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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.

2011

For ca	lendar year 2011, or tax year beginning	, 2011, and ending		,	
THE	SANGREAL FOUNDATION		A	Employer identification num 45-3779543	nber
	SACRED MOON COVE IN, TX 78746		В	Telephone number (see the (512); 551-925	instructions) 8
			С	If exemption application is	pending, check here 🕨 🗌
G Ch	eck all that apply: X Initial return Final return	Initial Return of a former public charity Amended return	D	1 Foreign organizations, chec	_
	Address change	Name change	4	2 Foreign organizations meet here and attach computation	ing the 85% test, check
H C	Check type of organization: X Section 501 Section 4947(a)(1) nonexempt charitable to	(c)(3) exempt private foundation	E	If private foundation status	was terminated
	air market value of all assets at end of year J Acc	ounting method: X Cash Accrual	1	under section 507(b)(1)(A)	_
► \$	210. (Part I,	Other (specify) column (d) must be on cash basis)	F	If the foundation is in a 60 under section 507(b)(1)(B)	month termination , check here
<u> </u>	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	(a) Revenue and expenses per books (b) Net investm	ent	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc, received (att sch) 2 Ck lif the foundn is not red to att Sch B	53,500.			
	3 Interest on savings and temporary				
	cash investments 4 Dividends and interest from securities				
	5a Gross rents				
R	b Net rental income or (loss) 6.2 Net gain/#insst troit sale of Assass frot on line 10			<u> </u>	
Ë	6a Net gain/(floss) from sale of assets not on line 10 b Gross sales price to fall the sets on line 6a				
Ė N	7 ¢apital gain net income (from Part IV, In 22). 8 NES short felm cartial gain.				
Ü	9 Income modifications				
	Ua Grossisales less				
	allowances b Less. Cost of GDEN, UT gloods sold				
	c Gross profit/(loss) (att sch) 11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11.	53,500.	0.	0.	
	13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages	0.		-	
	15 Pension plans, employee benefits				
A D	16a Legal fees (attach schedule). SEE. ST 1 b Accounting fees (attach sch)	2,440.			2,440.
M I N	c Other prof fees (attach sch)				
9 1	17 Interest				
P S T R A T	18 Taxes (attach schedule)(see instrs)			<u> </u>	
ı i	sch) and depletion				
Ń Ý G E	20 Occupancy 21 Travel, conferences, and meetings				1
A E N X D P	22 Printing and publications				
D P	23 Other expenses (attach schedule) SEE STATEMENT 2	850.			850.
N S E	Total operating and administrative expenses. Add lines 13 through 23	3,290.			3,290.
5	25 Contributions, gifts, grants paid PART XV	50,000.			50,000.
	26 Total expenses and disbursements. Add lines 24 and 25	53,290.	0.	0.	53,290.
	27 Subtract line 26 from line 12: a Excess of revenue over expenses				
	and disbursements	210.	~		
	b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-)		0,	0.	,
BAA F	or Paperwork Reduction Act Notice, see ins	tructions.	TEE	A0504L 12/05/11	Form 990-PF (2011)

		Investments — corporate stock (attach schedule)			
	(c Investments — corporate bonds (attach schedule)			
	11	Investments – land, buildings, and equipment: basis.			
		Less: accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans	,		
	13	Investments - other (attach schedule) .			
	14	Land, buildings, and equipment: basis ▶	-		
		Less. accumulated depreciation (attach schedule)			
	15	Other assets (describe ►)		
	16	Total assets (to be completed by all filers – see the instructions. Also, see page 1, item l)	0.	210.	21
Ļ	17	Accounts payable and accrued expenses			-
Á	18	Grants payable			_
Ŗ	19	Deferred revenue			
Ľ	20	Loans from officers, directors, trustees, & other disqualified persons			
Ţ	21	Mortgages and other notes payable (attach schedule)			
i	22	Other liabilities (describe			
E S	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.	Ц		
NF	24	Unrestricted			
N F E U T N	25	Temporarily restricted			
D	26	Permanently restricted			1
A B S A L T A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.	X		
EL	27	Capital stock, trust principal, or current funds			
SN	28	Paid-in or capital surplus, or land, building, and equipment fund			
C O E	29	Retained earnings, accumulated income, endowment, or other funds .		210.	
ŔŠ	30	Total net assets or fund balances(see instructions)	0.	210.	

