Fam 990

## **Return of Private Foundation**

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

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB\*No\*1545-0052

December 31st January 1st 2017, and ending For calendar year 2017 or tax year beginning A Employer identification number Name of foundation 20-1754985 Lakan Incorporated Number and street (or P O box number if mail is not delivered to street address) Room/surte B Telephone number (see instructions) 240-418-2649 11752 Lake Potomac Drive City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ▶ Potomac, MD 20854 G Check all that apply: ☐ Initial return Initial return of a former public charity D 1. Foreign organizations, check here ▶□ ☐ Final return ☐ Amended return 2. Foreign organizations meeting the 85% test, ☐ Address change □ Name change check here and attach computation If private foundation status was terminated under H Check type of organization: 

☑ Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Fair market value of all assets at J Accounting method: ☑ Cash ☐ Accrual F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here end of year (from Part II, col. (c), ▶□ Other (specify) line 16) ▶ \$ 733.980 (Part I, column (d) must be on cash basis) (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (a) Revenue and (c) Adjusted net (b) Net investment for charitable amounts in columns (b), (c), and (d) may not necessarily equal expenses per income purposes books the amounts in column (a) (see instructions)) (cash basis only) \$203,597 Contributions, gifts, grants, etc., received (attach schedule) Crack Control 2 Check ► ☐ If the foundation is **not** required to attach Sch B 3 Interest on savings and temporary cash investments \$134 4 Dividends and interest from securities 5a Gross rents . . . . Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) \$58,786 1147 8 Net short-term capital gain . 9 Income modifications 10a Gross sales less returns and allowances b Less: Cost of goods sold Gross profit or (loss) (attach schedule) C 11 Other income (attach schedule) \$203.597 \$58,928 12 Total. Add lines 1 through 11 . 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages . 15 Pension plans, employee benefits 16a Legal fees (attach schedule) b Accounting fees (attach schedule) Other professionati Ç 17 Interest Taxes (attachischedule) (see instructions) 18 Depreciation (attach sofiedule) and depleto 19 20 Occupancy Travel, conferences, ar 21 Printing and publication 22 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. Add lines 13 through 23. \$18,350 25 Contributions, gifts, grants paid 26 \$18,350 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: Excess of revenue over expenses and disbursements \$105,247 Net investment income (if negative, enter -0-) 600000 \$58.928

For Paperwork Reduction Act Notice, see instructions.

Adjusted net income (if negative, enter -0-)

Cat No 11289X

Form **990-PF** (2017)



		Attached schedules and amounts in the description column	Beginning of year		Ena c	or year
Pa	art II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions)	(a) Book Value	(b) Book Val	ne e	(c) Fair Market Value
	1	Cash-non-interest-bearing	\$46,594	\$7	2,624	\$72,624
	2	Savings and temporary cash investments				
	3					
	•	Accounts receivable ►  Less: allowance for doubtful accounts ►	Intiliars a manimum of our seasons of		1000	
	4					77.5
	•	Pledges receivable ►  Less: allowance for doubtful accounts ►	The same of the sa		1000000	
	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) ▶				200
	·	Less. allowance for doubtful accounts ▶			200	
Ø	8	Inventories for sale or use				T
şe	9	Prepaid expenses and deferred charges		<del></del>		
Assets	10a	Investments—U.S. and state government obligations (attach schedule)	-			
•	b	Investments—corporate stock (attach schedule)	\$426,264	\$66	1,356	\$661,356
	c	Investments—corporate bonds (attach schedule)			<u> </u>	
	11	Investments—land, buildings, and equipment basis ▶	724	7.00 E46.00	ATTIME.	
		Less: accumulated depreciation (attach schedule)			2 C V S Z T.	
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment basis ▶			ANN	Tiplica migratur, propini migrati.
		Less accumulated depreciation (attach schedule) ▶				
	15	Other assets (describe ► )				
	16	Total assets (to be completed by all filers—see the				
		ınstructions. Also, see page 1, item l)		\$73	3,980	\$733,980
7	17	Accounts payable and accrued expenses				
	18	Grants payable		•		
Liabilities	19	Deferred revenue				
ij	20	Loans from officers, directors, trustees, and other disqualified persons				
ap	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe ▶)				
	23	Total liabilities (add lines 17 through 22)	\$0		\$0	
		Foundations that follow SFAS 117, check here . >				
ĕ		and complete lines 24 through 26, and lines 30 and 31.				
Ĕ	24	Unrestricted	\$472,858	\$73	3,980	The second
jal	25	Temporarily restricted				40.0
9 6	26	Permanently restricted				
und Balances		Foundations that do not follow SFAS 117, check here ▶ □				46.00
Ē		and complete lines 27 through 31.				
ō	27	Capital stock, trust principal, or current funds .				
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
SS	29	Retained earnings, accumulated income, endowment, or other funds				7.0
t A	30	Total net assets or fund balances (see instructions)	\$472,858	\$73	3,980	
Ne	31	Total liabilities and net assets/fund balances (see				
		instructions)	\$472,858	\$73	3,980	der teen With La
	rt III	Analysis of Changes in Net Assets or Fund Balances				
1		I net assets or fund balances at beginning of year-Part II, colu				<b></b>
		of-year figure reported on prior year's return)			1	\$472,858
2		r amount from Part I, line 27a			2	\$185,247
3			***************************************		3	\$75,875
4					4	\$733,980
5	Deci	reases not included in line 2 (itemize)   I net assets or fund balances at end of year (line 4 minus line 5)—	Dort II. column /h\ !:	20	5	\$0 \$733,980
0	rota	i nel assels or iunu baiances al enu or year (iine 4 minus line 5)—	rantin, columni (D), ili	, <del>,</del> , , ,	6	U08,661 P

