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.

		t of the Treasury venue Service		Do not enter : · Go to www.ı								// <i>O</i>	Open	o Public Ins	nection
			or tax year beginning		31,	2017		, and e		DEC		2017		or dolle in a	pection
		foundation			/			<u> </u>	-	T		ntification	number		
Ţ	<u>NK</u>	V Found	ation							35	<u>-71</u>	<u>77629</u>			
	-	•	oox number if mail is not d	elivered to street	address)				Room/suite	B Telepi					
		<u>. Box 7</u>								84	<u>3-6</u>	<u>86-38</u>	00		(
			ovince, country, and Z							C If exem	ption ap	olication is pi	ending, che	ck here	- \
			d Island,		<u>938-</u>					ł <u>.</u> . <u>.</u>					
G (Check	all that apply:	X Initial retur			Initial return o		mer public c	harity	D 1 For	eign or	ganizations	, check h	ere 🕨	-
			Final return		=	Amended retu	rn			2 Fore	eign orga	nizations mei nd attach coi	eting the 85	i% test,	
	`hook	thing of organia	Address ch	n 501(c)(3) ex		Name change			$\overline{\alpha}$	1					
<u>"-</u>	_	type of organiz) nonexempt charitable			able private fo		on	Ш	I		idation stat i 507(b)(1)		_	▶ □
L F				J Accounti				Accr	ual	1		ion is in a 6			
		Part II, col. (c), I		_	her (spec							507(b)(1)			~ "□
•	\$,	150,000.	(Part I, colun	nn (d) mu	st be on cash	basıs.)					(-)		
Pa	art I	☐ (The total of ame)	evenue and Expenses ounts in columns (b), (c), ar al the amounts in column (i	ıd (d) may not	(a) !	Revenue and nses per book		(b) Net in		(c)	Adjuste incom		for cha	Disbursemer Iritable purpo sh basis only	oses
	1		gifts, grants, etc., rece			150,00	0.				N/A		,		}
	2		if the foundation is not required t												1
λ	3	Interest on saving	gs and temporary												!
`\	4	Dividends and	interest from securities	8											
	5a	Gross rents													
	b	Net rental income	or (loss)	· 						-					
ē	6a	Gross sales price	from sale of assets not on for all	line 10		•									
Revenue	_b	assets on line 6a							0.	-					
æ	′	Capital gain net ii Net short-term					+		<u> </u>						
	8	Income modifi	, -				\dashv			-					
	1.	Gross sales less and allowances	returns												
	1 _	Less Cost of goo	ods sold												
	C	Gross profit or	(loss)												
	11	Other income								ļ					
	12	Total. Add line	es 1 through 11			150,00			0.						
	13	•	officers, directors, trustee	s, etc			0.		0.	-					0.
	14		e salaries and wages				-+					_			
Š	15	Legal fees	employee benefits												
Că.	loa h	Accounting fee	ac .							R	ECE	IVED			
Ş	"	Other profession			<u> </u>					_			70		
Ze	17	Interest				-			5	14	м '0	8 2020	ő		
THE STATE OF THE S	18	Taxes							C	35	1 V		RS-OSC		
	19	Depreciation a	nd depletion								<u> </u>	NI 117	=		
يِّي	20	Occupancy									シレニ	N, U7			
S¥.	21	-	nces, and meetings							-					
P.	22	Printing and pr					\perp								
Zing	23	Other expense				<u>_</u>	+			-					
0202 L. I. NAGministrative Expenses	24		g and administrative			ı	_		0.						Λ
200	25	•	d lines 13 through 23				0.	-	U •	 		-			0.
	25 26		gifts, grants paid s and disbursements				•				-				<u> </u>
	20	Add lines 24 a					0.		0.						0.
	27	Subtract line 2			-		*			<u> </u>					
			e over expenses and disbu	rsements		150,00	0.			L_					
	l .		t income (if negative, en						0.						
	C	Adjusted net i	ncome (if negative, enter	-0-)					•		N/A				!

