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_{[Form} 990-PF

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

F	or c	calendar year 2012 o	or tax year begi	nning		, 2012	, and ending		, 20
	Nan	ne of foundation					_	A Employer identif	ication number
	NΑ	VEEN AND ANU J	AIN FOUNDAT	NOI				91-216899	
_	Nun	nber and street (or P O bo	ox number if mail is n	ot delivere	d to street address)		Room/suite	B Telephone numb	er (see instructions)
								(42	25) 260-4543
	22	7 BELLEVUE WAY	NE				158		
_	City	or town, state, and ZIP cod	de						
								C If exemption application pending, check here	ation is
	ВE	LLEVUE, WA 980	04					pending, check here	
G		heck all that apply	Initial retui	rn	Initial return	of a former r	nublic charity	7,	
_	٠.	noon an that apply	Final retur		Amended re	•	Jubilo ondiniy	D 1 Foreign organiza 2 Foreign organiza	
			Address c		Name change			85% test, check	nere and attach
н	Ch	heck type of organiza			(c)(3) exempt private f			computation •	
ï	٠Ť	Section 4947(a)(1) no			Other taxable pr		tion	E If private foundation	_ 1 1
1	F:	air market value of all			ounting method X C			1	o)(1)(A), check here . P
•		year (from Part II, col			ther (specify)	asii [] Acc	Sidai		in a 60-month termination (1)(1)(B), check here
) ▶ \$	8,919	1 —	column (d) must be on	cash hasis)		· under section 507(c	A TI(ID), Greek riere
į.		t I Analysis of Reve			<u> </u>	casii basis.j	<u> </u>		(d) Disbursements
L	ar	total of amounts in c			(a) Revenue and	(b) Net invi	estment	(c) Adjusted net	for charitable
		may not necessarily	equal the amount		expenses per books	incon	ne	income	purposes
_	_	column (a) (see instr	ructions))		95,908				(cash basis only)
	1	Contributions, gifts, grants,	etc , received (attach sci foundation is not req	hedule) .	93, 908				
	2		Sch B					· · · · · · · · · · · · · · · · · · ·	
	3	Interest on savings and				· <u></u>			ļ
	4	Dividends and intere							
	5	a Gross rents							<u> </u>
		b Net rental income or (los	ss)						
ne	6	a Net gain or (loss) from		line 10					
en	['	b Gross sales price for all assets on line 6a							
Revenue	7	Capital gain net inco	me (from Part IV,	lıne 2) .					
•	8	Net short-term capita	algaın						
	9								ļ <u>.</u>
	10	a Gross sales less returns and allowances • • • • •							
		b Less Cost of goods sold	ı . L						
		c Gross profit or (loss)	(attach schedule)						
	11	Other income (attach							
	12				95,908.				l
	13	Compensation of officer	rs, directors, trustees	etc	0				
s	14 15								
Se	15	Pension plans, emple	oyee benefits						<u> </u>
bei	16	ag Legal, fees (attach.sc	hedule)						
ŭ		b Accounting fees (att	ach schedule)						<u> </u>
Š		c Other professional fe	es (attach schedu	le)					
ā	17	(h)Grest 2.8 2013							
<u>, io</u>	18	Taxes (attach schedule)	(see Instructions)						
5	19	Depreciation (attach	schedule) and de	pletion					
Ę	20	CCOEN, U	1 1						
9	21	Travel, conferences,							
ᇹ	22	Printing and publicat				·-···			
- 1	23	Other expenses (atta							
26	24	Total operating and	•						
<u>-ē</u>	~~	Add lines 13 through		-	d				
9	25	Contributions arts			115,860				115,860
<u></u>	26	Contributions, gifts,	•		115,860			<u> </u>	115,860
5	27	Total expenses and disbur		- and 23					
Ö	117 18 19 20 21 22 23 24 25 26 27	Subtract line 26 from			-19,952.				
Ø					-15, 532.		0		 -
		b Net investment inco	, -	•					
_		c Adjusted net income	e (if negative, ente	r -0-)					L

