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Form 991

Department of the Treasury Internal Revenue Service

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)

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

2012
Open to Public Inspection

A For the 2012 calendar year, or tax year beginning and ending D Employer identification number C Name of organization Check if Address change THE SIKH COALITION 22-3834037 Doing Business As Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number Termin-50 BROAD STREET 1537 212-655-3095 Amended City, town, or post office, state, and ZIP code G Gross receipts \$ Applica-NEW YORK, NY 10004 H(a) Is this a group return pending Yes X No F Name and address of principal officer:NARINDER SINGH for affiliates? H(b) Are all affiliates included? Yes same as C above Tax-exempt status: X 501(c)(3) 501(c) (4947(a)(1) or If "No." attach a list. (see instructions)) ◀ (insert no) J Website: ► SIKHCOALITION.ORG H(c) Group exemption number ▶ K Form of organization X Corporation Association Other > L Year of formation 2001 M State of legal domicile, NY Part I Summary Briefly describe the organization's mission or most significant activities: THE SIKH COALITION WORKS TOWARDS Activities & Governance THE REALIZATION OF CIVIL AND HUMAN RIGHTS FOR ALL PEOPLE. Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets. 6 Number of voting members of the governing body (Part VI, line 1a) 6 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 6 6 Total number of volunteers (estimate if necessary) 7a 7 a Total unrelated business revenue from Part VIII, column (C), line 12 0. b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 1,488,611 1,083,651. Contributions and grants (Part VIII, line 1h) Revenue 0. 0. Я Program service revenue (Part VIII, line 2g) 29,698. 27,913 Investment income (Part VIII, Column (A), lines 3, 4, and 7d)
Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 10 0 0 11 1,516,524 1,113,349. Total revenue - add lines 8 through 11 (must equal Rart VIII, column (A), line 12) 13 Grants and similar amounts-paid (Part IX, column (A) lines 1-3)
14 Benefits paid to or for-members (Part IX, column (A) line 4) 6,265 ი 0. 0. 546,189 678,405. Salaries, other compensation employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX; column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 439,749. 581,032. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,265,702. 985,938. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 530,586. -152,353. 19 Revenue less expenses. Subtract line 18 from line 12 Assets or Balances Beginning of Current Year **End of Year** 1,677,593 1,601,312. 20 Total assets (Part X, line 16) 90,773. 60,430 21 Total liabilities (Part X, line 26) 510,539 1,617,163 22 Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block 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 11/14/13 Signature of officer Sign NARINDER SINGH, CHAIR Here Type or print name and title PTIN Preparer's Isiggraffure Print/Type preparer's name P00706145 Kevin Sunkel Paid 13-2060851 Firm's name Dowen J Flanagan Co Firm's EIN & Preparer Firm's address ▶ 60 East 42nd Street Use Only 212-682-2783 New York, NY 10165 Phone no X Yes No May the IRS discuss this return with the preparer shown above? (see instructions) Form 990 (2012) LHA For Paperwork Reduction Act Notice, see the separate instructions.

Part IV Checklist of Required Schedules

			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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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		<u>X</u>
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? If "Yes," complete Schedule C, Part II	4	Х	
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		<u>X</u>
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		<u> </u>
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		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III .	8		<u>X</u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; 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		<u>X</u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent		17	
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	44-	X	
	Part VI	11a		
D	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11b		х
_	assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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		Х
е	Did the organization report an amount for other liabilities in Part X, line 257 If "Yes," complete Schedule D, Part X	11e		X
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)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
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 and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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, Parts I and IV	14b_	. —	X
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 United States? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	١		l
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	4-		v
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		х
	1c and 8a? If "Yes," complete Schedule G, Part II	18		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	19		х
00-	complete Schedule G, Part III	20a		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	 	
<u> </u>	it res to line zoa, did the organization attach a copy of its audited financial statements to this return:		990	(2012)

Form 990 (2012) THE SIKH COALITION

Part IV Checklist of Required Schedules (continued)

21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 17 if "Yes," complete Schedule i, Parts i and ill 2	<u> </u>			Yes	No
United States on Part IX, column (A), line 17 if "Yes," complete Schedule I, Parts I and II 21 Did the organization report mer than \$5,000 or grants and other essastance to individuals in the United States on Fart IX, column (A), line 27 if "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes 10 Part VII, Section A, line 3, in c 5 about compensation of the organization surrent and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule II and III an	21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the		163	140
Det the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, counter (a) and its provided Schedule Parts and iii 2 X 22 X X 23 Det the organization answer "Yes" to Part IV, (iii Section A, line 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 X X 24 X 25 X 25 X 26 X 26 X 27 27 28 X 28 X 28 X 29 X			21		Х
column (A), line 27 if "Yes," complete Schedule I, Parts I and III 23 Did the organization aswer "Yes" to Part IVI; Section A, line 3, 4, or 5 about compensation of the organization current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I 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 lines 24b through 24d and complete Schedule I" No."; por to Imo 25 b) Did the organization invest any proceeds of tax-exempt bonds beyond a temporary pend exception? c) Did the organization meet any proceeds of tax-exempt bonds beyond a temporary pend exception? d) Did the organization meet any on behalf of issuer for bonds outstanding at any time during the year? of the organization and cat as an 'on behalf of issuer for bonds outstanding at any time during the year? d) Did the organization aware that engaged in an excess benefit transaction with a disqualified person during the year? I" "Yes," complete Schedule L, Part I b) Is the organization oware that engaged in an excess benefit transaction with a disqualified person outstanding as of the end of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part II Was a loan to or by a current or former officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV A can entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A can entity of which a current or former officer, director, trustee, or key employee or a family member of a current or former officer, director, trustee, or key employee or a family member thereof) was an officer, director, trustee, or key employee or a family member thereof) w	22			-	
23 Dut the organization answer "Yes" to Part VII, Section A, Ine 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 V II "No", or to Ine 25 Dut the organization have a tax-exempt bond size 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 lines 24b through 24d and complete Schedule K If "No", or to Ine 25 Dut the organization ministan an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 1 Dut the organization maintain an escrow account other than a refunding escrow at any time during the year? 2 Dut the organization acts as an 'on behalf of' issuer for bonds outstanding at any time during the year? 2 Dut the organization acts as an 'on behalf of' issuer for bonds outstanding at any time during the year? 2 Dut the organization acts as an 'on behalf of' issuer for bonds outstanding as of the year? 3 Dut the organization acts as an 'on behalf of' issuer for bonds outstanding as of the year? 4 Dut the organization acts as an 'on behalf of' issuer for bonds outstanding as of the year? 5 Dut the organization acts as an 'on behalf of' issuer for bonds outstanding as of the year? 5 Dut the organization acts as an 'on behalf of' issuer for bonds outstanding as of the year? 5 Dut the organization acts as an 'on behalf of' issuer for organization engage in an excess benefit transaction with a disqualified person during the year? 5 Dut the organization acts of the end of the organization's tax year? If "Yes," complete Schedule L, Part III 2 Dut the organization party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable fined, greater of the member, or to a 35% controlled entity or family member of a current of former officer, director, trustee, or key employee? If "Yes," comp			22		Х
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 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 lines 246 through 24d and complete Schedule K "I "No", go to line 25 b) Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c) Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c) Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c) Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c) Did the organization are 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? "Yes," complete Schedule L, Part I 15 Is the organization aware that it engaged in an excess benefit interaction 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	23				
Schedule J 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 lines 24b through 24d and complete Schedule K If "No", go to line 25			į		
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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-E27 if "Yes," complete Schedule L, Part I 25b X 26 Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26b X 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filling thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28c X 28c X 28d X 29d Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV 28c X 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II 31 X 32 Did the organization liquidate, terminate, or dissolve and sease operations? If "Yes," complete Schedule N, Part II 31 X 33 Did the organization liquidate, terminate, or dissolve and sease operations? If "Yes," complete Schedule R, Part II 33 X 34 Was the organization sell, exchange, dispose of, or transfer more than \$25% of its net assets? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, In	25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
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If "Yes," complete Schedule N, Part I 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 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? If "Yes," complete Schedule R, Part I 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35b If "Yes" to line 35a, 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 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 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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O		·	30		
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sections 301.7701·2 and 301.7701·3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 33			32		
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Part V, line 1 34	•		33	 	
Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, 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 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 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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	34	•	24	1	x
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If "Yes," complete Schedule R, Part V, line 2 36 X 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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O 38 X	00		330		-
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38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O 38 X	37		27		x
Note. All Form 990 filers are required to complete Schedule O	00		3,	-	
Note: All Form 350 micro die regalies to complete estisatio	38		38	x	
		NOTE: All Form 990 mers are required to complete ochequie O			(2012)

