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Form **990-PF**

Department of the Treasury

Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

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

OMB No 1545-0052

2010

Fo	or ca	lendar year 2010, or t ————	ax year beg	jinning	, ;	and ending			
G	Che	eck all that apply.	Initia	return] Initial return of a fo	ormer public cha	rity	Final	return
			Ame	nded return	Address change	•	•	change	O.G.
N	ame o	f foundation						Employer identification r	umber
TH	IE EI	NDOWMENT FUND F	OR WORLD	PEACE AND G	LOBAL HEALING. I	NC		31-181	
N	umber	and street (or P O box numb	per if mail is not	delivered to street ac	(dress)	Room/suite	В	Telephone number (see pa	
		IORWAY RD						(214) 443	•
С	ty or to	own, state, and ZIP code					C II	exemption application is p	
_	<u>\LLA</u>				TX	75230		. Foreign organizations, ch	
Щ	Che	eck type of organization	n. 💢 Secti	on 501(c)(3) exe	empt private foundat	ion		. Foreign organizations me	——————————————————————————————————————
<u>_</u>] Se	ction 4947(a)(1) nonex	empt charita	able trust (Other taxable private	foundation		check here and attach co	omputation >
1	Fair	market value of all as	sets at end	J Accounting	method X Cas	h Accrual		private foundation status inder section 507(b)(1)(A),	
	of y	ear (from Part II, col. (c),	Other (s	pecify)	_		the foundation is in a 60-n	
		16) > \$			d) must be on cash ba	sis)		nder section 507(b)(1)(B),	
Pa	art I	•			(a) Revenue and				(d) Disbursements
		amounts in columns (b), (c, the amounts in column (a)), and (d) may n (see page 11 of	ot necessarily equal	expenses per	(b) Net investm	ent	(c) Adjusted net income	for charitable
	Τ.				books			I I I I I I I I I I I I I I I I I I I	purposes (cash basis only)
	1	Contributions, gifts, grants,			96,392				
	3	Check Interpret of the foundation				, ,,	,		
	4	Interest on savings and Dividends and interest			17		17		
	1 .	a Gross rents	nom secunile	S	0		0	 	
4	1	b Net rental income or (lo	ee)	0			0		
Revenué	6 6	a Net gain or (loss) from			0	*		,	***
Ę,	ı	b Gross sales price for all ass		0				<u> </u>	
%	7	Capital gain net income					0	\\\\\\\\\	
	8	Net short-term capital g		,	· · · · · · · · · · · · · · · · · · ·			0	7
	9	Income modifications					- 7	<u>`</u>	*
	10 a	Gross sales less returns an	d allowances	0					
		b Less Cost of goods so		0	·				/ * * *
ANNED		Gross profit or (loss) (at		e)	0				
\leq	11	Other income (attach so			0		0		/ xxX
	12	Total. Add lines 1 throu			96,409		17	0	* * *
Expenses	13	Compensation of officer		rustees, etc	0				-
IIS	14	Other employee salaries							
be	15	Pension plans, employed Legal fees (attach sche	e benefits T	5					
_	16 a	Accounting fees (attach			0		0	0	0
and Administrative		71 1 '	,	lule) OSO	375		0	0	0
rat	17	Other professional fees Interest		S)	4,800		0	0	0
ist	18	Taxes (attach schedule)-(see		ו ווייי	92		0		
Ë	19	Depreciation (attachsc			0		- 0	0	0
튕	20	Occupancy							<u> </u>
≤	21	Travel, conferences, and	d meetings	Ī					
2	22	Printing and publications	3	Ţ					<u> </u>
	23	Other expenses (attach	schedule)		8,540		0	0	0
Operating	24	Total operating and ad		expenses.					<u></u>
era		Add lines 13 through 23		Ĺ	13,807		0	0	0
Ä	25	Contributions, gifts, gran		Į	101,999				101,999
	26	Total expenses and disbur		nes 24 and 25	115,806		0	0	101,999
İ	27	Subtract line 26 from line							.01,000
		Excess of revenue over exp			-19,397				· · · · · · · · · · · · · · · · · · ·
		Net investment income					17	ś	, x x x, x,
	С	Adjusted net income (f negative, en	ter -0-)			T		\$ 13 . 4

