## 990-PF Department of the Treasury Internal Revenue Service

## **Return of Private Foundation**

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

▶ 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
2017

$\smile$	Fo	r ca	lendar year 2017 or tax year beginning				, 2017	and endir	ng		, 20
	N	ame	of foundation INDUS CHARITABLE FO	UNDA	AT:	ON INC			7	A Employer identifi	cation number
	(	<u> </u>	INDUS CAPITAL PARTNERS LLC							26-149684	8
	N	umb	er and street (or P O box number if mail is not delivered	to stre	et a	oddress)		Room/suite	7	B Telephone numb	er (see instructions)
	{	388	7TH AVENUE							(212) 21	2-2888
	С	ity or	town, state or province, country, and ZIP or foreign pos	tal cod	le				l		
									- 1°	C If exemption application pending, check here	
			YORK, NY 10019								
	G	Che	ck all that apply Initial return			Initial return o	•	ublic chari	¹ty ∣ı	D 1 Foreign organizat	ions, check here 🕨 🛄
			Final return			Amended ref				2 Foreign organizates 85% test, check h	
$\overline{}$			Address change			Name change				computation .	
2	ᄴ	$\neg$	eck type of organization X Section 501					Ð	$\psi_{1}$	E If private foundation	status was terminated
10	1		ection 4947(a)(1) nonexempt charitable trust			her taxable pr			+	under section 507(b	)(1)(A), check here . 🕨 🛄
7			<del></del>		_	nethod X C	ash Acc	rual	J   I		in a 60-month termination
,						ecify)	<del></del>			under section 507(b)	(1)(B), check here . D
				,	ın (	d) must be on ca	sh basis )_				(d) Disbursements
	P	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)	(0		levenue and	(b) Net inve	estment	(c)	Adjusted net	for charitable
			may not necessarily equal the amounts in	l	ex	penses per     books	incom	ne	•	income	purposes (cash basis only)
	$\neg$		column (a) (see instructions) )	├──		216,355.		<del></del> +		<del></del> -	(Cash basis only)
	ł	1	Charle I f the foundation is not required to	├—		210,333.					
		2	attach Sch B	├							<del></del>
	ł	3	Interest on savings and temporary cash investments.	<del> </del>	-	<del> </del>		<del></del>			
	İ	4	Dividends and interest from securities	-	_					<del> </del>	<u> </u>
	- 1		Gross rents	<del> </del>							
	ره		Net rental income or (loss)		_						<del></del>
	린		Net gain or (loss) from sale of assets not on line 10 Gross sales pince for all	<b></b>	_						
	Revenue	7	assets on line 6a		_			0.			
	8	8	Net short-term capital gain		_						
	ļ	9	Income modifications								
		10 a	Gross sales less returns and allowances								
	l	ь	Less Cost of goods sold .								,
			Gross profit or (loss) (attach schedule)								1
	- 1	11	Other income (attach schedule) ATCH, 1					7,745.			'
		12	Total. Add lines 1 through 11			216,365.	30	7,745.			<u> </u>
		13	Compensation of officers, directors, trustees, etc			0.					
	xpenses	14	Other employee salaries and wages								
	ë	15	Pension plans, employee benefits		_		<u>_</u>				
		16 a	Legal fees (attach schedule)	<u> </u>		0.050	F	-REK	汜	VED	0.050
	w	b	Accounting fees (attach schedule)ATCH 2	<u> </u>		9,052.				2018	9,052.
	<u>.</u> ≧	С	Other professional fees (attach schedule)				<u> </u> ç	YON E	7 5	2018	
	ايد	17	Interest				2	31 140 4	T a	2010	
60	·	18	Taxes (attach schedule) (see instructions)					<del></del>			
ö	Έ	19	Depreciation (attach schedule) and depletion.					<u> </u>	DE	N, UI	
<b>≥</b>	P	20	Occupancy	<del> </del>	_						
SCANNED		21	Travel, conferences, and meetings								
m	B	22	Printing and publications	}		312.	<del></del>	+		<del></del>	312.
	Operating	24	Other expenses (attach schedule) ATCH .3.	<del></del>						·	
JAN	ž	4	Total operating and administrative expenses Add lines 13 through 23	1		9,364.					9,364.
ź	핅	25	Add lines 13 through 23	-		305,000.					305,000.
ယ		25 26	Total expenses and disbursements Add lines 24 and 25	1		314,364.		0.		0.	314,364.
0	$\rightarrow$	27	Subtract line 26 from line 12				<del></del>	<del></del>			<del></del>
2	- 1		Excess of revenue over expenses and disbursements	1		-97,999.					1
2019			Net investment income (if negative, enter -0-)			<del></del>	30	7,745.			<del></del>
<b>u</b>	- 1		Adjusted net income (if negative, enter -0-)								
JSA	Fo		perwork Reduction Act Notice, see instructions		_						Form 990-PF (2017)

JSA For Paperwork Reduction Act Notice, see instructions. 7E1410 1 000 4863 IJ 1577