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Form **990-PF** (2017)

Form 990-PF (2017)

TNKV Foundation

(a) List and describe	and Losses for Tax of the kind(s) of property sold (for varehouse; or common stock, 20	r example, real estate		(b) How acc P - Purch D - Dona	ase	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)		
1a				D - Dolla	.1011				
	ONE		_			_			
С									
d									
e									
(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis pense of sale		(h) Gain or (loss) ((e) plus (f) minus (g))				
<u>a</u>									
<u>b</u>									
<u>c</u>									
<u>d</u>									
Consolità colli fau acceta chi cui		d b the formedation	10/01/00						
Complete only for assets snow	ing gain in column (h) and owne	<u> </u>		(I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or					
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ess of col. (i) ol. (j), if any		Losses (from col. (h))				
_a									
_ b	ļ		,						
<u>C</u>									
<u>d</u>									
<u>e</u>									
2 Capital gain net income or (net c	$ \begin{cases} \text{If gain, also} \\ \text{If (loss), en} \end{cases} $	enter in Part I, line 7 ter -0- in Part I, line 7	,	} 2					
3 Net short-term capital gain or (lo If gain, also enter in Part I, line 8		(5) and (6):							
If (loss), enter -0- in Part I, line 8	3] 3					
Part V Qualification (Inder Section 4940(e)	for Reduced	Tax on Net	Investm	ent Inc	ome			
(For optional use by domestic prival If section 4940(d)(2) applies, leave Was the foundation liable for the set	this part blank.						N/A Yes		
If "Yes," the foundation doesn't qual									
1 Enter the appropriate amount in	each column for each year; see	the instructions befo	re making any er	itries.					
(a) Base period years Calendar year (or tax year beginn	(b) Adjusted qualifyin		Net value of nor	(c) ncharitable-u	se assets	(d) Distribution ratio s (col. (b) divided by col. (c))			
2016					· · · · · ·				
2015									
2014									
2013									
2012						 			
2 Total of line 1, column (d)						2			
3 Average distribution ratio for the	· ·	total on line 2 by 5.0,	or by the number	r of years					
the foundation has been in existe	ence it less than 5 years					3			
4 Enter the net value of noncharita	ble-use assets for 2017 from Pa	ırt X, line 5				4			
5 Multiply line 4 by line 3						5			
6 Enter 1% of net investment inco	me (1% of Part I, line 27b)					6			
7 Add lines 5 and 6						7			
8 Enter qualifying distributions from	m Part XII, line 4					8			
If line 8 is equal to or greater tha See the Part VI instructions.	n line 7, check the box in Part V	l, line 1b, and comple	ete that part using	a 1% tax ra	te.				

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	990-Pr (2017) TNKV Foundation	(a) 4040(b)			1//629		Page 4
	rt VI 'Excise Tax Based on Investment Income (Section 4940		4940(e), or 4	940 - 3	see instru	JCUO	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and en		.] [1
	Date of ruling or determination letter: (attach copy of letter if nece					-	1
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and enter 1	% }	1			<u> </u>
	of Part I, line 27b						1
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4%		col. (b).)	-			1
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; other	ers, enter -0-)	-	2			<u>0.</u>
-	Add lines 1 and 2	-	3			0.	
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; other	ners, enter -0-)	-	4			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		}	5			0.
	Credits/Payments:	1 - 1					ĺ
	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	0.				i
	Exempt foreign organizations - tax withheld at source	6b	0.				í
	Tax paid with application for extension of time to file (Form 8868)	6c	0.				:
	Backup withholding erroneously withheld	6d	0.	-			
	Total credits and payments. Add lines 6a through 6d	}-	-/			0.	
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attac	_ }	8			0.	
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		?	9			<u> </u>
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		loséus de d	10			
	Enter the amount of line 10 to be: Credited to 2018 estimated tax rt VII-A Statements Regarding Activities		Refunded >	11			
	During the tax year, did the foundation attempt to influence any national, state, or local legisla	tion or did it partie	nosto or intervene	ın	-	Yes	No
ıa	any political campaign?	ition or the it partit	sipate of intervene i	111	1a	.03	X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposi	tions for the definit	tion	1b		X	
U	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of		livii	10			
	distributed by the foundation in connection with the activities.	iisiieu ui					
c	Did the foundation file Form 1120-POL for this year?			1c		X	
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the			10			
٠	(1) On the foundation. > \$ 0. (2) On foundation managers.		0.				{
e	Enter the reimbursement (if any) paid by the foundation during the year for political expendition	-					[
Ť	managers. ►\$ 0.	3.0 taxp0000 0.	. Touridation				1 1
2	Has the foundation engaged in any activities that have not previously been reported to the IR.	S?			2		X
_	If "Yes," attach a detailed description of the activities	_					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing in	strument, articles	of incorporation, or				'
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	,	,,,		3	7 ~	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year	?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?			N/.	A. 4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		X
	If "Yes," attach the statement required by General Instruction T						i
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eith	ner:					. 1
	By language in the governing instrument, or						ı
	 By state legislation that effectively amends the governing instrument so that no mandatory 	directions that cor	flict with the state	law			, - <u>j</u>
	remain in the governing instrument?				6		<u>X</u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comple	ete Part II, col. (c),	and Part XV		7	Х	
8a	Enter the states to which the foundation reports or with which it is registered. See instruction	s. Non	e				
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Att	orney General (or	designate)			_	
	of each state as required by General Instruction G? If "No," attach explanation				8b	X	h
9	Is the foundation claiming status as a private operating foundation within the meaning of sec		4942(j)(5) for calen	ıdar			_ /)
	year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," comp				9		<u>x</u> ()
<u>10</u>	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule	listing their names ar	nd addresses		10	لـــِــا	<u>x</u> 5
					Form 99 ()-PF	(2017)