4 Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize) ▶

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

<u>4</u> 5

6

205,995

205,995

0

(a) List and describe t	the kind(s) of property sold (e.g., real esta buse, or common stock, 200 shs MLC Co	te,	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a			D DOMAIGH		
b					
C					
_d					ļ
е					1
(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis ense of sale		in or (loss) (f) minus (g)
	0		0		
	0 0		0		
	0		0		
	0		0		
Complete only for constants abo	U[U[hu tha farradati			
(i) F M V as of 12/31/69	(y) Adjusted basis as of 12/31/69	(k) Exce	ess of col (i)	col (k), but no	ol (h) gain minus ot less than -0-) or from col (h))
a	o o		0,,,	200000 (C
			0		0
	0 0		0		
	0		0		0
	0		0		0
2 Capital gain net income o		lso enter in Pa enter -0- in Pa		2	
3 Net short-term capital gai	n or (loss) as defined in section	s 1222(5) and	(6)		
If gain, also enter in Part	l, line 8, column (c) (see pages	13 and 17 of	the }		
instructions). If (loss), ent	er -0- in Part I, line 8	<u> </u>		3	0
Part V Qualification Ur	ider Section 4940(e) for Re	duced Tax o	on Net Investme	ent Income	·····
If "Yes," the foundation does	the section 4942 tax on the dist	e) Do not com	plete this part	·	
	nount in each column for each y	rear, see page	18 of the instruc	tions before makir	
(a) Base period years	(b)	ļ	(c)	Dis	(d) stribution ratio
Calendar year (or tax year beginning	in) Adjusted qualifying distribution	Net value	of noncharitable-use a	SSAIS	divided by col (c))
2009		,000	202	,468	0 419819
2008		,000	164	,786	0 576505
2007	130	,000	176	5,196	0 737815
2006			···		0 000000
2005					0 000000
2 Total of line 1, column (d)			2	1 734139
	for the 5-year base period—div oundation has been in existence			3	0 578046
4 Enter the net value of nor	charitable-use assets for 2010	from Part X, Iı	ne 5	. 4	211,331
5 Multiply line 4 by line 3				5	122,159
6 Enter 1% of net investme	nt income (1% of Part I, line 27t	o)		_6	0
7 Add lines 5 and 6				7	122,159
8 Enter qualifying distribution If line 8 is equal to or great	ons from Part XII, line 4 ater than line 7, check the box in	n Part VI, line	1b, and complete	that part using a	101,999 % tax rate. See
the Part VI instructions or		-1			

Fo	rm 990-PF (2010) THE ENDOWMENT FUND FOR WORLD PEACE AND GLOBAL HEALING, INC 31-18	31172	4 1	Dogo .			
Р	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of	he in	struc	Page of			
1	a Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1)			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						
here land enter 1% of Part I, line 27b							
	c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%			ļ			
2	of Part I, line 12, col (b) Tay under section 511 (demostra apartus 4047(a)/4) trusts and the line in			1			
3	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) Add lines 1 and 2		(<u> </u>			
4	Substitle A (many) And (day)		(니			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		— ,	+-			
6	Credits/Payments						
	a 2010 estimated tax payments and 2009 overpayment credited to 2010 6a 0						
	b Exempt foreign organizations—tax withheld at source 6b						
	c Tax paid with application for extension of time to file (Form 8868)		* 'Y	ŀ			
	d Backup withholding erroneously withheld 6d	•		1			
7	Total credits and payments Add lines 6a through 6d		C) '			
8	Enter any penalty for underpayment of estimated tax. Check here		C				
9 10	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		C)			
	Enter the amount of the 10 to the Condition to mind of enter the amount overpaid)			
	Ul Hotanaca P 11		C				
	art VII-A Statements Regarding Activities		,				
1	a 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	<u> </u>	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)?	1					
	$m{\cdot}$	1b	1 3	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	(1.5mm)		" ķ			
	C Did the foundation file Form 1120-POL for this year?	المناها ا					
	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	1c	'	X			
	(1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$	1 "T"	TR T	1			
(e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		, , ,				
	on foundation managers > \$	ľ		ä			
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			
7 6	a Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a tax return on Form 990-T for this year?	4a		X			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	4b	N/A				
•	If "Yes," attach the statement required by General Instruction T	5		_ X			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	·	>* *				
	By language in the governing instrument, or	\$ \frac{1}{2} \tag{2}	ا در چيند چ ^و د	,			
	By state legislation that effectively amends the governing instrument so that no mandatory directions	200					
	that conflict with the state law remain in the governing instrument?	6	X	ائد سد شا			
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 Part XV	7	X				
8 a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the	1		× 、			
	instructions) ► TX			- i			
t	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney		ł				
^	General (or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Х				
9	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 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page 27)? If "Yes," complete Part XIV						
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing	9		X			
	their names and addresses						
	and the desired of the second	10	X				