JSA For Paperwork Reduction Act Notice, see instructions. 46633P 700Y

Form **990-PF** (2012)

	art II	Attached schedules and amounts in the	Beginning of year		d of year
	artı	Balance Sheets description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	28,871	8,919	8,919
	2	Savings and temporary cash investments			
	3	Accounts receivable			1
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable			+
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts ▶			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
₹	10 a	Investments - U S and state government obligations (attach schedule).	1	_	
	ь	Investments - corporate stock (attach schedule)			
	С	Investments - corporate bonds (attach schedule)			
i	11	Investments - land, buildings, and equipment basis	.]		
		Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans	1		
	13	Investments - other (attach schedule)		<u> </u>	
	14	Land, buildings, and			
		equipment basis Less accumulated depreciation (attach schedule)		· 	
	15	Other assets (describe)		18.4	
	16	Total assets (to be completed by all filers - see the			
_		instructions Also, see page 1, item I)	28,871	8,91	8,919
	17	Accounts payable and accrued expenses			_
	18	Grants payable			
es	19	Deferred revenue		<u></u>	
1	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule)			
J	22	Other liabilities (describe			_
Į	23	Total liabilities (add lines 17 through 22)	0		<u> </u>
		Foundations that follow SFAS 117, check here ▶			
S		and complete lines 24 through 26 and lines 30 and 31			
č	24	Unrestricted			
Balances	25	Temporarily restricted			_
	26	Permanently restricted			_
Net Assets or Fund		Foundations that do not follow SFAS 117,	,]		
ř		check here and complete lines 27 through 31. $\blacktriangleright X$			
S	27	Capital stock, trust principal, or current funds			_
se	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
As	29	Retained earnings, accumulated income, endowment, or other funds $% \left(1\right) =\left(1\right) \left(1\right) \left($	28,871.	8,919	
Ket	30	Total net assets or fund balances (see instructions)	1	8,919	9
_	31	Total liabilities and net assets/fund balances (see	1 1		İ
		instructions)		8,919	<u> </u>
		Analysis of Changes in Net Assets or Fund			т
1		net assets or fund balances at beginning of year - Par			
		of-year figure reported on pnor year's return)			
2	Ente	r amount from Part I, line 27a		2	
3	Othe				
		lines 1, 2, and 3		4	8,919
		eases not included in line 2 (itemize) ▶			
6	Total	net assets or fund balances at end of year (line 4 minus	line 5) - Part II, column (h) line 30 6	8,919

1

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rauo	

Part IV Capital G	Sains and Losses for Tax on Inv	estment Income			
(a) l	List and describe the kind(s) of property sold story brick warehouse; or common stock, 200	(e g , real estate,	(b) How acquired P - Purchase D - Donation	(с) Date acquired (mo , day, ут)	(d) Date sold (mo , day, yr)
1a					
<u>b</u>					
C					
<u>_d</u>		<u> </u>			
_e		-		<u> </u>	l
(e) Gross sales pnce	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
<u>a</u>			 -		
<u>b</u>		 			
<u>c</u> d		 			
e				<u></u>	
	assets showing gain in column (h) and owner	ed by the foundation on 12/31/69	(1)	Gorna (Col. (b) a	ara minus
(i) F M V as of 12/31/0	(i) Adjusted basis	(k) Excess of col (i) over col (j), if any		Gains (Col. (h) g (k), but not less t Losses (from co	than -0-) or
b					
е					
2 Capital gain net incoi		f gain, also enter in Part I, line 7 } f (loss), enter -0- in Part I, line 7	2		
3 Net short-term capita	 al gain or (loss) as defined in sections 1				
	n Part I, line 8, column (c) (see ins				
-	<u> </u>		3		
Part V Qualificat	tion Under Section 4940(e) for Re	duced Tax on Net Investment I	ncome		
Was the foundation liab	plies, leave this part blank le for the section 4942 tax on the distribution and the distribution 4040(a)	• •	ase perio	d?	Yes X No
	does not qualify under section 4940(e) e amount in each column for each year		any entr		
(a)			any enu	(d)	
Base penod years Calendar year (or tax year beginn	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets	1	Distribution ra (col (b) divided by	
2011	94,750.	28,426	 	(cor (b) divided b)	3 333216
2010	2,011,000	28,401		7	0 807366
2009	111,100	28,330.			3 921638
2008	32,850.	28,644			1.146837
2007	21,250.	49,223.			0.431709
2 Total of line 1, colur	nn (d)		2		9.640766
3 Average distribution	ratio for the 5-year base period - divide	e the total on line 2 by 5, or by the			
number of years the	foundation has been in existence if les	s than 5 years	3	1	5 928153
4 Enter the net value	of noncharitable-use assets for 2012 fro	om Part X, line 5	4		18,612
5 Multiply line 4 by lin	e 3		5		296,455.
6 Enter 1% of net inve	estment income (1% of Part I, line 27b)		6		
			7		296,455.
8 Enter qualifying distr	ributions from Part XII, line 4		8 hat part		115,860
Part VI instructions.	or greater trian line 7, theth the box		mat part	using a 170 tax	OOO DE (COA)