Pat. II Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year- Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return). 0. 1 2 210. 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 3 4 Add lines 1, 2, and 3 4 210 5 Decreases not included in line 2 (itemize) 5 6 Total net assets or fund balances at end of year (line 4 minus line 5)- Part II, column (b), line 30 210. 6

obligations (attach schedule)

31 Total liabilities and net assets/fund balances

(see instructions)

210.

	Losses for Tax on Investment	Income			
2-story brick wareho	be the kind(s) of property sold (e.g., reuse; or common stock, 200 shares MLC	al estate,	(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year
1a N/A					
b					
С					
<u>d</u>					
е			l		<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other base plus expense of sa		(h) Gain or (e) plus (f) m	
<u>a</u>					
b					
<u>c</u>					
<u>d</u>					
Complete anhy fav an atrack		- form delice - 10/21/60			
(i) Fair Market Value	ing gain in column (h) and owned by the (j) Adjusted basis	(k) Excess of column		(I) Gains (Coli gain minus column (
as of 12/31/69	as of 12/31/69	over column (j), if a	iny t	han -0-) or Losses (fi	
ab					
С					
d					
e					····
2 Capital gain net income or (ne	t capital loss). If gain, also ell (loss), ente	enter in Part I, line 7 er -0- in Part I, line 7	- 2		
Net short-term capital gain or i	(loss) as defined in sections 1222(5) ar	_			
If dain, also enter in Part I, line	e 8, column (c) (see instructions). If (lo	oss) enter .0.	_		
ın Part I, line 8		753), eriter -0-			
्रात् े	. C - Al 4040/- \ (D - 1 1			-	
Qualification Unite	r Section 4940(e) for Reduced	Tax on Net Investme	nt Income		
	r Section 4940(e) for Reduced e foundations subject to the section 49			N/A	
or optional use by domestic private	e foundations subject to the section 49			N/A	
or optional use by domestic private section 4940(d)(2) applies, leave the	e foundations subject to the section 49 his part blank.	40(a) tax on net investmer	nt income.)		
or optional use by domestic private section 4940(d)(2) applies, leave the as the foundation liable for the sec	e foundations subject to the section 49 his part blank. tion 4942 tax on the distributable amoi	40(a) tax on net investmer unt of any year in the base	nt income.)	N/A	☐ No
or optional use by domestic private section 4940(d)(2) applies, leave the as the foundation liable for the sec Yes,' the foundation does not qual	e foundations subject to the section 49 his part blank. tion 4942 tax on the distributable amou ify under section 4940(e). Do not com	40(a) tax on net investmer unt of any year in the base plete this part.	e period?		☐ No
or optional use by domestic private section 4940(d)(2) applies, leave the section 4940(d)(2) applies, leave the section for the section of the foundation does not qual 1. Enter the appropriate amount in the section of the section o	e foundations subject to the section 49 his part blank. tion 4942 tax on the distributable amounty under section 4940(e). Do not compose a column for each year; see the	40(a) tax on net investmer unt of any year in the base plete this part. instructions before making	e period?	. Yes	∏ No
or optional use by domestic private section 4940(d)(2) applies, leave the as the foundation liable for the sec Yes,' the foundation does not qual	e foundations subject to the section 49 his part blank. tion 4942 tax on the distributable amou ify under section 4940(e). Do not com	40(a) tax on net investmer unt of any year in the base plete this part.	e period?		n ratio
or optional use by domestic private section 4940(d)(2) applies, leave the set of the section the foundation does not qual section. Enter the appropriate amount in the section of the sect	tion 4942 tax on the distributable among under section 4940(e). Do not composed to column for each year; see the	40(a) tax on net investmer unt of any year in the base plete this part. instructions before making (c) Net value of	e period?	Yes (d) Distribution	n ratio
or optional use by domestic private section 4940(d)(2) applies, leave the section 4940(d)(2) applies, leave the section for the section section does not qual section does not qual lenter the appropriate amount in the section of the	tion 4942 tax on the distributable among under section 4940(e). Do not composed to column for each year; see the	40(a) tax on net investmer unt of any year in the base plete this part. instructions before making (c) Net value of	e period?	Yes (d) Distribution	n ratio
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proptional use by domestic private proption of optional use by domestic private section 4940(d)(2) applies, leave the section of the section	tion 4942 tax on the distributable among under section 4940(e). Do not composed to column for each year; see the	40(a) tax on net investmer unt of any year in the base plete this part. instructions before making (c) Net value of	e period?	Yes (d) Distribution	n ratio
proptional use by domestic private section 4940(d)(2) applies, leave the section 4940(d)(2) applies, leave the section set the foundation liable for the section year, the foundation does not qual an entire the appropriate amount in the section of	tion 4942 tax on the distributable amounts under section 4940(e). Do not composed to column for each year; see the (b) Adjusted qualifying distributions	40(a) tax on net investmer unt of any year in the base plete this part. instructions before making (c) Net value of	e period? any entries.	Yes (d) Distribution	n ratio
proptional use by domestic private section 4940(d)(2) applies, leave the section 4940(d)(2) applies, leave the section set the foundation liable for the section year, the foundation does not qual an entire the appropriate amount in the section of	tion 4942 tax on the distributable amounts under section 4940(e). Do not compose a column for each year; see the (b) Adjusted qualifying distributions	40(a) tax on net investmer unt of any year in the base plete this part. instructions before making (c) Net value of	e period?	Yes (d) Distribution	n ratio
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proportional use by domestic private section 4940(d)(2) applies, leave the section 4940(d)(2) applies, leave the set the foundation liable for the sections. Yes,' the foundation does not qual 1. Enter the appropriate amount in the section of the	tion 4942 tax on the distributable amore ify under section 4940(e). Do not compose ach column for each year; see the (b) Adjusted qualifying distributions de 5-year base period—divide the total in has been in existence if less than 5 year table-use assets for 2011 from Part X,	unt of any year in the base plete this part. Instructions before making (c) Net value of noncharitable-use as on line 2 by 5, or by the years Instructions before making	e period? any entries. sets (co	Yes (d) Distribution	n ratio
or optional use by domestic private section 4940(d)(2) applies, leave the section 4940(d)(2) applies, leave the set the foundation liable for the sections of the section o	tion 4942 tax on the distributable amongly under section 4940(e). Do not composed column for each year; see the (b) Adjusted qualifying distributions The 5-year base period—divide the total in has been in existence if less than 5 years table-use assets for 2011 from Part X, ome (1% of Part I, line 27b.)	unt of any year in the base plete this part. Instructions before making (c) Net value of noncharitable-use as on line 2 by 5, or by the years Instructions before making	e period? any entries. sets (cc 2 3 4 5 6	Yes (d) Distribution	n ratio

