



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



Form 990-EZ

Short Form
Return of Organization Exempt From Income Tax

OMB No. 1545-1150

2011

Open to Public
InspectionDepartment of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

► Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions)

All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.

► The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2011 calendar year, or tax year beginning

01/01

, 2011, and ending

12/31

, 2011

B Check if applicable

Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization

Gujarati Samaj of Arkansas Inc

Number and street (or P.O. box, if mail is not delivered to street address)

D Employer identification number

20-2451567

109 Brighton Court

E Telephone number

501-827-7451

City or town, state or country, and ZIP + 4

North Little Rock, AR, 72116

F Group Exemption

Number ►

G Accounting Method: Cash Accrual Other (specify) ►I Website: ► <http://www.gsaarkansas.com/>J Tax-exempt status (check only one) — 501(c)(3) 501(c) (4) ◀ (insert no.) 4947(a)(1) or 527H Check ► if the organization is not required to attach Schedule B

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

K Check ► if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ

► \$ 94,735

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I.)

Check if the organization used Schedule O to respond to any question in this Part I

✓

1	Contributions, gifts, grants, and similar amounts received	1	53,116
2	Program service revenue including government fees and contracts	2	0
3	Membership dues and assessments	3	40,500
4	Investment income	4	1,119
5a	Gross amount from sale of assets other than inventory	5a	0
b	Less: cost or other basis and sales expenses	5b	0
c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	0
6	Gaming and fundraising events	6a	0
a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6b	0
b	Gross income from fundraising events (not including \$ from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6c	0
c	Less: direct expenses from gaming and fundraising events	6d	0
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	7a	0
7a	Gross sales of inventory, less returns and allowances	7b	0
b	Less: cost of goods sold	7c	0
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	8	0
8	Other revenue (describe in Schedule O)	9	94,735
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	10	0
10	Grants and similar amounts paid (list in Schedule O)	11	0
11	Benefits paid to or for members	12	0
12	Salaries, other compensation, and employee benefits	13	0
13	Professional fees and other payments to independent contractors	14	0
14	Occupancy, rent, utilities, and maintenance	15	37
15	Printing, publications, postage, and shipping	16	58,102
16	Other expenses (describe in Schedule O) See Schedule O, Statement 2	17	58,139
17	Total expenses. Add lines 10 through 16	18	36,596
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	19	104,666
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	20	0
20	Other changes in net assets or fund balances (explain in Schedule O)	21	141,262
21	Net assets or fund balances at end of year. Combine lines 18 through 20		

Part II Balance Sheets. (see the instructions for Part II.)

Check if the organization used Schedule O to respond to any question in this Part II

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	125,445	22 161,523
23	Land and buildings	0	23 0
24	Other assets (describe in Schedule O) See Schedule O, Statement 3	9,891	24 8,841
25	Total assets	135,336	25 170,364
26	Total liabilities (describe in Schedule O) See Schedule O, Statement 4	30,670	26 29,102
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	104,666	27 141,262

Part III Statement of Program Service Accomplishments (see the instructions for Part III.)

Check if the organization used Schedule O to respond to any question in this Part III.

What is the organization's primary exempt purpose? See Schedule O, Statement 5

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others.)

28 Religious and cultural music programs, drama programs, educational seminars and Indian festival celebrations

(Grants \$ **o) If this amount includes foreign grants, check here** **.....**

28a 56,892

29

If this amount includes foreign grants, check here

29a

30

(Grants \$) If this amount includes foreign grants, check here

30a

31 Other program services (describe in Schedule O)

(Grants \$) If this amount includes foreign grants, check here

31

32 Grants to NonProfit

32 56,892

Part IV List of Officers, Directors, Trustees, and Key Employees

Instructions for Part IV.)

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for Part IV.) Check if the organization used Schedule Q to respond to any question in this Part IV.

Check if the organization used Schedule C to respond to any question in this part.

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V

33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O

34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)

35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?

b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O

c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III

36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N

37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ► 37a 0

b Did the organization file Form 1120-POL for this year?

38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?

b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b

39 Section 501(c)(7) organizations. Enter:

a Initiation fees and capital contributions included on line 9 39a

b Gross receipts, included on line 9, for public use of club facilities 39b

40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► ; section 4912 ► ; section 4955 ►

b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I

c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ► 0

d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ► 0

e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.