. 4	Check if Schedule O contains a response to any question in this Part V					
	Chook is conscious a companie to any question in this part v			i	Yes	No
1-	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	16		162	140
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and r	ستت				Į
C	(gambling) winnings to prize winners?	сропа	bic garting	1c	•	l
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1 1		··		
20	filed for the calendar year ending with or within the year covered by this return	2a	11			į
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns			2ь	Х	1
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	٠,		3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other	author	itv over. a			
	financial account in a foreign country (such as a bank account, securities account, or other financial			4a		Х
ь	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	Accou	nts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transfer	action?	·	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did t	he orga	anization solicit			
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions o	r gifts .			ł
	were not tax deductible?			6b		
7	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 se	rvices ș	provided to the payor?	7a		X
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		<u> </u>
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	vas req	uired			
	to file Form 8282?	1	ı	7c		X
d	If "Yes," Indicate the number of Forms 8282 filed during the year	7d				.,
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	contra	ct?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont			7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file F			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		ļ
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.				•	1
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings a	t any tin	ne guring the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			0-	} :	
a	Did the organization make any taxable distributions under section 4966?			9a 9b	 	
_	Did the organization make a distribution to a donor, donor advisor, or related person?			30		
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12	10a				
a _	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
ь 11	Section 501(c)(12) organizations. Enter:		L			
a	Gross income from members or shareholders	11a	1			
b	Gross income from other sources (Do not net amounts due or paid to other sources against	1		İ		
	amounts due or received from them.)	116				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	_		l		
a	Is the organization licensed to issue qualified health plans in more than one state?			13a		
_	Note. See the instructions for additional information the organization must report on Schedule O.				[
b	Enter the amount of reserves the organization is required to maintain by the states in which the					
_	organization is licensed to issue qualified health plans	13b]		
С	Enter the amount of reserves on hand	13c			ļ	<u></u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	ile O		14b	<u> </u>	<u> </u>
_				Forn	990	(2012)

232005 12-10-12

22-3834037 THE SIKH COALITION Form 990 (2012) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI Section 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 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 6 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 Х 2 officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision Х 3 of officers, directors, or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or 7a more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X 7b persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a a The governing body? Х 8ь **b** Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the 9 organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with the organization's exempt purposes? 11a 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X 12b b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c in Schedule O how this was done X 13 13 Did the organization have a written whistleblower policy? 14 14 Did the organization have a written document retention and destruction policy? 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? 15a a The organization's CEO, Executive Director, or top management official X 15b **b** Other officers or key employees of the organization

Se	cti	on (C.	Dis	sclo	sure
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taxable entity during the year?

17 List the states with which a copy of this Form 990 is required to be filed ►NY, CA

If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a

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

Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

X Own website Another's website

exempt status with respect to such arrangements?

X Upon request

Other (explain in Schedule O)

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 during the tax year.

20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization:
	The Organization - 212-655-3095
	50 TROOP CONTROL NO. 1527 NEW YORK NY 10004

12-10-12

Form **990** (2012)

1278 2

16a

16b

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

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. 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- 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 organization r	or any related	related organization compensat					nsat	ated any current officer, director, or trustee.				
(A)	(B)				C)			(D)	(E)	(F)		
Name and Title	Average	(do		Pos) e than	one	Reportable	Reportable	Estimated		
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	amount of		
	week		Jer ar	10 a u	reci	ctor/trustee)		from	from related	other		
	(list any hours for	l gg				_	ŀ	the organization	organizations (W-2/1099-MISC)	compensation from the		
	related	9				ST EST EST EST EST EST EST EST EST EST E		(W-2/1099-MISC)	(***271099***********************************	organization		
	organizations	望	草		8	ige.		(** 2 1000 111100)		and related		
	below	Individual trustee or director	Institutional frustee		Key employee	o est	15 E			organizations		
	line)	횰	last	Officer	Ş.	Highest compensated employee	F					
(1) NARINDER SINGH	20.00											
CHAIR		X		X				0.	0.	0.		
(2) PRABHJOT SINGH	10.00											
TREASURER		X		X				0.	0.	0.		
(3) RUBIN PAUL SINGH	10.00				1					_		
SECRETARY		X		Х		<u>L</u>		0.	0.	0.		
(4) SAPREET KAUR	50.00				Ì							
EXECUTIVE DIRECTOR	ļ	X		X	<u> </u>	<u> </u>		67,902.	0.	2,037.		
(5) SUNEET KAUR	10.00							_	_			
TRUSTEE		X						0.	0.	0.		
(6) HARPREET SINGH	10.00]							_	_		
TRUSTEE	<u></u>	X			ļ <u>.</u>	<u> </u>		0.	0.	0.		
(7) JASJIT SINGH	10.00		į				1					
TRUSTEE		X	ļ	L.	$ldsymbol{ldsymbol{ldsymbol{ldsymbol{eta}}}$	<u> </u>		0.	0.	0.		
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232007 12-10-12

Form **990** (2012)

Form	990 (2012) THE SIKH									22-38	3403	<u>7 р</u>	age 8
Par	VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, an	d Hi	ghe	st C	Compensated Employe	es (continued)			
	(A) Name and title	(B) Average hours per week (list any hours for related organizations	(do box	not c	Pos heck ss pe	ttion more rson irecto		one h an tee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensatior from related organizations (W-2/1099-MIS)	CO) 01	(F) Estimate amount other mpensa from the ganizate and relate	of ation e ion
		below	Adria	Eğ) Šž	Key employee	loyee	Ē				ganizatı	
		line)	ള	<u>\$</u>	Officer	ğ	Hgh omp	Former					
					┢		-	_					
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					 			_	,				
1b	Sub-total						>		67,902.		0.	2,0	37.
	Total from continuation sheets to Part V	II, Section A							0.		0.		0.
	Total (add lines 1b and 1c)						<u> </u>		67,902.		0.	2,0	<u>37.</u>
2	Total number of individuals (including but r	ot limited to th	ose	liste	ed a	bove	e) wh	no r	eceived more than \$100	,000 of reportable)		0
	compensation from the organization							-				Yes	No
3	Did the organization list any former officer,	director, or tru	ıste	e, ke	y er	nplo	yee,	or	highest compensated e	mployee on		"	
	line 1a? If "Yes," complete Schedule J for s				•	•	•				3		X
4	For any individual listed on line 1a, is the si	um of reportab	le co	omp	ensa	atior	n and	d ot	her compensation from	the organization			
	and related organizations greater than \$15										4		Х
5	Did any person listed on line 1a receive or	•				•		elat	ted organization or indiv	dual for services	5	-	Х
Sec	rendered to the organization? If "Yes," contion B. Independent Contractors	ipiete Schedul	e J I	or s	ucn	pers	son					!	
1	Complete this table for your five highest co	mpensated in	depe	ende	ent c	onti	racto	ors t	that received more than	\$100,000 of com	pensation	from	
	the organization. Report compensation for												
	(A)			~~~	-				(B) Description of s	on doce		(C) ensatio	
	Name and business	adoress	N	INC	<u> </u>			-	Description of s	ervices	COM	ensauc	
						•			-				
												·	
						_							-
2	Total number of independent contractors (ot li	mite	d to			stec	d above) who received n	nore than			
	\$100,000 of compensation from the organ	zation 🕨				(0					000	0040
22200	•										Forr	n 990 (2012)

