instructions on page 28 to verify of I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accomplinations) Accomplinations is reported.	shment of Executed in column (e)	empt Purpose of Part XVI-A co	es ntributed importan	tly to the
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See works Part XV	heet in line 13 instructions on page 28 to verify of I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accomplinations) Accomplinations is reported.	shment of Ex	empt Purpose of Part XVI-A co	es ntributed importan	tly to the
See works Part XV	heet in line 13 instructions on page 28 to verify of I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accomplinations) Accomplinations is reported.	shment of Ex	empt Purpose of Part XVI-A co	es ntributed importan	tly to the
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See works Part XV	heet in line 13 instructions on page 28 to verify of I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accomplinations) Accomplinations is reported.	shment of Ex	empt Purpose of Part XVI-A co	es ntributed importan	tly to the
See works Part XV	heet in line 13 instructions on page 28 to verify of I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accomplinations) Accomplinations is reported.	shment of Ex	empt Purpose of Part XVI-A co	es ntributed importan	tly to the
See works Part XV	heet in line 13 instructions on page 28 to verify of I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accomplinations) Accomplinations is reported.	shment of Ex	empt Purpose of Part XVI-A co	es ntributed importan	tly to the
See works Part XV	heet in line 13 instructions on page 28 to verify of I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accomplinations) Accomplinations is reported.	shment of Executed in column (e)	empt Purpose of Part XVI-A co	es ntributed importan	tly to the
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See works Part XV	heet in line 13 instructions on page 28 to verify of I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accomplinations) Accomplinations is reported.	shment of Executed in column (e)	empt Purpose of Part XVI-A co	es ntributed importan	tly to the
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See works Part XV	heet in line 13 instructions on page 28 to verify of I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accomplinations) Accomplinations is reported.	shment of Executed in column (e)	empt Purpose of Part XVI-A co	es ntributed importan	tly to the
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Form	1990-PF				DAR FOUNDA						-0135035			ge 13
Pa	rt XVII	_			insfers To	and Tra	nsactio	ns and	Relation	ships Wit	h Nonch	arital	ble	
		Exempt Or	ganizat	ions										
1	Did the	organization dire	ectly or inc	directly eng	jage in any of	the follows	ing with ai	ny other o	rganızatıor	n described			Yes	_No
	ın secti	on 501(c) of the (Code (oth	er than sec	tion 501(c)(3)) organizat	ions) or ir	section 5	27, relatın	g to political		1		
	organiz	ations?												
а	Transfe	ers from the repor	ting found	dation to a	noncharitable	exempt or	rganizatio	n of						
	(1) Cas	sh										1a(1)	}	Х
	(2) Oth	er assets										1a(2)		X
b		ransactions												
_		es of assets to a	noncharit	able exemn	nt organization							1b(1)		Х
	٠,	chases of assets			•							1b(2)		X
	` '	ntal of facilities, e			· · ·							1b(3)	-	X
														X
		mbursement arra	_									1b(4)		
		ns or loan guarar										1b(5)		X
	• •	formance of servi		•	-							1b(6)		X
C	_	of facilities, equ		-								1c	<u></u>	X
d		nswer to any of th			•	•				-				
	value o	f the goods, othe	r assets,	or services	given by the	reporting for	oundation	If the fou	ındatıon re	ceived less	than fair ma	ırket		
	value ır	any transaction	or sharing	arrangeme	ent, show in c	olumn (d) t	he value o	of the good	ds, other as	ssets, or serv	rices receive	ed		
(a) L	ne no (b) Amount involved	(c)	Name of non	ncharitable exem	pt organizatio	on	(d) Desc	iption of tran	isfers, transacti	ons, and shar	ng arra	ngemen	its
														