_	990-PF (2011) THE SANGREAL FOUNDATION 45-3//9543		P:	age 4
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948- see instructions	s)		
1 :	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter: (attach copy of letter if necessary— see instrs)			
1	Domestic foundations that meet the section 4940(e) requirements in Part V,			0.
	check here ▶ and enter 1% of Part I, line 27b			
•	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			
	foundations only. Other's enter -0-)			0.
3	Add lines 1 and 2			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-).			0.
5	Tax based on investment incomeSubtract line 4 from line 3. If zero or less, enter -0-			0.
6	Credits/Payments:			
ä	2011 estimated tax pmts and 2010 overpayment credited to 2011			
ŀ	Exempt foreign organizations – tax withheld at source 6b			
•	Tax paid with application for extension of time to file (Form 8868) . 6c			
•	Backup withholding erroneously withheld 6d			
7	Total credits and payments. Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter theamount overpaid			
_11	Enter the amount of line 10 to be Credited to 2012 estimated tax.			
િં દ્ધ	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>X</u>
ŧ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes			
-	(see the instructions for definition)?	1ь		X
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published		j	
	or distributed by the foundation in connection with the activities			
	Did the foundation file Form 1120-POL for this year?	1c		X
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		.	
	(1) On the foundation . > \$ 0. (2) On foundation managers . > \$ 0. Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	-		
•	foundation managers > \$ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
_	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		Х
4.	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	42		X
	If 'Yes,' has it filed a tax return on Form 990-T for this year?	4b	N	/A
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
•	If 'Yes,' attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
•	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7	X	
	Enter the states to which the foundation reports or with which it is registered (see instructions)			
O a	N/A			
b	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation . SEE STATEMENT 3.	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 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	9		Х
		<u> </u>	-	
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses SEE STATEMENT 4	10	х	
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Statements Regarding Activiti	es for Which Form	4720 May Be Requ	iired (continued)	
5a During the year did the foundation pay or incu	•		CT., 63	
(1) Carry on propaganda, or otherwise attempt	ot to influence legislation	n (section 4945(e))? .	Yes X	No
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra		4955); or to carry	Yes X	
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	Yes X	No
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, or 4940(d)(2)? (see instru	ganization described uctions)	Yes X	No
(5) Provide for any purpose other than religio educational purposes, or for the preventio	us, charitable, scientific n of cruelty to children	; literary, or or animals?	Yes X	No
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in (see instructions)?	he transactions fail to q a current notice regard		ons	5b N/A
Organizations relying on a current notice rega			. ▶□	
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	the foundation claim ex sibility for the grant?	emption from the	N/A Yes	No
If 'Yes,' attach the statement required by Regi				
6a Did the foundation, during the year, receive are on a personal benefit contract?	ny funds, directly or ind	rectly, to pay premiums	. Yes X	
b Did the foundation, during the year, pay prem	iums, directly or indirec	tly, on a personal benef	it contract?	. 6ь Х
If 'Yes' to 6b, file Form 8870			🗀 🖼	
7a At any time during the tax year, was the found				1 1 1
b If 'Yes,' did the foundation receive any proceed Information About Officers, D				
and Contractors	nectors, Trustees,	i outination manag	jors, riiginy r ala E	.iiipioyees,
1 List all officers, directors, trustees, foundation	n managers and their o	compensation (see inst	ructions).	
(a) Name and address	(b) Title, and average hours per week devoted to position		(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
BRIAN SHETH	VICE PRESIDE	0.	0.	0.
3502 SACRED MOON COVE AUSTIN, TX 78746	1.00			
ADRIA SHETH	PRESIDENT	0.	0.	0.
3502 SACRED MOON COVE AUSTIN, TX 78746	1.00			
ANDREW GELLER	SECRETARY	0.	0.	0.
3502 SACRED MOON COVE AUSTIN, TX 78746	1.00			
2 Compensation of five highest-paid employee	es (other than those inc	luded on lin e 1 see inst	ructions). If none, ente	er 'NONE.'
(a) Name and address of each employee	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense account,
paid more than \$50,000	hours per week devoted to position		employee benefit plans and deferred compensation	other allowances
NONE				
Total number of other employees paid over \$50,000)	<u></u>	, , , , >	. 0
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Form 990-PF (2011)

