### SCANNED F

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

2018

Open to Public Inspection

For calendar year 2018 or tax year beginning 10/01/18, and ending 09/30/19Name of foundation Employer identification number JAGANNATHAN CHARITABLE TRUST 36-7288675 Number and street (or P O box number if mail is not delivered to street address) Room/suite Telephone number (see instructions) 1958 CORNELIA 309-343-3585 City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here **GALESBURG** 61401 IL G Check all that apply Initial return Initial return of a former public charity Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the Address change 85% test, check here and attach computation Name change Check type of organization X Section 501(c)(3) exempt private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation  $\mathbf{X}$ I Fair market value of all assets at Accounting method Cash If the foundation is in a 60-month termination end of year (from Part II, col (c), under section 507(b)(1)(B), check here Other (specify) 528,764 line 16) ▶ \$ (Part I, column (d) must be on cash basis ) (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily equal expenses per ıncome purposes books the amounts in column (a) (see instructions) ) (cash basis only) 26,000 Contributions, gifts, grants, etc , received (attach schedule) 1 2 if the foundation is **not** required to attach Sch. B 68 68 68 3 Interest on savings and temporary cash investments 21,175 21,175 21,175 4 Dividends and interest from securities 5a Gross rents Net rental income or (loss) Stmt 1 36,810 Net gain or (loss) from sale of assets not on line 10 136,054 Gross sales price for all assets on line 6a 8,995 Capital gain net income (from Part IV, line 2) 0 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold С Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 30,238 21,243 84,053 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages RECEIVED 15 Pension plans, employee benefits Legal fees (attach schedule) Stmt 2 1,020 1,020 Accounting fees (attach schedule) Other professional fees (attach schedule) 17 <del>OGDEN</del> Stmt 3 407 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications Stmt 4 4,945 4,930 15 23 Other expenses (att sch ) 24 Total operating and administrative expenses. Add lines 13 through 23 6,372 4,930 0 1,035 30,718 30,718 25 Contributions, gifts, grants paid 31,753 37,090 4,930 0 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 46,963 Excess of revenue over expenses and disbursements 25,308 Net investment income (if negative, enter -0-) 21,243 Adjusted net income (if negative, enter -0-)

1 Cash – non-interest-bearing		Part I	Balance Sheets Attached schedules and amounts in the description columns of	mn	Beginning of year	End o	f year
2 Savings and temporary cash investments  3 Accounts receivable P Less allowance for doubtful accounts ▶ 4 Pledges receivable P Less allowance for doubtful accounts ▶ 5 Grants receivable P Less allowance for doubtful accounts ▶ 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 7 Other rose as does receivable all acidades ▶ Less allowance for doubtful accounts ▶ 0 Investments — Carbonal schedule) (see instructions) 1 Investments — Gardan Sakok (attach schedule) 2 Investments — Corporate bonds (attach schedule) 2 Investments — Corporate bonds (attach schedule) 2 Investments — Corporate bonds (attach schedule) 3 Investments — Corporate bonds (attach schedule) 4 Investments — Corporate bonds (attach schedule) 5 Investments — Corporate bonds (attach schedule) 6 Investments — Corporate bonds (attach schedule) 7 Investments — Corporate bonds (attach schedule) 8 Investments — Corporate bonds (attach schedule) 9 Investments — Corporate bonds (attach schedule) 1 Investments — Corporate bonds (attach schedule) 2 Invest	_		should be for end-of-year amounts only (See instruction	is )	(a) Book Value	(b) Book Value	(c) Fair Market Value
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Instructions)  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize)  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize)  5 Decreases not included in line 2 (itemize)	ď		•		-		
Instructions)  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize)  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize)  5 Decreases not included in line 2 (itemize)	림		•				
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Instructions)  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize)  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize)  5 Decreases not included in line 2 (itemize)	ets		• • • • • • • • • • • • • • • • • • • •				
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Instructions)  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year − Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶  5	ž	1 - 1	•	l	,		
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end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶  5		Part II	Analysis of Changes in Net Assets or Fund Balan	ces	, , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·	
2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶  5 Decreases not included in line 2 (itemize) ▶	1	Total	net assets or fund balances at beginning of year - Part II, column (a), lir	ne 30 (mus	st agree with		
2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶  5 Decreases not included in line 2 (itemize) ▶			- • •	•	=	1	452,956
3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Decreases not included in line 2 (itemize) ▶ 5	2	Enter	amount from Part I, line 27a			2	
4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 5	3	Other	ıncreases not included in line 2 (itemize) ▶				
5 Decreases not included in line 2 (itemize) ▶ 5	·						499,919
6 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30 6 499, 919	5	Decre	ases not included in line 2 (itemize) ▶			5	
	6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II,	column (b	o), line 30	6	499,919