10006864

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Part	Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End (	of year
LECTIV	Dalalice Sileets	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bea	ring			
2	Savings and temporary	cash investments	98,001.	2.	2
3					
		ubtful accounts >			
4	Pledges receivable ▶_				
	Less allowance for do	ubtful accounts ▶			
5	Grants receivable				
6	Receivables due from	officers, directors, trustees, and other			
	disqualified persons (a	ttach schedule) (see instructions)			
7	Other notes and loans	receivable (attach schedule) ▶			
	Less allowance for do	ubtful accounts			
र्घ 8	Inventories for sale or u	se			
ssets 6 8		deferred charges			
٦0 X	• •	ate government obligations (attach schedule)			
- } -	b Investments - corporat	e stock (attach schedule)			
- 1	•	e bonds (attach schedule)			
11	Investments - land, building and equipment basis	gs. ▶			
	Less accumulated deprec	aation >			
12	(attach schedule)	e loans			
13	Investments - other (at	e loans	890,674.	890,674.	1,827,192.
14		<b>&gt;</b>			
	Less accumulated deprec	nation >			]
15	(attach schedule) Other assets (describe)	<b>&gt;</b> )			
16		completed by all filers - see the			
		page 1, item I)		890,676.	1,827,194.
17		accrued expenses			ŧ
18					}
	• •				]
<u>≅</u> 20		tors, trustees, and other disqualified persons.			
Liabilities 12 02 1		otes payable (attach schedule)			}
22 ات	7 7	pe ▶)			
23	Total liabilities (add lin	es 17 through 22)	0.	0.	
	Equipolations that follow	ow SFAS 117, check here			
d Balances	and complete lines 24	through 26, and lines 30 and 31			
	Unrestricted				
B 25	Temporarily restricted		1		_
<u> </u>	Permanently restricted				}
5	Foundations that do r	not follow SFAS 117, check here ►X			1
يت ا	and complete lines 27	through 31.			1
Net Assets or Fun 30 31	Capital stock, trust prii	ncipal, or current funds			j
28	Paid-in or capital surplus,	or land, bldg, and equipment fund			
Š 29	Retained earnings, accur	nulated income, endowment, or other funds	988,675.	890,676.	]
<b>≤</b> 30	Total net assets or fur	nd balances (see instructions)	988,675.	890,676.	1
31	Total liabilities and	d net assets/fund balances (see			· ·
7		<u> </u>	988,675.	890,676.	}
Part		anges in Net Assets or Fund Bala	nces		
		balances at beginning of year - Part		must agree with	
		ed on prior year's return)		(	988,675
		I, line 27a		· ·	-97,999.
				T	
					890,676.
	ecreases not included			5	
		balances at end of year (line 4 minus	line 5) - Part II, column (I	b), line 30 6	890,676.
	<del></del>				- 000 BE

Part IV

(a) List and des	cribe the kind(s) of property sold (for ick warehouse, or common stock, 200	example, real estate,	(b) How acquired P - Purchase D - Donation		(d) Date sold (mo , day, yr )
1 a					
b					
С					
_d					
е			<u> </u>	<u> </u>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo: ((e) plus (f) mini	
a		<u> </u>	ļ		
b					
С					
<u>d</u>	<del></del>		ļ	<u> </u>	
е					
Complete only for assets sh	nowing gain in column (h) and owner	d by the foundation on 12/31/69		Gains (Col (h) ga	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	(k), but not less ti Losses (from col	
a			<u> </u>		
b					
c			<u> </u>		
d		<u> </u>			
e			ļ <u>.</u>		
Capital gain net income of	or (net capital loss)	gain, also enter in Part I, line 7			
. •	, , , , , , , , , , , , , , , , , , ,	loss), enter -0- in Part I, line 7	2		
If gain, also enter in Pa	ain or (loss) as defined in sections art I, line 8, column (c) See in	istructions If (loss), enter -0- in $\}$	3		
		educed Tax on Net Investment I		<del></del>	
	the section 4942 tax on the distri 't qualify under section 4940(e)	butable amount of any year in the b	ase perio	do	Yes X
		ear, see the instructions before mak	ing any er	ntries	
(a)	(b)	(c)		(d)	
Base penod years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets	1	Distribution ra (col (b) divided by	
2016	276,147.	1,457,010.			0.189530
2015	265,393.	1,494,631.		<del></del>	0.177564
2014	215,975.	1,246,974.	1		0.173199
2013	180,563.	1,019,402.	1		0.177126
2012	244,765.	822,822.			0.297470
		<del></del>	<del> </del>		
Total of line 1, column (d					
	)		2		
		de the total on line 2 by 5 0, or by	2	· · · · · · · · · · · · · · · · · · ·	
	o for the 5-year base period - divid	de the total on line 2 by 5 0, or by	3	· ·	1.01488
	o for the 5-year base period - divid			· ·	1.014889
the number of years the f	o for the 5-year base period - dividence foundation has been in existence	de the total on line 2 by 5 0, or by all fless than 5 years			1.014889 0.202978
the number of years the f	o for the 5-year base period - dividence foundation has been in existence	de the total on line 2 by 5 0, or by	3		1.014889 0.202978
the number of years the f	o for the 5-year base period - dividence foundation has been in existence incharitable-use assets for 2017	de the total on line 2 by 5 0, or by all less than 5 years	3	1,	1.014889 0.202978 630,694.
the number of years the f	o for the 5-year base period - dividence foundation has been in existence incharitable-use assets for 2017	de the total on line 2 by 5 0, or by all fless than 5 years	3 4	1,	1.014889 0.202978 630,694.
the number of years the factor the net value of no Multiply line 4 by line 3.	o for the 5-year base period - dividence foundation has been in existence incharitable-use assets for 2017	de the total on line 2 by 5 0, or by a if less than 5 years	3 4	1,	1.014889 0.202978 630,694.
Enter the net value of no Multiply line 4 by line 3.	o for the 5-year base period - dividence foundation has been in existence incharitable-use assets for 2017	de the total on line 2 by 5 0, or by all less than 5 years	3 4 5	1,	1.014889 0.202978 630,694.
the number of years the factor the net value of no Multiply line 4 by line 3.  Enter 1% of net investment	o for the 5-year base period - dividence foundation has been in existence incharitable-use assets for 2017  ent income (1% of Part I, line 27b)	de the total on line 2 by 5 0, or by a if less than 5 years	3 4 5 6	1,	1.014889 0.202978 630,694. 330,995. 3,077.
the number of years the factor the net value of no Multiply line 4 by line 3.  Enter 1% of net investment	o for the 5-year base period - dividence foundation has been in existence incharitable-use assets for 2017  ent income (1% of Part I, line 27b)	de the total on line 2 by 5 0, or by a if less than 5 years	3 4 5 6	1,	1.014889 0.202978 630,694. 330,995.
the number of years the file.  Enter the net value of no Multiply line 4 by line 3.  Enter 1% of net investment Add lines 5 and 6	o for the 5-year base period - dividence foundation has been in existence incharitable-use assets for 2017 the control of the	de the total on line 2 by 5 0, or by a if less than 5 years	3 4 5 6	1,	1.014889 0.202978 630,694. 330,995.