41 List the states with which a copy of this return is filed. ►

42a The organization's books are in care of ► Naran Desai Telephone no. ► 501-834-0025
Located at ► 109 Brighton Court, North Little Rock, AR 72116 ZIP + 4 ► 72116

b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.

c At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country: ►

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ► 43

44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ

b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ

c Did the organization receive any payments for indoor tanning services during the year?

d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)

	Yes	No
33	✓	
34	✓	
35a	✓	
35b		
35c	✓	
36	✓	
37a		
37b	✓	
38a	✓	
38b		
39a		
39b		
40a		
40b		✓
40c		
40d		
40e		✓
42b	✓	
42c	✓	
44a	✓	
44b	✓	
44c	✓	
44d		
45a	✓	
45b	✓	

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 46	
Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47–49b and 52, and complete the tables for lines 50 and 51.			
Check if the organization used Schedule O to respond to any question in this Part VI <input type="checkbox"/>			
47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 47	
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 48	
49a Did the organization make any transfers to an exempt non-charitable related organization?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 49a	
b If "Yes," was the related organization a section 527 organization?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 49b	
50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."			
(a) Name and address of each employee paid more than \$100,000		(b) Title and average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)
None			
f Total number of other employees paid over \$100,000 ►			
51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."			
(a) Name and address of each independent contractor paid more than \$100,000		(b) Type of service	(c) Compensation
None			
d Total number of other independent contractors each receiving over \$100,000 ►			
52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A ► <input type="checkbox"/> Yes <input type="checkbox"/> No			
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge			
Sign Here	► Signature of officer <i>Girish Patel</i> Girish Patel, President Elect Type or print name and title		Date <i>5-31-15</i>
Paid Preparer Use Only	Print/Type preparer's name VIMAL BAVA	Preparer's signature <i>(Signature)</i>	Date <i>5/28/15</i> Check <input type="checkbox"/> if self-employed
	Firm's name ► VIMAL BAVA, CPA Firm's address ► 3020 OLSON CR, BRYANT, AR 72022		PTIN P01525746 Firm's EIN ► Phone no. 765-702-4873
May the IRS discuss this return with the preparer shown above? See instructions ► <input type="checkbox"/> Yes <input type="checkbox"/> No			

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization

Gujarati Samaj of Arkansas Inc

Employer identification number

20-2451567

Form 990-EZ, Header, Line B - Upon review of the prior years Form 990-EZ, the current officers (2015) discovered issues that have been corrected in the amended 990-EZ.

Form 990-EZ, Part I, Line 6b - Originally filed Form 990-EZ incorrectly reported all program service income as fundraising income. The income has been reclassified to the appropriate lines and the Schedule G is no longer applicable.

Form 990-EZ, Part I, Line 6c - Originally filed Form 990-EZ incorrectly reported all program service expenses as fundraising expenses. The expenses have been reclassified to the appropriate lines and the Schedule G is no longer applicable.

Form 990-EZ, Part III, Line (28-31) - Originally filed Form 990-EZ omitted the program service accomplishments & related expenses on line 28a. This has been corrected on the 990-EZ.

Reasonable Cause Explanations

Explanation

The originally filed form 990-EZ was timely filed. The 990-EZ is being amended late due to issues being discovered in 2015.

Schedule O, Statement 2

Form: 990-EZ

Page: 1

Line Number: Part I Line 16

Gujarati Samaj of Arkansas Inc**20-2451567****Other Expenses Structured Explanation**

Description	Amount
Religious and Cultural Events and Programs	47,760
Annual Meeting	711
Musical Program Expenses	9,133
Office Supplies	35
Miscellaneous Expenses	463
Total:	58,102

Schedule O, Statement 3

Form: 990-EZ

Page: 2

Line Number: Part II Line 24

Gujarati Samaj of Arkansas Inc

20-2451567

Other Assets Structured Explanation

Description	EOY Amount
Kitchen Utensils and Music System	6,221
Equipment	2,620
Total:	8,841

Other Liabilities Structured Explanation

Description	EOY Amount
Membership Dues Paid for Next Year	29,102
Total:	29,102

Primary Exempt Purpose

Primary Exempt Purpose

To promote the religion, arts and culture of the Gujarati heritage in Arkansas and surrounding states.