Part IV Capital Gains a	and Losses for Tax on Investme	ent Income						
	the kind(s) of property sold (for example, real estate, arehouse, or common stock, 200 shs MLC Co )		(b) How acquired P – Purchase D – Donation	(c) Date acqu (mo , day, y				
1a LONG-TERM CAPIT	TAL GAINS DIST							
_ <u>b</u>								
_ c								
<u>d</u>	=							
e								
(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale		(h) Gain or (toss) ) plus (f) minus (g))			
a 8,995					8,995			
<u>b</u>		_						
С								
d					······································			
<u>e</u>								
Complete only for assets showin	g gain in column (h) and owned by the fo	oundation on 12/31/6	69	(I) Gai	ns (Col. (h) gain minus			
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i) (j), if any		col (k), but not less than -0-) or Losses (from col (h))			
_a	•				8,995			
<u>b</u>								
d								
е								
2 Capital gain net income or (net c	apital loss) If gain, also enter in If (loss), enter -0- in If			2	8,995			
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) and (6	)						
If gain, also enter in Part I, line 8	, column (c) See instructions. If (loss), e	nter -0- ın						
Part I, line 8				3				
Part V Qualification Un	nder Section 4940(e) for Reduc	ed Tax on Net	Investment Incor	ne				
(For optional use by domestic private	e foundations subject to the section 4940	(a) tax on net invest	ment income)					
If section 4940(d)(2) applies, leave th	nis part blank							
	·							
	tion 4942 tax on the distributable amount	• •	pase period?		Yes X No			
<u> </u>	y under section 4940(e) Do not complete							
	each column for each year, see the instru	uctions before makii	ng any entries	γ				
(a) Base period years	(b)		(c)		(d) Distribution ratio			
Calendar year (or tax year beginning in			e of noncharitable-use assets		col (b) divided by col (c))			
2017		,742	458,1		0.051821			
2016		,206	441,0		0.134231			
2015		, 612	426,7		0.029554			
2014		,569	457,0	65	0.099699			
2013	12,	, 408	457,7	29	0.027108			
2 Total of line 1, column (d)				2	0.342413			
3 Average distribution ratio for the	5-year base period – divide the total on li	ne 2 by 5 0, or by						
the number of years the foundation	on has been in existence if less than 5 ye	ears		3	0.068483			
4 Enter the net value of noncharital	ble-use assets for 2018 from Part X, line	5		4	448,339			
5 Multiply line 4 by line 3				5	30,704			
6 Enter 1% of net investment incon	ne (1% of Part I, line 27b)			6	253			
7 Add lines 5 and 6				7	30,957			
8 Enter qualifying distributions from	Part XII. line 4			8	31,753			
· · · · · ·	n line 7, check the box in Part VI, line 1b,	and complete that (	part using a 1% tax ra					