Capital Gains and Losses for Tax on Investment Income

•				
	990-PF (2017)  t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instri		age 4
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1		.01.0112	· ·
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)	_		_
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		6,1	55.
	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-)			
3	Add lines 1 and 2		6,1	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		6,1	55.
6	Credits/Payments			
а				
b	Exempt foreign organizations - tax withheld at source			,
C	Tax paid with application for extension of time to file (Form 8868) 6c			
d			1	نہ ۔ 22.
7	Total ordana and paymonta rica and an additional and additional additional additional and additional addit			
8	and any persons of administration of administrat		5,7	33
9	The sale is the take of this of the sale is the sale i			<del></del>
10 11	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶ 10  Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ Refunded ▶ 11			
_	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
,	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
	instructions for the definition	1b		Χ
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
С	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		1
	(1) On the foundation ▶ \$ 0. (2) On foundation managers ▶ \$ 0.			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			1
	on foundation managers   \$0.	-	-	3
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<u> </u>
	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	_	İ	х.
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		$\frac{x}{x}$
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	х	
	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?	1		<del></del> -
_	If "Yes," attach the statement required by General Instruction T			ļ
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			1
	<ul> <li>By language in the governing instrument, or</li> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that</li> </ul>			!
	conflict with the state law remain in the governing instrument?	6	X	
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	Х	
	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 General

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

Form 990-PF (2017)

8b

DE, NY

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Pai	t VII-A Statements Regarding Activities (continued)			age 3
			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	11		X
12				
	person had advisory privileges? If "Yes," attach statement See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ▶ INDUS CAPITAL PARTNERS LLC Telephone no ▶ 212-909-	2888	3	
	Located at ▶888 7TH AVENUE NEW YORK, NY ZIP+4 ▶ 10019			<del></del>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		▶	$\cdot$
	and enter the amount of tax-exempt interest received or accrued during the year	N/		
16	At any time during calendar year 2017, 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_	<u> </u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of			
	the foreign country	N/	A	
Pa	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required		Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		res	No
1a	During the year, did the foundation (either directly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	1		) ]
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified poison?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		j	
	(4) Lay compensation to, or pay of formula the expenses of, a disquarine person			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	]		]
	the benefit of disc of a disqualment person, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,			
•	(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	l	l	1
	Commission of government, out word, it commission of the property of the commission of government, out when the commission of the commissi			
D	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1b		×
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	<del>""</del> -		<del></del>
_	Organizations relying on a current notice regarding disaster assistance, check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	1c		<u>x</u>
_	were not corrected before the first day of the tax year beginning in 2017?	<u> </u>		1
2	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	ļ		] }
_	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and	1		
a	6e, Part XIII) for tax year(s) beginning before 2017?			
	If "Yes," list the years ▶, N/A	{	l	
ь	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	j	] .	
	all years listed, answer "No" and attach statement - see instructions )	2b	N	/A
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
•	N/A	ì		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	ŀ		1
-	at any time during the year?	ļ	]	]
b	If "Yes," did it have excess business holdings in 2017 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	1		
	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 2017 ) , , , , , ,	3b	N	/ A
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			آا
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		Х
	Fo	m 99	0-PF	(2017)