1a		nd(s) of property sold (for example, real eduse, or common stock, 200 shs MLC Co.)		P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo , day, yr )
	See attached "Capital Gair	าร"				
b				<u> </u>		
С	<del></del>			<del> </del>		
<u>d</u>		<del></del>		<del> </del>		
e	<del></del>			<u> </u>		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis		or (loss) ) minus (g))
<u>a</u>					- <del></del>	<del></del>
<u> </u>						<del></del>
c d			<del></del>			
e e						
	Complete only for assets sho	owing gain in column (h) and owned	by the foundation	on 12/31/69	// Gains (Col.	(h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any	col (k), but not	less than -0-) or om col (h))
а						
b						
<u> </u>						
d						
e			<del> </del>			
2	Capital gain net income o		also enter in Pa enter -0- in Par		2	
3	If gain, also enter in Part	n or (loss) as defined in sections I, line 8, column (c). See instructions	ctions. If (loss)	, enter -0- ın (	3	
Part		ler Section 4940(e) for Redu				
Nas ti		e this part blank. section 4942 tax on the distribut qualify under section 4940(e). Do			ase period?	☐ Yes ☐ N
1	Enter the appropriate amo					
		Julii ili each Column Ior each vea	ar, see the instru		king any entries.	
Cale	(a) Base period years endar year (or tax year beginning in	(b)			Distr	(d) ibution ratio
Cale	Base period years indar year (or tax year beginning in	(b)		c) (c)	Distr	
Cale	Base period years	(b)		c) (c)	Distr	ibution ratio
Cale	Base period years endar year (or tax year beginning in 2016	(b)		c) (c)	Distr	ibution ratio
Cale	Base period years indar year (or tax year beginning in 2016 2015	(b)		c) (c)	Distr	ibution ratio
Cale	Base period years andar year (or tax year beginning in 2016 2015 2014	(b)		c) (c)	Distr	ibution ratio
2	Base period years endar year (or tax year beginning in 2016 2015 2014 2013 2012	(b) Adjusted qualifying distributions	Net value of	uctions before ma (c) finoncharitable-use ass	sets (col (b) d	ibution ratio
	Base period years endar year (or tax year beginning in 2016 2015 2014 2013 2012  Total of line 1, column (d) Average distribution ratio	(b) Adjusted qualifying distributions	Net value of	(c) (noncharitable-use ass	sets (col (b) d	ibution ratio
2	Base period years endar year (or tax year beginning in 2016 2015 2014 2013 2012  Total of line 1, column (d) Average distribution ratio the number of years the formula in the second control of the s	Adjusted qualifying distributions  Adjusted qualifying distributions	Net value of	(c) (noncharitable-use ass	eets (col (b) d	ibution ratio
2 3	Base period years endar year (or tax year beginning in 2016 2015 2014 2013 2012  Total of line 1, column (d) Average distribution ratio the number of years the formula in the second control of the s	Adjusted qualifying distributions  Adjusted qualifying distributions  for the 5-year base period—divolundation has been in existence	Net value of	(c) (noncharitable-use ass	. 2 by . 3	ibution ratio
2 3	Base period years andar year (or tax year beginning in 2016 2015 2014 2013 2012  Total of line 1, column (d) Average distribution ratio the number of years the form the first the net value of non Multiply line 4 by line 3	Adjusted qualifying distributions  Adjusted qualifying distributions  for the 5-year base period—divolundation has been in existence	Net value of	(c) (noncharitable-use ass	cets (col (b) d	ibution ratio
2 3 4 5	Base period years andar year (or tax year beginning in 2016 2015 2014 2013 2012  Total of line 1, column (d) Average distribution ratio the number of years the form the first the net value of non Multiply line 4 by line 3	(b) Adjusted qualifying distributions  Adjusted qualifying distributions  for the 5-year base period—divolundation has been in existence charitable-use assets for 2017 fr	Net value of	(c) (noncharitable-use ass	. 2 by . 3 . 4 . 5	ibution ratio

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	<u>−se</u>	Instruction	ns)		
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)	21 SH	\$1,179			
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1% of Part I, line 27b	NA DAR	Serie Elegaterole.	### TE		
С						
·	Part I, line 12, col. (b).	872 888		**************************************		
2	, , ,	2	61.470			
3	Add lines 1 and 2		\$1,179			
4		<u> </u>	\$1,179			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	<b>)</b> (20% 50%)	91,179 24:54:54:55	ಹಿಎರ್. ೩ <b>೩</b>		
6	Credits/Payments: 2017 estimated tax payments and 2016 overpayment credited to 2017   6a	劉臺				
a						
b	Exempt foreign organizations—tax withheld at source 6b  Tax paid with application for extension of time to file (Form 8868)  6c					
ď	Backup withholding erroneously withheld					
7	Total credits and payments Add lines 6a through 6d	7   1835	.10.22.07	ini hairin da		
8	Enter any <b>penalty</b> 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		\$1,179			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 1					
11	Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ Refunded ▶ 1	1				
Part	VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or	did it	Yes Yes	No		
	participate or intervene in any political campaign?		1a	<b>~</b>		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? Se instructions for the definition	e the	)   1b   '	•		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any ma published or distributed by the foundation in connection with the activities.	terials				
C	Did the foundation file Form 1120-POL for this year?		1c	TORONO, 4		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation. ▶ \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax important on foundation managers. ▶ \$	osed				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		2	<b>✓</b>		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articlincorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	cles of				
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	• •	3 4a	<u>~</u>		
ња b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	•	4b	<del>-</del>		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	<u>,</u>		
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.					
	By language in the governing instrument, or					
	• By state legislation that effectively amends the governing instrument so that no mandatory direction	s that				
	conflict with the state law remain in the governing instrument?		6	<b>√</b>		
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 P	art XV	7 🗸			
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Go (or designate) of each state as required by General Instruction G? If "No," attach explanation	eneral 	8b 🗸			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If the complete Part XIV.	)(3) or 'Yes,"	9			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing	a their		<del>-</del>		
	names and addresses		10 1			