****** (1)		Check if Schedule O cont	ains a response	to any question i			(C)	<u>L</u>
					(A) Total revenue	(B) Related or exempt function revenue	Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
1 a	3	Federated campaigns	1a					
b	b	Membership dues .	16					
c	C	Fundraising events	1c					
d	b	Related organizations	1d					
е	е	Government grants (contribut	tons) 1e					
f	ř	All other contributions, gifts, gran						
		similar amounts not included abor	ve 11 1,	083,651.				
9	9	Noncash contributions included in lines	1a-1f \$					
h	h.	Total. Add lines 1a-1f		•	1,083,651.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
				Business Code				
2 a	а							
b	Ь							
c	C		<u> </u>					
c	d							
е	е							
f	f	All other program service reve	enue	<u></u>				
	9_	Total. Add lines 2a-2f	· ····································	<u> </u>				
3		Investment income (including	dividends, intere	est, and				
		other similar amounts)		>	22,083.			22,083
4		Income from investment of ta	x-exempt bond p	roceeds				ļ
5		Royalties		<u> </u>				
			(i) Real	(ii) Personal				
6 a	а	Gross rents						
t	þ	Less: rental expenses						
C	C	Rental income or (loss)						
c	ď	Net rental income or (loss)		>				
7 a	а	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory	7,615.					
b	b	Less: cost or other basis						
		and sales expenses	0.					
•		Gain or (loss)	7,615.	l	7 (15			7 615
		Net gain or (loss)		<u> </u>	7,615.			7,615
8 a		Gross income from fundraisin	•					
		including \$	of					
		contributions reported on line	1c). See					
		Part IV, line 18	a					
		Less: direct expenses	. b	L				
		Net income or (loss) from fund						
9 8	а	Gross income from gaming ad						
		Part IV, line 19	a _					
		Less: direct expenses	b			•		
		Net income or (loss) from gam						
10 a	a	Gross sales of inventory, less						
	_	and allowances	a					
		Less: cost of goods sold	b		•	•		
	<u>c</u>	Net income or (loss) from sale	-	<u> </u>	I			
4.0	_	Miscellaneous Revenu		Business Code	ł	†		1
11 a						 		
	b							
۱ ۹	С	A II . A I				 		+
'	đ	All other revenue						
° مه ا	e	Total. Add lines 11a-11d			1,113,349.	0.	0	. 29,698
12		Total revenue. See instructions			-1113/347.			Form 990 (2012

Form 990 (2012) THE SIKH COAL Part IX Statement of Functional Expenses

	Check if Schedule O contains a response not include amounts reported on lines 6b,	e to any question in this	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and	2 (40	2 640		
_	organizations in the United States See Part IV, line 21	3,640.	3,640.		
2	Grants and other assistance to individuals in	2 625	2 (25		
_	the United States. See Part IV, line 22	2,625.	2,625.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
4	United States. See Part IV, lines 15 and 16			 	
5	Benefits paid to or for members Compensation of current officers, directors,				
5	trustees, and key employees	69,939.	48,957.	6,994.	13,988
6	Compensation not included above, to disqualified	05/3031	10/33.0	0,752.0	20,500
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	462,420.	386,370.	28,255.	47,795
8	Pension plan accruals and contributions (include	·		•	
	section 401(k) and 403(b) employer contributions)	7,327.	6,122.	448.	757
9	Other employee benefits	90,041.	73,786.	5,916.	757 10,339
0	Payroll taxes	48,678.	39,827.	3,217.	5,634
1	Fees for services (non-employees):				
а	Management				
b	Legal	2,296.	2,296.		
c	Accounting	13,835.	11,206.	969.	1,660
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
9	Other. (If line 11g amount exceeds 10% of line 25,				1 0.00
	column (A) amount, list line 11g expenses on Sch O)	67,076.	64,163.	1,045.	1,868
2	Advertising and promotion	6,932.	6,203.	265.	464
3	Office expenses	164,493.	140,846.	8,596.	15,051
4	Information technology	23,050.	18,859.	1,524.	2,667
5	Royalties	106 170	06 067	7.016	12 207
6	Occupancy	106,170.	86,867.	7,016.	12,287 1,654
7	Travel	109,216.	106,617.	945.	1,634
8	Payments of travel or entertainment expenses			,	
_	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings				
20	Interest Payments to efficience				
21	Payments to affiliates	8,549.	6,995.	565.	989
2	Depreciation, depletion, and amortization	15,832.	13,501.	847.	1,484
3	Insurance Other expanses, Itamize expanses, not covered	13,032.	13,301.	03/•	1/404
4	other expenses I temize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A)				
а	amount, list line 24e expenses on Schedule 0) PAYROLL SERVICES	25,212.	20,628.	1,666.	2,918
a b	TEMPORARY ASSISTANCE	18,944.	17,342.	582.	1,020
c	ELINIDDATCING AND ADVOCAC	10,393.	8,503.	687.	1,203
d	DUEG	4,795.	4,561.	85.	149
	All other expenses	4,239.	4,239.		
5 5	Total functional expenses. Add lines 1'through 24e	1,265,702.	1,074,153.	69,622.	121,927
6	Joint costs. Complete this line only if the organization			•	
•	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	Check here If following SOP 98-2 (ASC 958-720)				