Form :	990-PF (2017)					Page
Pai	t VII-B Statements Regarding Activitie	s for Which Form	4720 May Be Rec	uired (continued)		
5a `	During the year, did the foundation pay or incur any ar	nount to				Yes No
	(1) Carry on propaganda, or otherwise attempt to infl	uence legislation (section	on 4945(e))?	. Yes X No	) - £	٠ ' ' کړ
	(2) Influence the outcome of any specific public e	•				1
	directly or indirectly, any voter registration drive?				ין פ	
	(3) Provide a grant to an individual for travel, study, or	other similar purposes?		. Yes X No	·   /	
	(4) Provide a grant to an organization other than	-			<i>‡</i>	
	section 4945(d)(4)(A)? See instructions				۶ ا	'
	(5) Provide for any purpose other than religious,	•	• •		(	` •
_	purposes, or for the prevention of cruelty to childre					١ .
Ь	If any answer is "Yes" to 5a(1)-(5), did any of th Regulations section 53 4945 or in a current notice regi			•	. 5b	N/A
	Organizations relying on a current notice regarding dis	-	·	<b>.</b>	`\ <del></del>	- IV A
С	If the answer is "Yes" to question 5a(4), does the				<u> </u>	
·	because it maintained expenditure responsibility for the				,	
	If "Yes," attach the statement required by Regulations	=				
6a	Did the foundation, during the year, receive any fi		ectly, to pay premiur	ns		
	on a personal benefit contract?	•			, li	
b	Did the foundation, during the year, pay premiums, di				. 6b	X
	If "Yes" to 6b, file Form 8870					
7a	At any time during the tax year, was the foundation a	party to a prohibited ta	x shelter transaction?.	, 🔲 Yes 🔲 No	اــــا د	
b	If "Yes," did the foundation receive any proceeds or h					N/A
Pai	Information About Officers, Direct	ors, Trustees, Fou	ındation Manager:	s, Highly Paid Emp	ployees,	
1	List all officers, directors, trustees, foundation			instructions.		
		(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) Expens	
	List all officers, directors, trustees, foundation	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expens other all	
ATC	List all officers, directors, trustees, foundation (a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans		
ATC	List all officers, directors, trustees, foundation (a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		owances
ATC	List all officers, directors, trustees, foundation (a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		owances
ATC	List all officers, directors, trustees, foundation (a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		owances
ATC	List all officers, directors, trustees, foundation (a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		owances
ATC	List all officers, directors, trustees, foundation (a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		owances
ATC	List all officers, directors, trustees, foundation  (a) Name and address  H 5	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	other all	0
ATC	List all officers, directors, trustees, foundation (a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	other all	0
	List all officers, directors, trustees, foundation  (a) Name and address  H 5  Compensation of five highest-paid employee "NONE."	(b) Title, and average hours per week devoted to position  consistent of the second of	(c) Compensation (If not paid, enter -0-)  0.	(d) Contributions to employee benefit plans and deferred compensation  0.	ons). If no	One, ente
	List all officers, directors, trustees, foundation  (a) Name and address  H 5  Compensation of five highest-paid employee	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation  0.  1 - see instructi  (d) Contributions to employee benefit plans and deferred	ons). If no	0
	List all officers, directors, trustees, foundation  (a) Name and address  H 5  Compensation of five highest-paid employee "NONE."	(b) Title, and average hours per week devoted to position  s (other than those hours per week hours per week	(c) Compensation (If not paid, enter -0-)  0.	(d) Contributions to employee benefit plans and deferred compensation  0.  1 - see instructi (d) Contributions to employee benefit	ons). If no	One, ente
	List all officers, directors, trustees, foundation  (a) Name and address  H 5  Compensation of five highest-paid employee "NONE."	(b) Title, and average hours per week devoted to position  s (other than those hours per week hours per week	(c) Compensation (If not paid, enter -0-)  0.	(d) Contributions to employee benefit plans and deferred compensation  0.  1 - see instructi  (d) Contributions to employee benefit plans and deferred	ons). If no	One, ente
	List all officers, directors, trustees, foundation  (a) Name and address  H 5  Compensation of five highest-paid employee "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position  s (other than those hours per week hours per week	(c) Compensation (If not paid, enter -0-)  0.	(d) Contributions to employee benefit plans and deferred compensation  0.  1 - see instructi  (d) Contributions to employee benefit plans and deferred	ons). If no	One, ente
	List all officers, directors, trustees, foundation  (a) Name and address  H 5  Compensation of five highest-paid employee "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position  s (other than those hours per week hours per week	(c) Compensation (If not paid, enter -0-)  0.	(d) Contributions to employee benefit plans and deferred compensation  0.  1 - see instructi  (d) Contributions to employee benefit plans and deferred	ons). If no	One, ente
	List all officers, directors, trustees, foundation  (a) Name and address  H 5  Compensation of five highest-paid employee "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position  s (other than those hours per week hours per week	(c) Compensation (If not paid, enter -0-)  0.	(d) Contributions to employee benefit plans and deferred compensation  0.  1 - see instructi  (d) Contributions to employee benefit plans and deferred	ons). If no	One, ente
	List all officers, directors, trustees, foundation  (a) Name and address  H 5  Compensation of five highest-paid employee "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position  s (other than those hours per week hours per week	(c) Compensation (If not paid, enter -0-)  0.	(d) Contributions to employee benefit plans and deferred compensation  0.  1 - see instructi  (d) Contributions to employee benefit plans and deferred	ons). If no	One, ente
	List all officers, directors, trustees, foundation  (a) Name and address  H 5  Compensation of five highest-paid employee "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position  s (other than those hours per week hours per week	(c) Compensation (If not paid, enter -0-)  0.	(d) Contributions to employee benefit plans and deferred compensation  0.  1 - see instructi  (d) Contributions to employee benefit plans and deferred	ons). If no	One, ente

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3 NONE

All other program-related investments. See instructions

Total. Add lines 1 through 3

Pa	rt X <sup>s</sup>	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions)	ign four	ndations,
1	Fair	market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purp	oses		
a	Aver	age monthly fair market value of securities	1a	
		age of monthly cash balances	1b_	15,733.
		market value of all other assets (see instructions)	1c	1,639,794.
d		I (add lines 1a, b, and c)	1d	1,655,527.
е	Redu	iction claimed for blockage or other factors reported on lines 1a and		
	1c (a	attach detailed explanation)		
2		usition indebtedness applicable to line 1 assets	2	
3		ract line 2 from line 1d	3	1,655,527.
4	Cash	deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instr	uctions)	4	24,833.
5		value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	1,630,694.
6	Mini	mum investment return. Enter 5% of line 5	6	81,535.
Pa	rt XI	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations, check here ▶ and do not complete this part)	ndations	<del></del>
1	Mınır	mum investment return from Part X, line 6	1	81,535.
2 a	Tax	on investment income for 2017 from Part VI, line 5		
b	Incor	me tax for 2017 (This does not include the tax from Part VI) 2b		
c	Add	lines 2a and 2b	2c	6,155.
3		butable amount before adjustments Subtract line 2c from line 1	3	75,380.
4		overies of amounts treated as qualifying distributions	4	
5		lines 3 and 4	5	75,380.
6		uction from distributable amount (see instructions)	6	
7		ributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
•		1	7	75,380.
Pa		Qualifying Distributions (see instructions)		
1	Amo	unts paid (including administrative expenses) to accomplish charitable, etc., purposes		
•		enses, contributions, gifts, etc total from Part I, column (d), line 26	1a	314,364.
		ram-related investments - total from Part IX-B	1b	
2		ounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	<del></del>	
-		oses	2	
3		unts set aside for specific charitable projects that satisfy the		
-		ability test (prior IRS approval required)	3a	
b		n distribution test (attach the required schedule)	3b	
4		frying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	314,364.
5		ndations that qualify under section 4940(e) for the reduced rate of tax on net investment income	<del>  </del>	
•		r 1% of Part I, line 27b See instructions	5	0.
6		ested qualifying distributions. Subtract line 5 from line 4	6	314,364.
v	-	e: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca	سلمتا	
	NOLE	qualifies for the section 4940(e) reduction of tax in those years		whether the loundation

