

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



DLN: 93493228000222

Form 990

Department of the Treasury

Return of Organization Exempt From Income Tax

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

12

0

0

50

4

5

6

OMB No 1545-0047

Open to Public ▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection A For the 2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011 D Employer identification number B Check if applicable BITSAA INTERNATIONAL INC 22-3835037 Address change E Telephone number Doing Business As Name change (408) 368-8528 Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite G Gross receipts \$ 222,999 1560 Sunnyvale Saratoga Road Terminated Amended return City or town, state or country, and ZIP + 4 Sunnyvale, CA 94087 Application pending Name and address of principal officer H(a) Is this a group return for ┌ Yes ┌ No BITSAA International Inc affiliates? 1560 Sunnyvale Saratoga Road Suite 200 H(b) Are all affiliates included? Sunnyvale, CA 94087 If "No," attach a list (see instructions) **▽** 501(c)(3) **┌** Tax-exempt status 4947(a)(1) or 527 501(c) () ◀ (insert no) H(c) Group exemption number ► Website: ► www bitsaa org L Year of formation 2002 M State of legal domicile CA Part I Summary 1 Briefly describe the organization's mission or most significant activities To engage in educational and charitable activities by raising funds for setting up endowments, creating scholarships, rewarding teaching and research, and generally promoting the development of resources at BIRLA INSTITUTE OF TECHNOLOGY AND SCIENCE, PILANI, INDIA (and its campuses) (referred to as BITS-PILANI) To strengthen the ties, friendship and Activities & Governance communication amongst former students, current students, faculty and friends of BITS-PILANI

2 Check this box 📂 if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a) . . .

6 Total number of volunteers (estimate if necessary)

Number of independent voting members of the governing body (Part VI, line 1b) . . .

Total number of individuals employed in calendar year 2011 (Part V, line 2a) .

	7a ⊺	otal unrelated business revenue from Part VIII, column (C), line 12		7a	C
	ь∧	Net unrelated business taxable income from Form 990-T, line 34		7b	C
			Prior Year		Current Year
	8	Contributions and grants (Part VIII, line 1h)	61,0	38	206,710
E E	9	Program service revenue (Part VIII, line 2g)	17,8	64	4,525
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,9	13	5,999
ά	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-6	45	0
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	81,1	70	217,234
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	42,4	51	58,211
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0	0
8	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		0	0
⊕	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0	0
Expenses	ь	Total fundraising expenses (Part IX, column (D), line 25) ▶0			
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	10,3	49	11,127
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	52,8	00	69,338
	19	Revenue less expenses Subtract line 18 from line 12	28,3	70	147,896
Net Assets or Fund Balances			Beginning of Currer Year	it	End of Year
88. 88.	20	Total assets (Part X, line 16)	161,2	63	298,744
Z Z	21	Total liabilities (Part X, line 26)		0	0
<u> ŽZ</u>	22	Net assets or fund balances Subtract line 21 from line 20	161,2	63	298,744

Signature Block Part II

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 Kaushik Subramanian CFO Type or print name and title		20 Da	12-08-06 te
Paid	Preparer's signature	Date	Check if self-employed	Preparer's taxpayer identification number (see instructions)
Preparer's Use Only	Firm's name (or yours if self-employed), address, and ZIP + 4	EIN ▶		
	addicess, and Eli 1 4			Phone no 🕨