6 Adjusted qualifying distributions Subtract line 5 from line 4

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Minimum Investment Return (All domestic foundations must complete this part, see instructions.)	Foreign foun	dations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes:		
a Average monthly fair market value of securities	1a	105
	1b	105.
c Fair market value of all other assets (see instructions)	1c	105.
d Total (add lines 1a, b, and c)	. 1d	105.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c	_	
· · · · · · · · · · · · · · · · · · ·	0.	0
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	105.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	2.
5 Net value of noncharitable-use assetsSubtract line 4 from line 3. Enter here and on Part V, line 4	 	103.
6 Minimum investment return Enter 5% of line 5	6	5.
Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private on	perating found	
and certain foreign organizations check here ► and do not complete this part		ations
1 Minimum investment return from Part X, line 6	. 1	5.
2a Tax on investment income for 2011 from Part VI, line 5		
b Income tax for 2011. (This does not include the tax from Part VI.)		
c Add lines 2a and 2b	2 c	
3 Distributable amount before adjustments Subtract line 2c from line 1	3	5.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	. 5	5.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amountas adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	5.
Qualifying Distributions (see Instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: a Expenses, contributions, gifts, etc – total from Part I, column (d), line 26.		
	. <u>1a</u>	53,290.
b Program-related investments – total from Part IX-B	1b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes .	. 2	
3 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required)		
	3a	
b Cash distribution test (attach the required schedule)	3b	F2 222
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	53,290.
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 instructions)	. 5	

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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Form 990-PF (2011)