Part	VIFA Statements Regarding Activities (continued)	- Teach June 1
	And the state of t	Yes No
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	ne   11   ·
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	<del></del>
	person had advisory privileges? If "Yes," attach statement. See instructions	12
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application	1? 13
	Website address ► N/A	
14	The books are in care of ► Manpreet Singh  Telephone no ►	240-418-2649 20854
15	Located at ► 11752 Lake Potomac Drive, Potomac MD ZIP+4 ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here	20034
13	and enter the amount of tax-exempt interest received or accrued during the year   15	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authori	ty Yes No
	over a bank, securities, or other financial account in a foreign country?	16
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name	of Section 1
D	the foreign country	<b>为上海产业人员</b> [485]
Part	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
1a	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 🛂	io de la companya de
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	
	disqualified person?	1/19/2/19/2019/2019/2019/2019/2019
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1 (2) (1 (2) (2) (2) (2) (2) (2) (2) (2) (2) (2)
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? .   Yes   Yes	lo   e   e
	(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)?	
	(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.)	11.5 (4) (4) (4) (4) (4)
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulation	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b
c	Organizations relying on a current notice regarding disaster assistance, check here	
•	were not corrected before the first day of the tax year beginning in 2017?	1c 🗸
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a priva-	te Carlo
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and	
	6e, Part XIII) for tax year(s) beginning before 2017?	io la
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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)	
	all years listed, answer "No" and attach statement—see instructions.)	2b 🗸
C	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.	
20	➤ 20 , 20 , 20 , 20	
Ja	at any time during the year?	lo la
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation	2. 孫 衛衛科競技
	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 State of
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	
<b>.</b> .	foundation had excess business holdings in 2017.)	3b 🗸
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize it	
J	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017	

Part	I VII-B Stateme	nts Regarding Activitie:	s for V	Vhich Form	4720	May Be F	tequire	ed (conti	nued)			
5a	During the year, did t	he foundation pay or incur	any am	nount to						CAR OF T	Yes	No
	(1) Carry on propaga	nda, or otherwise attempt t	o influe	ence legislati	on (sec	tion 4945(e	))? .	☐ Yes	✓ No		變換	
		come of any specific publi		_				_				
	directly or indirec	tly, any voter registration dr	ive?					☐ Yes	✓ No			
	(3) Provide a grant to	an individual for travel, stu	idv. or	other similar	purpos	es?		Yes	✓ No		發為	
		an organization other thai									7	
		(A)? See instructions .			-			☐Yes	<b>∠</b> No			
	(5) Provide for any p	urpose other than religious	. charıt	able, scientif	ic, liter	ary, or edu	cational	_		1000		
		he prevention of cruelty to						□Yes	₩ No			
<b>b</b> If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions describe					nbed in							
		3.4945 or in a current notice								5b		
	Organizations relying	on a current notice regardi	ng disa	aster assistan	ice, che	ck here			▶□	1	£ 30	
c		" to question 5a(4), does t										
	because it maintaine	d expenditure responsibility	for the	grant? .				☐ Yes	☐ No			
	If "Yes," attach the st	atement required by Regula	ations s	section 53.49	45-5(d	).				200		
6a		uring the year, receive any					emiums			100		
	on a personal benefit	contract?						☐ Yes	✓ No			
b	Did the foundation, d	uring the year, pay premiun	ns, dire	ectly or indire	ctly, on	a personal	benefit	contract	?	6b		<b>V</b>
	If "Yes" to 6b, file For	m 8870										
		tax year, was the foundation							<b>∠</b> No			
		dation receive any proceed								7b	<u> </u>	
Part	<del></del>	n About Officers, Direc	tors, 1	Trustees, F	ounda	tion Mana	agers,	Highly F	Paid E	mploy	ees,	
	and Contra	<del></del>										
	List all officers, dire	ctors, trustees, and found								<b>.</b>		
	(a) Name ar	d address	hou	e, and average irs per week	i (If i	mpensation not paid,	emplo	Contribution: yee benefit	plans	(e) Expe	nse acc	
Latebb	in Oin ab		Presid	ed to position	er	ter -0-)	and defe	erred compe	nsation			
	ir Singh Lake Potomac Drive, Po	tomas MD 20864	riesiu	iem, i		0			0			0
	aljeet Singh	Jonac, WD 20034	Secret	ary 1	<del> </del>		ļ					
	Lake Potomac Drive, Po	ntomac MD 20854	000.00	.u. y, 1	İ	0			0			0
	eet Singh	Nomac, IND 20034	Directo	or. 1			<del> </del>				<del>.</del>	
	Lake Potomac Drive, Po	ntomac MD 20854		, -		0			0			0
	eet Singh		Directo	or, 1							<del>-,</del>	
	Lake Potomac Drive, Po	otomac, MD 20854		ŕ		0			0			0
2		ve highest-paid employee	s (oth	er than tho	se incl	uded on li	ne 1-9	see instr	uction	s). If no	one, e	nter
	"NONE."	,,								•	·	
				(b) Title, and a				(d) Contribu				
(	(a) Name and address of eac	h employee paid more than \$50,00	0	hours per v	veek -	(c) Comper	nsation	employee plans and o		(e) Exper	nse acc allowanc	
				devoted to p	osition			compens				_
NONE					-					-		
<b>-</b>		***************************************		1								
		<del></del>										
<del>-</del>												
Takal :	/			<u> </u>								
i otal r	number of other emplo	yees paid over \$50,000 .	• •	<u> </u>	• •	· · · ·	<u> </u>	<u> </u>	. 🟲			

