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. OMB No 1545-0047

Open to Public Inspection

Department of the Treasury

▶ Go to www.irs.gov/Form990PF for instructions and the latest information. Internal Revenue Service 09/16, 2020, and ending 12/31, 2020 For calendar year 2020 or tax year beginning A Employer identification number Name of foundation 85-3048732 INDUS FOUNDATION OF UTAH Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) (800) 839-1754FOUNDATION SOURCE 501 SILVERSIDE RD City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here. WILMINGTON, DE 19809-1377 X | Initial return G Check all that apply: Initial return of a former public charity D 1 Foreign organizations, check here. Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach Address change Name change computation H Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here . J Accounting method: X Cash Fair market value of all assets at If the foundation is in a 60-month termination Other (specify) end of year (from Part II, col (c), line under section 507(b)(1)(B), check here . > 256,355. **16)** ▶ \$ (Part I, column (d), must be on cash basis ) (d) Disbursements Part I Analysis of Revenue and Expenses (The (a) Revenue and for charitable (b) Net investment (c) Adjusted net total of amounts in columns (b), (c), and (d) expenses per purposes may not necessarily equal the amounts in ıncome income books (cash basis only) column (a) (see instructions) 250,000 Contributions, gifts, grants, etc , received (attach schedule) if the foundation is not required to Check ▶ attach Sch B. . . . . . . . . 3 Interest on savings and temporary cash investments. Dividends and interest from securities . . . Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 0 Capital gain net income (from Part IV, line 2) . Net short-term capital gain..... Income modifications Gross sales less returns and allowances . . . 10a b Less Cost of goods sold . c Gross profit or (loss) (attach schedule) . . . . 11 Other income (attach schedule) . . . . . . 250,000 0. 12 Total. Add lines 1 through 11 . . . . . 13 Compensation of officers, directors, trustees, etc. Other employee salaries and wages . . . . . Pension plans, employee benefits . . . . . . 16a Legal fees (attach schedule) . . . . . . . . . **b** Accounting fees (attach schedule) . . . . . Administrative c Other professional fees (attach schedule). . . 17 18 Taxes (attach schedule) (see instructions). . . 19 Depreciation (attach schedule) and depletion. 20 21 Travel, conferences, and meetings . . . . . and <u>OGDEN</u> 22 Printing and publications . . . . . . . . . . . . Operating Other expenses (attach schedule) . . . . . 23 24 Total operating and administrative expenses. 0 Add lines 13 through 23. . . . . . . . . . 25 Contributions, gifts, grants paid . . . . . . 0. Ō. 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12 250,000. Excess of revenue over expenses and disbursements 0. b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-).

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Form 990-PF (2020)

