Federal Electronic Filing Instructions

Tax Year 2020

You are responsible for confirming the status of your electronically filed return.

You can confirm the status of your return by going to https://www.taxact.com/ef/efile-center. You will need to enter the entity's EIN, ZIP code and company name.

You do not need to mail any paper signature forms to the IRS. Retain the signed copy of Form 8453-EO along with a copy of your return. The return has been successfully filed once an acceptance from the IRS is received.

Return of Private Foundation

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

▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.

| | | | nd ending | | | | | |
|------------------------------------|-------|---|------------------|-------------|--------|--------------|---|-------------------|
| Na | ame o | f foundation | | | | A Employe | er identification numb | er |
| Ch | and | hok Charitable Trust | | | | 75-64 | 65433 | |
| | | and street (or P.O. box number if mail is not delivered to street address |) | Room | /suite | | ne number (see instruct | ions) |
| 47 | 26 | Prytania St | | | | (646) | 202-0651 | |
| | | own, state or province, country, and ZIP or foreign postal code | | | | | tion application is pend | ing check here |
| | - | Orleans, LA 70115-4004 | | | | o | non approance to porta- | g, ccoxc.c p |
| | | eck all that apply: Initial return Initial return of a for | rmer nublic char | rity | | D 1 Forei | gn organizations, check | here |
| • | 0 | Final return Amended return | mor public cha. | , | | | - | |
| | | Address change Name change | | | | l | gn organizations meetir k here and attach comp | - |
| — | Chr | eck type of organization: X Section 501(c)(3) exempt private founda | tion | | | l | | |
| _ ;; | _ | ction 4947(a)(1) nonexempt charitable trust | | | | | foundation status was to 507(b)(1)(A), check here | |
| ÷ | | | $\overline{}$ | | | l | | |
| ı | | r market value of all assets at J Accounting method: X Cash | Accrual | | | l | Indation is in a 60-mont | |
| | | l of year (from Part II, col. (c), 16) ▶ \$ 156,107, | asis) | | | under se | ection 507(b)(1)(B), che | CKTIETE |
| В | | <u> </u> | | | | | | (d) Disbursements |
| | :111 | Analysis of Revenue and Expenses (The total of | (a) Revenue | | 1 ' ' | nvestment | (c) Adjusted net | for charitable |
| | | amounts in columns (b), (c), and (d) may not necessarily equal | expenses | - | " | icome | income | purposes |
| | I . | the amounts in column (a) (see instructions).) | books | • | | | | (cash basis only) |
| | 1 | Contributions, gifts, grants, etc., received (attach schedule) | | | | | | |
| | 2 | Check ►X if the foundation is not required to attach Sch. B | | | | | | |
| | 3 | Interest on savings and temporary cash investments | | 1. | | 1. | | |
| | 4 | Dividends and interest from securities | 2,6 | <u>44.</u> | 2 | ,644. | | |
| | 5 a | Gross rents | | | | | | |
| | b | Net rental income or (loss) | | | | | | |
| ne | 6a | Net gain or (loss) from sale of assets not on line 10 | | | | | | |
| Revenue | b | Gross sales price for all assets on line 6a | | | | | | |
| Š | 7 | Capital gain net income (from Part IV, line 2) | | | | | | |
| Ř | 8 | Net short-term capital gain | | | | | | |
| | 9 | Income modifications | | | | | | |
| | 10 a | Gross sales less returns and allowances | | | | | | |
| | b | Less: Cost of goods sold | | | | | | |
| | l | Gross profit or (loss) (attach schedule) | | | | | | |
| | 11 | Other income (attach schedule) | | | | | | |
| | 12 | Total. Add lines 1 through 11 | 2,6 | 45. | 2 | ,645. | | |
| _ | 13 | Compensation of officers, directors, trustees, etc | | | | , | | |
| | 14 | Other employee salaries and wages | | | | | | |
| ses | 15 | Pension plans, employee benefits. | | | | | | |
| | l | Legal fees (attach schedule) | | | | | | |
| þ | l | Accounting fees (attach schedule) | | | | | | |
| Û | l | Other professional fees (attach schedule) | | | | | | |
| ţį | 17 | Interest | | | | | | |
| tra | 18 | Taxes (attach schedule) (see instructions) | | 62. | | | | |
| inis | 19 | Depreciation (attach schedule) and depletion | | 02. | | | | |
| 臣 | 20 | Occupancy | | | | | | |
| Ă | l . | Travel, conferences, and meetings | | | | | | |
| ang | 21 | · · · · · · · · · · · · · · · · · · · | | | | | | |
| ng | 22 | Printing and publications | | | | | | |
| rati | 23 | Other expenses (attach schedule) | | | | | | |
| Operating and Administrative Expen | 24 | Total operating and administrative expenses. | | 63 | | | | |
| O | | Add lines 13 through 23 | | <u>62.</u> | | | | 01 000 |
| | 25 | Contributions, gifts, grants paid | 21,2 | | | | | 21,200. |
| | 26 | Total expenses and disbursements. Add lines 24 and 25 | 21,2 | 62. | | | | 21,200. |
| | 27 | Subtract line 26 from line 12: | 40 - | . - | | | | |
| | l | Excess of revenue over expenses and disbursements | -18,6 | <u> 17.</u> | | <i>-</i> 1 - | | |
| | I | Net investment income (if negative, enter -0-) | | | 2 | ,645. | | |
| | c | Adjusted net income (if negative, enter -0-) | | | | | | |