3	and Contractors (continued)	C 11
	Five highest-paid independent contractors for professional services. See instructions. If none, enter "NON	
1101	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON	<u></u>	
		ļ
		<del> </del>
		<u> </u>
Cota	number of others receiving over \$50,000 for professional services	<del></del>
		<u> </u>
Par	IX-A Summary of Direct Charitable Activities	
Lıs	the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of	
orç	anizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	NONE	
2		
3		
4		
		ſ
_		<u> </u>
	IX-B Summary of Program-Related Investments (see instructions)	A
	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	NONE	
_		<del>  </del>
2		1
	other program-related investments. See instructions	<del> </del>
All	P2	
_		1
All 3		}
_		

Part	see instructions.)	ign loundat	10115,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	\$439,537
b	Average of monthly cash balances	1b	\$83,060
С	Fair market value of all other assets (see instructions)	1c	
d	<b>Total</b> (add lines 1a, b, and c)	1d	\$522,597
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	\$522,597
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	ınstructions)	4	\$7,839
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	\$514,758
6	Minimum investment return. Enter 5% of line 5	6	\$25,738
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations, check here ► ☐ and do not complete this part.)	foundations	
1	Minimum investment return from Dort V. Inc. 6	11	\$25,738
2a	Tax on investment income for 2017 from Part VI, line 5	1988	
b	Income tax for 2017. (This does not include the tax from Part VI.) 2b \$0	J 188	
c	Add lines 2a and 2b	2c	\$1,179
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	\$24,559
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	\$24,559
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	<u> </u>	
	line 1	7	\$24,559
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	3.31	
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	\$18,350
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	i i	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
ь	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	\$18,350
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	\$18,350
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whether th	e foundation

Part	Undistributed income (see instructi	0118)			
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	<b>(d)</b> 2017
	line 7	<b>建筑的新疆。</b>	<b>元型的工程</b>		\$24,559
2	Undistributed income, if any, as of the end of 2017	P. Balkonning Monoch Adolesce		The depth of the state of the s	
а	Enter amount for 2016 only			\$11,584	
ь	Total for prior years: 20 ,20 ,20		· ·		
3	Excess distributions carryover, if any, to 2017:	Commence of the Commence of th	onness the adiamoral base surface and don't	Minimus and oil airlid, is a	at remain suballings formulain
а	From 2012				
b	From 2013				
c <sup>°</sup>	From 2014				
ď	From 2015	1000			
e	From 2016 \$4,710				
f	Total of lines 3a through e	\$13,795			
4	Qualifying distributions for 2017 from Part XII,		T. AND TOTAL STATE OF THE STATE AND ADDRESS.		
-	line 4. ▶ \$				
а	Applied to 2016, but not more than line 2a	3.4			
ь	Applied to undistributed income of prior years	7 - 25 - 71 - 72 - 73 - 75 - 75	N-T-2142445400-SERCAN (Sector, destruction		
_	(Election required—see instructions)		,		
С	Treated as distributions out of corpus (Election	Principle of the Service of the Serv			
•	required—see instructions)				
d	Applied to 2017 distributable amount			ia in the second	\$18,350
e	Remaining amount distributed out of corpus	ATTACAMENTAL STATE PARAMETERS			organismos de la compa
5	Excess distributions carryover applied to 2017				TREE-WASHINGTONING STATE
•	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)				Ligardou politico productivo de la composición del composición de la composición de la composición de la composición del composición de la composición del
6	Enler the net total of each column as				Alegania (mapa)
٠,	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e. Subtract line 5	\$13,795			
ь	Prior years' undistributed income. Subtract	COLOR SOCIAL	AND THE PARTY OF T		
	line 4b from line 2b		٠		
_	Enter the amount of prior years' undistributed				racional and
U	income for which a notice of deficiency has		r		
	been issued, or on which the section 4942(a)	7.7	ě		
	tax has been previously assessed		٠,		
d	Subtract line 6c from line 6b Taxable		, ,		
_	amount—see instructions				
6	Undistributed income for 2016. Subtract line			2 to account to Chance, and 18 Jonetic and Chicago.	
Ū	4a from line 2a. Taxable amount—see			·	
	instructions				
f	Undistributed income for 2017. Subtract lines	10700000000000		1004 (12232)	,
•	4d and 5 from line 1. This amount must be				12.69
	distributed in 2018				0 0
7	Amounts treated as distributions out of corpus	A. Dillicon with Achieva describer and have		C. P. S. S. P. P. S. C. P.	TRANSPORT STATE OF THE STATE OF
-	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)	,			
8	Excess distributions carryover from 2012 not		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	N. 100 C.	
	applied on line 5 or line 7 (see instructions) .	. '			
9	Excess distributions carryover to 2018.				
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:			104011433111231	
а	Excess from 2013				
b	Excess from 2014 \$1,744				
c	Excess from 2015 \$7,341				
q	Excess from 2016				
e	Excess from 2017				
			Andread An		The same of the sa