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
Distributable amount for 2011 from Part XI, line 7				5.
2 Undistributed income, if any, as of the end of 2011:				
a Enter amount for 2010 only			0.	,
b Total for prior years: 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2011:				
a From 2006 .				
b From 2007				
c From 2008				
d From 2009				
e From 2010				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2011 from Part				
XII, line 4: ► \$ 53, 290.				
a Applied to 2010, but not more than line 2a		l	0.	
b Applied to undistributed income of prior years (Election required – see instructions).		0.		
c Treated as distributions out of corpus (Election required – see instructions)	0.			
d Applied to 2011 distributable amount]		5.
e Remaining amount distributed out of corpus	53,285.			
5 Excess distributions carryover applied to 2011	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	53,285.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-				
ed income for which a notice of deficiency				
has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
, , , ,				
d Subtract line 6c from line 6b. Taxable amount – see instructions		0.		
e Undistributed income for 2010. Subtract line 4a from line 2a. Taxable amount — see instructions			0.	
inte Za. Taxable amount — See instructions				
f Undistributed income for 2011. Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2012				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2012.				
Subtract lines 7 and 8 from line 6a	53,285.			
10 Analysis of line 9: a Excess from 2007.				
b Excess from 2008				
c Excess from 2009				
d Excess from 2009 .				
e Excess from 2011 53, 285.				
BAA		<u>المستروس بالمروب</u>	<u></u>	Form 990-PF (2011
				

Form 990-PF (2011) THE SANGREAL FOUL			· <u>-</u>	45-3779543	Page 10 N/A		
Private Operating Foundations (see instructions and Part VII-A, question 9)							
1a'lf the foundation has received a ruling or our is effective for 2011, enter the date of the		that it is a private		n, and the ruling			
b Check box to indicate whether the foundat	-			4942(j)(3) or	4942(j)(5)		
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years				
income from Part I or the minimum investment return from Part X for each year listed .	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total		
b 85% of line 2a							
c Qualifying distributions from Part XII, line 4 for each year listed							
d Amounts included in line 2c not used directly for active conduct of exempt activities							
 Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c 							
3 Complete 3a, b, or c for the alternative test relied upon:							
a 'Assets' alternative test – enter:							
(1) Value of all assets							
b 'Endowment' alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed							
c 'Support' alternative test— enter:	- · · · · · · · · · · · · · · · · · · ·			 			
(1) Total support other than gross			1				
investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)							
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)							
(3) Largest amount of support from an exempt organization							
(4) Gross investment income			<u> </u>	145.000			
Supplementary Information assets at any time during th	(Complete this	part only if the	organization n	ad \$5,000 or moi	re in		
1 Information Regarding Foundation Manage		30400013.7	·				
List any managers of the foundation who is close of any tax year (but only if they have SEE STATEMENT 5	nave contributed mo	ore than 2% of the than \$5,000). (See	total contributions i section 507(d)(2).)	received by the found	dation before the		
b List any managers of the foundation who ca partnership or other entity) of which the	own 10% or more o foundation has a 10	f the stock of a cor 0% or greater inter	poration (or an equest.	ally large portion of	the ownership of		
NONE							
2 Information Regarding Contribution, Gran	nt, Gift, Loan, Scho	larship, etc, Progra	ams:				
Check here ►	nakes contributions s gifts, grants, etc,	to preselected cha (see instructions) t	iritable organization o individuals or org	is and does not acce janizations under oth	pt unsolicited er conditions,		
a The name, address, and telephone numbe	r of the person to v	whom applications	should be addresse				
and the state of t		The state of the s					
SEE STATEMENT 6		···					
b The form in which applications should be s	submitted and infor	mation and materia	als they should inclu	ıde:			
SEE STATEMENT FOR LINE 2A							
c Any submission deadlines:							
SEE STATEMENT FOR LINE 2A							
d Any restrictions or limitations on awards, s	uch as by geograp	hical areas, charita	ble fields, kinds of	institutions, or other	factors:		
SEE STATEMENT FOR LINE 2A							
DAA							

Recipient	If recipient is an individual, show any relationship to any foundation manager or	Foundation	Purpose of grant or	6
	any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business) a Paid during the year THE ARMORY FOUNDATION 216 FORT WASHINGTON AVE NEW YORK, NY 10032	NONE	501 C3		10,000.
FOREVER YOUNG FOUNDATION 1424 S. STAPLEY DRIVE MESA, AZ 85204	NONE	501 C3		25,000.
THE MIRACLE FOUNDATION 229 SEVENTH STREET, SUITE LL03 GARDEN CITY, NY 11530	NONE	501 C3		10,000.
AUSTIN CHILDREN'S SHELTER 4800 MANOR ROAD AUSTIN, TX 78723	NONE	501 C3		5,000.
Total			. ► 3a	50,000
b Approved for future payment				i
Total		•	▶ 31	

Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated I	business income	Excluded by	section 512, 513, or 514	(e)	
Program service revenue:	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions)	
a						
b					<u> </u>	
c					<u></u>	
d						
θ						
f			\mathbf{I}			
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash investments						
4 Dividends and interest from securities						
5 Net rental income or (loss) from real estate:						
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal property						
7 Other investment income						
8 Gain or (loss) from sales of assets other than inventory .						
9 Net income or (loss) from special events .						
10 Gross profit or (loss) from sales of inventory .						
11 Other revenue:						
a		··· <u>-</u>				
b						
c						
d	1					
е						
12 Subtotal Add columns (b), (d), and (e)						
13 Total. Add line 12, columns (b), (d), and (e)	, , , , , ,			. , 13		
(See worksheet in line 13 instructions to verify calculation						

Line No.	accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions.)
N/A	
	

Form 990-PF (2011) THE SANGREAL FOUNDATION 45-3779543 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

											Yes	No
ď	escribe	organization directly ed in section 501(c) to political organiza	of the Code (o	engage in any of other than section	the following n 501(c)(3) org	with any ot janizations)	her organization or in section 5	า 27,				
аT	ransfe	rs from the reporting	foundation to	a noncharitable	exempt organ	ization of:						
	l) Cas								[1a (1)		Χ
(2	2) Oth	er assets .			.,	, ,			[1a (2)		X
b O	ther tr	ansactions:							Ī			
(1) Sale	es of assets to a nor	icharitable exe	empt organizatio	n			. ,		1b(1)		Χ
		chases of assets from							[1b (2)		X
		tal of facilities, equip							[1b (3)		X
		nbursement arrange							[1b (4)		X
(5) Loa	ns or Ioan guarantee	es ,				,].	1 b (5)		X
(6) Peri	formance of services								1b (6)		X
		of facilities, equipm							[1 c		X
	Ū	. , ,	. 3	•	, , , , ,	•						
th	ne good	nswer to any of the a ds, other assets, or s isaction or sharing a	services given	by the reporting	ı founďatıon. If	the found:	ation received le	ess than fa	r market	t value in	e of	
(a) Line		(b) Amount involved		of noncharitable exer			Description of trans				gement	s
N/A			1		· · · · · · · · · · · · · · · · · · ·	 \-					·	
•												
												
												
					·		 					
	-					-				<u></u> .		
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	+					_						
	+				.	_		<u>- </u>				
												
	_		<u> </u>									
de	escribe	undation directly or d in section 501(c) of complete the followi	of the Code (o	ated with, or relither than section	ated to, one or n 501(c)(3)) or	more tax- in section	exempt organiz 527.?	ations		. Yes	X	No
		Name of organizati		(b) Typ	e of organizati	00	10) Description	n of rel:	ationshin		
N/A	<u>, (a</u>	, ranie or organizati	<u> </u>	(0) 199	c or organizati	011		, Description	-11 OF 1010	adonisi iib		
		······································							-			
	Under n	enalties of persons. I declar	e that I have evam	uned this return, inclu	dina accompanying	schedules an	d statements and to	the hest of my	knowledge	and belief	t is thie	
	correct,	enalties of perjury, I declar and complete Declaration	of preparer (other	than taxpayer) is bas	ed on all information	on of which pre	parer has any knowl	edge	Mionicago			
Sign		///: \	L		ر دا بن					May the this retur	n with th	ne
lere		Maria D	num		19/9/		RESIDENT			preparer (see inst	ructions)	pelow
	Signa	ture of officer or trustee			Date	Tı	de			X	Yes	No
		Print/Type preparer's nan	ne	Preparer's	· /Zhu	a mah	Date	Check	Lif	PTIN		
Paid		BRIAN R MAH			R MAH		3/27/12	self emp		P0052	2319	
repa	rer			CIATES, L				Firm's EIN ▶	94-3	<u>342694</u>		
Jse O			01 CALIFO			411						
		S	AN FRANCI	SCO, CA 94	1111			Phone no	(415) 981-	1111	
BAA										Form 99	0-PF	(2011)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF

OMB No 1545-0047

2011

Name of the organization THE SANGRE	Employer identification number 45-3779543			
Organization type (check one):				
Filers of:	Section:	/		
Form 990 or 990-EZ	501(c)() (enter number) organ 4947(a)(1) nonexempt charitable trus 527 political organization			
Form 990-PF	X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trus 501(c)(3) taxable private foundation	4947(a)(1) nonexempt charitable trust treated as a private foundation		
Check if your organization is cover. Note. Only a section 501(c)(7), (8),	ed by the General Rule or a Special Rule . or (10) organization can check boxes for both the Ge	eneral Rule and a Special Rule. See instructions.		
General Rule X For an organization filing Form contributor. (Complete Parts I a	990, 990-EZ, or 990-PF that received, during the year and II.)	r, \$5,000 or more (in money or property) from any one		
Special Rules				
509(a)(1) and 170(b)(1)(A)(vi).	ation filing Form 990 or 990-EZ that met the 33-1/3% and received from any one contributor, during the yea m 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. 0	ar, a contribution of the greater of \$5,000 or		
total contributions of more than	(10) organization filing Form 990 or 990-EZ that recein \$1,000 for useexclusively for religious, charitable, sodren or animals. Complete Parts I, II, and III.	ved from any one contributor, during the year, ientific, literary, or educational purposes, or		
If this box is checked, enter he purpose. Do not complete any	(10) organization filing Form 990 or 990-EZ that receive for religious, charitable, etc, purposes, but these content to the total contributions that were received during the of the parts unless the General Rule applies to this organization.	ntributions did not total to more than \$1,000. e year for arex <i>clusively</i> religious, charitable, etc,		
, , ,	butions of \$5,000 or more during the year.	· · · · · · · · · · · · · · · · · · ·		
Caution: An organization that is no 990-PF) but it must answer 'No' on Form 990-PF, to certify that it does	t covered by the General Rule and/or the Special Rul Part IV, line 2, of its Form 990; or check the box on not meet the filing requirements of Schedule B (Form	es does not file Schedule B (Form 990, 990-EZ, or line H of its Form 990-EZ or on Part I, line 2, of its n 990, 990-EZ, or 990-PF).		
BAA For Paperwork Reduction A 990EZ, or 990-PF.	ct Notice, see the Instructions for Form 990,	Schedule B (Form 990, 990-EZ, or 990-PF) (2011		

			····
	B (Form 990, 990-EZ, or 990-PF) (2011)	Page	1 of 1 of Part 1
Name of org		' '	identification number
THE SA	ANGREAL FOUNDATION	45-37	79543
કેંદ્ર ા ,]	Contributors (see instructions). Use duplicate copies of Part I if additional sp	pace is needed.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BRIAN & ADRIA SHETH		Person X Payroll
	3407 WOODCUTTERS WAY	\$53,500.	Noncash
	AUSTIN, TX 78746		(Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP → 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution

(a)

(a)

of Part II

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization

THE SANGREAL FOUNDATION

1 to Employer identification number

45-3779543

20.1	Noncash Property	(see instructions).	Use duplicate	copies of Part II if	additional space is needed.
------	-------------------------	---------------------	---------------	----------------------	-----------------------------

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
N/A			
		\$\$	
(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
		\$\$	
(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
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
AA		Schedule B (Form 990, 990-E	7 000 551 (00

BAA

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

of Part III

to Employer Identification number 45-3779543

Name of organization
THE SANGREAL FOUNDATION Exclusively religious, charitable, etc, individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete cols (a) through (e) and the following line entry.

For organizations completing Part III, enter total of exclusively religious, charitable, etc, contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)

. ▶\$ N/A

No. from Part I N/A (e) Transferee's name, address, and ZIP + 4 Relationship of transfer (a) (b) (c)	(d) of how gift is held or to transferee (d) of how gift is held	
(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transfer (a) (b) (c) Io. from Purpose of gift Use of gift Description	(d)	
Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transfer (a) (b) (c) Purpose of gift Use of gift Description	(d)	
Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transfer (a) (b) (c) from Purpose of gift Use of gift Description of transfer	(d)	
from Purpose of gift Use of gift Description		
from Purpose of gift Use of gift Description		
(e)		
Transfer of gift	Relationship of transferor to transferee	
(a) (b) (c)	(d)	
from Purpose of gift Use of gift Description	of how gift is held	
(e) Transferee's name, address, and ZIP + 4 Relationship of transfe	ror to transferee	
(a) (b) (c)	(d)	
from Purpose of gift Use of gift Description	of how gift is held	
(e) Transfer of gift		
Transferee's name, address, and ZIP + 4 Relationship of transfe	ror to transferee	