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Form	990-PF (2018) JAGANNATHAN CHARITABLE TRUST 36-7288675			Pi	age 4	ļ		
_Pa	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)		·· <del>·</del> ·······			-		
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1							
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)							
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check				<u> 253</u>	_		
	here ▶ X 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	3 Add lines 1 and 2							
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-		.,		253			
6	Credits/Payments							
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 6a							
b	Exempt foreign organizations – tax withheld at source 6b							
С	Tax paid with application for extension of time to file (Form 8868)  6c							
d	Backup withholding erroneously withheld 6d 6d							
7	Total credits and payments Add lines 6a through 6d							
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached8							
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			2	253			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	)						
11	Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ Refunded ▶ 1							
Pa	rt VII-A Statements Regarding Activities							
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No			
	participate or intervene in any political campaign?		1a		<u> </u>			
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the							
	instructions for the definition		1b		X			
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials							
	published or distributed by the foundation in connection with the activities							
С	Did the foundation file Form 1120-POL for this year?	N/A	1c					
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year							
	(1) On the foundation <b>&gt;</b> \$ (2) On foundation managers <b>&gt;</b> \$							
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed							
	on foundation managers > \$							
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X			
	If "Yes," attach a detailed description of the activities							
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of							
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X			
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b					
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5_		X			
	If "Yes," attach the statement required by General Instruction T							
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either							
	By language in the governing instrument, or							
	By state legislation that effectively amends the governing instrument so that no mandatory directions that							
	conflict 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 X'	/	7	X				
8a	Enter the states to which the foundation reports or with which it is registered. See instructions   IL							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General							
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b		X			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or							
	4942(j)(5) for calendar year 2018 or the taxable year beginning in 2018? See instructions for Part XIV If "Yes,"					^		
	complete Part XIV		9	Х		1		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their							
	names and addresses		10		X			
		F	orm 99	0-PF	(2018)	ı		

<u> P</u>	art 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 section 512(b)(13)? If "Yes," attach schedule See instructions	- 1	_11_		_ X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified				
40	person had advisory privileges? If "Yes," attach statement. See instructions	}	12	7.	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address   N/A	l	13	X	
14	The books are in care of ► SUBBIA JAGANNATHAN  Telephone no ► 30	a_3	43-	358	5
14	1958 CORNELIA	, ,	40	550	,
	Located at ▶ GALESBURG IL ZIP+4 ▶ 61	401			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> – check here				▶ [
	and enter the amount of tax-exempt interest received or accrued during the year				
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority			Yes	No
	over a bank, securities, or other financial account in a foreign country?	[	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of				
	the foreign country ▶				
P	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year, did the foundation (either directly or indirectly)				
		Vo			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?  Yes X I				
		ol ol			
		No.			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	•			
		No		l	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the				
	foundation agreed to make a grant to or to employ the official for a period after				
	termination of government service, if terminating within 90 days )	10			
þ	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations				
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here	$\supset \mid$			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	.			
		/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private				
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))				
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018?  Yes X	.			
	6e, Part XIII) for tax year(s) beginning before 2018?  If "Yes," list the years ▶ 20 , 20 , 20 , 20	No	- 1		
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)				
-	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to				
		/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here				
	<b>▶</b> 20 , 20 , 20 , 20				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise				
	at any time during the year?	10			
b	If "Yes," did it have excess business holdings in 2018 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		1		
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of				
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	,			
4-	foundation had excess business holdings in 2018 )  N/	A	3b		
4a h	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?  Did the foundation make any investment in a prior year (but offer December 31, 1969) that equild reposition its	ŀ	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?		46	ŀ	x
	one make purpose that had not been removed from Jeopardy before the first day of the tax year beginning in 2018?		4b	0-PF	
		FO.	33	<b>√</b> 1 1	12010