	<u> </u>	Check if Schedule O contains a response to any	auestion in th	is Part X			
		Silverin Control of Control of Coppensor Control	quounum		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			51,529.	1_	29,348.
	2	Savings and temporary cash investments		L	334,209.	2	309,377.
	3	Pledges and grants receivable, net	-		529,982.	3	420,975.
	4	Accounts receivable, net			20,000.	4	23,698.
	5	Loans and other receivables from current and fo	rmer officers,	directors,	,		`
ŀ		trustees, key employees, and highest compensation	ated employee	s. Complete	,		s
l		Part II of Schedule L		L		5	
	6	Loans and other receivables from other disqualr	fied persons (a	s defined under			
		section 4958(f)(1)), persons described in section	4958(c)(3)(B),	and contributing			
		employers and sponsoring organizations of sect	oluntary				
.		employees' beneficiary organizations (see instr).		6			
ets	7	Notes and loans receivable, net	Г		7	_	
Assets	8	Inventories for sale or use		[8	
`	9	Prepaid expenses and deferred charges			9		
	10a	Land, buildings, and equipment: cost or other	1 1	ľ			
		basis. Complete Part VI of Schedule D	10a	52,163.			
	ь	Less: accumulated depreciation	10b	52,163. 24,628.	6,948.	10c	27,535. 788,879.
:	11	Investments - publicly traded securities			716,188.	11	788,879.
	12	Investments - other securities. See Part IV, line 1			12		
	13	Investments - program-related. See Part IV, line			13		
	14	Intangible assets	Ţ	6,660.	14		
	15	Other assets. See Part IV, line 11		12,077.	15	1,500.	
	16	Total assets. Add lines 1 through 15 (must equ	1,677,593.	16	1,601,312.		
	17	Accounts payable and accrued expenses		60,430.	17	90,773.	
	18	Grants payable			18		
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities			20		
S	21	Escrow or custodial account liability. Complete	Part IV of Sche	edule D		21	
<u>ii</u>	22	Loans and other payables to current and former		Г			· · · · · · · · · · · · · · · · · · ·
Liabilities		key employees, highest compensated employee					
ا ت		Complete Part II of Schedule L	•			22	
	23	Secured mortgages and notes payable to unrela	ated third parti	es		23	
	24	Unsecured notes and loans payable to unrelate		Γ		24	
	25	Other liabilities (including federal income tax, pa		ed third			
		parties, and other liabilities not included on lines	-				
		Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			60,430.	26	90,773.
		Organizations that follow SFAS 117 (ASC 958), check here	► X and			
S.		complete lines 27 through 29, and lines 33 an					
ည	27	Unrestricted net assets			499,113.	27	486,496.
ala	28	Temporarily restricted net assets			630,475.	28	521,468.
g P	29	Permanently restricted net assets		ſ	487,575.	29	502,575.
Š		Organizations that do not follow SFAS 117 (A	SC 958), ched	ck here 🕨 🔲 🧻			
٠ ا		and complete lines 30 through 34.					
ţ	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building, or ed		Ī		31	
SS			rfundo		32		
et Ass	32	Retained earnings, endowment, accumulated in	i iuiius i				
Net Assets or Fund Balances	32 33	Retained earnings, endowment, accumulated in Total net assets or fund balances	icome, or othe	r iunus	1,617,163. 1,677,593.	33	1,510,539. 1,601,312.

Form **990** (2012)

Form	990 (2012) THE SIKH COALITION	22-383	4037	Pag	e 12
	t XI Reconciliation 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	1,113		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,265	70	<u> </u>
3	Revenue less expenses. Subtract line 2 from line 1	3	-152		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,617		
5	Net unrealized gains (losses) on investments	5	45	7.	<u> 29.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	1,510	5,5	<u> 39.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				<u></u>
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			Yes	No
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	e O.		1	v
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a	[i
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis			x	
Ь	Were the organization's financial statements audited by an independent accountant?		2b		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis,			ĺ
	consolidated basis, or both:		1 [İ
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audit,		х	
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
_	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ngle Audit	3a	Ì	х
	Act and OMB Circular A-133?	urad audit	38		
þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits?	nrea audit	3ь		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	·		gan /	(2012)
			COLL	JJU (رد ۱ د ا

SCHEDULE A

Department of the Treasury

(Form 990 or 990-EZ)

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.

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number 22-3834037 THE SIKH COALITION Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: 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 Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. d ____ Type III - Non-functionally integrated a Type I b Type II c Type III - Functionally integrated e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes No 11g(i) the governing body of the supported organization? 11g(ii) (ii) A family member of a person described in (i) above? 11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s). (vi) Is the (iv) is the organization (v) Did you notify the (vil) Amount of monetary (i) Name of supported (ii) EIN (iii) Type of organization organization in col in col (I) listed in your organization in col (described on lines 1-9 support organized in the organization governing document? (i) of your support? above or IRC section (see Instructions)) Ves Nο Yes No Yes No

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2012

232021 12-04-12

Part II Support Schedule for Organizations Described in Sections 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.)

		· · · · · · · · · · · · · · · · · · ·									
Section A. Public Support											
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total				
1	Gifts, grants, contributions, and										
	membership fees received. (Do not										
	include any "unusual grants.")	557,760.	963,613.	924,662.	1488611.	1083651.	5018297.				
2	Tax revenues levied for the organ-										
	ization's benefit and either paid to										
	or expended on its behalf										
3	The value of services or facilities										
	furnished by a governmental unit to	İ									
	the organization without charge					100051	5010005				
4	Total. Add lines 1 through 3	557,760.	963,613.	924,662.	1488611.	1083651.	5018297.				
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 (f)						623,614.				
6	Public support. Subtract line 5 from line 4						4394683.				
<u>Sec</u>	ction B. Total Support										
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total				
7	Amounts from line 4	557,760.	963,613.	924,662.	1488611.	1083651.	5018297.				
8	Gross income from interest,				1 1 -						
	dividends, payments received on										
	securities loans, rents, royalties										
	and income from similar sources	28,191.	22,865.	18,486.	21,008.	22,083.	112,633.				
9	Net income from unrelated business			!							
	activities, whether or not the										
	business is regularly carried on										
10	Other income. Do not include gain										
	or loss from the sale of capital										
	assets (Explain in Part IV.)										
11	Total support. Add lines 7 through 10						5130930.				
12	Gross receipts from related activities,	, etc. (see instruction	ons)			12					
13	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth to	ax year as a sectio	n 501(c)(3)	. —				
	organization, check this box and stor			· · · - · ·			▶				
<u>Se</u>	ction C. Computation of Publ	ic Support Pe	rcentage			· · · · · · · · · · · · · · · · · · ·	05 65				
14	Public support percentage for 2012 (line 6, column (f) d	ivided by line 11, o	column (f)) '		14	85.65 %				
-	Public support percentage from 2011	·			•	15	85.26 %				
16a	33 1/3% support test - 2012. If the	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	ox and				
	stop here. The organization qualifies						ightharpoons X				
t	33 1/3% support test - 2011. If the	organization did no	ot check a box on	line 13 or 16a, and	l line 15 is 33 1/3%	6 or more, check th	nis box				
	and stop here. The organization qual										
17a	10% -facts-and-circumstances tes										
	and if the organization meets the "fac	cts-and-circumstan	ces" test, check t	his box and stop h	iere. Explain in Pa	rt IV how the organ	nization				
	meets the "facts-and-circumstances"						▶∟				
t	10% -facts-and-circumstances tes										
	more, and if the organization meets t						,				
	organization meets the "facts-and-cire						▶;;;				
18	Private foundation. If the organization	on did not check a	box on line 13, 16	<u>a, 16b, 17a, or 17</u> l	b, check this box a	and see instruction	s •				
					Sch	edule A (Form 990	or 990-EZ) 2012				

232022 12-04-12

Part III Support Schedule for Organizations Described in Section 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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3							
_	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
7	ization's benefit and either paid to						
	or expended on its behalf						
_	·				· · · · · · · · · · · · · · · · · · ·	<u> </u>	
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge				 		
	Total. Add lines 1 through 5		<u> </u>				
7	Amounts included on lines 1, 2, and						
	3 received from disqualified persons		<u> </u>				
١	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			<u></u>			
(Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
Se	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6						
10	Gross income from interest,						
	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						
	c Add lines 10a and 10b				 		
11			 			-	
••	activities not included in line 10b,						
	whether or not the business is						
40	regularly carried on		 		-		
12	Other income. Do not include gain or loss from the sale of capital			1			
	assets (Explain in Part IV.)		 		 		· · · · · · · · · · · · · · · · · · ·
	Total support. (Add lines 9, 10c, 11, and 12)	L	1	<u> </u>		504()(0)	1
14	First five years. If the Form 990 is for	r the organization'	's first, second, thi	rd, fourth, or fifth t	tax year as a secti	on 501(c)(3) organia	zation,
_	check this box and stop here						
	ction C. Computation of Publ						
15	Public support percentage for 2012 (line 8, column (f) o	divided by line 13,	column (f))		15	
<u>16</u>						16	<u> </u>
	ction D. Computation of Inve						
17	Investment income percentage for 20)12 (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	
18						18	%
19	a 33 1/3% support tests - 2012. If the	organization did	not check the box	on line 14, and lin	e 15 is more than	33 1/3%, and line	17 is not
	more than 33 1/3%, check this box a						▶∟
1	b 33 1/3% support tests - 2011. If the						and
	line 18 is not more than 33 1/3%, che	eck this box and s	stop here. The ora	anızatıon qualifies	as a publicly sup	ported organization	▶ □
20	Private foundation. If the organization						▶ 🗀
							0 or 990-EZ) 2012

232023 12-04-12

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

See separate instructions.