FOITH	990-FF (2010) THE ENDOWMENT FUND FOR WORLD PEACE AND GLOBAL HEALING, INC	1724		age 🧿
Par	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	L
	Website address WWW.FUNDPEACEANDHEALING NET			
14	The books are in care of ► GUNJAN JAIN Telephone no ► (214) 443-83	359		
	Located at ► 3207 ST JOHNS DRIVE DALLAS TX ZIP+4 ► 75205			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here			▶ ∐
40	and enter the amount of tax-exempt interest received or accrued during the year 15		Yes	No
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority	16	162	X
	over a bank, securities, or other financial account in a foreign country? See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter	10	,	 ^-
	the name of the foreign country			
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			L
	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	,	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	\		ļ
	(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?		,	
	(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		or e	
	for the benefit or use of a disqualified person)?	jî t	* **	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	, ' .* , .*	***	7 (1) 3
	if the foundation agreed to make a grant to or to employ the official for a period		ĺ)
	after termination of government service, if terminating within 90 days)			
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 22 of the instructions)?	1b	N/A	× 1
	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,		21	~ * !
2	that were not corrected before the first day of the tax year beginning in 2010?	1c		X , v ,
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))	ļ		"
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d			,
_	and 6e, Part XIII) for tax year(s) beginning before 2010?			!
	If "Yes," list the years > 20 , 20 , 20 , 20 , 20		ļ. i	4
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			` , _{", \$5}
	(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 22 of the instructions)	2b	N/A	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	,,,,	*	21
_	20 , 20 , 20 , 20	,	·	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No	- 1	,	
L	enterprise at any time during the year? If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation	j.		'
b	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)	ļ	` .	
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine	ļ i		
	if the foundation had excess business holdings in 2010)	3b	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
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 2010?	4b		X