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	990-PF (2018) JAGANNATHA			7288675			Р	age <b>€</b>			
		rding Activities for Which F	orm 4/20 May Be I	Required (con	tinued)	T	1.,	Ι			
5a	<b>3</b> ,	•			Yes X No		Yes	No			
	(1) Carry on propaganda, or otherwis	,	· ··								
	(2) Influence the outcome of any spe	•	ob), or to carry on,		V <b>V</b> N-						
	directly or indirectly, any voter reg		2	<b>H</b>	Yes X No Yes X No						
	(3) Provide a grant to an individual for	• • • • • • • • • • • • • • • • • • • •			Yes X No						
	(4) Provide a grant to an organization section 4945(d)(4)(A)? See instru		ization described in		Yes X No						
	(5) Provide for any purpose other that		rany or advicational		Yes X No						
	purposes, or for the prevention of	•	rary, or educational		Yes X No						
b	If any answer is "Yes" to 5a(1)–(5), di	•	ify under the excentions of	ليسا	162 22 140						
-		<del>-</del>	•		N/A	5b	1				
	Regulations section 53 4945 or in a current notice regarding disaster assistance? See instructions  N/A  Organizations relying on a current notice regarding disaster assistance, check here										
С	If the answer is "Yes" to question 5a(				ا ا						
	because it maintained expenditure re			N/A 🗌	Yes No						
	If "Yes," attach the statement required	•	(d)								
6a	Did the foundation, during the year, re	• • •	•								
	on a personal benefit contract?			Π,	Yes X No						
b	Did the foundation, during the year, p	ay premiums, directly or indirectly, or	n a personal benefit cont		·	6b		х			
	If "Yes" to 6b, file Form 8870		•								
7a	At any time during the tax year, was t	he foundation a party to a prohibited	tax shelter transaction?	$\Box$	Yes X No						
b	If "Yes," did the foundation receive an	y proceeds or have any net income	attributable to the transac	ction?	N/A	7b					
8	Is the foundation subject to the section	n 4960 tax on payment(s) of more th	nan \$1,000,000 in								
	remuneration or excess parachute pa	yment(s) during the year?			Yes X No						
Pa	art VIII Information About	Officers, Directors, Trustees	s, Foundation Man	agers, Highly	Paid Employ	ees,					
	and Contractors										
<u>1</u> L	ist all officers, directors, trustees, a	nd foundation managers and their	r compensation. See in:	structions.							
			(b) Title, and average	(c) Compensation	(d) Contributions to	١.,٠					
	(a) Name a	nd address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred		pense ad er allowar				
			COVOICU TO POSITION		compensation						
	BBIA JAGANNATHAN	GALESBURG	TRUSTEE								
	58 CORNELIA	IL 61401	0.00	0	0	<del> </del>		0			
	MSAVENI K JAGANNATHAN	GALÈSBURG	TRUSTEE								
19	58 CORNELIA	IL 61401	0.00	0	0	<del> </del>		0			
						ŀ					
		<del></del>				ļ					
2	Compensation of five highest-paid "NONE."	employees (other than those inclu	ıded on line 1 – see ins	tructions). If non	e, enter						
			(b) Title, and average		(d) Contributions to						
	(a) Name and address of each employ	ee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred		pense ac er allowar				
			devoted to position	_	compensation						
NO	NE										
						<u> </u>					
						<u> </u>					
		<del></del>									
						L					
Total	number of other employees paid over	\$50,000	<u> </u>					0			
		<u> </u>			F	orm 99	0-PF				

Part VIII Information About Officers, Directors, Trustees, Foundati and Contractors (continued)	on Managers, Highly Paid I	Employees,	Page
3 Five highest-paid independent contractors for professional services. See instructi	ons. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Comper	nsation
NONE			
Total author of others receiving over \$50,000 for professional convens			,
Total number of others receiving over \$50,000 for professional services		<u> </u>	
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such organizations and other beneficiaries served, conferences convened, research papers produced, etc.	as the number of	Expens	ses
1 N/A			
2			
3		<u> </u>	
4	<del></del> -		
Part IX-B Summary of Program-Related Investments (see instruction	ons)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount	
1 N/A			
2			
All other program-related investments. See instructions			
3			
Total. Add lines 1 through 3		<b> </b>	

a Expenses, contributions, gifts, etc – total from Part I, column (d), line 26
b Program-related investments – total from Part IX-B

2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes

3 Amounts set aside for specific charitable projects that satisfy the

a Suitability test (prior IRS approval required)

b Cash distribution test (attach the required schedule)

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

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

Enter 1% of Part I, line 27b See instructions

5 253

Adjusted qualifying distributions Subtract line 5 from line 4

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 4940(e) reduction of tax in those years

Form 990-PF (2018)