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

		ganizations: Complete Part III.			
Name	e of organization			Emplo	oyer identification number
		SIKH COALITION			22-3834037
Pa	rt I-A Complete if th	ne organization is exempt un	der section 501(c)	or is a section 527 or	rganization.
2	Provide a description of the Political expenditures Volunteer hours	organization's direct and indirect politi	ical campaign activities	in Part IV. . ▶\$	
Pai	rt I-B Complete if th	ne organization is exempt un	der section 501(c)	1(3).	
		ise tax incurred by the organization un		▶ \$	
	•	ise tax incurred by organization manage		. .	
3	If the organization incurred a	section 4955 tax, did it file Form 4720	o for this year?		Yes No
4a	Was a correction made?				Yes No
b	If "Yes," describe in Part IV.			. <u> </u>	
Pa	rt I-C Complete if the	ne organization is exempt un	der section 501(c), except section 501(c)(3).
1	Enter the amount directly ex	pended by the filing organization for se	ection 527 exempt fund	ction activities > \$	
2	Enter the amount of the filing	g organization's funds contributed to o	other organizations for s	section 527	
	exempt function activities			▶\$	
		ditures. Add lines 1 and 2. Enter here	and on Form 1120-POI	L,	
	line 17b			▶\$	
		Form 1120-POL for this year?			Yes No
	•	and employer identification number (E	·	•	
	• •	rganization listed, enter the amount pa were promptly and directly delivered to			
		AC). If additional space is needed, pro	• •	•	to bogrogatos fario et a
	<u> </u>		(c) EIN	(d) Amount paid from	(e) Amount of political
	(a) Name	(b) Address	(e) Eliv	filing organization's funds. If none, enter -0	contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
					
		•			

232041 01-07-13

LHA

20

1278

Schedule C (Form 990 or 990-EZ) 2012

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2012

3,601.

627.

202,698.

32,180.

27,952.

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2012 THE SIKH COALITION 22-3834037 Page 3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(a)	(b)
of the	e lobbying activity.	Yes	No	Amo	unt
1	During the year, did the filing organization attempt to influence foreign, national, state or	-		·····	
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?	1			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d					
e	Publications, or published or broadcast statements?				
f					
а	Direct contact with legislators, their staffs, government officials, or a legislative body?				
_	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
i	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	<u></u>			
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		1		
Par	t III-A Complete if the organization is exempt under section 501(c)(4), sect	ion 501(c	(5), or se	ction	
<u> </u>	501(c)(6).		,,,,,		
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization make only in house loopying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		
	t III-B Complete if the organization is exempt under section 501(c)(4), sect	ion 501(c	(5), or se	ction	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere				ne 3. is
	answered "Yes."	, •	,		,
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poli	tical			
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
	Carryover from last year		2b		-
c			2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the e.	xcess			
•	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
	expenditure next year?	po	4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
	TIV Supplemental Information				
		Port II.A /offil	inted arous	lict): Dort II	A line 2
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5;	-art II-A (aiiii	iateu group	iisty, rait ii	'A, III 6 2
and	Part II-B, line 1. Also, complete this part for any additional information.				

SCHEDULE D

(Form 990)

Department of the Treasury internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

2012 Open to Public inspection

Name of the organization

THE SIKH COALITION

Employer identification number 22 – 3834037

Par	t I Organizations Maintaining Donor Advise	od Funds or Other Similar Funds	e or Accounts Complete if the
	organization answered 'Yes' to Form 990, Part IV, lin		or Accounts. Complete if the
	organization answered Tes to Form 990, Fart 14, inf	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor actus	end funds
•	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		
٠	for charitable purposes and not for the benefit of the donor of		· ·
	impermissible private benefit?	or denot advisor, or for any other perpose	Yes No
Par		ganization answered "Yes" to Form 990.	
1	Purpose(s) of conservation easements held by the organizat		
•	Preservation of land for public use (e.g., recreation or e		storically important land area
	Protection of natural habitat	· —	tified historic structure
	Preservation of open space	i reservation or a seri	mod motorio di obtaro
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last
_	day of the tax year.	med conservation continuotion in the form	of a solios, validit sassition on the last
	adjornio tak jour		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements	•	2b
c	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	• •	
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the	e organization during the tax
-	year▶	,	
4	Number of states where property subject to conservation ea	asement is located >	
5	Does the organization have a written policy regarding the pe		
	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	, and enforcing conservation easements of	during the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and		_
8	Does each conservation easement reported on line 2(d) abor		
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expense	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	ation's financial statements that describes	the organization's accounting for
	conservation easements.		
Pa	t III Organizations Maintaining Collections of	of Art, Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue state	ment and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	hibition, education, or research in furthera	ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri		
b	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pu	iblic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
	(ii) Assets included in Form 990, Part X	•	
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financia	al gain, provide
	the following amounts required to be reported under SFAS 1	116 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
ь	Assets included in Form 990, Part X		> \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 232051 12-10-12