P	art II	Balance Sheets Attached schedules and amounts in the	Beginning of year	End	l of year
		description column should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
		Savings and temporary cash investments	[ ··-		
		Accounts receivable			
		Less allowance for doubtful accounts ▶			
		Pledges receivable ▶	come de serie proceso processos.	<del></del> -	<del>                                     </del>
		Less allowance for doubtful accounts ▶			
	l	Grants receivable			
	l	Receivables due from officers, directors, trustees, and other			<del></del>
	l				
	l	disqualified persons (attach schedule) (see instructions)			<del>                                     </del>
		Other notes and loans receivable (attach schedule)	-to so the an about the second		-
S	l	Less allowance for doubtful accounts ▶			<del></del>
Assets		Inventories for sale or use			<del></del>
ŝ	l	Prepaid expenses and deferred charges		<del> </del>	
•		Investments - U S and state government obligations (attach schedule).		250,000	256 255
		Investments - corporate stock (attach schedule) ATCH 1	·	250,000	. 256,355
		Investments - corporate bonds (attach schedule) Investments - land, buildings,			<del> </del>
		and equipment basis			
		Less accumulated depreciation (attach schedule)			
		Investments - mortgage loans			
	13	Investments - other (attach schedule)			
		Land, buildings, and equipment basis			
		equipment basis Less accumulated depreciation (attach schedule)			
		Other assets (describe >)			
		Total assets (to be completed by all filers - see the			
		instructions Also, see page 1, item I)	0.	250,000	. 256,355.
	17	Accounts payable and accrued expenses			1
		Grants payable	,	"	
Ś		Deferred revenue			i
≝		Loans from officers, directors, trustees, and other disqualified persons.			i
豆		Mortgages and other notes payable (attach schedule)		•	
Liabilities		Other liabilities (describe )			
		Other habilities (describe >			
	23	Total liabilities (add lines 17 through 22)	0.1	0	
S		Foundations that follow FASB ASC 958, check here			i
nces		and complete lines 24, 25, 29, and 30.			
ㅁ	24	Net assets without donor restrictions			,
쪖	24				<del>                                     </del>
8	25	Net assets with donor restrictions · · · · · · · · · · · · · · · · · · ·			<del> </del>
5		and complete lines 26 through 30.			
<u>.</u>		-			
ō	26	Capital stock, trust principal, or current funds			+
뜡	21	Paid-in or capital surplus, or land, bldg, and equipment fund		250,000	1
SS	28	Retained earnings, accumulated income, endowment, or other funds	<u> </u>		<u> </u>
₹		Total net assets or fund balances (see instructions)	0.	250,000	+
Net		Total liabilities and net assets/fund balances (see		050 000	
		instructions)	0.	250,000	
		Analysis of Changes in Net Assets or Fund Bala		· · · · · · · · · · · · · · · · · · ·	<del></del>
1		I net assets or fund balances at beginning of year - Part		<u> </u>	
		of-year figure reported on prior year's return)			0.
		r amount from Part I, line 27a			250,000.
		er increases not included in line 2 (itemize) ▶			
	Add	lines 1, 2, and 3			250,000.
5		reases not included in line 2 (itemize) ▶		5	
6	Tota	I net assets or fund balances at end of year (line 4 minus	line 5) - Part II, column (t	o), line 29 6	250,000.

Part IV	Capital Gains	and Losses for Tax on Inve	estment Income		,	
	• •	scribe the kind(s) of property sold (for e rick warehouse, or common stock, 200	•	(b) How acquired P - Purchase D - Donation		(d) Date sold (mo , day, yr )
1 a						
b						
C						
d						
е						
(e) (	Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (los ((e) plus (f) minu	•
а						
b						
С						
d					<del>-</del>	
е						
Соп	plete only for assets s	howing gain in column (h) and owned	by the foundation on 12/31/69	(0)	Gains (Col (h) ga	un minus
(i) FM	V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		(k), but not less the Losses (from col	nan -0-) <b>or</b>
а					<del></del> _	
b						
С						
d						
e						
3 Net	aın, also enter ın P	ain or (loss) as defined in sections art I, line 8, column (c) See ins	tructions If (loss), enter -0- in	2		
		1		3		
Part V		Jnder Section 4940(e) for Red				
1 Res	erved	ECTION 4940(e) REPEALED ON	DECEMBER 20, 2019 - DO NOT C	OMPLETE		
	(a) Reserved	(b) Reserved	(c) Reserved		(d) Reserved	
	Reserved	· · · ·				
	Reserved					
	Reserved					J
	Reserved					Ì
	Reserved					1
2 Res	erved			2		
3 Res	erved			3		
4 Res	erved			4	<u></u>	
5 Res	erved			5	w is spine to the stage gain	
6 Res	erved			6		ر <del></del> ر
7 Res	erved			7		r rune e
8 Res	erved	· · · · · · · · · · · · · · · · · · ·		8	. # "	