Form	990-PF (2012) NAVEEN AND ANU JAIN FOUNDATION 91-216			Page 4
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	struc	tions)
`1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0
	here and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
	Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2			0
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			0
6	Credits/Payments·			
а	2012 estimated tax payments and 2011 overpayment credited to 2012 6a			
b	Exempt foreign organizations - tax withheld at source			
c	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			0
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2013 estimated tax ▶ Refunded ▶ 11			
Par	t VII-A Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate	\vdash	Yes	No
	or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the			
	definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	i İ		
	distributed by the foundation in connection with the activities			
C	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ►\$(2) On foundation managers. ►\$	ił		ĺ
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	i l		
	foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	1		
	or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X_
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
ь	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		X_
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T	1		l
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or]
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict	1		
	with the state law remain in the governing instrument?	6	<u> </u>	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	<u> </u>	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	l		
	WA	1 1		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	8ъ	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete]
	Part XIV	9		X_
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and			[
	addresses	10		Х
		- 00	n-PF	(0040)

Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions	11		X_
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	ļ		
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		Х	
	Website address N/A		-	
14	The books are in care of ► ANU JAIN Telephone no ► 425-260	-454	3	
	The books are in care of ► ANU JAIN Located at ►227 BELLEVUE WA N #158 BELLEVUE, WA Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	· 🔲
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	_16_		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of			
	the foreign country	<u> </u>		
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			· ·
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)		[!	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			ł
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			1
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the]	
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)			1
	termination of government service, if terminating within 90 days)		İ	
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here	1.5		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			ĺ
•	were not corrected before the first day of the tax year beginning in 2012?	10		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and			
	6e. Part XIII) for tax year(s) beginning before 2012?			
	If "Yes," list the years		1	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	1]	
	all years listed, answer "No" and attach statement - see instructions)	2b		Х
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>			1
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year? Yes X No			1
b	If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of]
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2012.)	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			"
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b		(2040)

Pai	t VII-B Statements Regarding Activities	or Which Form 4	720 May Be Requ	ired (continued)		
5a	During the year did the foundation pay or incur any amo	unt to				
	(1) Carry on propaganda, or otherwise attempt to influe	ence legislation (section	1 4945(e))?	. Yes X N	o	
	(2) Influence the outcome of any specific public el	ection (see section 4	1955), or to carry o	n,		
	directly or indirectly, any voter registration drive?			Yes X N	0	
	(3) Provide a grant to an individual for travel, study, or o				0	
	(4) Provide a grant to an organization other than a					
	section 509(a)(1), (2), or (3), or section 4940(d)(2)?					[
	(5) Provide for any purpose other than religious, of					ļ ļ
	purposes, or for the prevention of cruelty to children		=			
ь	If any answer is "Yes" to 5a(1)-(5), did any of the			• — — .	·	
•	Regulations section 53 4945 or in a current notice regar				5b	ł
	· ·	-	•		.;;;; <u>;</u>	
_	Organizations relying on a current notice regarding disa					
C	If the answer is "Yes" to question 5a(4), does the				_	
	because it maintained expenditure responsibility for the			. Yes X N	°	
_	If "Yes," attach the statement required by Regulations se	, ,				
6а	Did the foundation, during the year, receive any fur	•				
_	on a personal benefit contract?					
Ь	Did the foundation, during the year, pay premiums, dire	ectly or indirectly, on a	personal benefit contra	ct?	<u>6b</u>	X
	If "Yes" to 6b, file Form 8870				ļ	
7 a	At any time during the tax year, was the foundation a p	arty to a prohibited tax	shelter transaction? .	. Yes X N	o	1 1
	If "Yes," did the foundation receive any proceeds or ha					<u> </u>
Par	t VIII Information About Officers, Director and Contractors	s, Trustees, Foun	dation Managers,	Highly Paid Empi	loyees,	
1	List all officers, directors, trustees, foundation	managers and thei	r compensation (see	instructions).		
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) Expens	se account, lowances
		devoted to position	enter -0-)	and deferred compensation		
л <u>т</u> с	H I	-	(,)	0
AIC	11 1	 		 	 	
		-				
		 		 		