| Ð | art | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.) | Beginning of year | End of year | | f year |
|-------------|------|---|-------------------|----------------|----------------|-----------------------|
| Щ | al U | 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 | 13,977. | 4,73 | 7. | 4,737. |
| | 2 | Savings and temporary cash investments | | | | |
| | 3 | Accounts receivable | | | | |
| | | Less: allowance for doubtful accounts ▶ | | | | |
| | 4 | Pledges receivable ▶ | | | | |
| | | Less: allowance for doubtful accounts ▶ | | | | |
| | 5 | Grants receivable | | | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | | |
| | | disqualified persons (attach schedule) (see instructions) | | | | |
| | 7 | Other notes and loans receivable (attach schedule) ▶ | | | | |
| | | Less: allowance for doubtful accounts ▶ | | | | |
| ts | 8 | Inventories for sale or use | | | | |
| Assets | 9 | Prepaid expenses and deferred charges | | | | |
| Ř | 10 | Investments – U.S. and state government obligations (attach schedule) | | | | |
| | 1 | nvestments – corporate stock (attach schedule) | 150,539. | 151,37 | 0. | 151,370. |
| | (| Investments – corporate bonds (attach schedule) | | | | |
| | 11 | Investments – land, buildings, and equipment: basis ▶ | | | | |
| | | Less: accumulated depreciation (attach schedule) ▶ | | | | |
| | 12 | Investments – mortgage loans | | | | |
| | 13 | Investments – other (attach schedule) | | | | |
| | 14 | Land, buildings, and equipment: basis ▶ | | | | |
| | | Less: accumulated depreciation (attach schedule) ▶ | | | | |
| | 15 | Other assets (describe ▶ | | | | |
| | 16 | Total assets (to be completed by all filers – see the instructions. Also, | | | | |
| | | see page 1, item I) | 164,516. | 156,10 | 7. | 156,107. |
| | 17 | Accounts payable and accrued expenses | | | | |
| S | 18 | Grants payable | | | _ | |
| ij | 19 | Deferred revenue | | | _ | |
| Ξ | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | _ | |
| Liabilities | 21 | Mortgages and other notes payable (attach schedule) | | | Щ | |
| _ | 22 | Other liabilities (describe) | | | _ | |
| _ | 23 | Total liabilities (add lines 17 through 22) | | | _ | |
| alances | | Foundations that follow FASB ASC 958, check here | | | - 1 | |
| ī | | and complete lines 24, 25, 29, and 30. | | | - 1 | |
| al a | 24 | Net assets without donor restrictions | | | _ | |
| Ω | 25 | Net assets with donor restrictions | | | _ | |
| ınd | | Foundations that do not follow FASB ASC 958, check here | | | - 1 | |
| Fund | | and complete lines 26 through 30. | | | . | |
| ō | 26 | Capital stock, trust principal, or current funds | 295,070. | 295,07 | 0. | |
| | 27 | Paid-in or capital surplus, or land, bldg., and equipment fund | | | \blacksquare | |
| Se | 28 | Retained earnings, accumulated income, endowment, or other funds | | -138,96 | | |
| Assets | 29 | Total net assets or fund balances (see instructions) | 164,516. | 156,10 | 7. | |
| Net | 30 | Total liabilities and net assets/fund balances | | | _ | |
| | | (see instructions) | 164,516. | 156,10 | 7. | |
| | art | , , | | 4 | | |
| 1 | | otal net assets or fund balances at beginning of year – Part II, column (a), line 29 | | | ا ا | 164 516 |
| | | gure reported on prior year's return) | | | 1 | 164,516. |
| | | nter amount from Part I, line 27a | | | 3 | -18,617. 8,584. |
| | | dd lines 1, 2, and 3 | | | 4 | 154,483. |
| | | corosce not included in line 2 (itemize) | | | 5 | T71,103. |
| _ | | otal net assets or fund balances at end of year (line 4 minus line 5) – Part II, colu | | | 6 | 154,483. |
| | , 1 | startist accous of runa balances at one of year (line 4 millus line of = Fart II, cold | (D), III C Z J | | <u> </u> | ±3±/±03• |