orm 9	90-PF (2017)					Page <b>10</b>
Part	XIV Private Operating Founda	tions (see instr	uctions and Par	t VII-A, question 9	))	
1a	If the foundation has received a ruling				i	
	foundation, and the ruling is effective fo	r 2017, enter the c	date of the ruling			
b	Check box to indicate whether the fou	ndation is a privat	e operating founda	ation described in se	ection  4942(j)(	(3) or 🛮 4942(j)(5
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) rotai
	each year listed					
b	85% of line 2a		<u> </u>	<del>-</del>		
c	Qualifying distributions from Part XII,			<del> </del>	/	
-	line 4 for each year listed					
đ	Amounts included in line 2c not used directly			<del> </del> -	/	· · · · · · · · · · · · · · · · · · ·
•	for active conduct of exempt activities .	J			<b>/</b>	
_	•		+	<del>                                     </del>		
е	Qualifying distributions made directly				,	
	for active conduct of exempt activities.					
_	Subtract line 2d from line 2c			<del>                                     </del>		
3	Complete 3a, b, or c for the					
	alternative test relied upon:					
а	"Assets" alternative test—enter					
	(1) Value of all assets			1		
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in					 
	Part X, line 6 for each year listed					
С	"Support" alternative test-enter:		/			
	(1) Total support other than gross					i I
	investment income (interest,					
	dividends, rents, payments on	/	1			
	securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public	/	<del></del>		-	
	and 5 or more exempt				"	
	organizations as provided in section 4942(j)(3)(B)(iii)					
	section 4942(j)(3)(B)(iii) (3) Largest amount of support from	/		<del> </del>		
	an exempt organization	/				
			-			
Part	(4) Gross investment income .  XV Supplementary Information	n /Complete ti	his part only if	the foundation h	ad \$5,000 or me	aro in accete at
- GII U	any time during the year-	•	•	uie iouiidation n	αα φυ,υυυ οι πις	ne ili assets at
1	Information Regarding Foundation			<del></del>		
' a	List any managers of the foundation	-	uted more than 2	% of the total contr	ibutions received	by the foundation
а	before the close of any tax year (but o					by the realisation
200 S	chedule C	iny ii tiley have c	ontributed more t	nan 40,000). (000 3	0011011 001 (0)(2).)	
	List any managers of the foundation	who own 100% o	r mare of the ste	ok of a corporation	/or on oqually las	rae portion of the
b	ownership of a partnership or other er					ge portion of the
IONE		idity) Of WillOff the	Touridation rido d	1070 or greater inte	5,001.	
	··	0	- O-b-laushin	-1- D	<del></del>	<del></del>
2	Information Regarding Contribution					
	Check here ▶ ☑ If the foundation					
	unsolicited requests for funds. If the fo		gitts, grants, etc.	, to individuals or oi	rganizations under	other conditions,
	complete items 2a, b, c, and d. See in					
а	The name, address, and telephone nu	mber or email ad	dress of the perso	on to whom applica	tions should be ad	dressed.
		<del> </del>				
b	The form in which applications should	be submitted an	d information and	materials they sho	uld include.	
		- <del></del>				
С	Any submission deadlines:					
ام	Any restrictions or limitations	ards such as b	v goographical -	roos charitable fin	lde kinde of inch	ututions or other
a	Any restrictions or limitations on aw factors:	arus, such as D	y geographical a	reas, chantable fie	aus, Kirius Or inst	nudons, or other
	1401013.					

Total

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation show any relationship to Purpose of grant or status of Amount any foundation manager or substantial contributor contribution recipient Name and address (home or business) a Paid during the year Eco Sikh 501(c)3 For their use \$1,000 New York, NY **GGSF** 501(c)3 For their use \$11,000 13814 Travilah Road, North Potomac, MD 20878 **Jaswant Sawhney Trust** \$1000 501(c)3 For their use 7713 Tobruk Ct. Hanover, MD 21076 **GNFA** 501(c)3 For their use \$2,000 13814 Travilah Road, North Potomac, MD 20878 **George Washington University** 501(c)3 For their use \$750 2121 I St NW, Washington, DC 20052 **Five Talents** 501(c)3 For their use \$500 2789 Hartland Rd, Falls Church, VA 22043 Sikh Council \$100 501(c)3 For their use 2446 Reedie Dr. Suite 14, Silver Spring, MD 20902 Sikh Coalition 501(c)3 \$1000 For their use 50 Broad Street, Sulte 504, New York, NY 10004 Sikh Gurudwara DC 501(c)3 For their use \$1000 3801 Massachusetts Ave NW, Washington, DC 20016 \$18,350 Approved for future payment