		-		ļ	}	
		-			1	
2	Compensation of five highest-paid employees	(other than thes	e included on lin	e 1 - see instruct	ions) If n	one enter
_	"NONE."	(Other than thos	se meiadea on im	c i - acc manuci	101137. 11 11	one, enter
		(b) Title, and average		(d) Contributions to employee benefit	(e) Eynens	se account.
(a	Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		lowances
NON	· ·			compensation	 	
NON						0
				1		
		-				
						
		-				
		<u> </u>		ļ		
		.				
					ļ <u> </u>	
		.				
Tota	number of other employees paid over \$50,000 .	<u> </u>	 <u> </u>	<u></u> ▶	L	
					- 004	D DE (

and Contractors (continued)	, Which is	
3 Five highest-pald independent contractors for professional services (see inst		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		(
Total number of others receiving over \$50,000 for professional services		
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year Include relevant statistical organizations and other beneficianes served, conferences convened, research papers produced, etc	information such as the number of	Expenses
1 N/A		
2		
		
3		
4		
Part IX-B Summary of Program-Related Investments (see instructions)		. –
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 air	nd 2	Amount
1 NONE		
2		
All other program-related investments. See instructions		
3 NONE		
	_	
Total Add base 4 Abasemb 2		

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6

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18,895

18,895

18,895.

18,612

283

931

931

931

931

931

Part XII Qualifying Distributions (see instructions)

Deduction from distributable amount (see instructions)

qualifies for the section 4940(e) reduction of tax in those years.

Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,

Add lines 3 and 4

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	115,860
b	Program-related investments - total from Part IX-B		
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)		
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4		115,860.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4		115,860.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		

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_	irt XIII Undistributed Income (see instru	ıctions)			rage 3
1	Distributable amount for 2012 from Part XI.	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
'	line 7		·		931
2	Undistributed income, if any, as of the end of 2012				
_	Enter amount for 2011 only			1,421	
	Total for pnor years 20_10_,20_09_,20_08		4,269.		
3	Excess distributions carryover, if any, to 2012				
а	From 2007 16, 327.				
b	From 2008				
	From 2009				
d	From 2010 2,008,163				
e	From 2011 91,909	2 252 607			
	Total of lines 3a through e	2,253,607.			
4	Qualifying distributions for 2012 from Part XII, line 4: \$\int \text{115,860}\$				
_	Applied to 2011, but not more than line 2a			1,421	
b	Applied to undistributed income of prior years (Election required - see instructions)				
_	Treated as distributions out of corpus (Election				
·	required - see instructions)				
d	Applied to 2012 distributable amount				931_
е	Remaining amount distributed out of corpus	113,508			
5	Excess distributions carryover applied to 2012				
	(If an amount appears in column (d), the same amount must be shown in column (a))				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,367,115.			
b	Prior years' undistributed income Subtract				
_	line 4b from line 2b Enter the amount of prior years' undistributed		4,269		_
C	income for which a notice of deficiency has been				
	issued, or on which the section 4942(a) tax has				
	been previously assessed				
d	Subtract line 6c from line 6b Taxable amount - see instructions		4,269		
е	Undistributed income for 2011 Subtract line				
	4a from line 2a Taxable amount - see instructions				
T	Undistributed income for 2012 Subtract lines 4d and 5 from line 1. This amount must be		1		
	distributed in 2013				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions)	<u> </u>			
8	Excess distributions carryover from 2007 not				
	applied on line 5 or line 7 (see instructions)	16,327			
9	Excess distributions carryover to 2013.	2 250 700			
	Subtract lines 7 and 8 from line 6a	2,350,788.			
	Analysis of line 9 Excess from 2008				
a L	Excess from 2008		j		
ā	Excess from 2010				
	Excess from 2011 91, 909.				
	Excess from 2012 113,508				
<u> </u>			<u> </u>		Form 990-PF (2012)

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

factors

c Any submission deadlines:

art XV Supplementary Information (continued)			
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	ng the Year or Appr	oved for	Future Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	contribution	
a Paid during the year]	
Amou 2				
ATCH 3				
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	<u> </u>		1	
Total	<u> </u>		▶ 3a	115,86
b Approved for future payment				
			[
		i	1	
	1	-	1	
			1	
		1		
Total	L <u></u>	L	▶ 3b	