Schedule D (Form 990) 2012

Sche	dule D (Form 990) 2012 THE SIK	H COALITIO	N				22-38	<u>3403</u> 7	Page 2
Par	t III Organizations Maintaining C	ollections of A	rt, Historical Tr	easures, c	r Othe	r Simila	ar Asse	ts(continu	ied)
3	Using the organization's acquisition, accessi	on, and other record	ls, check any of the	following tha	t are a sig	gnificant	use of its	collection	items
	(check all that apply):								
а	Public exhibition	d	□ Loan or exc	hange progra	ıms				
ь	Scholarly research	е	Other						
c	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explai	n how they further t	he organizati	on's exen	npt purpo	ose in Parl	XIII.	
5	During the year, did the organization solicit o	r receive donations	of art, historical trea	sures, or oth	er sımılar	assets		_	
	to be sold to raise funds rather than to be ma	aintained as part of t	he organization's c	ollection?			_ ,	Yes	No_
Par	t IV Escrow and Custodial Arran reported an amount on Form 990, Par		ete if the organization	on answered '	'Yes" to f	Form 990	, Part IV, I	ine 9, or	
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for contribution	ns or other as	sets not i	included			
	on Form 990, Part X?						\square	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:						
								Amount	
С	Beginning balance					1c			
d	Additions during the year .					1d			
е	Distributions during the year		•			1e			
f	Ending balance					1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?					Yes	☐ No
<u>b</u>	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation has been	provided in l	Part XIII				
Pa	TV Endowment Funds. Complete t	f the organization an	swered "Yes" to Fo	rm 990, Part	IV, line 10	0.			
	·	(a) Current year	(b) Prior year	(c) Two year	s back	(d) Three y	ears back	(e) Four	years back_
1a	Beginning of year balance	487,575.	460,000.	460	,000.	4	60,000.		460,000.
b	Contributions .	15,000.	27,575.	,					
С	Net investment earnings, gains, and losses	44,954.							
d	Grants or scholarships	2,542.		1					
е	Other expenditures for facilities								
	and programs	21,206.							
f	Administrative expenses	21,206.							
9	End of year balance	502,575.	487,575.	. 460	,000.	4	60,000.		460,000.
2	Provide the estimated percentage of the curr	rent year end balanc	e (line 1g, column (a)) held as:		•			
а	Board designated or quasi-endowment		_%						
b	Permanent endowment ► 100.00	%							
C	Temporarily restricted endowment ▶	%							
	The percentages in lines 2a, 2b, and 2c shou	ıld equal 100%.							
3a	Are there endowment funds not in the posse	ession of the organiz	ation that are held a	and administe	red for th	ne organia	zation	_	
	by:							<u>`</u>	Yes No
	(i) unrelated organizations							3a(i)	X
	(ii) related organizations							3a(ii)	X
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Schedule R?					3b	
4	Describe in Part XIII the intended uses of the								
Par	t VI Land, Buildings, and Equipm	ent. See Form 990), Part X, line 10.						
	Description of property	(a) Cost or o basis (investr	1 ''	t or other (other)	• • •	ocumulate preciation		(d) Book	value
1a	Land								
b	Buildings								
c	Leasehold improvements								
d	Equipment								
e	Other		5	2,163.		24,6	28.		,535.
Total	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, column (B), line	10(c).)				27	,535.

Schedule D (Form 990) 2012

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

∑

Schedule D (Form 990) 2012

232053 12-10-12

(10)

•						
	lle D (Form 990) 2012 THE SIKH COALITION				<u>3834037</u>	Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statem	ents Wit	h Revenue per R	eturr		
1 T	otal revenue, gains, and other support per audited financial statements			1	1,282,	518.
2 A	mounts included on line 1 but not on Form 990, Part Vill, line 12:					
aΝ	let unrealized gains on investments	. 2a	45,729.			
b D	onated services and use of facilities	2b	123,440.	•		
c P	ecoveries of prior year grants	2c]		
d C	ther (Describe in Part XIII.)	2d]		
e A	dd lines 2a through 2d			2e		169.
3 S	ubtract line 2e from line 1			3	1,113,	349.
4 A	mounts included on Form 990, Part VIII, line 12, but not on line 1:					
a Ir	vestment expenses not included on Form 990, Part VIII, line 7b	4a	·			
b C	other (Describe in Part XIII.)	4b				
c A	dd lines 4a and 4b	-		4c		<u> </u>
	otal revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,113	<u>,349.</u>
Part	XII Reconciliation of Expenses per Audited Financial Stater	<u>nents Wi</u>	th Expenses per	Retu	rn	
1 T	otal expenses and losses per audited financial statements			1	1,389	<u>,142.</u>
2 A	mounts included on line 1 but not on Form 990, Part IX, line 25:					
a D	onated services and use of facilities	2a	123,440.			
b P	rior year adjustments	2b	<u></u>			
c C	Other losses .	2c				
d C	Other (Describe in Part XIII.)	2d	·····			
e A	dd lines 2a through 2d			2e	123	<u>,440.</u>
3 S	subtract line 2e from line 1			3_	1,265	<u>,702.</u>
4 A	mounts included on Form 990, Part IX, line 25, but not on line 1:					
a la	nvestment expenses not included on Form 990, Part VIII, line 7b	4a				
ьс	other (Describe in Part XIII.)	4b				
c A	dd lines 4a and 4b			4c		0.
5 T	otal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	·		5_	1,265	<u>,702.</u>
Part	XIII Supplemental Information					
Comple	ete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part	t III, lines 1a	and 4; Part IV, lines 1	b and	2b; Part V, line	4; Part
	2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part					
Part	V, line 4: THE ENDOWMENT CONSISTS OF T	HREE P	ERMANENTLY	RES	TRICTED	
			_			
FUNI	OS. THE FIRST FUND TOTALS \$460,000 WITH	EARNI	NGS TO BE S	PEN	T ON	
OPER	RATING SUPPORT. THE SECOND TOTALS \$25,0	OO WIT	H EARNINGS_	DES	IGNATED	FOR_
LEG	AL INTERN SCHOLARSHIPS AND THE THIRD TOTA	ALS \$1	7,575 WITH	EAR	NINGS	
DES	GNATED FOR INTERN SCHOLARSHIPS.					
Part	X, Line 2: MANAGEMENT DETERMINED THE O	RGANIZ	ATION DID N	TOI	TAKE	
ANY	UNCERTAIN TAX POSITIONS REQUIRING FINAN	CIAL S	TATEMENT RE			
				Sche	dule D (Form 9	990) 2012

232054 12-10-1

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Inspection

Name of the organization

Employer identification number 22-3834037

THE SIKH COALITION	22-3834037
Form 990, Part III, Line 1, Description of Organization M	ission:
RELATIONS WITH THEIR LOCAL COMMUNITY WHEREVER THEY MAY BE	•
Form 990, Part III, Line 4d, Other Program Services:	
EDUCATION PROGRAM - SEEKS TO CREATE AN ENVIRONMENT THROUG	H EDUCATION
WHERE SIKHS MAY FREELY PRACTICE THEIR FAITH AND WHERE PEO	PLE APPRECIATE
THE PRESENCE OF SIKHS IN THE COMMUNITY. WE PROACTIVELY F	GHT BIAS AND
DISCRIMINATION BY SPREADING AWARENESS ABOUT SIKHS.	
Expenses \$ 198,454. including grants of \$ 2,625. Reve	nue \$ 0.
Form 990, Part VI, Section A, line 2: PRABHJOT SINGH AND	HARPREET SINGH,
BOTH BOARD MEMBERS, ARE BROTHERS.	
Form 990, Part VI, Section B, line 11: A COPY OF THE FORM	990 IS EMAILED
TO ALL BOARD MEMBERS FOR THEIR REVIEW AND COMMENT PRIOR T	O ITS FILING.
Form 990, Part VI, Section B, Line 12c: EACH BOARD MEMBER	R IS REQUIRED TO
DISCLOSE POTENTIAL CONFLICTS IMMEDIATELY. POLICY COMPLIA	NCE MONITORING IS
CONDUCTED COLLECTIVELY BY THE BOARD AND EXECUTIVE DIRECTO	R THROUGH THEIR
KNOWLEDGE OF THE POLICY AND THE REQUIREMENT THAT POTENTIA	L CONFLICTS BE
DISCLOSED IMMEDIATELY FOR DISCUSSION AND REVIEW.	
Form 990, Part VI, Section B, Line 15a: THE COMPENSATION	COMMITTEE MEETS
-	TILIZES COMPETENT
AND INDUSTRY SPECIFIC SURVEYS AND REPORTS IN ORDER TO BEN	ICHMARK SALARY
	dule O (Form 990 or 990-EZ) (2012)