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Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instruc	ions)		
 1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1			Ī
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Reserved			0.
С	All other domestic foundations enter 1 39% of line 27b Exempt foreign organizations, enter 4% of			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			
3	Add lines 1 and 2			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)  4  Tax based on investment income. Subtract line 4 from line 3, if zero or less enter -0-			0.
5	Tax based on investment module. Cook as time 4 north line 5 in 2010 of 1035, cities 5			<del>-                                    </del>
6	Credits/Payments 2020 estimated tax payments and 2019 overpayment credited to 2020.			}
a	The state of the payment and the state of th			·
b	Exempt foreign organizations - tax withheld at source			
d	Backup withholding erroneously withheld	•		
7	Total credits and payments Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0.
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 2021 estimated tax ▶ Refunded ▶ 11			
Par	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	ıt	Yes	No
	participate or intervene in any political campaign?			X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	e		
	instructions for the definition		<u> </u>	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any material	3		
	published or distributed by the foundation in connection with the activities	- <u>-</u> -		X
	Did the foundation file Form 1120-POL for this year?	1c	ļ	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  (1) On the foundation ▶ \$			-
_	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
e	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	-		<u> </u>
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, article	s	·	
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			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?	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	i	,	1
	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that	it	·	
	conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	1
8a	Enter the states to which the foundation reports or with which it is registered. See instructions DE,			
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		X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) o			
	4942(j)(5) for calendar year 2020 or the tax year beginning in 2020? See the instructions for Part XIV If "Yes,			
	complete Part XIV			_x_L
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	1		•
	names and addresses . ATCH, 2		Х	
		Form 99	0-PF (	2020)

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Pai	rt 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	11_		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified		1	
	person had advisory privileges? If "Yes," attach statement See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ▶ FOUNDATION SOURCE Telephone no ▶ 800-839-	1754	4	
	Located at ▶501 SILVERSIDE ROAD, SUITE 123 WILMINGTON, DE ZIP+4 ▶ 19809-1:	377		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			
	and enter the amount of tax-exempt interest received or accrued during the year	_		
16	At any time during calendar year 2020, 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			1
	the foreign country >			
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1	\ <u>\</u>	N1 -
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly)		.	]
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(c) Turnish goods, services, or realisate to (or decept them rish) a disqualitied person.	1		
	(i) the state of t			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			ļ
				1
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)			
	termination of government service, if terminating within 90 days)			1
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here	<del>۔۔۔</del>		}
_	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			]
·	were not corrected before the first day of the tax year beginning in 2020?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			ı
-	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			1
а	At the end of tax year 2020, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2020? Yes X No			1
	If "Yes," list the years			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			
	all years listed, answer "No" and attach statement - see instructions )	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			}
	<b>&gt;</b>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	olf "Yes," did it have excess business holdings in 2020 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	<del></del>		4
	foundation had excess business holdings in 2020 )	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<u> </u>	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			اــــا
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2020?	4b	0.05	X
	Fig. 1	rm 99	ひ-アア	(2020)

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Par	t VII-B Statements Regarding Activities	for Which Form	4720 May Be Red	uired (continued)			
5a	During the year, did the foundation pay or incur any amo	ount to				Yes	No
	(1) Carry on propaganda, or otherwise attempt to influe	ence legislation (section	on 4945(e))?	. Yes X No			
	(2) Influence the outcome of any specific public ele	ection (see section	4955), or to carry or	n,			
	directly or indirectly, any voter registration drive?			Yes X No			
	(3) Provide a grant to an individual for travel, study, or o						
	(4) Provide a grant to an organization other than a						
	section 4945(d)(4)(A)? See instructions	-				İ	
	(5) Provide for any purpose other than religious, ch						
	purposes, or for the prevention of cruelty to children		-				
þ	If any answer is "Yes" to 5a(1)-(5), did any of the						
	Regulations section 53 4945 or in a current notice regar	dıng dısaster assıstan	ce? See instructions.		5b		-
	Organizations relying on a current notice regarding disas	ster assistance, check	here				
С	If the answer is "Yes" to question 5a(4), does the	foundation claim e	exemption from the t	ax	_		
	because it maintained expenditure responsibility for the		•				
	If "Yes," attach the statement required by Regulations se	•					
6a	Did the foundation, during the year, receive any fur	, ,	ectly, to pay premiui	ms			
	on a personal benefit contract?	•					
b	Did the foundation, during the year, pay premiums, dire	ctly or indirectly, on a	personal benefit contra	act?	6b		Х
	If "Yes" to 6b, file Form 8870						
7a	At any time during the tax year, was the foundation a pa	arty to a prohibited ta	x shelter transaction?.	. Yes X No			
b	If "Yes," did the foundation receive any proceeds or have	e any net income attr	butable to the transact	ion?	7b		
8	is the foundation subject to the section 4960 tax on pay	ment(s) of more that	n \$1,000,000 in				
	remuneration or excess parachute payment(s) during the	year <sup>9</sup>	<u></u>	. Yes X No			
Par	remuneration or excess parachute payment(s) during the Information About Officers, Director	rs, Trustees, Fou	ındation Manager	s, Highly Paid Emp	loyees,		·
1	and Contractors  List all officers, directors, trustees, and foundati	on managers and	their compensation	See instructions			
•		(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expens	e accor	ınt
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other all	owance	s
ATC	1 3		0.	0.			0.
			_				
		·					
2	Compensation of five highest-paid employees "NONE."	(other than thos	se included on line	e 1 - see instructio	ons). If no	one,	ente
	HONE.	(b) Title, and average		(d) Contributions to	<u></u>		
(a)	Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expens other all		
_		devoted to position		compensation			
	NONE	-,					
ı otal	number of other employees paid over \$50,000						