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Pa	ırt VII-A	Statements Regarding Activities (continued)				
					Yes	No
11	At any time	during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				
		2(b)(13)? If "Yes," attach schedule. See instructions		11		X
12		ndation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory p	orivileges?			
-		ach statement. See instructions	Ū	12		X
13		ndation comply with the public inspection requirements for its annual returns and exemption application?		13	Х	
		dress ► N/A				
14		are in care of Kumar K. Viswanthan Telephone no.	▶843-68	36-3	800	
•	Located at	▶PO Box 7567, Hilton Head, SC	ZIP+4 ▶29			
15		47(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here				
		ne amount of tax-exempt interest received or accrued during the year	15	N	/A	
16		during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,			Yes	No
	-	or other financial account in a foreign country?		16		Х
		tructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the		1.0		
	foreign cou					
Pa	rt VII-B	Statements Regarding Activities for Which Form 4720 May Be Required		<u> </u>		
		4720 if any item is checked in the "Yes" column, unless an exception applies.		T	Yes	No
12		year, did the foundation (either directly or indirectly):				
			es X No			
		w money from, lend money to, or otherwise extend credit to (or accept it from)				
			es 🗓 No			
	•		es X No			
			es X No			
	• •	er any income or assets to a disqualified person (or make any of either available	13 140			
			es X No			l
		to pay money or property to a government official? (Exception. Check "No"	55 22 110			
						l
		oundation agreed to make a grant to or to employ the official for a period after	es X No			
		, , , , , , , , , , , , , , , , , , , ,	es LAL NO			
D		er is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	N/A			
		4941(d)-3 or in a current notice regarding disaster assistance? See instructions	N/A	1b		
		ns relying on a current notice regarding disaster assistance, check here				ĺ
C		ndation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		4-		v
		irst day of the tax year beginning in 2017?		1c		X
2		illure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation				
		ection 4942(j)(3) or 4942(j)(5)):				
а		of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning				
	before 201		es X No			
	=	the years				
D		ny years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrec				ľ
		f accots) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach				
		see instructions.)	N/A	2b		
C	IT the provi	cione of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				1
_	D 100 6					1
За		ndation hold more than a 2% direct or indirect interest in any business enterprise at any time				
	during the		es X No			
b		it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons af				
		69; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to d	Ispose			
		acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	/-	-		
		to determine if the foundation had excess business holdings in 2017.)	N/A	3b		
		ndation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
b		ndation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpos	e that			
	had not ho	on removed from leaguedy hefore the first day of the tay year healinging in 20172		1 /11/	I	l V