													~	
														
														
_														
														
2a		oundation directly		-										
	describ	ed in section 501	(c) of the	Code (other	er than sectio	n 501(c)(3))) or in se	ction 5277	· · · · ·			Ye	s X	No
<u>_b</u>	If "Yes,	" complete the fo	llowing so	chedule										
		(a) Name of organ	zation		(b)	Type of orga	nization			(c) Descrip	tion of relation	ship		
	Under pe	enalties of perjury, I d	eclare that	I have exami	ned this return i	ncluding acco	ompanying s	chedules ar	d statement	s, and to the be	st of my know	ledge a	nd	
	belief, it	is true, correct, and o	complete D	eclaration of	preparer (other t	han taxpayer	or fiduciary) is based o	n all informa	tion of which pr	eparer has an	y knowle	edge	
s		-CM		أمحجنه	\mathcal{Q}			9/2] Zeill					
<u> </u>	<u></u>	ure of alliant and a	مرعب ر	7				1 - 1 - 2 - 1 - 2 - 2 - 2 - 2 - 2 - 2 -	10011	DIRECT	<u>UK</u>			
g n	Signat	ure of officer or trust	ee				Date	Date		Title	Decree 1	doct		
- 1	Paid								{		Preparer's in number (see		-	
H	Prepar-				ci	~^^4			Check if	_	page 30 of f	-)
e r	er's	Preparer's	oteu	enw	Schmure	LPAN	×		self-employ	yed ▶ X				
e	Use			W Schnur	CPA	· P	09- <u>01-2</u>	011						
]	Only	Firm's name (or y self-employed), a		Steven	W Schnur	CPA				EIN				
		and ZIP code		Milpit	as, CA 950	35				Phone no	4 ()8-37	4-941	0

Federal Su	pporting Stateme		2009 PG 01
THE CHAN DESAIGOUDAR FOUNDATION	N		77-0135035
FORM 990PF, I INVESTMENTS: COR	PART II, LINE : PORATE STOCK SO		STATEMENT #137
CATEGORY	BOY	BOOK VALUE	EOY FMV
SMITH BARNEY CITIGROUP 42934 SMITH BARNEY CITIGROUP 42935 SMITH BARNEY CITIGROUP 42940 CAMERON GROUP INVESTMENT	134,016 183,681 257,532 50,000	50,000	1
DATANET CORPORATION UBS	30,000	30,000 474,100	5,000
TOTALS	655,229	554,100	522,540

		Federal Sı	Federal Supporting Statements	nents	_ 	
Name(s) as shown on return THE CHAN DESAIGOUDAR FOUNDATION					Your Social Security Number 77-0135035	
	FORM 990PF	FORM 990PF, PART I, LINE 23 - C	- OTHER EXPENSES SCHEDULE	gr	STATEMENT #103	
	REVENUE	NET	ADJUSTED	CHARITABLE		
DESCRIPTION	AND EXPENSES	INVESTMENT	NET INCOME	PURPOSE		
AUTO EXPENSE	450	450	0	0		
BANK CHARGE	0	0	0	0		
MEALS & EMTERTAINMENT	975	975	0	o		_
MAINTENANCE FEE	410	410	0	0		
POSTAGE	0	0	0	0		
TELEPHONE	380	380	0	0		
MISCELLANEOUS	72	72	0	0		
STATOL	786 6	786 6	c	c		
	10217	10272				
						-
					PG 01	
	FORM 990P	F, PART I, LINE 16(A)	FORM 990PF, PART I, LINE 16(A) - LEGAL, FEES SCHEDULE	ωį	STATEMENT #107	
	REVENUE	NET	ADJUSTED	CHARITABLE		
DESCRIPTION FILING FEE	AND EXPENSES	INVESTMENT	NET INCOME	PURPOSE		
	į	;	•			
IOTALS	1/2	5/	0			
				!		
						-]

		Federal St	Federal Supporting Statements	ments	2009 PG 01
Name(s) as shown on return THE CHAN DESAIGOUDAR FOUNDATION					Your Social Security Number 77-0135035
	FORM 990PF, PART	I, LINE 16(B)	- ACCOUNTING FEES SCHEDULE	oure	STATEMENT #108
DESCRIPTION ACCOUNTING FEE	REVENUE AND EXPENSES 1,500	NET INVESTMENT	ADJUSTED NET INCOME	CHARITABLE PURPOSE	
TOTALS	1,500	1,500			
	FORM 990PE, PART	I, LINE 16(C) - OTHE	FORM 990PF, PART I, LINE 16(C) - OTHER PROFESSIONAL FEES SCHEDULE	SCHEDULE	PG 01 STATEMENT #109
DESCRIPTION INVESTMENT MANAGEMENT FEE	REVENUE AND EXPENSES 6,437	NET INVESTMENT 6,437	ADJUSTED NET INCOME	CHARITABLE PURPOSE 0	
TOTALS	6,437	6,437		0	

