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.

	Interr	nal Rev	enue Service Go to www.irs.gov/Fori	n990PF for instruction	ons and the	latest inf	ormation.	Open to Public Inspection
	For	calend	dar year 2019 or tax year beginning ,	and ending				
	Nar	ne of for	undation			A Empl	oyer Identification number	
			L FOUNDATION, INC.				<u> -3559705</u>	
			d street (or P O box number if mail is not delivered to street address)		oom/suite		hone number (see instructio	ns)
			PATEL BROTHERS 37-27 74TH S , state or province, country, and ZIP or foreign postal code	<u>T</u>		/10	8-898-3445	
			SON HEIGHTS NY 11372			C If exe	mption application is pending	g, check here
				urn of a former public of	harity	D 1 F	oreign organizations, check h	nere 🕨
	u	MICCK 6	Final return Amended	•	inanty			_
			Address change Name ch				oreign organizations meeting 5% test, check here and atta	
								
3	$\overline{}$		ype of organization X Section 501(c)(3) exempt priva		ρ_{G}		ate foundation status was te on 507(b)(1)(A), check here	rminated under
			0 4947(a)(1) nonexempt charitable trust Other taxal					
≤ 11			ket value of all assets at J Accounting method	Cash X Acc	rual		foundation is in a 60-month to section 507(b)(1)(B), check	
')~\			ear (from Part II, col. (c), Other (specify)			under	Section Sor (b)(1)(b), theck	. Here
	,	ie 16)						(d) Disbursements
		<u> </u>	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net inv		(c) Adjusted net	for charitable
			the amounts in column (a) (see instructions))	books	incor	ne	income	purposes (cash basis only)
		1	Contributions, gifts, grants, etc., received (attach schedule)		A CHEST CONTROL OF THE CONTROL OF TH			
		2	Check ► X if the foundation is not required to attach Sch	B				
		3	Interest on savings and temporary cash investments					
		4	Dividends and interest from securities	DECEN	/ED	7		
		5a	Gross rents	RECEI	VLU			COSASINA POR STATEMENT OF THE STATEMENT
	ā	b	Net rental income or (loss)				iederácz (poporos i podziesti i priek, 43.	inggiighodagailanandhiringgadhais-4-iri
	Revenue	6a	Net gain or (loss) from sale of assets not on line 10	MAY 1 4	2020:::::			
121	Ş	ь	Gross sales price for all assets on line 6a		BALLANDEN TRIBUNE	MA BARRIE A PRAC		
202,	æ	7	Capital gain net income (from Part IV, line 2)	OGDE		- 0		
2.6		8	Net short-term capital gain				0	
		9	Income modifications		and applicable to an auto	and the second		
APR		10a	Gross sales less returns and allowances		「 ない こうしゅう こうしゅう こうしょう しゅうしゅう しゅう	(減分が行を求かけておく日本だり		
A		b	Less Cost of goods sold		Antenna de la compania del compania del compania de la compania del	AND SAN		
Q		С	Gross profit or (loss) (attach schedule)					
نِيا =		11 🔭	Other income (attach schedule)	<u> </u>				
SCANNED		12	Total. Add lines 1 through 11	0		0	0	
ৰ	Expenses	13	Compensation of officers, directors, trustees, etc	0				
\mathcal{C}	Ë	14	Other employee salaries and wages		ļ <u>.</u>			
0.	ğ	15	Pension plans, employee benefits					
	_	16a	Legal fees (attach schedule)					
	Ş	b	Accounting fees (attach schedule)					
	aţi	C	Other professional fees (attach schedule) Stmt 1	500			<u></u>	500
	str	17	Interest					
	Ξ	18	Taxes (attach schedule) (see instructions)					sen alle and experiments and including the literal at
	ᄩ	19	Depreciation (attach schedule) and depletion		ļ			
	Ă	20	Occupancy					
	ק	21	Travel, conferences, and meetings					
	<u> </u>	22	Printing and publications	F.0				
	Ē	23	Other expenses (att sch) Stmt 2	50				50
	Operating and Administrative	24	Total operating and administrative expenses.			_	_	F.F.A
)er		Add lines 13 through 23	550		0	0	550
	ŏ	25	Contributions, gifts, grants paid					6,000
		26	Total expenses and disbursements. Add lines 24 and 25	6,550	#XIII #################################	0	0	6,550
		27	Subtract line 26 from line 12					
		a	Excess of revenue over expenses and disbursements	-6,550	AN INC. TRANSCIANT SANS			ITANIJE TEBESHINTERNESS (PRESENTER
		b	Net investment income (if negative, enter -0-)		*	U		
		l c	Adjusted net income (if negative, enter -0-)		Laurente Berlingen gung	comment militaritati	. 0	「大いないべんれたからにのちょがかけらいのがかからがまりできないだ