Pa	rt XIII Undistributed Income (see instr	uctions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2017 from Part XI,	Corpus	Years prior to 2016	2016	2017
	line 7				75,380.
2	Undistributed income, if any, as of the end of 2017				
а	Enter amount for 2016 only				;
b	Total for pnor years 20 15 ,20 14 ,20 13		_		,
	Excess distributions carryover, if any, to 2017				
а	From 2012				
b	From 2013			ļ	
	From 2014				
	From 2015 190,661.				
е	From 2016			1	
f	Total of lines 3a through e	880,800.			
4	Qualifying distributions for 2017 from Part XII				
	line 4 ▶ \$314,364.				
а	Applied to 2016, but not more than line 2a				
b	Applied to undistributed income of prior years				•
	(Election required - see instructions)				<u></u>
С	Treated as distributions out of corpus (Election				F
	required - see instructions)				75 200
d	Applied to 2017 distributable amount				75,380.
е	Remaining amount distributed out of corpus	238,984.			
5	Excess distributions carryover applied to 2017			·	
	(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:	1,119,784.			<b>i</b>
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,119,704.			
b	Prior years' undistributed income Subtract				*
	line 4b from line 2b				_ <del></del>
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has				ı
	been issued, or on which the section 4942(a)				•
	tax has been previously assessed	<del></del>			
d	Subtract line 6c from line 6b Taxable				
٥	amount - see instructions				
Ī	4a from line 2a Taxable amount - see				
	instructions				
f	Undistributed income for 2017 Subtract lines				
	4d and 5 from line 1 This amount must be distributed in 2018				
-		· <del></del>			1
′	Amounts treated as distributions out of corpus to satisfy requirements imposed by section				1
	170(b)(1)(F) or 4942(g)(3) (Election may be				1
	required - see instructions)				;
8	Excess distributions carryover from 2012 not				
•	applied on line 5 or line 7 (see instructions)	203,624.			
9	Excess distributions carryover to 2018.				
	Subtract lines 7 and 8 from line 6a	916,160.			
10	Analysis of line 9	İ			
а	Excess from 2013 129,593.				, ,
b	Excess from 2014 153, 626.	İ			
С	Excess from 2015 190, 661 .				ļ
d	Excess from 2016			}	ľ
e	Excess from 2017 238, 984.			L	- 000 DC
					Form 990-PF (2017)