\$0

Enter g	ross amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by sect	ion 512, 513, or 514	(e)
4 D	70070m 000100 70100101	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1 P	rogram service revenue:					
b						
c		<u> </u>	<del></del>			
d						
e	<del></del>		<del>-</del>			
f						
	Fees and contracts from government agencies		<del></del>			
9 2 M	lembership dues and assessments		<del></del>			
	terest on savings and temporary cash investments			<del></del>	<del></del>	
	ividends and interest from securities					
	et rental income or (loss) from real estate:	emarging of Semicalial range of	արանդրատուց, <sub>Հայա</sub> սիկիկայան բերանգներում	someter general filternighter general beten e	p formetting formetting for state of the sta	and the same of th
a				**	Committee of the Control of the Cont	ofin constitutional 2. Substitut L.
b			<del></del>		<del></del>	
	et rental income or (loss) from personal property			<del></del>		
	ther investment income	<del> </del> -				
	ain or (loss) from sales of assets other than inventory				-	
	et income or (loss) from special events .					
	ross profit or (loss) from sales of inventory .					
			<del></del>			
b	ther revenue: a		· -			
d						
e 12 Si	ubtotal Add columns (b) (d) and (e)			ů.		
e 12 Si	ubtotal. Add columns (b), (d), and (e)	د َ -			13	
13 To	otal. Add line 12, columns (b), (d), and (e)				13	
13 To See wo	otal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculation	s.)		· · · · ·	13	
13 To See wo	otal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exempt	Purposes		poortantly to the
<b>13 T</b> o See wo	otal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculation  XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exempt	Purposes		nportantly to the
13 To See wo Part D Line N	otal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exempt	Purposes		nportantly to the
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13 To See wo Part D Line N	otal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exempt	Purposes		nportantly to the tions )
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1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(S) organizations) or in section 527, relating to political organizations?  1 Transfers from the reporting foundation to a noncharitable exempt organization of:  1 (1) Cash  2 (2) Other assets  1 (2) Other assets  (3) Sales of assets to a noncharitable exempt organization  (4) Perivasses of assets from a noncharitable exempt organization  (5) Loans or loan guarantees  (6) Performance of services or membership or fundraising solicitations  (7) Sales of decident exempt organization  (8) Performance of services or membership or fundraising solicitations  (9) Performance of services or membership or fundraising solicitations  (1b(6)	Part	XVII	Information Organizati	n Regarding Trar	sfers to and Tra	nsactions and	Relationshi	ps With	Nonchar	ritable	e Exe	empt
a Transfers from the reporting foundation to a noncharitable exempt organization of:  (1) Cash (2) Other assets (1) Sales of assets to a noncharitable exempt organization (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Loans or loan guarantees (7) Loans or loan guarantees (8) Rental of facilities, equipment, mailing lists, other assets, or pand employees (8) Rental or facilities, equipment, mailing lists, other assets, or pand employees (9) Loans or loan guarantees (9) Loans or loans guarantees (10) Amain (nothed) (2) Amain (nothed) (3) Amain (nothed) (4) Description of transfers, transactions, and sharing arrangements (4) Loans or loans guarantees (4) Loans	1	ın s	he organization of ection 501(c) (o	directly or indirectly							Yes	No
(1) Cash (2) Other assets (3) Other transactions: (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements. (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations (7) Sales of assets of a services or membership or fundraising solicitations (8) Performance of services or membership or fundraising solicitations (9) Performance of services or membership or fundraising solicitations (9) Performance of services or membership or fundraising solicitations (15) Loans or loan guarantees (9) Family India (15) Sales (15) Sal	а	-		porting foundation to	o a noncharitable ex	empt organizatio	on of:					٥
(2) Other rassets  b Other transactions:  (1) Sales of assets to a noncharitable exempt organization  (2) Purchases of assets from a noncharitable exempt organization  (3) Rental of facilities, equipment, or other assets  (4) Reimbursement arrangements  (5) Loans or loan guarantees  (6) Performance of services or membership or fundraising solicitations  (7) Sales of facilities, equipment, mailing lists, other assets, or paid employees  (8) Performance of services or membership or fundraising solicitations  (8) Performance of services or membership or fundraising solicitations  (9) In any transaction or sharing arrangement, show in column (gl) the value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than far market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than far market value of the goods, other assets, or services received (gl Line no. (gl) Amount involved (gl Name of noncharitable exempt organization (gl) Description of transfere, transactions, and sharing arrangements described in section 501(c) (other than section 501(c)(3)) or in section 527?  (a) Name of organization (gl) Pescription of transfere, transactions, and sharing arrangements described in section 501(c) (other than section 501(c)(3)) or in section 527?  (a) Name of organization (gl) Pescription of relationship (gl) Description of rel				<del>-</del>						1a(1)		
b) Other transactions:  (1) Sales of assets to a noncharitable exempt organization  (2) Purchases of assets from a noncharitable exempt organization  (3) Rental of facilities, equipment, or other assets  (4) Rembursement arrangements  (5) Loans or loan guarantees  (6) Performance of services or membership or fundraising solicitations  (7) Compared to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting loundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services given by the reporting loundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line no.  (a) Amount involved  (b) Amount involved  (c) Name of noncharitable exempt organization  (d) Description of transfers, transactions, and sharing arrangements described in section 501(c) (other than section 501(c)(3)) or in section 527?  (a) Name of organization  (b) Type of organization  (c) Description of relationship  (d) Description of relationship  (e) Description of relationship  (e) Description of relationship  (f) Description of relationship  (g) Description of relationship  (		٠,										
Sign	b	٠,										1
(2) Purchases of assets from a noncharitable exempt organization		(1) S	ales of assets to	a noncharitable exe	empt organization					1b(1)		
(3) Reintal of facilities, equipment, or other assets  (4) Reimbursement arrangements  (5) Loans or loan guarantees  (6) Performance of services or membership or fundraising solicitations  (7) Performance of services or membership or fundraising solicitations  (8) Performance of services or membership or fundraising solicitations  (8) Performance of services or membership or fundraising solicitations  (8) Performance of services or membership or fundraising solicitations  (8) Performance of services or membership or fundraising solicitations  (8) Services of facilities, equipment, analysis of facilities, equipment, analysis of facilities, equipment, and the services of facilities (any transaction or sharing arrangement) or sharing arrangement or sharing arrangement, show in column (d) the value of the goods, other assets, or services received value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line in any transaction or sharing arrangements, show in column (d) the value of the goods, other assets, or services received (d) Line in any transaction or sharing arrangements (e) Perceived (e) Ammount involved (g) Am					· •	ation				1b(2)		
(4) Reimbursement arrangements .   1b(4)										1b(3)		
(§) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations  15(6)   1		(4) F	leimbursement ai	rrangements						1b(4)		
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees										1b(5)		
d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line no. (b) Amount involved (e) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (d) Description of transfers, transactions, and sharing arrangements (e) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (e) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (e) Name of organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? \tag{   Yes} \tag{   No}    N		(6) P	erformance of se	ervices or membersh	nip or fundraising so	licitations .				1b(6)		