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29

16,146

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Form 990-PF (2019) PATEL FOUNDATION, 11-3559705 Page 3 Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired (c) Date acquired (d) Date sold (a) List and describe the kind(s) of property sold (for example, real estate, P - Purchase 2-story brick warehouse, or common stock, 200 shs MLC Co) (mo, day, yr) (mo, day, yr) D - Donation N/A 1a b C d е (g) Cost or other basis (h) Gain or (loss) (f) Depreciation allowed (e) Gross sales price (or allowable) plus expense of sale ((e) plus (f) minus (a)) а b C d е Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col (h) gain minus col (k), but not less than -0-) or (J) Adjusted basis (k) Excess of col (i) (i) FMV as of 12/31/69 Losses (from col (h)) as of 12/31/69 over col (j), if any а b C d е If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 2 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) See instructions If (loss), enter -0- in Part I, line 8 Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income **⊯Part**-V**#** (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation doesn't qualify under section 4940(e) Do not complete this part. 1 Enter the appropriate amount in each column for each year, see the instructions before making any entries (a) (d) Base period years Adjusted qualifying distributions Net value of noncharitable-use assets Calendar year (or tax year beginning in) (col (b) divided by col (c)) 18,050 2018 5,550 2017 8,075 2016 15,575 2015 15, 560 2014 2 Total of line 1, column (d) 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years 3 4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5 4 5 Multiply line 4 by line 3 6 Enter 1% of net investment income (1% of Part I, line 27b) 6 7 Add lines 5 and 6 0 7

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

8

6,550

Part VI instructions

8 Enter qualifying distributions from Part XII, line 4

Form	990-PF (2019) PATEL FOUNDATION, INC. 11-3559705	040				age 4
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948	– see ii	<u>ıstrı</u>	uctio	ons)
1å	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	1				
	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-)	2				<u> </u>
3	Add lines 1 and 2	3				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5				0
6	Credits/Payments					
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 6a					
b	Exempt foreign organizations – tax withheld at source					
С	Tax paid with application for extension of time to file (Form 8868)					
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments. Add lines 6a through 6d	7				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be Credited to 2020 estimated tax ▶ Refunded ▶	11				
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		22	######## \ ############################	Yes	No
	participate or intervene in any political campaign?		ļ	1a		<u>X</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					
C	Did the foundation file Form 1120-POL for this year?		1	1c	kansasi	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		(
	(1) On the foundation ▶ \$ (2) On foundation managers. ▶ \$	-	## ## ##	ARRIVAT IN		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		はは、	###//## 18 ###/## /# ###/## /#		
•	on foundation managers. • \$		100	2	ARII MANI	X
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		W 49 38 31		*******	
3	If "Yes," attach a detailed description of the activities Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles		# 5 # 8 # 8 # 8 # 8	MARIAN IN TRANSPORTER TRANSPOR		*******
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		⁷²	3	1326,252,	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		<u> </u>	4a	$\overline{}$	$\frac{x}{x}$
b	If "Yes," has it filed a tax return on Form 990-T for this year?	1	_ <i>_</i> _	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		22 22 22 22 22 24			
	By language in the governing instrument, or		## ## ## ##			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		*** *** ***	100 (100) 100 (100) 100 (100) 100 (100) 100 (100) 100 (100) 100 (100) 100 (100) 100 (100) 100 (100)		
	conflict with the state law remain in the governing instrument? 6 X					
7						
8a	1988-1959					
	NY		## ## ##			*******
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		7.00 9.00 9.00 9.00 9.00 9.00 9.00 9.00			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation			8b	X	hallaneed)
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		144 144	1		
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See instructions for Part XIV If "Yes,"					12
4-	complete Part XIV		 	9	\dashv	<u>x</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			_	1	v
	names and addresses			10 . aan	DE	(2019)
			rorm	- ココリ	,-,- F	(2019)