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Part VII-B Statements Regarding Activities for Which	Form 4/20 May Be I	Required (contin	ued)	INC.	
5a During the year, did the foundation pay or incur any amount to:				Ye	s No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y ₁	es X No		
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indir				
any voter registration drive?	_		es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section				
4945(d)(4)(A)? See instructions			es X No	ŀ	
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or i				
the prevention of cruelty to children or animals?			es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	· ·	in Regulations	37/3		
section 53.4945 or in a current notice regarding disaster assistance? See instr			N/A	5b	_
Organizations relying on a current notice regarding disaster assistance, check				ł	-[
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f			i		
expenditure responsibility for the grant?	N	I/A LY	es L No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	<u> </u>	. .		
a personal benefit contract?		Ye	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal denetit contract?		-	6b	<u> </u>
If "Yes" to 6b, file Form 8870.	shalter transaction?	[]	es X No		
7a At any time during the tax year, was the foundation a party to a prohibited tax		Y6		76	
Part VIII Information About Officers, Directors, Trust		nagore Highly		7b	
Paid Employees, and Contractors	.ees, Foundation Ma	illagers, riigili	,	•	
1 List all officers, directors, trustees, and foundation managers and f	their compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) E	xpense nt, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	accour	nt, other vances
Kumar K. Viswanathan	Trustee	Ciner o y	oompensaaon		
PO Box 7567	1145000				
Hilton Head, SC 29938	1.00	0.	0.		0.
	1			ļ	
	1			ŀ	
	1				
	1				
	1				
	1				
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1). If none,	enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Ex	xpense nt, other
(a) wante and address of each employee paid more than 450,000	devoted to position	(C) Compensation	and deferred compensation	allow	vances
NONE]				
	<u></u> _				
					_
•					
Total number of other employees paid over \$50,000			•		0

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Part VIII' Information About Officers, Directors, Trustees, Paid Employees, and Contractors (continued)	Foundation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If no	one, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include releasement of organizations and other beneficiaries served, conferences convened, research p	vant statistical information such as the papers produced, etc.	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the t	ax year on lines 1 and 2.	Amount
1 N/A		
0		
2		
All other program-related investments. See instructions.		
3		
Total Add lines 1 through 3	•	0.

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Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

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0.

3a

3h

4

Suitability test (prior IRS approval required)

income. Enter 1% of Part I, line 27b

b Cash distribution test (attach the required schedule)

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1	Distributable amount for 2017 from Part XI,	537,632			
•	line 7				0.
2	Undistributed income, if any, as of the end of 2017		+	_	
	a Enter amount for 2016 only			0.	,
	b Total for prior years:				-
	, ,		0.		
3	Excess distributions carryover, if any, to 2017:				
	a From 2012		·		•
	b From 2013				
	c From 2014				
	d From 2015				
	e From 2016				,
	f Total of lines 3a through e	0.			
4	Qualifying distributions for 2017 from				
	Part XII, line 4: ► \$0 .				
	a Applied to 2016, but not more than line 2a			0.	
	b Applied to undistributed income of prior				
	years (Election required - see instructions)		0.		
	c Treated as distributions out of corpus				·
	(Election required - see instructions)	0.			
	d Applied to 2017 distributable amount				0.
	e Remaining amount distributed out of corpus	0.			
5	Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6	Enter the net total of each column as indicated below:				
	2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			•
	b Prior years' undistributed income. Subtract		· · ·		, , , , ,
	line 4b from line 2b		0.		
	c Enter the amount of prior years'				
	undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
	d Subtract line 6c from line 6b. Taxable			· · · · · · · · · · · · · · · · · · ·	
	amount - see instructions		0.		
	e Undistributed income for 2016. Subtract line			· · · · · · · · · · · · · · · · · · ·	
	4a from line 2a. Taxable amount - see instr.			0.	
	f Undistributed income for 2017. Subtract	-		-	
	lines 4d and 5 from line 1. This amount must				
	be distributed in 2018				0.
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by				!
	section 170(b)(1)(F) or 4942(g)(3) (Election				
	may be required - see instructions)	0.			·
8	Excess distributions carryover from 2012		·		
	not applied on line 5 or line 7	0.			
9	Excess distributions carryover to 2018.				
	Subtract lines 7 and 8 from line 6a	0.			
10	Analysis of line 9:				
	a Excess from 2013				!
	b Excess from 2014				
	c Excess from 2015				
	d Excess from 2016				
	e Excess from 2017				