value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (e) Line no. (b) Amount involved (e) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (e) Line no. (e) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (e) Line no. (e) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (e) Line no. (e) Name of organizations (d) Description of transfers, transactions, and sharing arrangements (e) Line no. (e) Description of transfers, transactions, and sharing arrangements (e) Line no. (e) Description of transfers, transactions, and sharing arrangements (e) Line no. (e) Description of transfers, transactions, and sharing arrangements (e) Line no. (e) Description of transfers, transactions, and sharing arrangements (e) Line no. (e) Description of transfers, transactions, and sharing arrangements (e) Line no. (e) Description of transfers, transactions, and sharing arrangements (e) Line no. (e) Description of relationship (e) Line no. (e) Des	C	Shar	ing of facilities, e	quipment, mailing li	sts, other assets, or	paid employees				1c		
value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received  (a) Line no. (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements  (a) Line no. (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements  (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements  (d) Description of transfers, transactions, and sharing arrangements  (e) Description of transfers, transactions, and sharing arrangements  (d) Description of transfers, transactions, and sharing arrangements  (e) Description of transfers, transactions, and sharing arrangements  (d) Description of transfers, transactions, and sharing arrangements  (e) Description of transfers, transactions, and sharing arrangements  (e) Description of transfers, transactions, and sharing arrangements  (f) Description of transfers, transactions, and sharing arrangements  (g) Line no. (h) Personal arrangements  (g) Line no. (h) Personal arrangements  (g) Description of transfers, transactions, and sharing arrangements  (g) Description of transfers, and sharing arrangements  (g) Description of t	d	If the	answer to any	of the above is "Ye	s," complete the fol	lowing schedule	Column (b)	should alv	vays shov	v the	fair m	arket
(a) Line no. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements  (a) Line no. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?												
2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?			<del></del>	on or sharing arrang	ement, show in colu							
described in section 501(c) (other than section 501(c)(3)) or in section 527?	(a) Line	no.	(b) Amount involved	(c) Name of noncl	naritable exempt organiza	tion (d) Des	scription of transfe	ers, transaction	ons, and sha	ring arra	angeme	ents
described in section 501(c) (other than section 501(c)(3)) or in section 527?												
described in section 501(c) (other than section 501(c)(3)) or in section 527?												
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described in section 501(c) (other than section 501(c)(3)) or in section 527?											_	
described in section 501(c) (other than section 501(c)(3)) or in section 527?		-		<u> </u>	<del></del>				<del></del>			
described in section 501(c) (other than section 501(c)(3)) or in section 527?				<del></del>		<del> </del>						
described in section 501(c) (other than section 501(c)(3)) or in section 527?												
described in section 501(c) (other than section 501(c)(3)) or in section 527?		<b></b> ⊦		- <del>-</del>			······································					
described in section 501(c) (other than section 501(c)(3)) or in section 527?		lo the	foundation dura	othy or indirectly of	blotod with or rolat	ad to one or m	oro tay ayam	nt organiz	otiono			
b if "Yes," complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship    Complete the following schedules and statements and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge    Complete the following schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge    Complete the following schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge    May the IRS discuss this return with the preparer shown below? See Instructions   Yes   No								-	_	1 ٧		N1-
(a) Name of organization  (b) Type of organization  (c) Description of relationship  Under penalties of penjury, 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 taxpayer) is based on all information of which preparer has any knowledge    Value						Section 527 :			· · L	] Yes		NO
Under penalties of penjury, 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 taxpayer) is based on all information of which preparer has any knowledge    A   A   B   Director		11 16	<u> </u>				<del></del>	(c) Description	on of relation	chin		
Sign Here   Correct, and complete   Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge   May the IRS discuss this return with the preparer shown below?   Signature of officer or trustee   Date   Director   Title    Paid   Print/Type preparer's name   Preparer's signature   Date   Check   If self-employed   Firm's name			(a) Name or organi	- Ization	(b) Type of or	ganization	+	(c) Description	on or relation	isinp		
Sign Here   Correct, and complete   Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge   May the IRS discuss this return with the preparer shown below?   Signature of officer or trustee   Date   Director   Title    Paid   Print/Type preparer's name   Preparer's signature   Date   Check   If self-employed   Firm's name		-									-	
Sign Here   Correct, and complete   Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge   May the IRS discuss this return with the preparer shown below?   Signature of officer or trustee   Date   Director   Title    Paid   Print/Type preparer's name   Preparer's signature   Date   Check   If self-employed   Firm's name							<del> </del>					
Sign Here   Correct, and complete   Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge   May the IRS discuss this return with the preparer shown below?   Signature of officer or trustee   Date   Director   Title    Paid   Print/Type preparer's name   Preparer's signature   Date   Check   If self-employed   Firm's name					<del></del>		<del>  – </del>	<del></del>				
Sign Here   Correct, and complete   Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge   May the IRS discuss this return with the preparer shown below?   Signature of officer or trustee   Date   Director   Title    Paid   Print/Type preparer's name   Preparer's signature   Date   Check   If self-employed   Firm's name							<del> </del>					
Sign Here   Correct, and complete   Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge   May the IRS discuss this return with the preparer shown below?   Signature of officer or trustee   Date   Director   Title    Paid   Print/Type preparer's name   Preparer's signature   Date   Check   If self-employed   Firm's name		Unde	r penalties of penury. I	declare that I have examine	d this return, including acco	mpanying schedules a	Ind statements, and	to the best of	f my knowlede	ge and h	elief. it	ıs true.
Here Signature of officer or trustee Date Date Print/Type preparer's name Preparer's signature Print/Type preparer's name Print/Type preparer's name Print/Type preparer's name Print/Type preparer's signature Print/Type preparer's signature Print/Type preparer's name Print/Type preparer's signature Print/Type preparer's name Print/Type preparer's signature Print/Type preparer's signature Print/Type preparer's name Print/Type preparer's name Print/Type preparer's signature Print/Type preparer's name Print/Type preparer's signature Print/Type preparer's name Print/Type pr	Sian										_	
Signature of officer or trustee  Paid Preparer's name Preparer's signature  Print/Type preparer's name			28 K lum:	Sada	19.20 1	Director			with the pro	eparer s	hown b	elow?
Paid Preparer's name Preparer's signature Date Check ☐ if self-employed Firm's name Firm's name Firm's name Firm's name	. 1616	Sign	ature of officer or trus	stee		_ ′	· · · · · · · · · · · · · · · · · · ·					
Paid Preparer Use Only Firm's name ► Firm's EIN ►		5.					Date	<del>-  </del>	P	TIN		
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Ose Office Control Con			Firm's name	<del></del>	<u> </u>		<del></del>		<u> </u>			
	use C	צוחי	Firm's address				-	Phone no	<u> </u>			