11-3559705 Form 990-PF (2019) PATEL FOUNDATION, Statements Regarding Activities (continued) Part VII-A WWW Yes No At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the 11 X 11 meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified 12 person had advisory privileges? If "Yes," attach statement See instructions 13 X Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address ► N/A Telephone no. ▶ 718-898-3445 The books are in care of ▶ MAHENDRA PATEL 14 37-27 74TH STREET ZIP+4 ▶ 11372 Located at ▶ JACKSON HEIGHTS Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here 15 and enter the amount of tax-exempt interest received or accrued during the year Yes At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority 16 16 over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes." enter the name of the foreign country Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. Yes During the year, did the foundation (either directly or indirectly) X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No X (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes (5) Transfer any income or assets to a disqualified person (or make any of either available for X No Yes the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after X No Yes termination of government service, if terminating within 90 days) If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in 1b Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions ******* Organizations relying on a current notice regarding disaster assistance, check here Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that C N/A were not corrected before the first day of the tax year beginning in 2019? 1c 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)) At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines X No 6d and 6e) for tax year(s) beginning before 2019? , 20 , 20 If "Yes," list the years ▶ 20 , 20 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 N/A 2b all years listed, answer "No" and attach statement - see instructions) If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here . 20 . 20 За Did the foundation hold more than a 2% direct or indirect interest in any business enterprise X No at any time during the year? Yes If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the

Form **990-PF** (2019)

3b

4a

4b

N/A

foundation had excess business holdings in 2019)

4a. Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?