RAISE FOR THE EXECUTIVE DIRECTOR IN LINE WITH THE BENCHMARKS DERIVED. THE COMMITTEE PRESENTS ITS FINDINGS TO THE BOARD FOR APPROVAL. THE COMMITTEE OR BOARD CHAIR MEETS WITH THE EXECUTIVE DIRECTOR TO DISCUSS AND DOCUMENT PERFORMANCE, STRENGTHS, WEAKNESSES, GOALS AND COMPENSATION. FORM 990, Part VI, Section C, Line 19: THE SIKH COALITION'S 990 FORMS ARE MADE PUBLIC ON ITS WEBSITE. OTHER GOVERNING DOCUMENTS SUCH AS BY-LAWS AND THE CONFLICT OF INTEREST POLICY ARE OPEN FOR PUBLIC INSPECTION UPON
RECEIVED FROM OUTSIDE PARTIES. THEY DETERMINE AN ADEQUATE SALARY AND/OR RAISE FOR THE EXECUTIVE DIRECTOR IN LINE WITH THE BENCHMARKS DERIVED. THE COMMITTEE PRESENTS ITS FINDINGS TO THE BOARD FOR APPROVAL. THE COMMITTEE OR BOARD CHAIR MEETS WITH THE EXECUTIVE DIRECTOR TO DISCUSS AND DOCUMENT PERFORMANCE, STRENGTHS, WEAKNESSES, GOALS AND COMPENSATION. FORM 990, Part VI, Section C, Line 19: THE SIKH COALITION'S 990 FORMS ARE MADE PUBLIC ON ITS WEBSITE. OTHER GOVERNING DOCUMENTS SUCH AS BY-LAWS AND THE CONFLICT OF INTEREST POLICY ARE OPEN FOR PUBLIC INSPECTION UPON
OR BOARD CHAIR MEETS WITH THE EXECUTIVE DIRECTOR TO DISCUSS AND DOCUMENT PERFORMANCE, STRENGTHS, WEAKNESSES, GOALS AND COMPENSATION. Form 990, Part VI, Section C, Line 19: THE SIKH COALITION'S 990 FORMS ARE MADE PUBLIC ON ITS WEBSITE. OTHER GOVERNING DOCUMENTS SUCH AS BY-LAWS AND
COMMITTEE PRESENTS ITS FINDINGS TO THE BOARD FOR APPROVAL. THE COMMITTEE OR BOARD CHAIR MEETS WITH THE EXECUTIVE DIRECTOR TO DISCUSS AND DOCUMENT PERFORMANCE, STRENGTHS, WEAKNESSES, GOALS AND COMPENSATION. Form 990, Part VI, Section C, Line 19: THE SIKH COALITION'S 990 FORMS ARE MADE PUBLIC ON ITS WEBSITE. OTHER GOVERNING DOCUMENTS SUCH AS BY-LAWS AND THE CONFLICT OF INTEREST POLICY ARE OPEN FOR PUBLIC INSPECTION UPON
OR BOARD CHAIR MEETS WITH THE EXECUTIVE DIRECTOR TO DISCUSS AND DOCUMENT PERFORMANCE, STRENGTHS, WEAKNESSES, GOALS AND COMPENSATION. Form 990, Part VI, Section C, Line 19: THE SIKH COALITION'S 990 FORMS ARE MADE PUBLIC ON ITS WEBSITE. OTHER GOVERNING DOCUMENTS SUCH AS BY-LAWS AND THE CONFLICT OF INTEREST POLICY ARE OPEN FOR PUBLIC INSPECTION UPON
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Form 990, Part VI, Section C, Line 19: THE SIKH COALITION'S 990 FORMS ARE MADE PUBLIC ON ITS WEBSITE. OTHER GOVERNING DOCUMENTS SUCH AS BY-LAWS AND THE CONFLICT OF INTEREST POLICY ARE OPEN FOR PUBLIC INSPECTION UPON
MADE PUBLIC ON ITS WEBSITE. OTHER GOVERNING DOCUMENTS SUCH AS BY-LAWS AND THE CONFLICT OF INTEREST POLICY ARE OPEN FOR PUBLIC INSPECTION UPON
THE CONFLICT OF INTEREST POLICY ARE OPEN FOR PUBLIC INSPECTION UPON
REQUEST.

Form 4562

Department of the Treasury Internal Revenue Service (99

Depreciation and Amortization

(Including Information on Listed Property)

➤ See separate instructions.
➤ Attach to your tax return.

990 **2012**

Attachment Sequence No 179

OMB No 1545-0172

Name(s) shown on return Business or activity to which this form relates Identifying number THE SIKH COALITION Form 990 Page 10 22-3834037 Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 500,000. 1 Maximum amount (see instructions) 2 Total cost of section 179 property placed in service (see instructions) 2,000,000. 3 Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions (c) Elected cost (a) Description of property 7 Listed property. Enter the amount from line 29 7 8 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 Tentative deduction. Enter the smaller of line 5 or line 8 10 Carryover of disallowed deduction from line 13 of your 2011 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2013. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year 14 15 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property) (See instructions.) Section A 3,330. 17 17 MACRS deductions for assets placed in service in tax years beginning before 2012 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2012 Tax Year Using the General Depreciation System (c) Basis for depreciation (business/investment use only - see instructions) (b) Month and (e) Convention (f) Method (g) Depreciation deduction (a) Classification of property year placed In service 10,984. 4,722. Yrs. HY SL19a 3-year property 3,584. HY SL Yrs. b 5-year property 7-year property C 10-year property d e 15-year property f 20-year property 25-year property 25 yrs. S/L a 27.5 yrs. MM S/L h Residential rental property S/L MM 27.5 yrs. MM S/L 39 yrs. Nonresidential real property MM S/L Section C - Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs. b 12-year 40 yrs MM S/L 40-year Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. 8,549. 22 Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr. 23 For assets shown above and placed in service during the current year, enter the

Form 4562 (2012)

portion of the basis attributable to section 263A costs

LHA For Paperwork Reduction Act Notice, see separate instructions.