Forn	n 990-PF (2010) THE ENDOWMENT FUND F	OR WORLD PEACE	AND GLOBAL HE	ALING, INC	31-1811724	Page 6
Pa	rt VII-B Statements Regarding Activiti					
	During the year did the foundation pay or incur any		<u></u>	4		
-	(1) Carry on propaganda, or otherwise attempt to		section 4945(e))?	Yes	No :	, , ,
	(2) Influence the outcome of any specific public				-	
	on, directly or indirectly, any voter registration	· · · · · · · · · · · · · · · · · · ·		Yes	No 🏣	
			0	=======================================	≓ \	
	(3) Provide a grant to an individual for travel, stu			Yes	< No │	
	(4) Provide a grant to an organization other than			П., Г	7.	(3) * -
	in section 509(a)(1), (2), or (3), or section 49			Yes/	< No	
	(5) Provide for any purpose other than religious,			<u></u>		1
	educational purposes, or for the prevention of	of cruelty to children or	animals?	Yes 2	< No	
b	If any answer is "Yes" to 5a(1)–(5), did any of the	transactions fail to qual	ify under the exception	ns described in	ĺ	
	Regulations section 53 4945 or in a current notice	regarding disaster assi	stance (see page 22	of the instructions)?	<u>5b</u> _	N/A
	Organizations relying on a current notice regarding	disaster assistance cl	neck here	▶Ĺ	_	j , j,
C	If the answer is "Yes" to question 5a(4), does the f	oundation claim exemp	otion from the		_	
	tax because it maintained expenditure responsibilit	ty for the grant?		Yes	<u>≺</u> No	'
	If "Yes," attach the statement required by Regulation	ons section 53 4945–5	(d)			- *
6a	Did the foundation, during the year, receive any ful	nds, directly or indirect	y, to pay)	
	premiums on a personal benefit contract?			Yes	K No	, ,
b	Did the foundation, during the year, pay premiums	, directly or indirectly, o	n a personal 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	I tax shelter transaction	on? Yes	₹ No 🌏	* * * * * * * * * * * * * * * * * * * *
	If "Yes," did the foundation receive any proceeds of				7b	X
	art VIII Information About Officers,				id Employ	
	and Contractors	Directors, Traste	es, i oundation	managers, mgmy r	ila Employ	003,
1	List all officers, directors, trustees, found	ation managers an	d their compensat	ion (see page 22 of the	instruction	ns).
<u> </u>	Ziot un omooro, unotoro, tractoro, rouna	(b) Title, and average	(c) Compensation	(d) Contributions to		
	(a) Name and address	hours per week	(If not paid, enter	employee benefit plans		se account, owances
	LIDAO JAINI	devoted to position	-0-)	and deferred compensation		
	URAG JAIN	DIRECTOR				0
	38 NORWAY RD DALLAS TX 75230	2 00	0		0	0
	ARLOTTE ANDERSON	VICE PRESIDENT			ا	0
	131 VENTURA BLVD SHERMAN OAKS CA!	2 00	0		0	0
	NJAN JAIN	TREASURER			ا	•
<u>593</u>	38 NORWAY RD DALLAS TX 75230	2 00	0		0	
					1	0
		00	0		0	0
2	Compensation of five highest-paid emplo		<u> </u>		<u></u>	0
	Compensation of five highest-paid employ if none, enter "NONE."		<u> </u>	ne 1—see page 23 of t	<u></u>	0
	If none, enter "NONE."	yees (other than the	ose included on li	ne 1—see page 23 of the	he instruction	ons).
		(b) Title, and avers	ose included on li	(d) Contributions to employee benefit	he instruction	ons).
	If none, enter "NONE."	yees (other than the	ose included on li	(d) Contributions to	he instruction	ons).
(a	If none, enter "NONE." Name and address of each employee paid more than \$50,	(b) Title, and avers	ose included on li	(d) Contributions to employee benefit plans and deferred	he instruction	ons).
(a	If none, enter "NONE."	(b) Title, and avers	ose included on li	(d) Contributions to employee benefit plans and deferred	he instruction	ons).
(a	If none, enter "NONE." Name and address of each employee paid more than \$50,	(b) Title, and avers	ose included on li	(d) Contributions to employee benefit plans and deferred	he instruction	ons).
(a	If none, enter "NONE." Name and address of each employee paid more than \$50,	(b) Title, and avers	ose included on li	(d) Contributions to employee benefit plans and deferred	he instruction	ons).
(a	If none, enter "NONE." Name and address of each employee paid more than \$50,	(b) Title, and avers	ose included on li	(d) Contributions to employee benefit plans and deferred	he instruction	ons).
(a	If none, enter "NONE." Name and address of each employee paid more than \$50,	(b) Title, and avers	ose included on li	(d) Contributions to employee benefit plans and deferred	he instruction	ons).
(a	If none, enter "NONE." Name and address of each employee paid more than \$50,	(b) Title, and avers	ose included on li	(d) Contributions to employee benefit plans and deferred	he instruction	ons).
(a	If none, enter "NONE." Name and address of each employee paid more than \$50,	(b) Title, and avers	ose included on li	(d) Contributions to employee benefit plans and deferred	he instruction	ons).