THE CHAN DESAIGOUDAR FOUNDATION THE CHAN DESAIGOUDAR FOUNDATION REVENUE DESCRIPTION AND EXPENSES FRANCHISE TAX BOARD FOREIGN TAX TOTALS G12 TOTALS 622	FORM 990PF, PART I, LINE 18 - TAXES SCHEDULE NET ADJUSTED INVESTMENT 0 0 2 612 622 0 2 622 0	TAXES SCHEDULE ADJUSTED 0 0 0	CHARITABLE PURPOSE 0 0 0	Your STATE	Your Social Security Number 77-0135035 STATEMENT #110
REVENUE AND EXPENSES 61 61	990PF, PART I, LINE 18 - NET INVESTMENT 612 622	TAXES SCHEDULE ADJUSTED 0 0 0 0 0			135035
AND EXPENSES W BOARD 61 62	990PF, PART I, LINE 18 - NET 10 612 622	ADJUSTED ADJUSTED O O O O O O O O O O O O O			EMENT #110
X BOARD X BOARD	NET INVESTMENT 10 612 622				
W BOARD	612)		
XAT 1					

990	Overflow Statement	2 Pā	009 ge 1
Name(s) as shown on return		FEIN	
THE CHAN DESAIGOUDA	R FOUNDATION	77-0	135035

LOAN FROM DIRECTOR

Description			Amount
LOAN FROM CHAN DESAIGOUDAR - SHORBIRD	EXPENSES		\$ 2,937
	-	Total:	\$ 2,937

Description		Amount
TOTAL FMV		533,228
LESS CASH		(15,688)
	Total:	517,540

	868 (Rev 4-2009)			Pag
If yo	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box			• • • • •
	Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed For	rm 8868		
	ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)			
Part			_	
Type o		•		on number
print File by ti		-013		5
extende due date	Number, street, and room or suite no. If a P.O. box, see instructions 739 J P NAGAR	IRS use or	nly	
filing the return S instruction	City, town or post office, state, and other code roll a toreign address, see instructions			
	type of return to be filed (File a separate application for each return)			
For	m 990		□ f	Form 6069
For	m 990-BL		□ f	orm 8870
For	m 990-EZ Form 990-T (trust other than above) Form 5227	_		
	Do not complete Part II if you were not already granted an automatic 3-month extension on a previously fil	led Form	8868	<u></u>
	books are in the care of AARATHI DESAIGOUDAR			
Tele	ephone No ▶ <u>360-828-1468</u> FAX No ▶			
If th	e organization does not have an office or place of business in the United States, check this box			• • • • •
		this is		
for 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 members the extension is for			
4 1	request an additional 3-month extension of time until $10-17$, $20\overline{11}$			
5 F	For calendar year, or other tax year beginning12-01_, 2009 and ending			, 20 <u>1 0</u>
6 1	f this tax year is for less than 12 months, check reason 🔲 Initial return 🔲 Final return 📋 Change in	account	ing pe	riod
7 5	State in detail why you need the extension			
-	TAXPAYER RESIDES OUTSIDE THE COUNTRY. PREPARER DID NOT			
	SUFFICIENT TIME TO PREPARE THE RETURN DURING HIS VISITS	5		
-		$\overline{}$		
	f this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax.			
8a I	, , , , , , , , , , , , , , , , , , , ,	8a	\$	
8a	ess any nonrefundable credits. See instructions	8a	\$	
8a <u> </u> b	, , , , , , , , , , , , , , , , , , , ,	8a	\$	
8a b	ess any nonrefundable credits. See instructions f this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and	8a 8b	\$ \$	
8a 	ess any nonrefundable credits. See instructions f 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.			
8a b c	ess any nonrefundable credits. See instructions f 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. Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit			
8a b c	ess any nonrefundable credits. See instructions f 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. 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.	8b	\$	
Ba I I I I I I I I I I I I I I I I I I I	ess any nonrefundable credits. See instructions f 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. Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit	8b 8c	\$	elief,
8a l l l l l l l l l	ess any nonrefundable credits. See instructions 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. 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. Signature and Verification. enablies of perjury. I declare that I have examined this form, including accompanying schedules and statements, and to the best of my	8b 8c	\$	elief,
8a I	ess any nonrefundable credits. See instructions 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. 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. Signature and Verification enablies of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my correct, and complete, and that I am authorized to prepare this form.	8b 8c	\$	elief,