Part I			ervice Accompl		tIII	
1 B	riefly describe the		. , , .			,
research (and its	n, and generally pro	omoting the develo ed to as BITS-PIL	opment of resources ANI) To strengthe	s at BIRLA INSTI	TUTE OF TECHNOLOGY	olarships, rewarding teaching a AND SCIENCE, PILANI, INDI ongst former students, current
	d the organization e prior Form 990 o		nıfıcant program se		year which were not listed	
Ιf	"Yes," describe the	ese new services o	on Schedule O			
se	rvices?			t changes in how	ıt conducts, any program	
4 De	penses Section 5	ation's program se 01(c)(3) and 501(ervice accomplishm (c)(4) organizations	and section 494	ts three largest program se 7(a)(1) trusts are required r each program service rep	to report the amount of
4a (Code) (Expenses \$	16,600	including grants of	\$ 16,600) (Rever	nue \$ 0)
b C	y the team of students Dakota The Intelligent	s to build a prototype r Flying Object for Reco	obot to compete at the nnaissance is an initiativ	International Aerial F oe taken up by BITS!	Robotics Competition (http://iarc	\$16,600 The grant is intended to be t angel-strike com/) in August, 2011 at unmanned aerial vehicle with multiple mage processing
4b (Code) (Expenses \$	10,000	including grants of	\$ 10,000) (Reve	nue \$ 0)
S	axena Epsilon Prize in NTS to disburse prize m	BITS, Pilani campus (\$ ioney to the winner of	10,000) to promote ent a business plan compe	trepreneurship among tition "Epsilon" is an	the students of BITS, Pilani cam	pus The grant is intended to be used npetition, which serves to increase
4c (Code) (Expenses \$	6,250	including grants of	\$ 6,250) (Reve	nue \$ 0)
T	uition Scholarships in B	ITS, Pılanı campus (\$6	5250) - to enable 8 stud	lents to pay part of f		lanı These scholarships were setup b
	0.1.) (5	2.574		2.574.) (0	4.525.)
E e					world who host chapter specific e	nue \$ 4,525) events such as workshops, get togeth d back to the chapters to cover event
	C-1-) /F	0.000			
B			8,988 the first time in New De student development in			nue \$ 0) gether The alumnı came up with seve
	Code) (Expenses \$	4,444	including grants of	\$ 4,444) (Reve	nue \$ 0)
F		, , , , ,	·	3 3	, , ,	o students per semester (pay full
	Code) (Expenses \$	9,355	including grants of	\$ 9,355) (Reve	nue \$ 0)
· (Other activities including to help students pay tu	awards for travel ass	stance (to help faculty	and students travel t Il for students with er	o international conferences), one itrepreneurial achievements All th	-time tuition scholarships setup by alu hese activities further the cause of BΠ
		(5)				
				f \$	25 361)/Revenue ¢	4 525 \
				<u> </u>	10,001 / (Nevenue p	7,323)
4d (other program serv Expenses \$ Fotal program servi	ices (Describe in 25,361	· · · · · · · · · · · · · · · · · · ·	f\$	25,361) (Revenue \$	4,525)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		Νo
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If</i> "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a		No
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than $5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

1 01111	990 (2011)			Page •
Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			i
		28a		Νo
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		Νo
b	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," complete Schedule R, Part V, line $2 \cdot \cdot \cdot$.	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

•	,	
Part V	Statements Regarding Other IRS Filings and Tax Compliance	

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
а	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
h	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
ט	1b	[
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable		V	
:a	gaming (gambling) winnings to prize winners?	1c	Yes	
	Statements filed for the calendar year ending with or within the year covered by this			
L	return	1		
ט		2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
а	Did the organization have unrelated business gross income of \$1,000 or more during the	3a		No
b	year?	3b		
	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 or securities	4a		No
b	account)?			NO
	If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	j ,			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? \cdot .	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N o
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		_
а	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		
	organization solicit any contributions that were not tax deductible?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		
	services provided to the payor?			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
_	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
~	contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	 7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	- 9		
-	Form 1098-C?	7h		
1	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other			
	sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization			
	allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by			
c	the states in which the organization is licensed to issue qualified health plans Enter the aggregate amount of reserves on hand			
-	13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N o
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Suite 200