21	1	1
71	,	

FEDERAL STATEMENTS

PAGE 1

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CLIENT SAN5111

THE SANGREAL FOUNDATION

3/27/12

09:42AM

STATEMENT 1 FORM 990-PF, PART I, LINE 16A **LEGAL FEES**

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	CHARITABLE PURPOSES
LEGAL EXPENSES TOTAL	\$ 2,440. \$ 2,440.	\$ 0.	\$ 0.	\$ 2,440. \$ 2,440.

STATEMENT 2 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ORGANIZATION FEES	TOTAL	\$ 850. \$ 850.	\$ 0.	\$ 0.	\$ 850. \$ 850.

STATEMENT 3 FORM 990-PF, PART VII-A, LINE 8B COPIES OF FORM 990-PF TO STATE OFFICIALS

TEXAS HAS NO FILING REQUIREMENT.

STATEMENT 4 FORM 990-PF, PART VII-A, LINE 10 SUBSTANTIAL CONTRIBUTORS DURING THE TAX YEAR

NAME OF SUBSTANTIAL CONTRIBUTOR ADDRESS OF SUBSTANTIAL CONTRIBUTOR BRIAN AND ADRIA SHETH 3502 SACRED MOON COVE

AUSTIN, TX 78746

STATEMENT 5 FORM 990-PF, PART XV, LINE 1A FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

BRIAN SHETH ADRIA SHETH 2011

3/27/12

FEDERAL STATEMENTS

THE SANGREAL FOUNDATION

PAGE 2 45-3779543

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CLIENT SAN5111

09:42AM

STATEMENT 6 FORM 990-PF, PART XV, LINE 2A-D

APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:

BRIAN SHETH

NAME:

CARE OF:

STREET ADDRESS:

3502 SACRED MOON COVE

CITY, STATE, ZIP CODE:

AUSTIN, TX 78746

TELEPHONE:

FORM AND CONTENT: SUBMISSION DEADLINES:

RESTRICTIONS ON AWARDS:

2A. NAME, ADDRESS, AND TELEPHONE NUMBER OF THE PERSON TO WHOM APPLICATIONS SHOULD BE ADDRESSED:
THE SANGREAL FOUNDATION

3502 SACRED MOON COVE

AUSTIN, TX 78746 (512) 551-9258

2B. THE FORM IN WHICH APPLICATIONS SHOULD BE SUBMITTED AND

INFORMATION AND MATERIALS THEY SHOULD INCLUDE:

NO SPECIFIC FORM OR INFORMATION REQUIRED 2C. ANY SUBMISSION DEADLINES:

NO SUBMISSION DEADLINES.
2D. ANY RESTRICTIONS OR LIMITATIONS ON AWARDS, SUCH AS BY

GEOGRAPHICAL AREAS, CHARITABLE FIELDS, KIND OF INSTITUTIONS, OR OTHER FACTORS:

DISTRIBUTION OF FUNDS ARE MADE TO VARIOUS

ORGANIZATIONS AT THE DISCRETION OF THE BOARD OF

DIRECTORS.

ADRIA SHETH

ANDREW GELLER

NAME OF GRANT PROGRAM:

NAME:

CARE OF:

STREET ADDRESS:

3502 SACRED MOON COVE

CITY, STATE, ZIP CODE: AUSTIN, TX 78746

TELEPHONE:

FORM AND CONTENT:

SUBMISSION DEADLINES:

RESTRICTIONS ON AWARDS: SAME RESTRICTIONS ON AWARDS AS ABOVE.

NAME OF GRANT PROGRAM:

NAME:

CARE OF:

STREET ADDRESS:

3502 SACRED MOON COVE

CITY, STATE, ZIP CODE: AUSTIN, TX 78746

TELEPHONE:

FORM AND CONTENT:

SUBMISSION DEADLINES:

RESTRICTIONS ON AWARDS: SAME RESTRICTIONS ON AWARDS AS ABOVE.