1 a	1.				and Part VII-A, que			NOT APPLICA
	If the foundation has							
	foundation, and the ruling	j is effective for 2	2017, enter the	date of the rulin	9	▶∟		
b	Check box to indicate v	hether the foun	idation is a pr	vate operating	foundation described	in section	4942(j)(3	) or 4942(J)
2 a	Enter the lesser of the ad-	Tax year			Prior 3 years	·	/	(e) Total
	justed net income from Part	(a) 2017		(b) 2016	(c) 2015	(d) 20	)14	
	I or the minimum investment	l						
	return from Part X for each year listed					ر ا	/	
h	85% of line 2a							
	Qualifying distributions from Part							
Ŭ	XII line 4 for each year listed .						}	
d	Amounts included in line 2c not							
	used directly for active conduct		]			/	ļ	
۵	of exempt activities			<del></del>				
٠	directly for active conduct of							
	exempt activities. Subtract line	I				- [	Î	
3	2d from line 2c				<del>                                     </del>	<del></del>	<del></del>	<u> </u>
	alternative test relied upon					1	}	
а	"Assets" alternative test - enter	I	j				1	
	(1) Value of all assets (2) Value of assets qualifying		<del></del>		+/	<del>                                     </del>		
	under section	I						
L	4942(j)(3)(B)(i)	<del> </del>			/	<del> </del>		
ø	"Endowment" alternative test- enter 2/3 of minimum invest-	I		/				
	ment return shown in Part X,							
	line 6 for each year listed	<del>                                     </del>		/_	<del> </del>	<del> </del>		
С	"Support" alternative test - enter							
	(1) Total support other than gross investment income					1	1	
	(interest, dividends, rents							
	payments on secunties loans (section 512(a)(5))		/	<b>,</b>				
	or royalties)							
	(2) Support from general public and 5 or more							
	exempt organizations as				1	ľ	Ì	
	provided in section 4942 (j)(3)(B)(iii)							
	(3) Largest amount of sup-							
	port from an exempt organization							
	(4) Gross investment income.							
Рa	rt XV Supplemer	itary Informat	tion (Compl	ete this par	t only if the found	dation had \$	5,000 or r	nore in assets
	any time de	uring the year	r - see instru	ctions.)				
	Information Pegardin	g Foundation N						
1		the foundation	who have co	ontributed mo	ore than 2% of the t	otal contribution	ons received	d by the foundar
	List any managers of		nly if they hav	e contributed	more than \$5,000)	isee section s		
		tax year (but o				(000 0000000	07(0)(2))	
а	List any managers of before the close of any N/A							
а	List any managers of before the close of any N/A List any managers of	the foundation			of the stock of a co	rporation (or		
а	List any managers of before the close of any N/A	the foundation			of the stock of a co	rporation (or		
а	List any managers of before the close of any N/A List any managers of	the foundation			of the stock of a co	rporation (or		
b	List any managers of before the close of any N/A List any managers of ownership of a partner	the foundation ship or other er	ntity) of which	the foundation	of the stock of a co on has a 10% or great	rporation (or		
b	List any managers of before the close of any N/A List any managers of ownership of a partner	the foundation ship or other er	ntity) of which	the foundation	of the stock of a co on has a 10% or great	rporation (or		
b	List any managers of before the close of any N/A  List any managers of ownership of a partner  N/A  Information Regarding	the foundation ship or other er g Contribution,	ntity) of which , Grant, Gift, L	the foundation	of the stock of a con has a 10% or great ship, etc., Programs:	orporation (or der interest	an equally l	arge portion of
b	List any managers of before the close of any N/A  List any managers of ownership of a partner  N/A  Information Regarding  Check here X if t	the foundation ship or other er g Contribution, he foundation	ntity) of which , Grant, Gift, L only makes	the foundation	of the stock of a con has a 10% or great ship, etc., Programs:	rporation (or ler interest	an equally I	arge portion of
b	List any managers of before the close of any N/A  List any managers of ownership of a partner  N/A  Information Regarding	the foundation ship or other er g Contribution, he foundation or funds If the	ntity) of which , Grant, Gift, L only makes foundation m	the foundation	of the stock of a con has a 10% or great ship, etc., Programs:	rporation (or ler interest	an equally I	arge portion of
b 2	List any managers of before the close of any N/A  List any managers of ownership of a partner  N/A  Information Regarding Check here X if the unsolicited requests for complete items 2a, b, complete	the foundation ship or other er g Contribution, he foundation or funds If the c, and d See ins	ntity) of which , Grant, Gift, L only makes foundation m structions	con, Scholars contributions nakes gifts, g	of the stock of a con has a 10% or great ship, etc., Programs: s to preselected chrants, etc., to individ	erporation (or ter interest aritable organ uals or organi	an equally I	arge portion of d does not accer other condition
b 2	List any managers of before the close of any N/A  List any managers of ownership of a partner N/A  Information Regarding  Check here ► X if the unsolicited requests for complete items 2a, b, of the name, address, a	the foundation ship or other er g Contribution, he foundation or funds If the c, and d See ins	ntity) of which , Grant, Gift, L only makes foundation m structions	con, Scholars contributions nakes gifts, g	of the stock of a con has a 10% or great ship, etc., Programs: s to preselected chrants, etc., to individ	erporation (or ter interest aritable organ uals or organi	an equally I	arge portion of d does not accer other condition
a b	List any managers of before the close of any N/A  List any managers of ownership of a partner N/A  Information Regarding Check here X if tunsolicited requests for complete items 2a, b, of the name, address, a N/A	the foundation ship or other er g Contribution, he foundation or funds If the c, and d See inside telephone no	ntity) of which , Grant, Gift, L only makes foundation m structions umber or ema	con, Scholars contributions nakes gifts, g	of the stock of a con has a 10% or great ship, etc., Programs: s to preselected chrants, etc., to individ	aritable organuals or organi	an equally I	arge portion of d does not accer other condition
a b	List any managers of before the close of any N/A  List any managers of ownership of a partner N/A  Information Regarding  Check here ► X if the unsolicited requests for complete items 2a, b, of the name, address, a	the foundation ship or other er g Contribution, he foundation or funds If the c, and d See inside telephone no	ntity) of which , Grant, Gift, L only makes foundation m structions umber or ema	con, Scholars contributions nakes gifts, g	of the stock of a con has a 10% or great ship, etc., Programs: s to preselected chrants, etc., to individ	aritable organuals or organi	an equally I	arge portion of d does not accer other condition
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a b	List any managers of before the close of any N/A  List any managers of ownership of a partner N/A  Information Regarding Check here X if the unsolicited requests from the name, address, a N/A  The form in which app	the foundation ship or other er g Contribution, he foundation or funds If the c, and d See inside telephone nullications should	ntity) of which , Grant, Gift, L only makes foundation m structions umber or ema	con, Scholars contributions nakes gifts, g	of the stock of a con has a 10% or great ship, etc., Programs: s to preselected chrants, etc., to individ	aritable organuals or organi	an equally I	arge portion of d does not accer other condition
a b	List any managers of before the close of any N/A  List any managers of ownership of a partner N/A  Information Regarding Check here X if tunsolicited requests for complete items 2a, b, of the name, address, a N/A  The form in which app  N/A  Any submission deadle	the foundation ship or other er g Contribution, he foundation or funds If the c, and d See inside telephone nullications should	ntity) of which , Grant, Gift, L only makes foundation m structions umber or ema	con, Scholars contributions nakes gifts, g	of the stock of a con has a 10% or great ship, etc., Programs: s to preselected chrants, etc., to individ	aritable organuals or organi	an equally I	arge portion of d does not accer other condition
a b c	List any managers of before the close of any N/A  List any managers of ownership of a partner N/A  Information Regarding Check here X if the unsolicited requests for complete items 2a, b, of the name, address, and N/A  The form in which app  N/A  Any submission deadling N/A	the foundation ship or other er g Contribution, he foundation or funds If the c, and d See ins and telephone nullications should nes	, Grant, Gift, L only makes foundation m structions umber or ema	contributions nakes gifts, g	of the stock of a con has a 10% or greater than the stock of a con has a 10% or greater than the person to whom a control and materials the	aritable organials or organials or organials or organials by should include	an equally I	arge portion of
a b c	List any managers of before the close of any N/A  List any managers of ownership of a partner  N/A  Information Regarding Check here ► X if the unsolicited requests for complete items 2a, b, of the name, address, and N/A  The form in which app  N/A  Any submission deadling  N/A  Any restrictions or line	the foundation ship or other er g Contribution, he foundation or funds If the c, and d See ins and telephone nullications should nes	, Grant, Gift, L only makes foundation m structions umber or ema	contributions nakes gifts, g	of the stock of a con has a 10% or greater than the stock of a con has a 10% or greater than the person to whom a control and materials the	aritable organials or organials or organials or organials by should include	an equally I	arge portion of
a b c	List any managers of before the close of any N/A  List any managers of ownership of a partner N/A  Information Regarding Check here X if the unsolicited requests for complete items 2a, b, of the name, address, and N/A  The form in which app  N/A  Any submission deadling N/A	the foundation ship or other er g Contribution, he foundation or funds If the c, and d See ins and telephone nullications should nes	, Grant, Gift, L only makes foundation m structions umber or ema	contributions nakes gifts, g	of the stock of a con has a 10% or greater than the stock of a con has a 10% or greater than the person to whom a control and materials the	aritable organials or organials or organials should include	an equally I	arge portion of
a b c	List any managers of before the close of any N/A  List any managers of ownership of a partner  N/A  Information Regarding Check here ► X if the unsolicited requests for complete items 2a, b, of the name, address, and N/A  The form in which app  N/A  Any submission deadling  N/A  Any restrictions or line	the foundation ship or other er g Contribution, he foundation or funds If the c, and d See ins and telephone nullications should nes	, Grant, Gift, L only makes foundation m structions umber or ema	contributions nakes gifts, g	of the stock of a con has a 10% or greater than the stock of a con has a 10% or greater than the person to whom a control and materials the	aritable organials or organials or organials should include	an equally I	arge portion of

art XV Supplementary Information	(continued)			
3 Grants and Contributions Paid Dur	ing the Year or Appl			
Recipient	If recipient is an individual show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)  a Paid during the year	or substantial contributor	recipient		
a raid during the year		1		
ATCH 6				
		1		
		}		
		]		
		, !		
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		, ,		
		l ,		
		)		
		1		
		}		
		1 1		
		<u> </u>		
Total	<del> </del>	<del></del>	▶ 3a	305,00
<b>b</b> Approved for future payment				
	1	1 1		
		1		
		1		
	1			
			1	