Total number of other employees paid over \$50,000

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Pai and Contractors (continued)	d Employees,
3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, ent	er "NONF "
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	0
	0
	0
	0
Total number of others receiving over \$50,000 for professional services ▶	
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
	
4	
Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)	L
Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	<u> </u>
	· · · · · · · · · · · · · · · · · · ·
2	
All other program-related investments See page 24 of the instructions	
3 NONE	
	0
Total. Add lines 1 through 3	0

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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)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	101
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 (see page 26 of the instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	101
	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

purposes

Form **990-PF** (2010)

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0 999,

ai	TAIL Undistributed income (see p.	age 20 01 t	(a)	(b)	(c)	(d)
1	Distributable amount for 2010 from Part XI, line 7	ļ	Corpus	Years prior to 2009	2009	2010
2	Undistributed income, if any, as of the end	of 2010				10,007
	a Enter amount for 2009 only	3, 20, 3			(ol
	b Total for prior years 20, 20,	20		0		
3	Excess distributions carryover, if any, to 20					
	a From 2005	ol			ı	
	b From 2006	0				
	c From 2007	121,191				
`	d From 2008	86,840				
	e From 2009	74,878				
	f Total of lines 3a through e	,00	282,909			
4	Qualifying distributions for 2010 from Part					,
•	XII, line 4 ► \$ 101,999			*		
	a Applied to 2009, but not more than line 2a					ol "
	b Applied to undistributed income of prior year	ırs				
•	(Election required—see page 26 of the inst			o		
	c Treated as distributions out of corpus (Elec				, , , , , , , , , , , , , , , , , , ,	
,	required—see page 26 of the instructions)		0		 ,- →	*
	d Applied to 2010 distributable amount		* 3 * * *	, , , , ,		10,567
	e Remaining amount distributed out of corpu	s .	91,432	3.	* ' ' '	
5			0		X < \$	0
	(If an amount appears in column (d), the		,	*	3	
	same amount must be shown in column (a,))			1	1
6	Enter the net total of each column as indicated below:		``	٠	ά.	*
i	a Corpus Add lines 3f, 4c, and 4e Subtract	line 5	374,341			·
	b Prior years' undistributed income Subtract		*			
	line 4b from line 2b		4	0	·	
	c Enter the amount of prior years' undistribut	ed	,			İ
	income for which a notice of deficiency has					
	been issued, or on which the section 4942					
	tax has been previously assessed	, ,	*		*	. , ,
	d Subtract line 6c from line 6b Taxable					
	amount—see page 27 of the instructions		,	l o		
	e Undistributed income for 2009 Subtract lin	е	3.	,		~ v.
	4a from line 2a Taxable amount—see pag			\$` · · · · · · · · · · · · · · · · · ·		** , , ,
	instructions					0
	f Undistributed income for 2010 Subtract					
	lines 4d and 5 from line 1. This amount mu	ıst			ļ	
	be distributed in 2011	-		1		0
7						
•	corpus to satisfy requirements imposed by		1	1	ļ	
	section 170(b)(1)(F) or 4942(g)(3) (see page		ļ	1		,
	the instructions)	,	ļ		*	434
8						
٠	not applied on line 5 or line 7 (see page 27	of the				1
	instructions)	J. 1.10	0)		
9	•		<u>-</u>	 		
J	Subtract lines 7 and 8 from line 6a		374,341			
10			0,7,041	\		
10	_ ′	n	J		٠	
		121,191	1	, , , , , ,	^	1
	b Excess from 2007	86,840				
	c Excess from 2008		7		,	ļ
	d Excess from 2009	74,878 91,432	7			
	e Excess from 2010	∀1,43 2	. {	1	1	