	undation		<u></u>	35-71	77629 Page 1
Part XIV Private Operating F	oundations (see in	nstructions and Part V	II-A, question 9)	N/A	
1 a Jf the foundation has received a ruling of	r determination letter tha	it it is a private operating			
foundation, and the ruling is effective fo	r 2017, enter the date of	the ruling	▶ ∟		
b Check box to indicate whether the found	dation is a private operati	ing foundation described		4942(<u>J)(3)</u> or49)42(j)(5)/
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.			1		
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)		1			
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year			•		
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					l
investment income (interest, dividends, rents, payments op		-			l
securities loans (section					l
512(a)(5)), or royalties					
(2) Support from general public					ı
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					<u> </u>
(3) Largest amount of support from					
an exempt organization			<u> </u>		
(4) Gross investment income					
Part XV Supplementary Info			if the foundatio	n had \$5,000 or mo	re in assets
at any time during t	he year-see insti	ructions.)			
1 Information Regarding Foundation	n Managers:	,			
a List any managers of the foundation wh			tributions received by th	e foundation before the clos	e of any tax
year (but only if they have contributed in	iore than \$5,000). (See s	section 507(a)(2).)			
None					
b List any managers of the foundation who			(or an equally large port	tion of the ownership of a pa	irtnership or
other entity) of which the foundation has	s a 10% or greater intere	SI.			
None					
2 Information Regarding Contributi					
Check here X if the foundation o					ests for funds. If
the foundation makes gifts, grants, etc.,					· · · · · · · · · · · · · · · · · · ·
a The name, address, and telephone number	per or email address of the	he person to whom appli	cations should be addre	ssed:	
b The form in which applications should b	e submitted and informa	tion and materials they s	nould include:		
c Any submission deadlines:					
,					
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields	, kınds of institutions, or	other factors:	

orm 990-PF (2017) TNKV Founda Part XV Supplementary Information	tion		35-717	7629 Page 1
Grants and Contributions Paid During the Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
None				
Tabel		<u></u>	> 20	
b Approved for future payment			▶ 3a	<u>.</u>
None				
1.0110				
	+			
	<u> </u>			
Total			► ah	(

TOTH 300 TT (2017)	TIVILY TOUTIQUE	1011		<u> </u>				
Part XVI-A Analysis of Income-Producing Activities								
Enter gross amounts unless otherwise indicated.		Unrelated business income	Excluded by section 512, 513, or 514					

Enter gross amounts unless otherwise indicated.			Excluded by section 512, 513, or 51		514 (e)	
•	(a) Business code	(b) Amount	(C) Exclu- sion code		Related or exempt function income	
1 Program service revenue:	COUE			<u> </u>		
<u>a</u>						
b					<u> </u>	
C			1			
d	-					
e	-					
g Fees and contracts from government agencies			-			
Membership dues and assessments			 			
3 Interest on savings and temporary cash			<u> </u>			
investments						
4 Dividends and interest from securities			1			
5 Net rental income or (loss) from real estate:						
a Debt-financed property						
b Not debt-financed property				-		
6 Net rental income or (loss) from personal						
property						
7 Other investment income						
8 Gain or (loss) from sales of assets other			-			
than inventory						
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue:						
a		•				
b	_	· ,				
c						
d						
e						
12 Subtotal. Add columns (b), (d), and (e)		0.		0.	0.	
13 Total. Add line 12, columns (b), (d), and (e)	·				0.	
(See worksheet in line 13 instructions to verify calculations.)				_		
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	t Purposes		
Line No. Explain below how each activity for which incom			contrib	outed importantly to the accor	nplishment of	
the foundation's exempt purposes (other than b	y providing fu	nds for such purposes).				
					<u> </u>	
					-	
					-	
					-	

Form 990 Part X			and Transactions a	35 nd Relationships With No	-7177629 oncharitable		age 13
1 Did 1		rectly engage in any of the following	ng with any other organization	on described in section 501(c)		Yes	No
		nizations) or in section 527, relatin					
		lation to a noncharitable exempt or					
(1)	Cash				1a(1)		_x
(2)	Other assets				1a(2)		X
b Othe	er transactions:						
(1)	Sales of assets to a noncharita	ible exempt organization			1b(1)		<u>X</u>
		oncharitable exempt organization			<u>1b(2)</u>		X_
	Rental of facilities, equipment,				1b(3)		X
	Reimbursement arrangements	3			1b(4)		X
	Loans or loan guarantees	ambarahin ar fundasing saliaitatu			1b(5)		X
٠.		embership or fundraising solicitation			1b(6)		X
		ailing lists, other assets, or paid em		vays show the fair market value of the	1c	L	
			• •	e in any transaction or sharing arrang	•	eto,	
		other assets, or services received.		o in any manoaction of charming arraing	joinione, onow in		
(a) Line no	(b) Amount involved	(c) Name of noncharitable		(d) Description of transfers, transact	tions, and sharing ar	rangeme	nts
-		N/A			-		
			- · · · · · · · · · · · · · · · · · · ·				
						_	
				<u> </u>			
	-		· · ·	-			
			 .				
			-				
ın se	ction 501(c) (other than sectio	tly affiliated with, or related to, one in 501(c)(3)) or in section 527?	or more tax-exempt organiz	zations described	Yes	X] No
<u>b</u> If "Ye	es," complete the following sch		(b) Topo of succession				
	(a) Name of org	janization	(b) Type of organization	(c) Description of	relationship		
	N/A		-			_	
			-				
						·	
		pplete Declaration of preparer (other than 1800)		statements, and to the best of my knowledge ation of which preparer has any knowledge	May the IRS of return with the shown below: X Yes	prepare	er .
	Print/Type preparer's na			Date Check If	PTIN		
	Type properties of the	1 10001010	2 000	self- employed			
Paid	Robert J A	rundell 7	2	13/2020	P00840	945	
Prepar	rer Firm's name ► Min	or, Haight & Ar	undell. P.C.		$\frac{100010}{57-09952}$		
Use O	nly		,			-	
	Firm's address ▶ P .	0. Box 6067					
· · · · · · · · · · · · · · · · ·		<u>lton Head Islan</u>	d, SC 29938	Phone no. 84	<u> 13-785-8</u>	040	
					Form 990	-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