## 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. ▶ Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

**Employer identification number** 

Lakan Incorporated		20-1754985
Organization type (chec	ck one):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as	s a private foundation
	☐ 527 political organization	
Form 990-PF		
	4947(a)(1) nonexempt charitable trust treated as a p	private foundation
	_	
	501(c)(3) taxable private foundation	
General Rule  For an organiza or more (in mon contributor's to	1(c)(7), (8), or (10) organization can check boxes for both the G stion filing Form 990, 990-EZ, or 990-PF that received, during they or property) from any one contributor. Complete Parts I and tal contributions.	the year, contributions totaling \$5,000
Special Rules		
regulations und 13, 16a, or 16b,	tion described in section 501(c)(3) filing Form 990 or 990-EZ the sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedu, and that received from any one contributor, during the year, of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form	ule A (Form 990 or 990-EZ), Part II, line total contributions of the greater of (1)
contributor, duri	tion described in section 501(c)(7), (8), or (10) filing Form 990 or ing the year, total contributions of more than \$1,000 exclusively ational purposes, or for the prevention of cruelty to children or	ly for religious, charitable, scientific,
contributor, dur contributions to during the year <b>General Rule</b> a	tion described in section 501(c)(7), (8), or (10) filing Form 990 or the year, contributions exclusively for religious, charitable, staled more than \$1,000. If this box is checked, enter here the for an exclusively religious, charitable, etc., purpose. Don't coupplies to this organization because it received nonexclusively or more during the year	, etc , purposes, but no such total contributions that were received omplete any of the parts unless the religious, charitable, etc., contributions
	n that isn't covered by the General Rule and/or the Special Ru It <b>must</b> answer "No" on Part IV, line 2, of its Form 990; or che	

Form 990-PF, Part I, line 2, to certify that it doesn't meet the filling requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
_1	Lakhbir Singh  11752 Lake Potomac Drive, Potomac, MD 20854	\$ 147,872	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2	Manpreet Singh  11752 Lake Potomac Drive, Potomac, MD 20854	\$ 55,725	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions)		

Employer identification number

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
1	See Attached Schedule				
		\$			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
2	See Attached Schedule				
		\$			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			
(a) No. from Part I	. (b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\$	·		

Part III

Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. 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 add	ditional space is need	ded.	*************************************		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	(e) Transfer of gift					
_	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
-	(e) Transfer of gift					
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
101.						
-	(e) Transfer of gift					
	Transferee's name, address, and ZIP + 4 Relation		ship of transferor to transferee			
		••••••				
(a) No. from Part I	(b) Purpose of gift	(c) Use o	f gift	(d) Description of how gift is held		
				***************************************		
	(e) Transfer of gift					
-	Transferee's name, address, and ZIP + 4 Relation		ship of transferor to transferee			
	***************************************					