	m 990-PF (2010) THE ENDOWMENT FUND F				31-181	
Pa	rt XIV Private Operating Foundations (Se	ee page 27 of th	ne instructions a	nd Part VII-A, qu	iestion 9)	N/A
1 a	If the foundation has received a ruling or determina foundation, and the ruling is effective for 2010, enter			.		
	Check box to indicate whether the foundation is a p	rivate operating fou	ındatıon described ii	n section	4942(j)(3) or	4942(J)(5)
2 a	a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		40 = 44
	investment return from Part X for each	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
	year listed	0				0
k	9 85% of line 2a	0	0	0	0	0
C	Qualifying distributions from Part XII, line 4 for each year listed	0				0
C	Amounts included in line 2c not used directly for active conduct of exempt activities	i				
e	Qualifying distributions made directly	·				0
	for active conduct of exempt activities Subtract line 2d from line 2c	0	0	0	0	0
3	Complete 3a, b, or c for the alternative test relied upon a "Assets" alternative test—enter					<u></u>
	(1) Value of all assets					0
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
k	"Endowment" alternative test—enter 2/3 of minimum investment return shown in					0
	Part X, line 6 for each year listed	0				0
C	"Support" alternative test—enter	i				
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					0
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					0
	(4) Gross investment income					0
Pa	art XV Supplementary Information (Con	plete this part	only if the fou	ndation had \$5.	000 or more in	
	assets at any time during the yea	•	•	-		
1	Information Regarding Foundation Manage		··			
á	List any managers of the foundation who have cont before the close of any tax year (but only if they have	ributed more than 2			the foundation	
A٨	IURAG JAIN		, ,			
	List any managers of the foundation who own 10% ownership of a partnership or other entity) of which		•		ortion of the	
NC	OT APPLICABLE					
2	Information Regarding Contribution, Grant	, Gift, Loan, Sch	olarship, etc., P	rograms:		
	Check here $\blacktriangleright X$ if the foundation only makes unsolicited requests for funds. If the foundation mal under other conditions, complete items 2a, b, c, and	kes gifts, grants, et				tions
	The name, address, and telephone number of the p		olications should be	addressed		
	The form in which applications should be submitted	and information ar	nd materials they sh	ould include		
	Any submission deadlines					
	Any restrictions or limitations on awards, such as b factors	y geographical area	as, charitable fields,	kınds of ınstitutions,	or other	

3 Grants and Contributions Paid During		for Future	Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Continuation	
a Paid during the year JP Jones-Research project			AID TO NEEDY	23,999
American Red Cross- Haiti	† 		AID TO NEEDY	5,000
Haiti Feed Your Soul		501(C)(3)	FOOD FOR THE NEEDY	45,000
Pao Nosso Organization-Brazil		501(C)(3)	AID POOR AND NEEDY IN BRAZIL	18,000
Brazil Tuloy Foundation of Philliplines		501(C)(3)	AID TO NEEDY	10,000
Philippines				
b Approved for future payment			▶ 3a	101,999
Total			> 2h	

Enter gross amounts unless otherwise indicated.	Unrelated bus	iness income	Excluded by section	(e)	
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See page 28 of the instructions)
a		0		0	
b		0		0	
С		0		0	
d		0		0	
е		0		0	(
f		0		0	(
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	17	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate		* * * *		\$ 100 C. (\$5) E.S.	ETAR TE
a Debt-financed property		L	L		
b Not debt-financed property					
6 Net rental income or (loss) from personal property					L
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory				0	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory				ļ	L
11 Other revenue a		0		0	
b	-	0		0	
C	-	0		0	
d	-	0		0	
e	-	0		0	
12 Subtotal Add columns (b), (d), and (e)		0		17	
13 Total. Add line 12, columns (b), (d), and (e)	wlotions \			13	17
(See worksheet in line 13 instructions on page 29 to verify calc		(F + 1 P			
Part XVI-B Relationship of Activities to the Ac					
Line No. Explain below how each activity for which income the accomplishment of the foundation's exempt page 29 of the instructions)					
NOT APPLICABLE					
		 			
					
		_ 			
					
					
	 				
					
				-	
					
		·			
					
					
					
_ 1	_				

Part XVII	Information Regarding	Transfers To and	Transactions and	Relationships	With Noncharitable
	Exempt Organizations				