Sunnyvale, CA 94087 (408) 368-8528

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	venue Code.)		Yes	No
10-	Did the organization have local chapters, branches, or affiliates?	10a	res	No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10a		110
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		No
	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a		Νo
b	Other officers or key employees of the organization	15b		No
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?			
		16b		
<u>Se</u> 17	List the States with which a copy of this Form 990 is required to be filed.			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)			
10	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website. Another's website. Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	e orga	nızatıor	ı F
	Kaushik Subramanian 1560 Sunnyvale Saratoga Road			

<u>Part VII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0 in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ♦ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

Chack this box if neither the erganization per any related erganizations compensated any current or former efficer, director, or trustee

◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organiz	atıon nor any re	nsat	ed any current or fo	ormer officer, direct	or, or trustee					
(A) Name and Title	(B) A verage hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		MISC)	related organizations
(1) RAJU REDDY Trustee, President	4	х						0	0	0
(2) SP Kotharı Trustee, Chairman Emeritus	2	х						0	0	0
(3) Rajesh Chelapurath Trustee, CIO	3	х		х	х			0	0	0
(4) Sarath Kolla Trustee	6	х						0	0	0
(5) Deepak Sharma Trustee	2	х						0	0	0
(6) Brij Bhushan Trustee	2	х						0	0	0
(7) Viggy Mokkrala Trustee	6	х						0	0	0
(8) Nıranjan Bose Trustee	2	х						0	0	0
(9) Chandra Bhople Trustee	2	х						0	0	0
(10) Rohit Koul Secretary, CEO	12			х	х			0	0	0
(11) Kaushik Subramanian Treasurer, CFO	6			х	х			0	0	0
(12) Vıjay Sharma Trustee, COO	12			х	х			0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) A verage hours per week (describe	Average Position (do not check more than one box, unless person is both an officer and a director/trustee)							(D) ortable ensation m the zation (W- 9-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)		(F) Estimated amount of oth compensatio from the organization a	
		for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		organiza	
1b	Sub-Total				•			•						
c d	Total from continuation sheets to Total (add lines 1b and 1c).			• •	•	•		>		0		0		0
2	Total number of individuals (inclusion) \$100,000 of reportable compens	udıng but not lın	nited to	thos	e lıs		<u>a</u> bove) who	receive	d more tha	in	<u> </u>		
													Yes	No No
3	Did the organization list any form on line 1a? <i>If</i> "Yes," complete Sch								r highes	t compens	ated employee	3		No
4	For any individual listed on line 1 organization and related organization and related organization.											4		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person						or individual for •	5		No				
Se	ection B. Independent Cont	tractors												
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax years.	highest comper the organizatio												
	-	(A) ne and business add	dress							Desc	(B) ription of services		(C) Compen	
												\perp		
												+		
	Total number of independent conti \$100,000 of compensation from t			ot lır	nited	to t	those	liste	d above)	who recei	ved more than			