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Pa	rt VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emploand Contractors (continued)	yees, ·
3	Five	nighest-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
NON	JE		
			0.
		<del></del>	
		<del></del>	
		er of others receiving over \$50,000 for professional services	
	rt IX-A	· · · · · · · · · · · · · · · · · · ·	
		ndation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of its and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1	N/A		
•			
-			
2		* · · · · · · · · · · · · · · · · · · ·	
_			
3 _		1	•
-			
4			
•			
Pai	t IX-B	Summary of Program-Related Investments (see instructions)	<b>r</b> -
		e two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1.	NONE		
-			
2			
-	٠		
A	l other pr	ogram-related investments. See instructions	
3			
	NONE	_	
		lines 1 through 2	

Pa	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	eign foundations,	
1	Fair, market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes.		·
а	Average monthly fair market value of securities	1a	64,089.
b		1b	
С		1c	
d		1d	64,089.
е			
	1c (attach detailed explanation)	_	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	64,089.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	961.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	63,128.
6	Minimum investment return. Enter 5% of line 5	6	923.
Ра	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations, check here ▶ ☐ and do not complete this part.)	foundations	
1	Minimum investment return from Part X, line 6	1	923.
2 a	Tax on investment income for 2020 from Part VI, line 5 2a		
b		1	
С		2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1		923.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4	5	923.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	923.
	rt XII Qualifying Distributions (see instructions)		
1_	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	- permitted to the state of the		
b	The grant to take a management of the first and the first	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc,		
•	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	, , , , , , , , , , , , , , , , , , ,	3a	
ь 4		3b	
5	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	
IJ	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	_	^
e	Enter 1% of Part I, line 27b See instructions		0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when call qualifies for the section 4940(e) reduction of tax in those years	ilculating whether	the foundation

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Pa	rt XIII Undistributed Income (see instr	uctions)			<u></u>
4	Distributable amount for 2020 from Part XI,	(a) Corpus	(b) Years prior to 2019	(c) 2019	(d) 2020
'					923.
_	line 7				<u> </u>
	Undistributed income, if any, as of the end of 2020				
	Enter amount for 2019 only				
þ	Total for pnor years 20 18 ,20 17 ,20 16				
3	Excess distributions carryover, if any, to 2020				
а	From 2015				
b	From 2016				i I
С	From 2017				
d	From 2018				
е	From 2019				İ
f	Total of lines 3a through e				
4	Qualifying distributions for 2020 from Part XII,				ļ
	line 4 ▶ \$				
а	Applied to 2019, but not more than line 2a		- · · · · · · · · · · · · · · · · · · ·		<u> </u>
b	Applied to undistributed income of prior years				į.
	(Election required - see instructions)	-			<u>,                                    </u>
С	Treated as distributions out of corpus (Election				ļ
	required - see instructions)				
d	Applied to 2020 distributable amount				
	Remaining amount distributed out of corpus				}
5	Excess distributions carryover applied to 2020				
	(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:				
	Corpus Add lines 3f, 4c, and 4e Subtract line 5			*** ***	<u> </u>
b	Prior years' undistributed income Subtract				
_	line 4b from line 2b				
С	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				<u> </u>
d	Subtract line 6c from line 6b Taxable				
	amount - see instructions				
е	Undistributed income for 2019 Subtract line 4a from line 2a Taxable amount - see				
	instructions				
f	Undistributed income for 2020 Subtract lines				
•	4d and 5 from line 1. This amount must be				
	distributed in 2021				923.
7	Amounts treated as distributions out of corpus				Į
	to satisfy requirements imposed by section				1
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)				J
8	Excess distributions carryover from 2015 not				1
-	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2021.				
-	Subtract lines 7 and 8 from line 6a	0.			
10	Analysis of line 9				1
	Excess from 2016				 
	Excess from 2017				i
	Excess from 2018				t r
	Excess from 2019				1
е	Excess from 2020	L			l