1181 mg 2	990-PF (2019) PATEL FOU			559705		Page 6
## K8	art VII-B Statements Rec	arding Activities for Which F	orm 4720 May Bo	Required (c	ontinued)	
5à	During the year did the foundation	pay or incur any amount to:				Yes No
	(1) Carry on propaganda, or other	wise attempt to influence legislation (se	ction 4945(e))?	\\	res 🗓 No	
		pecific public election (see section 495				THE CALL SECTION OF THE SECTION OF T
	directly or indirectly, any voter			\	/es 🛚 X No	
	(3) Provide a grant to an individua	for travel, study, or other similar purpo	ses?		res 🗓 No	dendamen Jegolinen Stimmungs dendamen Schaffen Schaffen dendamen Schaffen Schaffen dendamen Schaffen Schaffen Schaffen dendamen Jegolinen Schaffen Sch dendamen Schaffen Schaf
	(4) Provide a grant to an organizat	ion other than a charitable, etc , organi	zation described in	_	_	ANTO THE TRANSPORT ENGINEERS OF THE PROPERTY O
	section 4945(d)(4)(A)? See ins			\	∕es 🏿 No	
		than religious, charitable, scientific, liter	ary, or educational			STATES ST
	purposes, or for the prevention	of cruelty to children or animals?		□ \(\bigcirc \)	res 🛚 X No	CONTROL SANGERS CONTROL CONTRO
b	If any answer is "Yes" to 5a(1)-(5),	did any of the transactions fail to quali	ly under the exceptions	described	_	######################################
	in Regulations section 53 4945 or i	n a current notice regarding disaster as	sistance? See instructi	ons	N/A	5b
	Organizations relying on a current	notice regarding disaster assistance, ch	eck here		▶ []	AND THE PROPERTY OF THE PROPER
С	If the answer is "Yes" to question 5	a(4), does the foundation claim exempt	ion from the tax			
	because it maintained expenditure	responsibility for the grant?		N/A 🗌	res 🗌 No 📗	######################################
	If "Yes," attach the statement requi	red by Regulations section 53 4945-5(d)			DESCRIPTION OF THE PROPERTY OF
6a	Did the foundation, during the year	, receive any funds, directly or indirectly	, to pay premiums			######################################
	on a personal benefit contract?			\ <u></u>	res 🔀 No	
b	Did the foundation, during the year	, pay premiums, directly or indirectly, or	a personal benefit cor	ntract?	. –	6b X
	If "Yes" to 6b, file Form 8870					
7a	At any time during the tax year, wa	s the foundation a party to a prohibited	tax shelter transaction	? 🔲 \	res 🗶 No	
b	If "Yes," did the foundation receive	any proceeds or have any net income a	attributable to the trans	action?	N/A	7b
8	Is the foundation subject to the sec	tion 4960 tax on payment(s) of more th	an \$1,000,000 in			
	remuneration or excess parachute				res 🗶 No	MANAGER AND
Pa	art VIII Information Abou	ut Officers, Directors, Trustee	s, Foundation M	anagers, Hig	hly Paid Emp	loyees,
	and Contractors					
1 L	ist all officers, directors, trustees	s, and foundation managers and the	ir compensation. See	instructions.		
			(b) Title, and average	(c) Compensation	(d) Contributions to	
	(a) Name	and address	hours per week	(If not paid,	employee benefit plans and deferred	(e) Expense account, other allowances
			devoted to position	enter -0-)	compensation	
MA						
7-24	HENDRA PATEL	COLONIA	President			
	HENDRA PATEL 6 MEREDITH ROAD	COLONIA NJ 07067	President 1.00	0	0	0
11				0	0	0
11 HA	6 MEREDITH ROAD	NJ 07067	1.00	0	0	
11 HA	.6 MEREDITH ROAD	NJ 07067 ROSLYN	1.00 Treasurer			
11 HA	.6 MEREDITH ROAD	NJ 07067 ROSLYN	1.00 Treasurer			
11 HA	.6 MEREDITH ROAD	NJ 07067 ROSLYN	1.00 Treasurer			
11 HA	.6 MEREDITH ROAD ARSHAD PATEL 28 AUGUSTA COURT	NJ 07067 ROSLYN NY 11576	1.00 Treasurer 1.00	0	0	
11 HA	.6 MEREDITH ROAD ARSHAD PATEL 28 AUGUSTA COURT Compensation of five highest-p	NJ 07067 ROSLYN	1.00 Treasurer 1.00	0	0	
11 HA 22	.6 MEREDITH ROAD ARSHAD PATEL 28 AUGUSTA COURT	NJ 07067 ROSLYN NY 11576	1.00 Treasurer 1.00	0	none, enter	
11 HA 22	ARSHAD PATEL 8 AUGUSTA COURT Compensation of five highest-p. "NONE."	NJ 07067 ROSLYN NY 11576 aid employees (other than those inc	1.00 Treasurer 1.00 luded on line 1 – see	instructions). If	none, enter	0