Part XVI-A Analysis of Income-Produ Enter gross amounts unless otherwise indicated		ated business income	Excluded by	y section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d)	Related or exempt function income (See instructions)
a	-				
b					
C					
d					· · · · · · · · · · · · · · · · · · ·
f			 		
g Fees and contracts from government agencies			<u> </u>		
Membership dues and assessments					
Interest on savings and temporary cash investments					
Dividends and interest from securities					
Net rental income or (loss) from real estate			 		
a Debt-financed property					
Net rental income or (loss) from personal property			 -		
Other investment income					
Gain or (loss) from sales of assets other than inventory		<u> </u>			
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue a			 		
b					
c					
d			-		
Subtotal Add columns (b), (d), and (e)			 		
Total. Add line 12, columns (b), (d), and (e)				13	
See worksheet in line 13 instructions to verify calcu	ulations.)				
art XVI-B Relationship of Activities	to the Ac	complishment of E	xempt Purp	oses	
Line No. Explain below how each activity	y for which	n income is reported	ın column (e) of Part XVI-A contribi	uted importantly to t
▼ accomplishment of the foundation	n's exemp	t purposes (other thar	n by providing	funds for such purposes	s). (See instructions)
					_ _
		 			
		·····			
			 		
					
					
					
		<u> </u>		 	
		-			

2) NAVEEN AND ANU JAIN FOUNDATION 91-2168990 Page Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Form 990-PF (2012) Part XVII Ir

1	ın sec	_	•		_		ganization described , relating to political		Yes	No
а	Transf	ers from the reporting	g foundation to a	noncharitable exei	mpt organiz	zation of				
		sh	•					1a(1)		Х
		her assets						1a(2)		X
b	Other	transactions:								
	(1) Sa	les of assets to a no	ncharitable exem	pt organization				1b(1)		X
	(2) Pu	rchases of assets fro	om a noncharitab	le exempt organizatı	on			1b(2)		_ X
	(3) Re	ntal of facilities, equ	ipment, or other a	ssets				1b(3)		Х
	(4) Re	imbursement arrang	ements					1b(4)		X
	(5) Lo	ans or loan guarante	es					1b(5)		_ <u>X</u>
								1b(6)		_ X
								1c		X
d							should always show			
							ndation received less			
		·	· · · · · · · · · · · · · · · · · · ·	•			ds, other assets, or s			
(a) L	ine no	(b) Amount involved	(c) Name of no	ncharitable exempt organ	ization		nsfers, transactions, and shar	ing arra	ngeme	nts
	-	N/A				N/A	<u> </u>			
										
	-				-					
	<u> </u>									•
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	+					· · · · · · · · · · · · · · · · · · ·				
	1			· · · · · · · · · · · · · · · · · · ·	1					
				· · ·						
	descri	foundation directly bed in section 501(c) s," complete the follo	of the Code (oth					Ye	es X] No
U	n res	(a) Name of organizatio		(b) Type of org	anization	1	(c) Description of relations	hip		
		(e) memo er er germeene		(-7-7				<u> </u>		
					••					
		• •			····					
				-						
Sig	n corre	r penalties of penury, I declered, and complete Declaration of	are that I have examine f preparer (other than tax	d this return, including accepayer) is based on all information	companying sch ation of which pi	nedules and statements, an reparer has any knowledge	d to the best of my knowledge May the IRS with the pr	discus	s this	return
	· · —	nature of officer or trustee		Date	· ·	Title	(see instruction	· 🗔	Yes	No
		Print/Type preparer's	name	Prepare signature	e/\	Date /	/ Check If	TIN		
Paid	1	DONALD A. COR		Man	192 NO LA	10/13	self-employed		8657	0
?re	parer		RANT THORNTO	1	y-vou	1/12	Firm's EIN ▶ 36-60			-
	Only	<u> </u>		ET, SUITE 280	0		THINSEN > 30 00			
			CATTLE, WA	LI, SOIIE 200		98101	Phone no 206-62	23-11	121	
						20401		om 99		(2012