Form 9								Page 9
	VIIII	Statement of	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
nts uts	1a	Federated cam						
<u> </u>	b	Membership du	es 1b					
چ. ∰	C		ents 1c	0				
<u>≅</u> ,ਰ*਼	d		zations 1d	0				
ans, Sim	e	Government grant		0		ļ		
Contributions, gifts, grants and other similar amounts	f g	sımılar amounts no	butions included in	206,710				
9.0°	h	Total. Add lines	s 1a-1f	▶	206,710			
				Business Code				
Program Service Revenue	2a	Event Registration	s	900099	4,525	4,525	0	o
Be Se	ь							
93	c							
₹	d							
<u>ه</u> 2	e							
Ž B	f	All other progra	am service revenue		0	0	0	0
ξ	g	Total. Add lines	s 2a-2f		4,525			
	3		ome (including dividen		,			
		and other simil	ar amounts)	▶ [4,261	4,261	0	0
	4	Income from inves	stment of tax-exempt bond	proceeds 🕨	0	0	0	
	5	Royalties		-	0	0	0	0
	_		(ı) Real	(II) Personal				
	6a b	Gross rents Less rental	0	0				
		expenses	0	0				
	C	Rental income or (loss)	_					
	d	Net rental inco	me or (loss)		0	0	0	0
	7a	Gross amount from sales of	(i) Securities 7,503	(II) O ther				
	ь	assets other than inventory Less cost or other basis and	5,765	0				
		sales expenses Gain or (loss)	1,738	0				
	d	Net gain or (los		<u> </u>	1,738	1,738	0	0
<u> </u>	8a	Gross income f events (not inc	rom fundraising luding			· ·		
Other Revenue			os reported on line 1c)					
<u> </u>	Ь	less directer	penses b					
₹	c		(loss) from fundraising	events 🟲				
	9a	Gross income f See Part IV, lir	rom gaming activities ne 19 a					
	b c		penses b (loss) from gaming acti	vities				
	10a	Gross sales of returns and allo	inventory, less owances .					
	Ь	less costofa	a oods sold b					
	c	_	(loss) from sales of inv	entory ►				
		Miscellaneous		Business Code				
	11a							
	ь							
	c							
	d	All other reven	ue					
	e	Total. Add lines	s 11a-11d		0			
		T.4.	Can In	· .	9			
	12	Total revenue.	See Instructions .	· · •	217,234	10,524	0	0

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

C	neck if Schedule O contains a response to any question in this Part IX	<u></u>		<u> </u>	
	t include amounts reported on lines 6b, , 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	2,574	2,574		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0	0		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	55,637	55,637		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	0	0	0	0
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0	0	0	0
7	Other salaries and wages	0	0	0	0
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	0	0	0	0
9	Other employee benefits	0	0	0	0
10	Payroll taxes	0	0	0	0
11	Fees for services (non-employees)				
 a	Management	0	0	0	0
b	Legal	1,240	0	1,240	0
c	Accounting	0	0	0	0
d	Lobbying	0	0	0	0
e	Professional fundraising See Part IV, line 17	0	0	Ŭ	0
f	Investment management fees	0	0	0	0
g g	Other	1,436	0	1,436	0
9 12	Advertising and promotion	1,430	0	1,430	0
13	Office expenses	0	0	0	0
	· · · · · · · · · · · · · · · · · · ·	8,451	0		
14	Information technology			8,451	0
15	Royalties	0	0	0	0
16	Occupancy	0	0	0	0
17	Travel	0	0	0	0
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	0	0	0	0
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	0	0	0	0
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a					
b					
С					
d					
е					
f	All other expenses	0	0	0	0
25	Total functional expenses. Add lines 1 through 24f	69,338	58,211	11,127	0
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
				Г.	orm 990 (2011)

Pa	rt X	Balance Sheet				
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		0	1	0
	2	Savings and temporary cash investments		69,028	2	200,418
	3	Pledges and grants receivable, net		0	3	0
	4	Accounts receivable, net		0	4	0
	5	Receivables from current and former officers, directors, trustees, keepinghest compensated employees Complete Part II of	ey employees, and			
		Schedule L		0	5	0
	6	Receivables from other disqualified persons (as defined under section persons described in section $4958(c)(3)(B)$ Complete Part II of				
		Schedule L	0	6	0	
Assets	7	Notes and loans receivable, net		0	7	0
SS	8	Inventories for sale or use		0	8	0
⋖	9	Prepaid expenses and deferred charges		0	9	0
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a			
	b	Less accumulated depreciation	10b	0	10c	
	11	Investments—publicly traded securities		92,235	11	98,326
	12	Investments—other securities See Part IV, line 11	0	12	0	
	13	Investments—program-related See Part IV, line 11		0	13	0
	14	Intangible assets	0	14	0	
	15	Other assets See Part IV, line 11		0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)		161,263	16	298,744
	17	Accounts payable and accrued expenses .		0	17	0
	18	Grants payable		0	18	0
	19	Deferred revenue		0	19	0
	20	Tax-exempt bond liabilities		0	20	0
7.6	21	Escrow or custodial account liability		0	21	0
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified				
죭		persons Complete Part II of Schedule L		0	22	0
Ξ	23	Secured mortgages and notes payable to unrelated third parties .		0	23	0
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0
	25	Other liabilities (including federal income tax, payables to related t and other liabilities not included on lines 17-24) Complete Part X (
		D		0	25	
	26	Total liabilities. Add lines 17 through 25		0	26	0
φ		Organizations that follow SFAS 117, check here ► and complete through 29, and lines 33 and 34.	e lines 2/			
Fund Balance	27	Unrestricted net assets			27	
<u>8</u>	28	Temporarily restricted net assets			28	
<u> </u>	29	Permanently restricted net assets			29	
Ĭ	23	Organizations that do not follow SFAS 117, check here ▶ ✓ and co	omplete		25	
		lines 30 through 34.	<i>m</i> piece			
S O.	30	Capital stock or trust principal, or current funds		121,758	30	127,560
sets	31	Paid-in or capital surplus, or land, building or equipment fund		0	31	0
ASS	32	Retained earnings, endowment, accumulated income, or other funds		39,505	-	171,184
Net	33	Total net assets or fund balances		161,263	\vdash	298,744
Z	34	Total liabilities and net assets/fund balances		161 263	\vdash	298 744