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Part XVI	Analysis of Income-Prod	ucing Act	ivities			
Enter gross	amounts unless otherwise indicated	Unrela (a)	ated business income (b)	Excluded by	y section 512, 513, or 514	(e) Related or exempt function income
1 Program	n service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
a						
b				ļ		
		 		<del> </del>		
			<del></del>	<del> </del>		
				<del> </del>		
f g Fees	and contracts from government agencies			<del> </del>		
_	ship dues and assessments			<del></del>		<del> </del>
	on savings and temporary cash investments •					
	ds and interest from securities			14	10.	
5 Net rent	al income or (loss) from real estate	ļ		ļ <u>.</u>		
a Debt	-financed property		ļ <del>_</del> _	<del> </del>		
	debt-financed property			<b> </b>		
6 Net renta	al income or (loss) from personal property		<u></u>	<del> </del>		
	vestment income	<del></del>		<del> </del> -		
•	loss) from sales of assets other than inventory			<del> </del>	<u> </u>	
	ome or (loss) from special events	<u> </u>		<del> </del>		
	rofit or (loss) from sales of inventory					
	venue a		<del></del>			<del></del>
						<del> </del>
. —						
е						
12 Subtota	Add columns (b), (d), and (e)			<u></u>	10.	
	dd line 12, columns (b), (d), and (e)				13	10.
	heet in line 13 instructions to verify calci				·	
Part XVI						
Line No.	Explain below how each activit					
▼	accomplishment of the foundation	on's exemp	t purposes (other than	by providing	funds for such purpose	s) (See instructions)
	N/A					
				-		
						<del></del>
						<del></del>
	<del> </del>				<del></del>	<del></del>
						<del></del>
	<del></del>					
					<del></del>	<del></del>
		<del></del>				
<del></del>	<del> </del>					

	XVII			sfers to and Transac	tions and	d Relations	ships \	With Nonc	hari		ge IJ
	ın sec			ngage in any of the follow 01(c)(3) organizations) o						Yes	No
	a Transfers from the reporting foundation to a noncharitable exempt organization of								ŭ		
	(1) Cash						1a(1) 1a(2)		X		
	b Other transactions										
	(1) Sales of assets to a noncharitable exempt organization								X		
	(2) Purchases of assets from a noncharitable exempt organization						1b(2)		X		
		•		ssets							Х
		_									Х
C	Sharin	g of facilities, equipr	ment, mailing lists	or fundraising solicitations , other assets, or paid empl	oyees				1c		X
,	value d	of the goods, other	assets, or service	" complete the following is given by the reporting filment, show in column (d)	foundation	If the found	ation re	eceived less	than	fair m	arke
(a) Lin		(b) Amount involved	<del></del>	charitable exempt organization	<del>- ,</del>	cription of transf					
		N/A			N/A						
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										_	
	descrit	oed in section 501(c	) (other than secti	ated with, or related to, on 501(c)(3)) or in section					Y	es X	 ] No
	11 163	" complete the follo (a) Name of organization		(b) Type of organization			(c) Descri	ption of relations	hip		
			<del></del>								
Sian	correc			I this return, including accompanying ayer) is based on all information of white	ch preparer has	any knowledge	o the best				
Sign Here		nature of officer or trustee		Date   10 / 18 /20 18	Title	FO		May the IRS with the pre	parer s		below?
		Print/Type preparer's na	ame	Preparer's signature		Date	10 c	heck if P	TIN		
Paid		MICHAEL R SAL		1		10/12/20	18 86		2017		3
Prep			RNST & YOUNG				Firm's El	N ▶34-65	655	96	
Use	Unly		O WOOD AVENUE SELIN, NJ	7 2001H	08	830	Phone n	732-51	6-43	200	
			THE INC				Phone ne			-PF	(2017)

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

Name of the organization	<del></del>	Employer identification number			
INDUS CHARITABLE FOUND					
C/O INDUS CAPITAL PART	26-1496848				
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 foundate	ion			
	501(c)(3) taxable private foundation				
<del></del>					
•	vered by the General Rule or a Special Rule.				
note: Only a section 501(c)(7), (instructions	(8), or (10) organization can check boxes for both the General Rule and a S	special Rule See			
General Rule					
	ing Form 990, 990-EZ, or 990-PF that received, during the year, contribution property) from any one contributor. Complete Parts I and II. See instructions				
Special Rules					
For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.					
Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					

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) (2017)

Name of organization INDUS CHARITABLE FOUNDATION INC C/O INDUS CAPITAL PARTNERS LLC

Employer identification number 26-1496848

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	INDUS CAPITAL PARTNERS  888 7TH AVENUE  NEW YORK, NY 10019	\$ 216,355.	Person  Payroll  Noncash  (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
<u></u>			Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
			Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
			Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
			Person Payroll Noncash (Complete Part II for noncash contributions)		

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization INDUS CHARITABLE FOUNDATION INC Employer identification number C/O INDUS CAPITAL PARTNERS LLC 26-1496848

Part ( Nonc	ash Property (see instructions) Use duplicate copies	of Part II if additional space is ne	eded
(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		_	
<del>-</del>		\ \$	
(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
		_	
		<del>_</del>	
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_			
\ <del></del>		\ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<del></del>			
		\ \$	