Pa	rt XIV Private Op	erating Foundations	(see instructions a	nd Part VII-A, questi	on 9) 1	NOT APPLICABLE
1 a	If the foundation has	received a ruling or d	etermination letter tha	t it is a private opera	ating	
	foundation, and the ruling	g is effective for 2020, e	nter the date of the ruling		▶	<u></u>
b	Check box to indicate v	whether the foundation	is a private operating	foundation described in	section 4942(j	)(3) or4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
	justed net income from Part	(a) 2020	(b) 2019	(c) 2018	(d) 2017	(e) Total
	I or the minimum investment return from Part X for each					
	year listed					
b	85% of line 2a					
	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			N		
_	alternative test relied upon					
a	"Assets" alternative test - enter					
	<ol> <li>Value of all assets</li> <li>Value of assets qualifying</li> </ol>			/		<u>.                                      </u>
	under section		/			
b	4942(j)(3)(B)(i)					
Ī	enter 2/3 of minimum invest-					
	ment return shown in Part X,					
_	line 6, for each year listed.					
C	"Support" alternative test - enter  (1) Total support other than					
	gross investment income					
	(interest, dividends, rents, payments on secunties					
	loans (section 512(a)(5)),	/	,			
	or royalties)					
	(2) Support from general public and 5 or more					
	exempt organizations as provided in section 4942					
	(J)(3)(B)(III)					
	<li>(3) Largest amount of sup- port from an exempt</li>					
	organization		<del></del>			
	(4) Gross investment income.		Name		1 1 0 5 000	
Рa		ntary Information (( uring the year - see		only if the founda	ition nad \$5,000 o	r more in assets at
1	Information Regarding		<u> </u>		<del></del> .	<del></del>
' a	List any managers of			e than 2% of the tota	al contributions receiv	ved by the foundation
	before the close of any					red by the roundation
	-		-,	(0.	, , , , , , , , , , , , , , , , , , ,	
— <u> </u>	ATTACHME List any managers of			f the stock of a corn	oration for an aqually	/ large parties of the
J	ownership of a partner					r large portion or the
	o moromp or a partitor	omportunor omary, or	willow to to distance.	nao a 1070 or greater	into root	
	N/A					
2	Information Regarding	a Contribution Grant	Gift Loan Scholarsh	in etc Programs:	<del></del>	
_	<u> </u>	-		•• •		
	Check here ► X if to unsolicited requests for	ne toundation only t or funds if the founds	nakes contributions	to preselected chari	table organizations a	and does not accept
	complete items 2a, b, c			inis, etc., to individua	is or organizations ur	ider other conditions,
	The name, address, a			no poreon to whom ann	lications should be add	Iroscod
a	The hame, address, a	na telephone namber i	or email address of th	ie person to whom app	nications should be add	iressed
	The form in which app	lications should be sub	mitted and information	on and materials they	should include:	
_			toa ana miorinatio	and materials tiley	onodia molade	
	Any submission deadle	nes:			<del></del>	
_	.,	··- <del></del>				
d	Any restrictions or li	mitations on awards	such as by geogra	aphical areas charita	ble fields kinds of	institutions or other
_	factors:	unding on amaids,	such as by geogra	.p.noui aioas, ciiailla	ioio neius, kilius Ul	moundations, or other

JSA 0E1490 1 000 Form **990-PF** (2020)