Pa	rt XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	•	• •	. [▽	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2	217,23
2	Total expenses (must equal Part IX, column (A), line 25)	2			69,33
3	Revenue less expenses Subtract line 2 from line 1	3		1	L47,890
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1	161,26
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-	-10,41
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		2	298,74
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII		•	୮	
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b		No
C	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain its Schedule O		2c		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	ssued			
	Separate basis Consolidated basis Both consolidated and separated basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	2	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the readily or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493228000222

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization BITSAA INTERNATIONAL INC

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Inspection **Employer identification number**

									22-38350				
	rt I			blic Charity Sta						nstructions			
The c	rganı			te foundation becaus			-		x)				
1	Г	A chur	ch, convent	ion of churches, or a	ssociation of	churches s	section 170(b)(1)(A)(i).					
2	Г	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)											
3	Г	A hosp	ital or a cod	perative hospital se	rvice organiz	atıon descr	ıbed ın sectio	n 170(b)(1)	(A)(iii).				
4	Γ		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state										
5	Γ	An orga	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in										
		section	170(b)(1)((A)(iv). (Complete P	art II)								
6	Γ	A feder	al, state, or	·local government o	r government	al unit desc	rıbed ın secti	on 170(b)(1)(A)(v).				
7	⊽	describ	oed in	at normally receives (A)(vi) (Complete P		al part of its	support from	a governme	ntal unit or fi	rom the gen	eral public		
8	Г			: described in sectio		A)(vi) (Cor	nplete Part II	.)					
9				at normally receives					outions, mem	bership fee	s. and gross		
_	•			rities related to its e									
				oss investment inco									
				ganızatıon after June						cax, nom be	ix) from businesses		
10	\vdash			ganized and operated									
11	<u>'</u>									o carry out	the nurnoses of		
	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Che the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type III c Type III - Functionally integrated d Type III - Other						509(a)(3). Check						
е	Γ	other t	-	ox, I certify that the ion managers and ot	_				•		•		
f		If the o		received a written d	etermınatıon	from the IR	S that it is a	Туре І, Туре	e II or Type :	III supportı	ng organization,		
g				2006, has the organ	ızatıon accep	ted any gift	or contributi	on from any	of the		,		
			ng persons? erson who di	rectly or indirectly c	ontrols, eith	eralone ort	ogether with	persons des	crıbed ın (ıı)		Yes No		
				governing body of th			ation?			119	ı(i)		
		(ii) a fa	amily memb	er of a person descri	bed in (i) abo	ve?				11g	(ii)		
		(iii) a 3	35% contro	lled entity of a perso	n described i	ın (ı) or (ıı) a	ibove?			11g	(iii)		
h		Provide	e the followi	ng information about	the supporte	ed organızat	ion(s)						
(ii) Type of organization (described on supported organization (see (iii) Type of organization in col (i) listed in your governing document? (v) (vi) (vi) Is the organization in col (i) of your support? (vii) Is the organization in col (i) of your support? (in the U.S.?)					e ıon ın anızed	(vii) A mount of support?							
				instructions))	Yes	No	Yes	No	Yes	No			
Total													
											1		