11 HA 22	.6 MEREDITH ROAD ARSHAD PATEL 28 AUGUSTA COURT Compensation of five highest-p	NJ 07067 ROSLYN NY 11576 aid employees (other than those inc	1.00 Treasurer 1.00 luded on line 1 — see (b) Title, and average hours per week	0	none, enter (d) Contributions to employee benefit plans and deferred	
11 HA 22	ARSHAD PATEL 8 AUGUSTA COURT Compensation of five highest-p: "NONE."	NJ 07067 ROSLYN NY 11576 aid employees (other than those inc	1.00 Treasurer 1.00 luded on line 1 – see	instructions). If	none, enter (d) Contributions to employee benefit	(e) Expense account,
11 HA 22	ARSHAD PATEL 8 AUGUSTA COURT Compensation of five highest-p. "NONE."	NJ 07067 ROSLYN NY 11576 aid employees (other than those inc	1.00 Treasurer 1.00 luded on line 1 — see (b) Title, and average hours per week	instructions). If	none, enter (d) Contributions to employee benefit plans and deferred	(e) Expense account,
11 HA 22	ARSHAD PATEL 8 AUGUSTA COURT Compensation of five highest-p: "NONE."	NJ 07067 ROSLYN NY 11576 aid employees (other than those inc	1.00 Treasurer 1.00 luded on line 1 — see (b) Title, and average hours per week	instructions). If	none, enter (d) Contributions to employee benefit plans and deferred	(e) Expense account,
11 HA 22	ARSHAD PATEL 8 AUGUSTA COURT Compensation of five highest-p: "NONE."	NJ 07067 ROSLYN NY 11576 aid employees (other than those inc	1.00 Treasurer 1.00 luded on line 1 – see (b) Title, and average hours per week	instructions). If	none, enter (d) Contributions to employee benefit plans and deferred	(e) Expense account,
11 HA 22	ARSHAD PATEL 8 AUGUSTA COURT Compensation of five highest-p: "NONE."	NJ 07067 ROSLYN NY 11576 aid employees (other than those inc	1.00 Treasurer 1.00 luded on line 1 – see (b) Title, and average hours per week	instructions). If	none, enter (d) Contributions to employee benefit plans and deferred	(e) Expense account,
11 HA 22	ARSHAD PATEL 8 AUGUSTA COURT Compensation of five highest-p: "NONE."	NJ 07067 ROSLYN NY 11576 aid employees (other than those inc	1.00 Treasurer 1.00 luded on line 1 – see (b) Title, and average hours per week	instructions). If	none, enter (d) Contributions to employee benefit plans and deferred	(e) Expense account,
11 HA 22	ARSHAD PATEL 8 AUGUSTA COURT Compensation of five highest-p: "NONE."	NJ 07067 ROSLYN NY 11576 aid employees (other than those inc	1.00 Treasurer 1.00 luded on line 1 – see (b) Title, and average hours per week	instructions). If	none, enter (d) Contributions to employee benefit plans and deferred	(e) Expense account,
11 HA 22	ARSHAD PATEL 8 AUGUSTA COURT Compensation of five highest-p: "NONE."	NJ 07067 ROSLYN NY 11576 aid employees (other than those inc	1.00 Treasurer 1.00 luded on line 1 – see (b) Title, and average hours per week	instructions). If	none, enter (d) Contributions to employee benefit plans and deferred	(e) Expense account,
11 HA 22	ARSHAD PATEL 8 AUGUSTA COURT Compensation of five highest-p: "NONE."	NJ 07067 ROSLYN NY 11576 aid employees (other than those inc	1.00 Treasurer 1.00 luded on line 1 – see (b) Title, and average hours per week	instructions). If	none, enter (d) Contributions to employee benefit plans and deferred	(e) Expense account,
11 HA 22	ARSHAD PATEL 8 AUGUSTA COURT Compensation of five highest-p: "NONE."	NJ 07067 ROSLYN NY 11576 aid employees (other than those inc	1.00 Treasurer 1.00 luded on line 1 – see (b) Title, and average hours per week	instructions). If	none, enter (d) Contributions to employee benefit plans and deferred	(e) Expense account,
2 	ARSHAD PATEL 8 AUGUSTA COURT Compensation of five highest-p: "NONE." (a) Name and address of each emone	NJ 07067 ROSLYN NY 11576 aid employees (other than those incomployee paid more than \$50,000	1.00 Treasurer 1.00 luded on line 1 – see (b) Title, and average hours per week	instructions). If	none, enter (d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
2 	ARSHAD PATEL 8 AUGUSTA COURT Compensation of five highest-p: "NONE."	NJ 07067 ROSLYN NY 11576 aid employees (other than those incomployee paid more than \$50,000	1.00 Treasurer 1.00 luded on line 1 – see (b) Title, and average hours per week	instructions). If	none, enter (d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances

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Part VIII Information About Officers, Directors, Trustees and Contractors (continued)	s, Foundation Managers, Highly Paid	d Employees,
3 Five highest-paid independent contractors for professional services.	. See instructions. If none, 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		<u> </u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic organizations and other beneficiaries served, conferences convened, research papers produced, etc.	al information such as the number of	Expenses
1 N/A		
2		
3		
4		
Part IX:Bi Summary of Program-Related Investments (s	see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lin	nes 1 and 2	Amount
1 N/A		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3	>	

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Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required) Cash distribution test (attach the required schedule) 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 income Enter 1% of Part I, line 27b See instructions 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	ь		1b	
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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 6 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	3	Amounts set aside for specific charitable projects that satisfy the	ineliging?	
Cash distribution test (attach the required schedule) 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 income Enter 1% of Part I, line 27b See instructions 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	а			
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 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	b	, " , , , , , , , , , , , , , , , , , ,	3b	
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 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	4	·	4	6,550
Enter 1% of Part I, line 27b See instructions 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	5			
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		· · ·	5	0
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	6			6,550
	-	• • •	foundation	
qualifies for the section 4340(e) reduction or tax in those years		qualifies for the section 4940(e) reduction of tax in those years		

Pa	rt XIII Undistributed Income	e (see instruction	s)		<u> </u>	
•			(a)	(b)	(c)	(d)
1	Distributable amount for 2019 from Part	XI,	Corpus	Years prior to 2018	2018	2019
	line 7	·				
2	Undistributed income, if any, as of the ei	nd of 2019				
	Enter amount for 2018 only					
b	Total for prior years. 20 , 20	20	1		-	
3	Excess distributions carryover, if any, to		······································			
	From 2014	15,560	-			
_			` " - " ' <u>-</u>	-		
p	From 2015	15,575	′ ′	407		
С	From 2016	8,075				
d	From 2017	5,550	A. 11. 11.		Service Services	
е	From 2018	18,050			2 1,- , ,	
f	Total of lines 3a through e		62,810			
4	Qualifying distributions for 2019 from Pa	rt XII,				
	line 4 ▶ \$6,550					
а	Applied to 2018, but not more than line 2	?a				
b	Applied to undistributed income of prior		_			
	(Election required – see instructions)	,	·			
~	Treated as distributions out of corpus (E	lection				
·	required – see instructions)	10011011				
	•					
	Applied to 2019 distributable amount	m.,	6,550			<u> </u>
	Remaining amount distributed out of cor		0,330			
5	Excess distributions carryover applied to					
	(If an amount appears in column (d), the	same				
	amount must be shown in column (a).)					
6	Enter the net total of each column as					
	indicated below:					
а	Corpus Add lines 3f, 4c, and 4e Subtra	ct line 5	69,360			
b	Prior years' undistributed income Subtra	act				
	line 4b from line 2b					
С	Enter the amount of prior years' undistrib	outed				
	income for which a notice of deficiency h	nas				
	been issued, or on which the section 494				<u>.</u> .	
	tax has been previously assessed	, ,				
d	Subtract line 6c from line 6b. Taxable				,	
_	amount - see instructions					
6	Undistributed income for 2018 Subtract	line				
Ŭ	4a from line 2a Taxable amount – see					
	instructions					
f	Undistributed income for 2019 Subtract	lines				
'						
	4d and 5 from line 1. This amount must	De				(
_	distributed in 2020			-		
7	Amounts treated as distributions out of c					
	to satisfy requirements imposed by secti					
	170(b)(1)(F) or 4942(g)(3) (Election may	be				
	required—see instructions)					
8	Excess distributions carryover from 201	1 not				
	applied on line 5 or line 7 (see instruction	ns)	15,560			
9	Excess distributions carryover to 202	20.				
	Subtract lines 7 and 8 from line 6a		53,800			
10	Analysis of line 9:		. 1 .	_ 11 _ 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- ,	
á	Excess from 2015	15,575		1 2007	1, 197 2	
b	Excess from 2016	8,075	, , , , , ,	i i	Language Service	4 4-
c	Excess from 2017	5,550	·		·	
d	Excess from 2018	18,050				
e	Excess from 2019	6,550				
<u> </u>		3,550			·	5 000-DE (004

Form	990-PF (2019) PATEL FOUND	ATION, INC.	·	<u>11-35597</u>		∕Page 10
Pa	art XIV Private Operating Fo	oundations (see	instructions and F	Part VII-A, questic	on 9)	
1a	If the foundation has received a ruling of					
•	foundation, and the ruling is effective fo	r 2019, enter the date	of the ruling	•		
b	Check box to indicate whether the found	dation is a private ope	rating foundation des	cribed in section 4	942(j)(3) or 4942	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
	investment return from Part X for					
	each year listed				/	
b	85% of line 2a		1			
С	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					
е	Qualifying distributions made directly	·				
•	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
·	alternative test relied upon:			/		
9	"Assets" alternative test – enter					
a	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test – enter 2/3				<u> </u>	
U	of minimum investment return shown in					
	Part X, line 6, for each year listed				Ì	
_	"Support" alternative test – enter:					
С						
	(1) Total support other than gross investment income (interest,		1		İ	
	dividends, rents, payments on	/				
	securities loans (section		1			
	512(a)(5)), or royalties)					
	(2) Support from general public				1	
	and 5 or more exempt					
	organizations as provided in				1	
	section 4942(j)(3)(B)(iii)	- /				
	(3) Largest amount of support from	/			1	
	an exempt organization	d				
ille D	(4) Gross investment income art XV Supplementary Infor	mation (Comple	to this part only	if the foundation	n had \$5 000 or m	ore in accets a
	any time during the	•		ii the loulidatio	ii iiau \$5,000 oi ii	iore iii assets a
1	Information Regarding Foundation		ictions.)			-··
-	List any managers of the foundation wh	_	ore than 2% of the tot	al contributions receiv	ed by the foundation	
а	before the close of any tax year (but on				-	
	N/A	iy ii tiley have contilot	Jieu more man \$5,000). (See section 507 (u)(2))	
_		- own 100/ or more o	f the steek of a corner	stop (or an equally le	ran portion of the	
b	List any managers of the foundation wh		·		rge portion of the	
	ownership of a partnership or other entine N/A	ty) of which the found	allon has a 10% or gri	eater interest.		
	- · · · · · · · · · · · · · · · · · · ·	Crant Citt Loon S	Sabalarahin ata Dre			
2	Information Regarding Contribution		-		d daga not account	
	Check here ► if the foundation only	•	•	-		
	unsolicited requests for funds. If the fou		grants, etc., to individu	als or organizations u	inger other conditions,	
	complete items 2a, b, c, and d. See inst		tal a l		L	
а	The name, address, and telephone nun	nber or email address	of the person to whor	n applications should	be addressed	
	N/A					
				 		