Fal	Supplementary Information (	continueu)	oved for	Eutura Barmant	9
3_	Paginish	Ing the Year or Appl	Foundation	ruture Payment	
	Grants and Contributions Paid During Recipient Name and address (home or business)	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount ',
a	Paid during the year .	or substantial continuor	recipient		···
				•	
		•			
					,
	•			`	
					,
	•				
	•				•
					•
				1	
	Total				
b	Approved for future payment	<u> </u>	<u> </u>		
-					
				,	,
				,	
		1			
		,	1		
	Total			▶ 3b	

Part XVĮ	<ul> <li>Analysis of Income-Prod</li> </ul>	ucing Act	ivities			
	amounts unless otherwise indicated		ated business income (b)	Excluded by	y section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program	n service revenue	Business code	Amount	Exclusion code		(See instructions)
a						
b						
c						
е						
f						
g Fees	and contracts from government agencies	_				-
2 Member	rship dues and assessments					
	on savings and temporary cash investments					
	ds and interest from securities					
	tal income or (loss) from real estate					
	t-financed property					
	debt-financed property					
	al income or (loss) from personal property					
	ivestment income					
	loss) from sales of assets other than inventory					
•	ome or (loss) from special events					•
	rofit or (loss) from sales of inventory					
-	evenue a					-
е						
	I Add columns (b), (d), and (e)					
	dd line 12, columns (b), (d), and (e)				13	
	heet in line 13 instructions to verify calci					
Part XVI-	B Relationship of Activities	s to the A	ccomplishment of E	xempt Pur	poses	-
Line No.	Explain below how each activit	v for which	n income is reported i	n column (e	e) of Part XVI-A contribu	uted importantly to th
▼	accomplishment of the foundation				· ·	
			<u>-</u>		<u> </u>	
-						
	-		-			
					-	
						<del></del>
			· · · · · ·			
			<del> </del>			
					·	
				-		
	I .					

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

		<u> </u>										
1	Did the	organization directl	ly or indirectly eng	gage in any of th	e following	with any	other orga	nızatıon	described	<u>-</u> -	Yes	No
	ın sec	tion 501(c) (other	than section 50	01(c)(3) organiza	ations) or i	n section	n 527, rel	ating to	o political			ı
	organiz	zations?									. 1	
а	Transfe	ers from the reportin	g foundation to a	noncharitable exe	empt organiz	ation of				- <del></del>		
	(1) Cas	sh								1a(1)		Х
	(2) Oth	ner assets								1a(2)		Х
b	Other t	ransactions										
	(1) Sal	es of assets to a noi	ncharitable exemp	t organization						16(1)		X
		chases of assets fro								i .		Х
		ntal of facilities, equi		_								Х
		mbursement arrange										Х
		ans or loan guarantee										Х
		formance of service										X
c		g of facilities, equipm		_								X
		answer to any of th									fair m	arket
u		of the goods, other		•	_				-			
		n any transaction or										
/a\ i	ine no	(b) Amount involved	T	charitable exempt orga			-		ctions, and shar			
\u/ L		N/A	(c) Name of none	onantable exempt orge	and a second	N/A	phon or trans-	010, 1101100	ionorio, and ona	9	goo	
						,	_					
				<del></del>								
	-						<del></del>					
				<del></del> -			<del></del>					
			-			_					-	
	-										<del>-</del>	
			<del> </del>									
			<del>-</del>									
	-											
			-						<del></del>			
			<u></u>									
2a		foundation directly								<del></del> 1	ΓV	٦
		ped in section 501(c)		on 501(c)(3)) or ir	section 52	/7	• • • • • •			Y	es X	J No
b	If "Yes	," complete the follow			<del></del>							
(a) Name of organization (b) Type of organization (c) Description of relationship					hip							
			<del></del>	_		<u> </u>	<del></del>	_				
							<del>.</del>		-			
	1				······						-16 -1	
	correc	penalties of perjury, I declar it, and complete Declaration of	are that I have examined I prepaper (other than taxpa	this return, including a ayer) is based on all inforr	ccompanying son nation of which pr	equies and si eparer has any	atements, and t knowledge	o the best	or my knowledg	e ano c	ener, it	is true,
Sigi		Anarol	- h	11/12			Presid	L	May the IRS	discus	s this	return
Her		Miles		11/12	<u>/ 2/ / / / / / / / / / / / / / / / / / </u>	10-	1 163 10		with the pre			_ 1
101	Sigr	nature of officer or trustee	•	Date /	7	Title			See instruction	s <u>X</u>	Yes	No
		<u> </u>		T =			1					
Paid	4	Print/Type preparer's na		Preparer's signature			Date		" L	PTIN		
		JEFFREY D HAS		JEFFREY D I	HASKELL		08/26/2	2021 s		P013		0
	parer		OUNDATION SOU					Firm's El	N ▶ 51039	9834	7	
Use	Only	Firm's address ► ON	E HOLLOW LN,	STE 212								
		LA	KE SUCCESS,	NY		1104	42	Phone n	800-83			
										004	DE	(2020)