P	art XIII Undistributed Income (	see instructions	)			
	•		(a)	(b)	(c)	(d)
1	Distributable amount for 2018 from Part XI,		Corpus	Years prior to 2017	2017	2018
	line 7					
2	Undistributed income, if any, as of the end	of 2018				
а	Enter amount for 2017 only					
b	Total for prior years 20 , 20	, 20				
3	Excess distributions carryover, if any, to 20					
а	1					
b	From 2014					
С	From 2015					
d	From 2016	·				
е	From 2017					
f	Total of lines 3a through e					
4	Qualifying distributions for 2018 from Part X	(II,				
	line 4 ▶ \$ 31,753					
а	Applied to 2017, but not more than line 2a					
b	Applied to undistributed income of prior year	rs				
	(Election required – see instructions)					
¢	Treated as distributions out of corpus (Elect	tion				
	required – see instructions)					
d	Applied to 2018 distributable amount					
е	Remaining amount distributed out of corpus	;	31,753			
5	Excess distributions carryover applied to 20	18				
	(If an amount appears in column (d), the sai	me				
	amount must be shown in column (a))					
6	Enter the net total of each column as					
	indicated below:					
	Corpus Add lines 3f, 4c, and 4e Subtract li	ne 5	31,753			
b	Prior years' undistributed income Subtract					
	line 4b from line 2b					
С	Enter the amount of prior years' undistribute	ed				
	income for which a notice of deficiency has		İ			
	been issued, or on which the section 4942(a	a)				
	tax has been previously assessed	,				
a	Subtract line 6c from line 6b Taxable					
_	amount – see instructions		······	· · · · · · · · · · · · · · · · · · ·		
е	Undistributed income for 2017 Subtract line	1				
	4a from line 2a Taxable amount – see instructions					
f	Undistributed income for 2018 Subtract line	ne .			<del> </del>	
•	4d and 5 from line 1. This amount must be	.5				
	distributed in 2019					
7	Amounts treated as distributions out of corporate	us				
•	to satisfy requirements imposed by section					
	170(b)(1)(F) or 4942(g)(3) (Election may be				,	
	required—see instructions)					
8	Excess distributions carryover from 2013 no	t İ				
	applied on line 5 or line 7 (see instructions)	]				
9	Excess distributions carryover to 2019.	Ì				
	Subtract lines 7 and 8 from line 6a					
0	Analysis of line 9	Ţ				****
	Excess from 2014			***************************************		
b	Excess from 2015					
С	Excess from 2016					
d	Excess from 2017					
е	Excess from 2018					

DAA

P	art XIV Private Operating Fo	<b>undations</b> (see in	structions and Par	rt VII-A, question 9	9)				
1a	1a If the foundation has received a ruling or determination letter that it is a private operating								
	foundation, and the ruling is effective for	2018, enter the date of	of the ruling	<b>&gt;</b>		N/.			
b	Check box to indicate whether the found	ation is a private opera	ating foundation descri	bed in section X 49	942(j)(3) or 494	2(1)(5)			
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years	· · · · · · · · · · · · · · · · · · ·				
	income from Part I or the minimum	(a) 2018	<b>(b)</b> 2017	(c) 2016	(d) 2015	(e) Total			
	investment return from Part X for								
	each year listed	21,243	21,760	15,343	15,842	74,18			
b	85% of line 2a	18,057			13,466	63,06			
c	Qualifying distributions from Part XII,				/				
_	line 4 for each year listed	31,753	23,742	59,315	12,612	127,42			
d	Amounts included in line 2c not used directly					,			
_	for active conduct of exempt activities								
е	Qualifying distributions made directly								
_	for active conduct of exempt activities								
	Subtract line 2d from line 2c	31,753	23,742	59,315	12,612	127,42			
3	Complete 3a, b, or c for the			\					
•	alternative test relied upon								
а	"Assets" alternative test – enter								
_	(1) Value of all assets	528,764	482,821	450,983	446,812	1,909,38			
	(2) Value of assets qualifying under			,					
	section 4942(j)(3)(B)(i)	528,764	482,821	450,983	446,812	1,909,386			
b	"Endowment" alternative test – enter 2/3		,		\	_,,-			
-	of minimum investment return shown in		•						
	Part X, line 6 for each year listed								
С	"Support" alternative test – enter.	/							
•	(1) Total support other than gross								
	investment income (interest,				}	\			
	dividends, rents, payments on								
	securities loans (section								
	512(a)(5)), or royalties) <b>N/A</b>								
	(2) Support from general public								
	and 5 or more exempt								
	organizations as provided in section 4942(j)(3)(B)(iii) <b>N/A</b>								
	(3) Largest amount of support from	-							
	an exempt organization N/A								
	(4) Gross investment income N/A		-						
Pa	art XV Supplementary Inform	nation (Complete	this part only if t	he foundation ha	nd \$5 000 or more	in assats at			
	any time during the ye		•	ine roundation ne	14 45,000 OI IIIOI C	in assets at			
1	Information Regarding Foundation Ma								
a	List any managers of the foundation who	•	e than 2% of the total o	ontributions received l	ny the foundation				
u	before the close of any tax year (but only				•				
	SUBBIA G AND HAMSAVE	•	•	(000 3000011 307(0)(2)	,				
	List any managers of the foundation who		·	on for an equally large	portion of the				
	ownership of a partnership or other entity				portion of the				
	N/A	) or writer the louridati	oirnas a 10 % or great	er interest					
2	Information Regarding Contribution, C	Frant Gift Loan Sch	olarship etc. Progra	me:	<del></del>				
~	Check here ► X if the foundation only				nos not accont				
	unsolicited requests for funds. If the foun								
	complete items 2a, b, c, and d. See instri		ants, etc., to individuals	o or organizations unde	er other conditions,				
			the person to whom o	nalizationa abaiilal ba					
а	The name, address, and telephone numb $\mathbf{N/A}$	per or email address of	the person to whom a	pplications should be a	addressed				
	N/A								
	The fear was both as a late of the late of								
b	The form in which applications should be $\mathbf{N/A}$	submitted and informa	ation and materials the	y should include					
					<del></del> -				
С	Any submission deadlines								
	N/A	<del></del>							
d	Any restrictions or limitations on awards,	such as by geographic	cai areas, charitable fie	elas, kinds of institution	is, or other				
	factors								
	N/A								