Schedule B

(Form 990, 990-EZ,

or 990-PF) Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

Name of the organization		Employer identification number
NAVEEN AND ANU JAIN FO	DUNDATION	
		91-2168990
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private fou	ndation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundat	ion
	501(c)(3) taxable private foundation	
General Rule X For an organization fill	ng Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 o	or more (in money or
	e contributor. Complete Parts I and II	in more (in money or
Special Rules		
under sections 509(a)	i) organization filing Form 990 or 990-EZ that met the 33 1/3 % support to (1) and 170(b)(1)(A)(vi) and received from any one contributor, during the 100 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form	e year, a contribution of
during the year, total o	(), (8), or (10) organization filing Form 990 or 990-EZ that received from a contributions of more than \$1,000 for use exclusively for religious, charital es, or the prevention of cruelty to children or animals. Complete Parts I, II,	ble, scientific, literary,
during the year, contri not total to more than year for an exclusively applies to this organiz	(), (8), or (10) organization filing Form 990 or 990-EZ that received from a butions for use <i>exclusively</i> for religious, charitable, etc., purposes, but the \$1,000. If this box is checked, enter here the total contributions that were religious, charitable, etc., purpose Do not complete any of the parts unless ation because it received nonexclusively religious, charitable, etc., contributions.	ese contributions did the received during the tes the General Rule toutions of \$5,000 or
990-EZ, or 990-PF), but it must a	not covered by the General Rule and/or the Special Rules does not file So answer "No" on Part IV, line 2 of its Form 990, or check the box on line H , to certify that it does not meet the filing requirements of Schedule B (Fon	of its Form 990-EZ or on

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Schedule B (Form 990, 990-EZ, or 990-PF) (2012) Page 2 Name of organization NAVEEN AND ANU JAIN FOUNDATION Employer identification number 91-2168990 Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (c) (d) Total contributions Type of contribution No. Name, address, and ZIP + 4 _ _ 1 NAVEEN & ANU JAIN Person Payroll 95,908. 227 BELLEVUE WAY NE #158 Noncash (Complete Part II if there is BELLEVUE, WA 98004 a noncash contribution) (d) (a) (b) (c) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II if there is a noncash contribution) (c) (d) (a) (b) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution) (c) (d) (a) (b) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution) (c) (d) (a) **Total contributions** Type of contribution Name, address, and ZIP + 4 No.

	Payroli
 \$	Noncash
	(Complete Part II if there is

(c)

Total contributions

(a)

No.

Person Payroll Noncash

Person

(Complete Part II if there is a noncash contribution.)

(d)

Type of contribution

(b) Name, address, and ZIP + 4

Name of o	organization NAVEEN AND ANU JAIN FOUNDATION	Emplo	yer identification number
			91-2168990
Part II	Noncash Property (see instructions). Use duplicate copies of	f Part II if additional space	is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (see instructions)	
		 \$	<i></i>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (see instructions)	
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (see instructions)	1 11ate received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (see instructions)	Date received

\$___

Employer identification number 91-2168990

Part III	Exclusively religious,	charitable, et	c., individua	l contributions	to section	501(c)(7), (B), or (10) o	organizations
	that total more than							

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

	Use duplicate copies of Part III if addite	onal space is needed	<u>d</u>					
(a) No. from Part I	(b) Purpose of gift	(c) Use		(d) Description of how gift is held				
		- 						
		(a) Transfe	- of -164					
	(e) Transfer of gift							
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee				
(a) No.	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held				
Part I								
		(e) Transfe	er of gift					
	Transferee's name, address, al	nd 7IP + 4	Relatio	nship of transferor to transferee				
	Transfer Co o Hame, Baareso, an			The state of the s				
				-				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
		(a) Taf						
	(e) Transfer of gift							
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					
(a) No.								
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held				
		(e) Transfe	er of gift					
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee				
			~					
			~					
			~					

ATTACHMENT 1	CONTRIBUTIONS EXPENSE ACCT TO EMPLOYEE AND OTHER BENEFIT PLANS ALLOWANCES	0	0	0 0
	COMPENSATION E	O	0	0
OFFICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	DIRECTOR, PRES SEC , TREAS.	DIRECTOR, VICE PRESIDENT	GRAND TOTALS
FORM 990PF, PART VIII - LIST OF OFFICERS,	NAME AND ADDRESS	ANU JAIN 227 BELLEVUE WAY, STE 158 BELLEVUE, WA 98004	NAVEEN JAIN 227 BELLEVUE WAY, STE 158 BELLEVUE, WA 98004	