1		rganization directly i 501(c) of the Code ions?	•	•	•	•	•			Yes	<u>No</u>
2	Transfers	from the reporting	foundation to	a noncharitable	evemnt organiz	ation of			. ^	,	
a	(1) Cash		iouridation to	a nonchantable	exempt organiz	ation of			1a(1)		· •
	(2) Other					•		•	1a(1)		X
h	Other trai		•	•				•	18(2)		
D		· · - · · -	aharitahla aw	omnt organizatio	n				45/4		
		of assets to a non-							1b(1)		X
	• •	nases of assets from			anization	•	•	•	1b(2)		X
		al of facilities, equip	•					•	1b(3)		X
		bursement arrange				•			1b(4)		Х
		s or loan guarantee				•			1b(5)		X
		rmance of services							1b(6)		X
	-	of facilities, equipme	_						1c		X
	value of t	wer to any of the at he goods, other ass my transaction or sl	sets, or service haring arrang	es given by the ement, show in o	reporting founda column (d) the v	tion If the	ne foundation re he goods, other	ceived less that assets, or serv	n fair m	arket ceived	d. ———
(a)	Line no	(b) Amount involved	(c) Name	of nonchantable exen	npt organization	(d) Des	scription of transfers,	transactions, and s	hanng arr	angem	ents
		0				<u> </u>					
		0	<u> </u>								
		0									
		0									
		0									
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		0				 					
		0				┼					——
						 					
2-	1- Ab - f	U		nind with an rale							
	described	ndation directly or i I in section 501(c) o complete the followi	of the Code (o						Yes X	No	
		(a) Name of organization		(b) Typ	oe of organization		(c) I	Description of relation	onship		
					- 			·			
				L							
	gn belief,	penalties of perjury, I dec it is true, correct, and con nature of officer or ruster			an taxpayer or fiducia	_		of which preparer ha		-	9
		Print/Type preparer's na	ame	Preparer's signature			Date		PTIN		
Pa	id		-				=	Check X if			
	eparer	Daniel Neighbors		Daniel Neig	hbors		9/27/2011	self-employed	P0106	34156	j
	•		iniel Neighbo					Firm's EIN			
US	e Only	Firm's address ▶ PC			 57				4) 354-	5613	
		1	200.010002	.,, 17. 700.				121		DE	(0046)

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2010

Employer identification number

THE ENDOWMENT FUND FOR WORLD PEACE AND GLOBAL HEALING, INC 31-1811724 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II. Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and П 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).

age	1	of	2	of	Part i

Schedule B (F	orm 990, 990-EZ, or 990-PF) (2010)		Page 1 of 2 of Part
Name of ord THE ENDO	ganization DWMENT FUND FOR WORLD PEACE AND GLOBAL HEA	ALING, INC	Employer identification number 31-1811724
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	MISCELLANEOUS UNDER 5,000 Foreign State or Province Foreign Country	\$ 40,843	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	SHAWN WHITESELL Foreign State or Province Foreign Country	\$ 12,600	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	ROCKY PATEL Foreign State or Province Foreign Country	\$ 9,370	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4	DELL DIRECT GIVING CAMPAIGN Foreign State or Province Foreign Country	\$ 8,279	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5	FEED YOUR SOUL Foreign State or Province Foreign Country	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
6	FRONTIERS INC. Foreign State or Province Foreign Country	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)

ige	2	of	2	of Part I

	, (20.0)		or or art
	ganization OWMENT FUND FOR WORLD PEACE AND GLOBAL HEA	ALING, INC	Employer identification number 31-1811724
Part I	Contributors (see instructions)	<u> </u>	
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	FIDELITY CHARITABLE GIFT FUND Foreign State or Province Foreign Country	\$6,000	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
8	DANNY THAKKAR Foreign State or Province Foreign Country	\$ 5,000	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
9	Foreign State or Province Foreign Country	\$0	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
10	Foreign State or Province Foreign Country	\$0	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
11	Foreign State or Province Foreign Country	\$0	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
12	Foreign State or Province Foreign Country	\$0	Person Payroll Noncash Complete Part II if there is a noncash contribution)

Name of organization
THE ENDOWMENT FUND FOR WORLD PEACE AND GLOBAL HEALING, INC

Employer identification number

31-1811724

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
		\$0	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$0	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$0	
(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
		\$0	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$0	