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual. Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year GUIDING LIGHT FOR THE BLIND 717 S WARREN AVE NONE MALVERN PA 19355 CHARITABLE 150 MARCH OF DIMES 1275 MAMARONECK AVE NONE WHITE PLAINS NY 10605 CHARITABE 50 GUARDIAN ANGELS 1855 WINDISH DR NONE GALESBURG IL 61401 HUMANE SOCIETY 100 PARALIZED VETS OF AMERICA 2122 W TAYLOR DR NONE CHICAGO IL 60612 CHARITABLE 25 AMERICAN HEART ASSOC 230 16TH AVE NONE ROCK ISLAND IL 61201 MEDICAL 20 AMERICAN DIABITIES ASSOC 2451 CRYSTAL DR NONE **ARLINGTON VA 22202** MEDICAL 20 ST JUDES 262 DANNY THOMAS PLACE NONE MEMPHIS TN 38105 MEDICAL 150 CARL SANDBURG COLLEGE FOUNDATION 2400 TOM WILSON BLVD NONE GALESBURG IL 61401 EDUCATION 500 MADD 511 E. CARPENTER FREEWAY NONE IRVING TX 75062 CHARITABLE 100 TAMIL NADU FOUNDATION 7409 GREEN HILL DR NONE MACUNGIE PA 18062 CHARITABLE 350 Total ▶ 3a b Approved for future payment N/A rii. Total ▶ 3b

Part XV Supplementary Information (c				
3 Grants and Contributions Paid During	the Year or Approved for	or Future Payment	<u>,</u>	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year  MEMORIAL SLOAN KETTERING C.  1275 YORK AVE	ANCER NONE			
NEW YORK NY 10065		C	HARITABLE	30
SRI KANCHI KAMAKOTI MEDICA	L TRUST NONE		MEDICAL	10,000
ISHA FOUNDATION INC 951 ISHA LANE MCMINNVILLE TN 37110	NONE	c	HARITABLE	8,990
BIRDIES FOR CHARITIES 15623 COALTOWN RD EAST MOLINE IL 61244	NONE	c	HARITABLE	100
SEWA INTERNATIONAL 1000 WEST OAKS MALL HOUSTON TX 77082	NONE		HARITABLE	100
AUGUSTANA COLLEGE	NONE	:	UCATIONAL	50
•				
Total	1		<b>L</b> 22	
Total b Approved for future payment			▶ 3a	
N/A	,			
Total		<u> </u>	<b>▶</b> 3b	j sp.