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ATTACHMENT 2

FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

ANU JAIN NAVEEN JAIN 91~2168990

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ATTACHMENT 3		AMOUNT	10,000	2, 000	250	10, 000	110	1,500
ATTA		PURFOSE OF GRANT OR CONTRIBUTION						
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND	FOUNDATION STATUS OF RECIPIENT	501 (C) (3)	501 (C) (3)	501(C)(3)	501 (C) (3)	501 (C) (3)	501 (C) (3)
		RECIPIENT NAME AND ADDRESS	PRATHAM USA 9703 RICHMOND AVENUE SUITE 102 HOUSTON, TX 77042	TREEHOUSE 5666 LINCOLN DRIVE SUITE 201 EDINA, MN 55439	YWCA 2025 M STREET NW SUITE 550 WASHINGTON, DC 20036	ASHOKA SEATTLE 853 HIAWATHA PLACE SOUTH SEATTLE, WA 98144	UNITED NATIONS FOUNDATION 1800 MASSACHUSETTS AVENUE NW SUITE 400 WASHINGTON, DC 20036	BELLEVUE LIFESPRING P O BOX 53203 BELLEVUE, WA 98015

ATTACHMENT 3 (CONT'D)

AMOUNT

PURPOSE OF GRANT OR CONTRIBUTION

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

501 (C) (3)

INDIA ASSOCIATION OF WESTERN WASHINGTON

RECIPIENT NAME AND ADDRESS

501 (C) (3)

UNITED WAY OF KING COUNTY

720 SECOND AVENUE SEATTLE, WA 98104

BELLEVUE, WA 98009

P O BOX 404

501 (C) (3)

OVERLAKE MEDICAL CENTER FOUNDATION

1035 116TH AVENUE NE

BELLEVUE, WA 98004

501 (C) (3)

501 (C) (3)

SANATAN DHARMA TEMPLE AND CULTURAL CENTER

16120 NE EIGHTH STREET

KINDERING CENTER

BELLEVUE, WA 98008

14320 NE 21ST STREET #16

BELLEVUE, WA 98007

THE KIRAN ANJALI PROJECT

P 0 BOX 757

MERCER ISLAND, WA 98040

501 (C) (3)

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

500

500

PAID
CONTRIBUTIONS
TOTAL

(Rev January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

Form 8868 (Rev 1-2013)

If you ar	e filing for an Automatic 3-Month Extension, or e filing for an Additional (Not Automatic) 3-Months explete Part II unless you have already been gra	onth Exten	sion, complete only Pa	art II (on page 2 of this form)				
a corporati 8868 to re Return for instructions	filing (e-file). You can electronically file Form on required to file Form 990-T), or an addition equest an extension of time to file any of the Transfers Associated With Certain Personals) For more details on the electronic filing of the utomatic 3-Month Extension of Time. Or	nal (not au forms liste al Benefit his form, vis	tomatic) 3-month exter ed in Part I or Part II w Contracts, which musi sit www.irs.gov/efile.an	nsion of time. You can electronicallith the exception of Form 8870, It be sent to the IRS in paper for the click on e-file for Chanties & Nonj	y file Form nformation ormat (see			
								
	on required to file Form 990-T and requesting				. $ egin{array}{c} \end{array}$			
Part I only					▶ 📖			
	orporations (including 1120-C filers), partnersh	nips, REMIC	Cs, and trusts must use I					
<u>to file inco</u>	me tax returns			Enter filer's identifying number, se				
Type or	Name of exempt organization or other filer, see in	structions		Employer identification number (EIN) or				
Type or								
print	NAVEEN AND ANU JAIN FOUNDATION			91-2168990				
File by the due date for	Number, street, and room or suite no. If a P O. bo	box, see instructions		Social security number (SSN)				
filing your	227 BELLEVUE WAY NE #158							
return See	City, town or post office, state, and ZIP code For a foreign address, see instructions							
Instructions	BELLEVUE, WA 98004							
Enter the F	Return code for the return that this application	is for (file a	a separate application fo	or each return)	0 4			
Application	·	Return	Application	pplication Retu				
Is For	•	Code	Is For		Code			
				ii-u\				
	or Form 990-EZ	01		m 990-T (corporation) 07				
Form 990-I		02	Form 1041-A					
Form 4720	- (ındıvıdual)	03	Form 4720					
Form 990-F	<u> </u>	04	Form 5227	10				
Form 990-T (sec. 401(a) or 408(a) trust)		05	Form 6069	orm 6069				
Form 990-T (trust other than above)		06	Form 8870		12			
Telepho If the org If this is for the who a list with the until	ks are in the care of ► ANU JAIN ne No. ► 425 260-4543 ganization does not have an office or place of for a Group Return, enter the organization's foole group, check this box ► I he names and EINs of all members the extens lest an automatic 3-month (6 months for a corest and extens the extens and EINs of all members the extens lest an automatic 3-month (6 months for a corest and extens the extens and EINs of all members the extens lest an automatic 3-month (6 months for a corest and extens the exten	business ir ur digit Gro f it is for pa non is for. poration re	oup Exemption Number (art of the group, check to group)	(GEN) If the this box and atterproperties and atterproperties.	ach 			
	e organization's return for							
► X calendar year 2012 or								
▶ [tax year beginning, 20, and ending, 20							
2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period								
	Ba If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any							
nonrefundable credits. See instructions. 3a \$								
		for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and						
estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$								
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS								
(Electronic Federal Tax Payment System). See instructions 3c \$								
Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions								