Name of organization

Employer identification number

THE ENDO	DWMENT FUND FOR WORLD PEACE AN			31-1811724					
Part III	Exclusively religious, charitable, etc.,	individual cor	ntributions to section 5	01(c)(7), (8), or (10) organizations					
	aggregating more than \$1,000 for the y	ear. Complete	columns (a) through (e)	and the following line entry.					
	For organizations completing Part III, enti-	er the total of e	exclusively religious, cha	aritable, etc.					
	contributions of \$1,000 or less for the ye				0				
(a) No.									
from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is he	ld				
Part I				 					
					· ·				
		l		<u></u>					
	,	(e) T	ransfer of gift						
	Transferee's name, address, and	ZIP + 4	Relationsh	ip of transferor to transferee					
	For Prov Country								
(a) No.			<u> </u>						
from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is he	ld				
Part I				<u> </u>					
					· -				
					· -				
	<u> </u>	·		L					
		(е) і	ranster of gift						
	Transferee's name, address, and	ZIP + 4	Relationsh	ip of transferor to transferee					
					· -				
			·						
	For Prov Country	r							
(a) No. from	(b) Purpose of gift	/ /	(c) Use of gift (d) Description of how gift is						
Part I	(b) i dipose oi giit		(a) Description of now gire is not						
					• • •				
		(e) T	ransfer of gift						
	(c) Handler of grit								
	Transferee's name, address, and	ZIP + 4	Relationsh	ip of transferor to transferee					
									
	For Prov Country								
(a) No.		T	<u> </u>						
from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is he	ld				
Part I									
					· ·				
		/o) T	for of aid	<u> </u>					
		(e) i	ransfer of gift						
	Transferente nome eddress and	71D 4	Polationahin of transferor to transferor						
	Transferee's name, address, and	LIFT 4	Relationship of transferor to transferee						
	For Prov Country				·				
	I IOI FIOY COUNTY								

Line 16c (990-PF) - Other Fees

THE ENDOWMENT FUND FOR WORLD PEACE AND GLOBAL HEALING, INC

=		1		T	T	T	T			ļ		
	Disbursements for Charitable Purposes	Casil Dasis Oil										
	Adjusted Net											
C	Net Investment											
4.800	Revenue and Expenses per Books	1 365	3.435									
	Name of Organization or Person Providing Service	FC FINANCIAL INC	FROST RUTENBERG									
		-	2	3	4	5	9	7	8	6	10	

Line 18 (990-PF) - Taxes

	, afr	ple	<u></u>										_
	Disburseme	for Charitable	Furboses										
c	<u>,</u>		+	+	+	+	+	+		+	+	-	
		Adjusted	BIJIONIII 1941										
		Net Investment	DI DONI										
92	Revenue	and Expenses	92										
		Description	Income tax										
Ì			-	7	3	4	2	9	7	8	6	10	

Line 23 (990-PF) - Other Expenses

THE ENDOWMENT FUND FOR WORLD PEACE AND GLOBAL HEALING, INC

1		8,540	0	0	
		Revenue and			Disbursements
		Expenses	Net Investment	Adjusted Net	for Charitable
	Description	per Books	Prome	emoon!	Diracco
-	Amortization. See attached statement				ependin i
2	AUDIO STREAMING	2 800			
3	BANK FEES	150			
4	PAYPAL FEES	2 179			
5	WEBSITE DESIGN	3,000			
9	STATUTORY FEE	411			
8					
6					
10					

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

		"\" \Jood							
		< YOUR					Foreign		Average
	Name	if Business	Street	Cit	State	7 in Code	Country	a H: ⊢	D ST TO
	ANURAG JAIN			DALLAS	ř	TX 75230	1	DIRECTOR	2000
	CHARLOTTE ANDERSON			SHERMAN OAKS	Ϋ́	91423		CE PRESIDE	2
	GUNJAN JAIN		5938 NORWAY RD	DALLAS	×	75230		TREAS! IREE	7 0
								יייני ווכטוירי	7
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THE ENDOWMENT FUND FOR WORLD PEACE AND GLOBAL HEALING, INC

	Explanation										
0	Expense	0	0	0							
0	Benefits	0	0	0							
0	Compensation	0	0	0							
		1	2	3	4	2	9	7	8	6	9

Part XVI-B (990-PF) - Relationship of Activities

Line	VI-D (000-11) - Itelationship of Addivides
Number	Explanation Explanation
	NOT APPLICABLE
	······································