b	The form in which applications should b	e submitted and infor	mation and materials t	hey should include.		
	N/A					
С	Any submission deadlines					
	N/A				**-	
d	Any restrictions or limitations on awards	s, such as by geograp	hical areas, charitable	fields, kinds of institu	tions, or other	
	factors					
	N/A					
						OOO DE

Part XV Supplementary Information (continued)			
3 Grants and Contributions Paid During		for Future Payment	· · · · · · · · · · · · · · · · · · ·	
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	COMMISSION	
a Paid during the year SHARE & CARE FOUNDATION 676 WINTERS AVE PARAMUS NJ 07652	Non Profit		Donation	1,000
ST JUDE CHILDREN HOSPITAL 262 DANNY THOMAS PLACE MEMPHIS TN 38105	Non Profit		Donation	5,000
			:	
•				
Total	<u> </u>	L	▶ 3a	6,000
b Approved for future payment N/A				
Total			▶ 3b	

	Analysis of Income-Producing A		d business income	Evoluded by	y section 512, 513, or 514	
Enter gross am	nounts unless otherwise indicated	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
1 Program se	ervice revenue:			1 0000		(See instructions)
a						
b						
с		_			·	
d		_				·
e		-				
f		_		 		
-	nd contracts from government agencies			<u> </u>		
	p dues and assessments			 		
3 Interest on	savings and temporary cash investments			<u> </u>		
	and interest from securities	***************************************			*******************	(REZI: MARKER); WARKERN(INNKARK); boll'
	ncome or (loss) from real estate:	THE RESERVE THE PROPERTY OF THE PARTY OF THE		*************		ture resultation de la constitución de la constituc
	nanced property			 		
	bt-financed property					
	ncome or (loss) from personal property					
	stment income					
	ss) from sales of assets other than inventory			-		
	e or (loss) from special events	- · · -		 		
	t or (loss) from sales of inventory			+ +		
	nue a	-		++		
ь				┼		
		-		 		
				 		
ee	dd celuwro (b) (d) and (a)				0	0
	dd columns (b), (d), and (e)	******************		, Nikanın ûkünyx	13	0
	line 12, columns (b), (d), and (e)				13	
Dart YVI-	at in line 13 instructions to verify calculations.) Relationship of Activities to the	Accomplish	ment of Exempt	Purnos	200	
Line No. ▼	Explain below how each activity for which incor accomplishment of the foundation's exempt pu	me is reported in	column (e) of Part X\	VI-A contrib	outed importantly to	
N/A	,	<u> </u>	/ F		7_1	
•						
_						
						
				-		

Preparer's signature

Agashiwala,

10010-2093

1123 Broadway Suite 301

LOMA AGASHIWALA

CPA, PC

2	1	2-	95	1-	7	38	5
		Form	99	0-F	F	(201	9)

05/11/20

Firm's EIN ▶

Phone no

P02137330

13-3453317

Check _____ if self-employed

Paid

Preparei

Use Only

Print/Type preparer's name

Firm's name ▶

Firm's address

LOMA AGASHIWALA

Mahesh J.

New York, NY

,				
5/11/2020 10:03 PM	Charitable Purpose \$ 500		Charitable Purpose \$ 50	1-2
ments	Net Soo s Soo Soo Soo Soo Soo Soo Soo Soo S	n 990-PF, Part I, Line 23 - Other Expenses	Net Adjusted Investment \$	
N, INC. Federal Statements	Statement 1 - Form 990-PF, Part I, Line Total \$ <td>Statement 2 - Form 990-PF, Part I, I</td> <td>* Total \$ \$ </td> <td></td>	Statement 2 - Form 990-PF, Part I, I	* Total \$ \$	
PATELFD2019 PATEL FOUNDATION, INC. 11-3559705 FYE: 12/31/2019	Statem Description Profesional Fees Total	ISI	Description Expenses CHAR500 Filing Fees Total	