instructions

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

-	ection A. Public Support	organization fa	alls to qualify u	nder the tests i	listed below, ple	ease coi	npiete P	art III.)		
	endar year (or fiscal year beginning	(a) 2007	(b) 2008	(a) 2000	(4) 2010	(0) 2	011	(f) Total		
	ın)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2	011	(f) Total		
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual	30,063	63,356	68,570	73,902		211,235	447,126		
_	grants ")						\longrightarrow			
2	Tax revenues levied for the organization's benefit and either		0	0	0			0		
	paid to or expended on its behalf		, v	Ů						
3	The value of services or facilities furnished by a governmental unit to the organization without charge		0	0	0			0		
4	Total. Add lines 1 through 3	30,063	63,356	68,570	73,902		211,235	447,126		
5	The portion of total contributions by each person (other than a governmental unit or publicly							· ·		
	supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column							60,744		
	(f)									
6	Public Support. Subtract line 5 from line 4							386,382		
S	ection B. Total Support					•				
Cal	endar year (or fiscal year beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 20	011	(f) Total		
7	In) A mounts from line 4	30,063	63,356	68,570	73,902		211,235	447,126		
8	Gross income from interest,	,	,	,	,			,		
-	dividends, payments received on									
	securities loans, rents, royalties	1,793	1,747	1,643	2,913		4,261	12,357		
	and income from similar sources									
9	Net income from unrelated									
	business activities, whether or	0	0	0	0			0		
	not the business is regularly									
10	carried on Other income (Explain in Part						-			
10	IV) Do not include gain or loss	326	-652	-2,693	-645		1,738	-1,926		
	from the sale of capital assets									
11	Total support (Add lines 7 through 10)							457,557		
12	Gross receipts from related activities	es, etc (See instr	ructions)	1		12		0		
13	First Five Years If the Form 990 is for check this box and stop here			thırd, fourth, or f	ıfth tax year as a		-			
S	ection C. Computation of Pub	lic Support P	ercentage							
14	Public Support Percentage for 2011	(line 6 column (a) divided by line	11 column (f))		14		84 445 %		
15	Public Support Percentage for 2010	Schedule A, Par	t II, line 14			15		83 033 %		
16a	a 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box									
h	and stop here. The organization qua				a and line 15 ic	33 1/20%	or more /	hack this		
b	b 33 1/3% support test—2010. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization									
17a	a 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b and line 14							·		
	is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported							ad		
	in Part IV now the organization mee organization	is the lacts and	circumstances" t	est ine organiza	acion quannes as	a publici	y support	ea ▶ □		
b	10%-facts-and-circumstances test-	-2010. If the orga	nızatıon dıd not c	heck a box on lin	ie 13, 16a, 16b, d	r 17a an	d line	- 1		
	15 is 10% or more, and if the organ	ızatıon meets the	"facts and circui	mstances" test, o	check this box an	d stop he	ere.			
	Explain in Part IV how the organizat	ion meets the "fa	cts and circumst	ances" test The	organization qua	lifies as a	publicly	▶ ┌		
18	supported organization Private Foundation If the organizati	on did not check	a hox on line 13	16a.16b.17a.or	r 17b, check this	box and	see	 1		

▶□

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

33 1/3% support tests-2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

▶[

Schedule A	(Form 990	or 990-EZ)	2011
------------	-----------	------------	------

Page **4**

	Part IV Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).
	Facts And Circumstances Test
_	Explanation
]	Income included in Part 2, Line 10 represents net income (or loss) from sale of securities held in the investment account

Schedule A (Form 990 or 990-EZ) 2011

"Yes" to Form 990, Part IV, line 14b.