Name of o	rganization INDUS CHARITABLE FOUNDAT		Employer identification number				
Part III	C/O INDUS CAPITAL PARTNE		26-1496848				
Part III			butor. Complete columns (a) through (e) and				
			ne total of <i>exclusively</i> religious, charitable, etc.				
	contributions of \$1,000 or less for the y						
	Use duplicate copies of Part III if addition						
(a) No from	(b) Purpose of gift		(d) Description of how set in held				
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		<del></del>	L				
		(e) Transfer of gift					
	Transferee's name, address, and a	7IP + 4	Relationship of transferor to transferee				
	Tunorote o mano, auditos, una	····	Treatment of transfer to transfer to				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I	(b) i dipose of girl	(0, 000 0. g	(a) boompton of non-gire to held				
		(e) Transfer of gift					
	(c) Transier of girt						
	Transferee's name, address, and a	Relationship of transferor to transferee					
(a) No.	<del>                                     </del>						
from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I	<del> </del>						
		(e) Transfer of gift					
			B. Astronomorphisms of Association and Association				
	Transferee's name, address, and a	IP + 4	Relationship of transferor to transferee				
			<del></del>				
(a) No. from	(h) Burnosa of gift	(c) Use of gift	(d) Description of how gift is held				
Part I	(b) Purpose of gift		(u) Description of now girt is neith				
		(e) Transfer of gift					
	(e) Transier or girc						
	Transferee's name, address, and a	ZIP + 4	Relationship of transferor to transferee				

FORM 990PF, PART I - OTHER INCOME

REVENUE AND EXPENSES PER BOOKS

NET INVESTMENT INCOME 307,745.

207 715

TOTALS

DESCRIPTION SUBPART F INCOME - INDUS OMNI FUND

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990PF

CHARITABLE PURPOSES	9,052.	9,052.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	9,052.	9,052.
		TOTALS
DESCRIPTION	ERNST & YOUNG U.S. LLP	

FORM 990PF, PART I - OTHER EXPENSES

CHARITABLE PURPOSES 312.	312.
ADJUSTED NET INCOME	
NET INVESTMENT INCOME	
REVENUE AND EXPENSES PER BOOKS 312.	312.
	TOTALS
DESCRIPTION STATE FILING FEES	

INVESTMENTS
OTHER
- II
PART
990PF,
FORM

ENDING FMV	1,827,144.	1,827,192.
ENDING BOOK VALUE	890,585.	890,674.
DESCRIPTION	INDUS OMNI FUND, LTD ASIA PACIFIC DIST. HOLDINGS	TOTALS

ATTACHMENT 5 PAGE 25

ATTACHMENT 5	EXPENSE ACCT AND OTHER ALLOWANCES		.0	O	0.
ATTACH	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	.0	.0	Ö	0.
	COMPENSATION	· 0		· 0	0
FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TREASURER 1.00	SECRETARY 1.00	DIRECTOR 1.00	GRAND TOTALS
FORM 990PF, PART VIII - LI	NAME AND ADDRESS	JAMES WEINER 888 7TH AVENUE NEW YORK, NY 10019	BRIAN GUZMAN 888 7TH AVENUE NEW YORK, NY 10019	MATTHEW SIPPEL 888 7TH AVENUE NEW YORK, NY 10019	

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

AMOUNT	\$25,000	\$12,500	\$25,000	\$25,000	\$25,000
PURPOSE OF GRANT OR CONTRIBUTION	Support to solve pollution problems in low and middle income countries where human life is at risk.	Youth development support for NYC students in need.	Support children and families to end generational poverty.	To empower children and their families in Nicaragua to reach full potential and take advantage of economic opportunities.	Support to protect the drinking water supply of NYC and Hudson Valley Residents.
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	None PC	None PC	None PC	None PC	None PC
RECIPIENT NAME AND ADDRESS	Pure Earth/The Blacksmith Institute 475 Riverside Drive, Suite 860 New York, NY 10115	South Asian Youth Action (SAYA) 54-05 Seabury Street Elmhurst, NY 11373	Harlem Children's Zone 35 East 125th Street New York, NY 10035	Fabretto Children's Foundation 325 Commerce Street Alexandria, VA 22314	Riverkeeper 20 Secor Road Ossining, NY 10562

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AMOUNT	\$15,000	\$10,000	\$25,000	\$25,000
PURPOSE OF GRANT OR CONTRIBUTION	To support fund collaboration between doctors and researchers to fight a rare cancer.	Support for the safety, healing, and self-determination of victims of domestic violence and related forms of gender violence.	Support for women to graduate and become skilled an innovative professionals in Asia and throughout the world.	Support to transform the lives of the world's most vulnerable children.
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	None	None PC	None PC	None PC
RECIPIENT NAME AND ADDRESS	Cycle for Survival/ Memorial Sloan-Kettering Cancer Center 885 2nd Ave New York, NY 10017	Sanctuary for Families PO Box 1406 Wall Street Station New York, NY 10268	Asian University for Women 1100 Massachusetts Avenue, No 300 Cambridge, MA 02138	Global Fùnd for Children 1101 14th St NW No 420 Washington, DC 20005

AMOUNT	\$25, 000	\$15,000	\$7,500	\$5,000	\$10,000
PURPOSE OF GRANT OR CONTRIBUTION	To empower young women and girls in Afganistan through community-based education.	Support to empower girls and promote education in government schools.	To help save lives by reducing the impact of gynaecological cancers by raising awareness and educating the local community.	Support to improve the social and academic well-being of children in the Harlem community through active participation in hockey.	Fosters the advancing scientific research by creating/purchasing patent rights for inventions and design.
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	None PC	None PC	None PC	None PC	None PC
RECIPIENT NAME AND ADDRESS	Razıa's Ray of Hope Foundation PO Box 8102 Wellesley, MA 02481	Educate Girls Globally 1485 Main Street Saint Helena, CA 94574	Karen Leung Memorial Foundation USA 1180 AVENUE OF AMERICAS SUITE 842 NEW YORK, NY 10036	Ice Hockey in Harlem 127 West 127th Street, No 415 New York, NY 10014	Penn State Research Fund 304 Old Maın University Park, Pennsylvanıa 16802

Total