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Re	v 1-2013)				Page 2			
 If you are 	filing for an Additional (Not Automatic) 3-M	onth Exten	sion, complete only Part I	I and check this box	▶ X			
	complete Part II if you have already been gra		•					
■ If you are	filing for an Automatic 3-Month Extension,	complete c	only Part I (on page 1).					
Part II	Additional (Not Automatic) 3-Month E	xtension o	of Time. Only file the orig	inal (no copies needed).				
	Enter filer's identifying number, see instruction							
	Name of exempt organization or other filer, see in		Employer identification number (EIN) or					
Type or	pe or							
print	NAVEEN AND ANU JAIN FOUNDATION			91-2168990				
•	Number, street, and room or suite no If a P.O box, see instructions		Social security number (SSN)					
File by the due date for	227 BELLEVUE WAY NE #158							
filing your	City, town or post office, state, and ZIP code For a foreign address, see instructions							
retum See instructions	BELLEVUE, WA 98004							
Enter the Re	eturn code for the return that this application	is for (file a	a separate application for ea	ach return)	. 0 4			
Application		Return	Application		Return			
ls For		Code	Is For		Code			
Form 990 o	r Form 990-EZ	01	And the second					
Form 990-B		02	Form 1041-A	24 - 12 - 12 - 12 - 12 - 12 - 12 - 12 -	08			
Form 4720		03	Form 4720					
Form 990-PI		04	Form 5227					
	(sec. 401(a) or 408(a) trust)	05	Form 6069					
	(trust other than above)	06	Form 8870		11			
	ot complete Part II if you were not already			sion on a previously filed Forn				
	s are in the care of ANU JAIN	3						
	e No ▶ 425 - 260-4543		FAX No ▶	 ·				
	anization does not have an office or place of			nis box				
	or a Group Return, enter the organizati <u>on'</u> s fo				is is			
	e group, check this box							
			are or the group, oneone the	20x and and	2017 4			
	with the names and EINs of all members the extension is for 11/15, 20 13							
	lendar year 2012, or other tax year beginn							
	ax year entered in line 5 is for less than 12 m							
		ionina, onec	ok reason.	turn r mai return				
	nange in accounting period detail why you need the extension ADDITIONAL TIME IS NEEDED IN ORDER TO FILE AN							
	ATE TAX RETURN	1011112	1111 12 1111111111111111111111111111111					
110001	THE THE TOTAL		· · · · · · · · · · · · · · · · · · ·					
	· · · · · · · · · · · · · · · · · · ·							
8a If this	application is for Form 990-BL, 990-PF, 99	90-T 4720	or 6069 enter the tent	tative tax less any				
	undable credits. See instructions	00 1, 1120	, 0. 0000, 0.1101 1.10 1011	8a \$				
	application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and							
	ted tax payments made Include any prior year overpayment allowed as a credit and any							
	t paid previously with Form 8868							
	e Due. Subtract line 8b from line 8a Include	ent with this form if requir						
	8c \$							
(Liecti	onic Federal Tax Payment System). See instru		ct he completed for D					
	Signature and Verification of perjury, I declare that I have examined this form, t, and complete, and that I am authonzed to prepare this form.	including acc	-		ge and belief,			
_			.					
Signature >			Title ►	Date Date	/D 4 00401			
				6086 mo-1	(Rev 1-2013)			