Part XVI-	A Analysis of Income-Producing Act	ivities				
	mounts unless otherwise indicated		ed business income	Excluded	by section 512, 513, or 514	
,		(a) Business code	(b) Amount	(c) Exclusion	(d) Amount	(e) Related or exempt function income
1 Program	service revenue			code		(See instructions)
a						
	· · · · · · · · · · · · · · · · · · ·			1		
d				ļ		
	,					
	and contracts from government agencies					
	nip dues and assessments			+		
	n savings and temporary cash investments			14	68	
	and interest from securities			14	21,175	
	income or (loss) from real estate			1		
	inanced property	<u> </u>		+ +		
	ebt-financed property	-				
	income or (loss) from personal property					
	estitient income uss) from sales of assets other than inventory			14	8,995	27 015
	e or (loss) from special events			124	0,995	27,815
	fit or (loss) from sales of inventory			1		
	enue a			<del> </del>		<del></del>
			· .		-	
е						
12 Subtotal A	Add columns (b), (d), and (e)		0		30,238	27,815
	l line 12, columns (b), (d), and (e)		-	<u>-!</u> 1	13	58,053
	et in line 13 instructions to verify calculations)					
Part XVI-I		complishm	ent of Exempt P	urpose	<u> </u>	
Line No. ▼	Explain below how each activity for which income is accomplishment of the foundation's exempt purpose					ons )
N/A					· , , , , , , , , , , , , , , , , , , ,	
				<u> </u>		···
					<u> </u>	
		<del> </del>				
					<del></del>	
<del>_</del> -					···	
	<del> </del>					
			<del></del>			
				<del></del>		
						<u>.</u>
		<u> </u>		-		
				_		
<del></del>						

Part 2	XVII	Information Reg Organizations	garding Tr	ansfers T	o ar	nd Transact	ions and Rela	ationships W	ith Noncharita	ble Ex	emp	t
1 Did	d the org	anization directly or inc	directly enga	ge in any of t	he fo	llowing with an	y other organizati	on described		$\top$	Yes	No
ın :	_	01(c) (other than sec		•		•						
		rom the reporting found	dation to a n	oncharitable (	exem	not organization	of					
	Cash	. 3								1a(1)	.]	x
(2)	Other a	ssets								1a(2)		X
b Ot	her trans	actions										
(1)	Sales o	of assets to a nonchari	table exemp	t organization	1					1b(1)		X
(2)	Purcha	ses of assets from a n	oncharitable	exempt orga	nızat	ion				1b(2)		X
(3)	Rental	of facilities, equipment	t, or other as	sets						1b(3)		X
(4)	Reimbi	ırsement arrangement	ts							1b(4)	Ь.	X
		or loan guarantees								1b(5)		X
		nance of services or m								1b(6)		X
		facilities, equipment, m								1c		X
		er to any of the above										
		goods, other assets, transaction or sharing				-						
(a) Lir		(b) Amount involved		e of noncharitable					ransactions, and sharing a	arrangeme	-nts	
N/A			1				(-,-:					
								-				
		-										
			ļ						<u></u>			-
							<u> </u>					
<del></del>	<del></del>		<del> </del>			<del></del>						
			-	<u> </u>	-				·			
			<del>                                     </del>		_							
						•						
		ation directly or indired a section 501(c) (other	•				ax-exempt organi	zations		Ye	- <b>X</b>	) No
		nplete the following so								□, .,	,o <u>==</u>	,
	<u> </u>	a) Name of organization		(b) Ty	pe of c	organization		(c) Descri	otion of relationship			
N/ <i>I</i>	A											
	-	<del></del>										
	Under per	nalties of perjury, I declare th	nat I have exami	ned this return, in	ncludin	g accompanying s	hedules and statemer	nts and to the hest of	my knowledge and helie	f it is true		
	correct, a	nd complete Declaration of p	preparer (other t	han taxpayer) is	based	on all information	of which preparer has	any knowledge	May the IRS disc			
Sign									with the prepare			_
Here		/ 0 10	^				/		See instructions	<u> </u>	Yes	No
	NV	Sallar Ca			)	IV	11/12/19	TRUS	TEE			
	Sign	ture of officer or trustee				Da	te /	Title				
	Print/Ty	pe preparer's name				Preparer's signa	ture		Date		Check	
Paid							2 /	4	İ	İ	self-em	" ployed
Preparer	-	BURGLAND				1 <u>1</u>	such for	<u> </u>	11/1			
Use Only	Firm's n				As:	sociates	s, Ľtd.			0154		
•	Firm's a		BOX 14		404	0_1464			200	-101		
	<u> </u>	GALES	BURG,	<u> </u>	40	2-14 <u>64</u>			Phone no 305	<del>9-34</del>	<u>3-4</u>	<u> 106</u>