Employer identification number

TN	IKV Foundation	35-7177629	
Organization type (check o	-		
Filers of:	: Section:		
Form 990 or 990-EZ	501(c)() (enter number) organization		
	4947(a)(1) nonexempt charitable trust not treated as a private foundation		
	527 political organization		
Form 990-PF	X 501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as a private foundation		
	501(c)(3) taxable private foundation		
•	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le See instructions	
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor.		
Special Rules			
sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, ir, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount line 1 Complete Parts I and II	or 16b, and that received from	
year, total contribu	a described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educately to children or animals. Complete Parts I, II, and III	• •	
year, contributions is checked, enter h purpose Don't con	a described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a exclusively for religious, charitable, etc., purposes, but no such contributions totaled materie the total contributions that were received during the year for an exclusively religious inplete any of the parts unless the General Rule applies to this organization because it re, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000 If this box , charitable, etc ,	
but it must answer "No" on certify that it doesn't meet the	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fe Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fo he filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). ction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B	orm 990-PF, Part I, line 2, to	

Name of organization

Employer identification number

		-		
TNKV	$\mathbf{F} \cap \mathbf{H}$	nda	+ 1	On
T TAT/	rou	nua		-11

35-7177629

Part I	Contributors (see instructions) Use duplicate copies of Part I	ıf addıtıonal space ıs needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Kumar K. Viswanathan PO Box 7567 Hilton Head, SC 29938	\$150,000.	Person X Payroll
(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)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II for noncash contributions)
23452 11-0	1-17	Schedule B (Form	990, 990-EZ, or 990-PF) (2017)

Name of organization

Employer identification number

TNKV Foundation

35-7177629

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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	· · · · · · · · · · · · · · · · · · ·	\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	•	\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

ame of orgain	ization			Employer identification number	
NKV Fo	oundation			35-7177629	
Part III	Exclusively religious, charitable, etc., contrible year from any one contributor. Complete of completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	olumns (a) through (e) and the follow charitable, etc., contributions of \$1,000 o	wing line entry, For organization	or (10) that total more than \$1,000 for	
(a) No. from Part I	(b) Purpose of gift			(d) Description of how gift is held	
_					
		(e) Transfer of gif			
-	Transferee's name, address, and	d ZIP + 4	Relationship of tr	ansferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	(d) Description of how gift is held	
		(e) Transfer of git	ft		
-	Transferee's name, address, and ZIP + 4		Relationship of tr	ansferor to transferee	
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held	
Part I _					
-		(e) Transfer of git	tt		
-	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
(a) No. from					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held	
_ -		(e) Transfer of git	it		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
-					

Form 990-PF

Reasonable Cause for Late Filing

Statement

1

The Foundation did not receive its Determination Letter until 2/16, 2018 and did not become active and had no activity of any kind except for a single contribution by the grantor of the Foundation made on 12/28/2017. There was no activity of any kind in 2018 and no activity until the end of 2019 which brought the current situation to the forefront. In addition, the formation of the Foundation was handled exclusively by a law firm in Atlanta, Georgia and, apparently, there was confusion between that law firm and the grantor's Form 1040 tax preparer concerning the Foundation's filing responsibilties. As this is a new Foundation and the oversight was corrected as soon as discovered and that any penalties will only diminish the funds available for the Foundation to further its charitable purpose, the grantor respectfully requests a waiver of the failure to file penalty.