## 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

2020

Employer identification number

INDUS FOUNDATION OF UTAH 85-3048732 Organization type (check one): Filers of: Section: Form 990 or 990-F7 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Employer identification number 85-3048732

Part I	Contributors (see instructions). Use duplicate cop	ies of Part I if additional space is ne	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	KRISHNAN, AJAY  1325 E PERRY'S HOLLOW ROAD  SALT LAKE CITY, UT 84103	\$ \$ \$ 250,000.	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)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization INDUS FOUNDATION OF UTAH

Employer identification number 85-3048732

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) · Date received
1	WASATCH EMERGING MARKETS SELECT INSTL WIESX, 13520.822 SH.	\$250,000.	12/23/2020
(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
		\$	

Name of organization INDUS FOUNDATION OF UTAH

Employer identification number 85-3048732

Part III	(10) that total more than \$1,000 for the following line entry. For organizat	the year from any ions completing Par	one contributor. (	Complete columns (a) through (e) and of exclusively religious, charitable, etc.,
	contributions of \$1,000 or less for th Use duplicate copies of Part III if addit	e year. (Enter this in tional space is neede	tormation once. S ed.	ee instructions.) > 5
(a) No. from Part I	(b) Purpose of gift	(c) Use		(d) Description of how gift is held
-				
	Transferee's name, address, at	(e) Transf nd ZIP + 4	_	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transf	_	
	Transferee's name, address, at	nd ZIP + 4	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift (c) (		of gift	(d) Description of how gift is held
		(e) Transi	er of gift	
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift (c) U		of gift	(d) Description of how gift is held
		(a) <b>T</b> urned		
	Transferee's name, address, a	(e) Transi	•	onship of transferor to transferee

1	ı
ATTACHMENT	

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- CORPORATE	
-	1
-	
DART T	1 1 1 1 1
A T T	

E	BOOI
	ION
	DESCRIPTION

BOOK VALUE	250,000.	000 050
DESCRIPTION	WASATCH EMERGING MARKETS SELEC	S.TATOT

	DING	Ð	LUE	
--	------	---	-----	--

ENDING FMV

256,355.

ATTACHMENT 1

ATTACHMENT 2

LINE 10 - SUBSTANTIAL CONTRIBUTORS PART VII-A, FORM 990PF,

## NAME AND ADDRESS

KRISHNAN, AJAY 1325 E PERRY'S HOLLOW ROAD SALT LAKE CITY, UT 84103 AKKAPEDDI, SHAILAJA 1325 E PERRY'S HOLLOW ROAD SALT LAKE CITY, UT 84103

ATTACHMENT 3	CONTRIBUTIONS EXPENSE ACCT TO EMPLOYEE AND OTHER BENEFIT PLANS ALLOWANCES	.0	.0	0.
	CONTR. TO EM. COMPENSATION BENEF	·O	.0	0.
ERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	CO- PRES, DIR, SEC, TREAS 1.00	CO- PRES, DIR 1.00	GRAND TOTALS
FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	NAME AND ADDRESS	SHAILAJA AKKAPEDDI FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377	AJAY KRISHNAN FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377	

ATTACHMENT 4

## FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

AJAY KRISHNAN SHAILAJA AKKAPEDDI