Schedule B (Form 990, 990-EZ,

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

### **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

2018

Name of the organization

Employer identification number

JAGANNATHAN (	36-7288675							
Organization type (check of	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 foundation							
	527 political organization							
Form 990-PF	<b>X</b> 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation	4947(a)(1) nonexempt charitable trust treated as a private foundation						
501(c)(3) taxable private foundation								
	covered by the <b>General Rule</b> or a <b>Special Rule</b> . (7), (8), or (10) organization can check boxes for both the General Rule and a Speci	ıal Rule See						
General Rule								
	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions total reproperty) from any one contributor. Complete Parts I and II. See instructions for distributions.	_						
Special Rules								
regulations under se 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> /3% suppo- ictions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-E that received from any one contributor, during the year, total contributions of the gr the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete	EZ), Part II, line reater of <b>(1)</b>						
contributor, during the literary, or education	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 (entering) "N/A" in column (b) instead of the contributor name and address), II, and III							
contributor, during the contributions totaled during the year for a General Rule applie	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.							
990-EZ, or 990-PF), but it m	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule ust answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its o certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-	Form 990-EZ or on its						

Name of organization

JAGANNATHAN CHARITABLE TRUST

Employer identification number 36-7288675

	MATHAN CHARITABLE IROSI		5-1200013
Part I	Contributors (see instructions). Use duplie	cate copies of Part I if additional space is r	eeded.
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	SUBBIA JAGANNATHAN 1958 CORNELIA DR GALESBURG IL 6	\$ 26,000	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
`	·	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

## 4755 JAGANNATHAN CHARITABLE TRUST

36-7288675 FYE: 9/30/2019

Federal Statements

Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets

			How				•
Des	Description		Received				
Whom Sold	Date Acquired	Date Sold	Sale Price	Cost	Expense	Depreciation	Net Gain / Loss
LOOMIS SAYLES GROWTH CL Y	CL Y		Purchase				
	Various	3/21/19 \$	25,000 \$	14,972 \$		ψ.	\$ 10.028
LOOMIS SAYLES GROWTH CL Y	CL Y		Purchase	•		-	
	Various	4/15/19	59,091	36,255			22.836
PIONEER FLEXIBLE OPPTYS CL Y	YS CL Y		Purchase	•			
	Various	4/15/19	42,968	48,017			-5,049
Total		φ.	127,059 \$	99,244 \$	0	\$	\$ 27,815

ing Fees
- Account
ine 16b
Part I, Li
990-PF, I
2 - Form
Statement

# Statement 3 - Form 990-PF, Part I, Line 18 - Taxes

Charitable Purpose	\$	\$
Adjusted Net	s	\$
Net Investment	\$	0
Total	\$ 407	\$ 407
Description	FEDERAL TAX -INVEST INCOME	Total

<del></del>	,	•							 t
11/11/2019 11:37 AM		Charitable Purpose	\$		Fair Market Value	\$ 464,027			4-5
	enses	Adjusted Net	\$	tments	Basis of Valuation	Cost			
ements	990-PF, Part I, Line 23 - Other Expenses	Net Investment	4,930	Line 13 - Other Inves	End of Year	\$ 435,183 \$ 435,183			
Federal Statements	- Form 990-PF, Part	Total	4,930 4,945	Statement 5 - Form 990-PF, Part II, Line 13 - Other Investments	Beginning of Year	\$ 424,762 \$ 424,762			
TABLE TRUST	Statement 4 - Form		ው <b>'</b> ው"	Statement 5 -					
4755 JAGANNATHAN CHARITABLE TRUST 36-7288675 FYE: 9/30/2019		Description	enses ADVISORY FEES FILING FEES Total		Description	FUNDS tal			
4755 JAGANN, 36-7288675 FYE: 9/30/2019			Expenses ADVISOR FILING Total			MUTUAL FUN Total			

4755 JAGANNATHAN CHARITABLE TRUST
36-7288675 Federal Statements

FYE: 9/30/2019

11/11/2019 11:37 AM

			Amount					
SUBBIA G	G AND	HAMSAVENI	K	JAGANNATHAN,	•	\$		
Tot	al					\$_		0