P	rm 4562 (2012)		SIKH										3634		Page 2
	art V Listed Propert	y (Include au	itomobiles, c	ertain oth	er vehicle	es, cert	ain com	outers	s, and prop	erty use	d for en	tertainm	ent, rec	reation, c	r
	amusement.) Note: For any v	ehicle for wh	hich vou are u	sing the	standard	milean	e rate or	dedud	ctina lease	expense	e. como	lete only	24a. 24	lb. colun	ns (a)
	through (c) of S	ection A, all	of Section B,	and Sec	tion C If a	pplicat	ble.				-,				(4
	Section A -	Depreciation	on and Other	Informa	tion (Cau	ıtion: S	See the ir	struc	tions for lii	nits for p	asseng	er autom	obiles.)		
24	a Do you have evidence to s	upport the bus	siness/investm	ent use cla	imed?	Ye	es 🗀] No	24b If "Y	es," is th	e evidei	nce writt	en?	Yes _	No
	(a)	(b)	(c)	.]	(d)		(e)		(f)	(9	9)	(1	h)		ī)
	Type of property	Date placed in	Business/ investmen	⊦ I	Cost or		is for depre siness/inve		Recovery		hod/		ciation	Elec sectio	
	(list vehicles first)	service	use percenta		her basis	, , ,	use only		period	Conv	ention	ueau	ction	CO	
25	Special depreciation allo	wance for q	ualified listed	property	placed in	n servic	e during	the ta	ax year an	d					
	used more than 50% in	a qualified b	usiness use								25				
26	Property used more than	n 50% in a q	ualified busin	ess use:			-						_		
				%											
				%											
				%											
27	Property used 50% or le	ess in a quali	fied business	use:	-										
				%						S/L·					
				%						S/L·					
				%						S/L·					
28	Add amounts in column	(h), lines 25	through 27. I	Enter here	e and on	line 21,	, page 1				28				
	Add amounts in column		_										29		
		· · · · · · · · · · · · · · · · · · ·			B - Inform	nation	on Use	of Veh	nicles						
Co	mplete this section for ve	hicles used l	by a sole pro	orietor, p	artner. or	other "	more the	an 5%	owner."	or related	Derson	١.			
	ou provided vehicles to y												ng this s	ection fo	r
the	se vehicles.	, ,													
_				1	a)	(1	b)		(c)	(6	<u></u>	(6		(f)
30	Total business/investment i	miles driven di	uring the	1	nicle	-	nicle	ν	/ehicle	Veh		1	ıcle	Veh	
-	year (do not include comm		g•	10.				-							
31	Total commuting miles of		the vear				-								
	Total other personal (no	_	-												
JZ	driven	ncommuting	y miles									-			
33	Total miles driven during	the year													
55	Add lines 30 through 32														
34	Was the vehicle available		al uso	Yes	No	Yes	No	Yes	s No	Yes	No	Yes	No	Yes	No
~	during off-duty hours?	ic for person	ai 030	103	"					1.00		1.00	- 134		
35	Was the vehicle used pi	rimarily by a	more							 					
-	than 5% owner or relate		111010												
26	is another vehicle availa	•	an al	-	 		1		-						
30	use?	ble for perso	mai	1]		1								
_	user	Section C	- Questions	for Empl	lovers W	ho Pro	vide Vet	icles	for lise h	v Their F	mploy	285			
۸	swer these questions to o			-	-					-			re not m	ore than	5%
	rners or related persons.	Jeterriine ir j	you meet an	exceptioi	i to comp	neung c	Section	J 101 V	remicies us	ied by ei	iipioyee	S WIIO U		1010 111011	0 70
	Do you maintain a writte	n nollow otot	lomont that a	robibito d	ll porcon	al usa d	of vobiolo	00 100	duding cor	mmutina	by you	<u> </u>		Yes	No
3/	·	in policy stat	tement that p	TONIDIES &	in person	ai use (oi veriicie	35, IIIC	luding co.	minuting	, by you	'		1.03	1
	employees? Do you maintain a writte	a policy stat	lamant that n	robibito r	nomonal (ice of v	chicles	avcar	at commut	ing by y	OUT				-
											Oui			1	
38		A		a by corr	Jorale Oil	icers, c	inectors,	01 17	o or more	OMITEIS				-	_
	employees? See the ins														_
39	Do you treat all use of ve	ehicles by er	mployees as	personal		o form of	tion from	VOUE	omployee	e about					
39	Do you treat all use of vo	ehicles by er an five vehic	mployees as les to your er	personal nployees	, obtain ii	nformat	tion from	your	employee	s about					l
39 40	Do you treat all use of vo Do you provide more that the use of the vehicles,	ehicles by er an five vehic and retain th	mployees as les to your er ne information	personal nployees n received	, obtain ii d?				employee	s about					-
39 40	Do you treat all use of vo Do you provide more that the use of the vehicles, Do you meet the require	ehicles by er an five vehic and retain the ements conc	mployees as ples to your ender information erning qualification.	personal nployees received ed autom	, obtain ii d? iobile der	nonstra	ation use	?							
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39 40 41	Do you treat all use of von Do you provide more that the use of the vehicles, Do you meet the require Note: If your answer to see the provided in the provided	ehicles by er an five vehic and retain th ements conc 37, 38, 39, 4	mployees as ples to your endering qualification of the control of	personal nployees n received ed autom es, " do no (b)	, obtain ind? nobile der not comple	nonstra	ation use	?	covered ve	ehicles	(e)	iton		(f)	
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Form 8868 (Rev 1-2013)			_		Page 2			
 If you are filing for an Additional (Not Automatic) 3-Month E 	xtension,	complete only Part II and check this	s box		▶ X			
Note. Only complete Part II if you have already been granted an	automatic	3 month extension on a previously f	iled Form	3868.				
 If you are filing for an Automatic 3-Month Extension, complete 								
Part II Additional (Not Automatic) 3-Month	Extensio	n of Time. Only file the origin	al (no c	pies nee	ded)			
		Enter filer's	identifyin	g number, s	ee instructions			
Type or Name of exempt organization or other filer, see instructions Employer identification number (I								
print								
File by the due date for him by the detailed and the second secon								
filing your Number, street, and room or suite no if a P.O box,	see instruc	tions	Social se	curity number	er (SSN)			
return See 50 BROAD STREET, No. 1537								
Oity, town or post office, state, and zip code For a	foreign add	dress, see instructions						
NEW YORK, NY 10004								
Enter the Deturn and for the nature that the nation of the	E1	As a selfention for a selection			01			
Enter the Return code for the return that this application is for (f	nie a separa	ite application for each return)						
Application	Return	Application			Return			
ls For	Code	Is For			Code			
Form 990 or Form 990-EZ	01	1510						
Form 990-BL	02	Form 1041-A			08			
Form 4720 (individual)	03	Form 4720			09			
Form 990-PF	04	Form 5227			10			
Form 990-T (sec 401(a) or 408(a) trust)		11						
Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069 Form 990-T (trust other than above) 06 Form 8870								
STOP! Do not complete Part II if you were not already grante	ed an autor	natic 3-month extension on a prev	riously file	d Form 886	8.			
The Organizati			•					
• The books are in the care of ▶ <u>50 BROAD STREE</u>		. 1537 - NEW YORK,	NY 1	0004				
Telephone No ► 212-655-3095		FAX No. ▶						
If the organization does not have an office or place of business.	ess in the U	nited States, check this box						
If this is for a Group Return, enter the organization's four dig	ıt Group Ex	emption Number (GEN)	If this is fo	r the whole g	group, check this			
box ► If it is for part of the group, check this box ►			f all memb	ers the exte	nsion is for			
4 I request an additional 3-month extension of time until		<u>ber 15, 2013</u>						
5 For calendar year 2012 , or other tax year beginning		, and endin	- -					
6 If the tax year entered in line 5 is for less than 12 months,	, check reas	son: Initial return	Final i	eturn				
Change in accounting period								
7 State in detail why you need the extension	10 100	TOTAL MIND TO BI	T 10 T 10	C ANDITY	A T			
THE ORGANIZATION IS REQUESTING	NG ADD	THE COMPLETE	TIE II	2 AININO	<u> </u>			
RETURN DUE TO THE AUDIT NOT	YET BE	ING COMPLETE.						
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720	0.0000.0	enter the tentative tay less any		T				
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720 nonrefundable credits. See instructions.	J, OI 0009, t	enter the tentative tax, less any	8a	s	0.			
individual described and individual								
b If this application is for Form 990-PF, 990-T, 4720, or 606 tax payments made. Include any prior year overpayment.								
previously with Form 8868.	allowed as	a credit and any amount paid	8b	s	0.			
c Balance due. Subtract line 8b from line 8a Include your	navment wi	th this form, if required, by using						
EFTPS (Electronic Federal Tax Payment System) See ins		ar and remajor required; e.g. earning	8c	s	0.			
		st be completed for Part II						
Under penalties of perjury, I declare that I have examined this form, incli	uding accom			of my knowled	ge and belief,			
it is true, correct, and complete, and that I am authorized to prepare this	form.	·		1.	n 112			
Signature MU WM Title	CPA		Date	≥ 8//	7/13			
				Form 8	3868 (Rev. 1-2013)			