DLN: 93493228000222

2011

OMB No 1545-0047

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990. ► See separate instructions.

General Information on Activities Outside the United States. Complete if the organization answered

Open to Public Inspection

Name of the organization BITSAA INTERNATIONAL INC

Employer identification number

22-3835037

1	For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?						
2	For grantmakers. Describe in Pa United States	irt V the organiz	zatıon's procedu	res for monitoring the us	e of grant funds outside th	ne	
3	Activites per Region (Use Part	V ıf addıtıonal s	pace is needed)			
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g ,	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region	
	Middle East and North Africa	0	0	Program Services	BITSAA granted funds to BITS-Pilani, Dubai campus located in UAE to enable research and development in the field of robotics. The students of BITS-Pilani, Dubai campus were developing a robot to participate in the International Aerial Robotics. Competition 2011. The grant was intended to enable the students complete their research and develop the robot to participate in the competition.		
	South Asia	0	0	Program Services	BITSAA granted funds to BITS-Pilani, India, towards development of entrepreneurial research and studies The grant is intended to be used by the University to award winners of entrepreneurship development contests, with the spirit of encouraging more students to study and practice entrepreneurship	10,000	
	Sub-total						
b	Total from continuation sheets to Part I						

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			BITSAA raised funds from the alumni of BITS-Pilani in the US towards setting up the first ever global alumni meet in New Delhi, India The funds raised were granted to BITS-Pilani, to be used towards various research and development activities in the University as well as towards event expenses		Wire transfer	0		
		South Asia	BITSAA granted funds to BITS-Pilani, India, towards development of entrepreneurial research and studies The grant is intended to be used by the University to award winners of entrepreneurship development contests, with the spirit of encouraging more students to study and practice entrepreneurship		Wire transfer	0	0	
		Middle East and North Africa			Wire Transfer	0	0	

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

2

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Part V if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
					1		
		+			†		
		+			+		
		+ +	·	<u> </u>	+		
'	 	+ +	<u> </u>	-	+		
		+	<u> </u>	-	+	<u> </u>	+
		+	ı———			1	
			<u> </u>	<u> </u>		 	+
				<u> </u>		 	
						1	
			<u></u>	<u> </u>		1	
		T					
-					Ţ		
		+ + + + + + + + + + + + + + + + + + + +	 I		†		
		+		<u> </u>	+		
		+	·	<u> </u>	+		
	+	+	 I	<u> </u>	+	<u> </u>	+
·	 	+	ı———	<u>'</u>		1	_
			<u> </u>	<u> </u>		 	1
						1	dula E (Earry 000) 2011

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Yes	<u> </u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Г	Yes	্	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	┍	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	┍	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	~	No

Schedule F (Form 990) 2011

Part V	Supplemental	Informatior

Supplemental Information
Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional

information. I dentifier	ReturnReference	Explanation
SchF_P01_S00_L02	Schedule F, Part I, Line 2	BITSAA International is a non-profit organization, setup by the
		alumni of "Birla Institute of Technology and Science" (BITS),
		located in Pilani, Rajasthan, India The goal of BITSAA is to
		engage in charitable activities to benefit the students, faculty and
		community of BITS-Pilani BITS-Pilani is a top ranked university in India and has campuses in Hyderabad (India), Goa (India),
		Dubai (UAE) BITSAA makes grants to BITS-Pilani (the
		University) towards tuition scholarships for students, travel
		awards to students and faculty to travel to international
		conferences, research activities and community development
		activities The funds granted to BITS-Pilani are disbursed by the
		University to the students/faculty/community selected and
 SchF_P01_S00_L03	Schedule F, Part I, Line 3	monitored by the University ROW (1) COLUMN (e) Purpose of grant BITSAA granted funds to
SCHF_P01_S00_L03	Schedule F, Part 1, Line 3	BITS-Pilani, Dubai campus located in UAE to enable research
		and development in the field of robotics. The students of BITS-
		Pilani, Dubai campus were developing a robot to participate in the
		International Aerial Robotics Competition 2011 The grant was
		intended to enable the students complete their research and
		develop the robot to participate in the competition ROW (2)
		COLUMN (e) Purpose of grant BITSAA granted funds to BITS-
		Pilani, India, towards development of entrepreneurial research and studies. The grant is intended to be used by the University to
		award winners of entrepreneurship development contests, with the
		spirit of encouraging more students to study and practice
		entrepreneurship
SchF_P02_S00_L01	Schedule F, Part II, Line 1	ROW(1)COLUMN(d)Purpose of grant (8,988) BITSAA raised
		funds from the alumni of BITS-Pilani in the US towards setting up
		the first ever global alumni meet in New Delhi, India The funds
		raised were granted to BITS-Pilani, to be used towards various
		research and development activities in the University as well as towards event expenses ROW (2) COLUMN (d) Purpose of grant
		(10,000) BITSAA granted funds to BITS-Pilani, India, towards
		development of entrepreneurial research and studies. The grant is
		intended to be used by the University to award winners of
		entrepreneurship development contests, with the spirit of
		encouraging more students to study and practice
		entrepreneurship ROW (3) COLUMN (d) Purpose of grant
		(16,600) BITSAA granted funds to BITS-Pilani, Dubai Campus
		(located in UAE) towards robotics research and development of a prototype robot to participate in the Internal Aerial Robotics
		Competition 2011 The funds are intended to be used by the
		students of BITS-Pilani, Dubai Campus for research studies,
		prototype robot development and travel to participate in the
		competition

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493228000222

OMB No 1545-0047

Quen to Public

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 to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization	Employer identifi	cation number
BITSAA INTERNATIONAL INC		
	22-3835037	

ldentifier	Return Reference	Explanation
F990_P06_S0B_L11b	Form 990, Part VI, Section B, Line 11b	The organization prepares a detailed statement of accounts that itemizes all revenue and expense streams during the financial year. The statement itself is directly based on bank account transactions, so the exact dollar amounts coming in and going out are accounted for. This data is used to prepare the Form 990. The form is reviewed by the finance team of the organization.
F990_P06_S0C_L19	Form 990, Part VI, Section C, Line 19	Organization information including by-laws, list of board of directors and all financial statements are available on www bitsaa org
F990_P11_S00_L05	Form 990, Part XI, Line 5	Depreciation in market value of the investments

Additional Data

Software ID: 11000129

Software Version: v1.00

EIN: 22-3835037

Name: BITSAA INTERNATIONAL INC

Form 990, Special Condition Description:

Special Condition Description

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$	2,574	including grants of \$	2,574) (Revenue \$	4,525)
as workshops, get t		New Jersey, H	louston) The revenue raised	he world who host chapter specifi here is through event registratio	
	\	9 000	including grants of \$	8,988) (Revenue \$	0)
(Code) (Expenses \$	0,900	meraaming grants or p	-, , (+	,
SITS Alumnı Assoc	, , , , , ,	e first time in	New Delhi, India, to bring all	alumnı from across the world tog	ether The
SITS Alumnı Assoc	cıatıon Global Meet, held for th	e first time in ting research,	New Delhi, India, to bring all	alumnı from across the world tog	ether The 0)
BITS Alumnı Assoc alumnı came up wit (Code	ciation Global Meet, held for the h several initiatives for promo) (Expenses \$ Scholarship - Setup in honor of	e first time in ting research, 4,444	New Delhi, India, to bring all faculty and student develope including grants of \$	alumnı from across the world tog ment ın BITS	0)