| ган | Capital Gaills all | u LU3363 10 | и тах | OII IIIVES | IIIICIII IIIC | UIIIC | | | |
|------|--|-------------------|-------------------------|---------------|----------------------------------|---------|--|-----------------------------------|-----------------------------------|
| | (a) List and describe the2-story brick warehouse; | | | | estate, | | (b) How acquired P - Purchase D - Donation | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo., day, yr.) |
| 1a | 32 shares Schw | ab S&P 5 | 500 : | Index I | und | | P | 10/09/201 | 801/16/2020 |
| b | 300 shares Sch | wab S&P | 500 | Index | Fund | | P | | 803/30/2020 |
| С | 221 shares Sch | wab S&P | 500 | Index | Fund | | P | 10/09/201 | 805/11/2020 |
| d | | | | | | | | | |
| e | | | | | | | | | |
| | (e) Gross sales price | | reciation or allowat | | | | r other basis nse of sale | | ain or (loss) s (f) minus (g)) |
| a | 1,624. | ` | | · | <u> </u> | • | 1,433. | | 191. |
| b | 12,105. | | | | | | 13,435. | | -1,330. |
| | 10,000. | | | | | | 9,928. | , | 72. |
| d | | | | | | | | | |
| е | | | | | | | | | |
| Com | plete only for assets showing g | ain in column (h |) and ow | ned by the fo | undation on | 12/31/6 | 69. | (I) Gains (| Col. (h) gain minus |
| | (i) FMV as of 12/31/69 | (j) Adju | sted bas | is | (k) | Excess | s of col. (i) | | not less than -0-) or |
| | | as of | 12/31/69 | 1 | | over co | I. (j), if any | Losses | s (from col. (h)) |
| a | | | | | | | | | 191. |
| b | | | | | | | | | -1,330. |
| c | | | | | | | | | 72. |
| d | | | | | | | | | |
| е | | | | | | | | | |
| 2 (| Capital gain net income or (net | capital loss) | | | in, also enter ss), enter -0- | | | | 1 060 |
| 2 1 | Net short-term capital gain or (lo | ana) an dafinad i | n acatio | • | | iii aii | i, iiie | 2 | -1,067. |
| | If gain, also enter in Part I, line 8 | | | | | in | , | | |
| | Part I, line 8......... | . , | | • | • | | } | | |
| Part | | | | | | v on l | Not Investmen | 3 nt Income | |
| rart | Qualification on | | • | | | | | DO NOT COMPLE | |
| 1 | Reserved | | CTION | 4340(e) INEI | LALLD ON | DECE | WIDEN 20, 2019 - 1 | DO NOT COMPLE | I L. |
| | (a) | | | b) | | | (c) | | (d) |
| | Reserved | | Res | erved | | | Reserved | | Reserved |
| | Reserved | | | | | | | | |
| | Reserved | | | | | | | | |
| | Reserved | | | | | | | | |
| | Reserved | | | | | | | | |
| | Reserved | | | | | | | | |
| | | | | | | | | | |
| 2 | Reserved | | | | | | | 2 | |
| | | | | | | | | | |
| 3 | Reserved | | | | | | | 3 | |
| | | | | | | | | | |
| 4 | Reserved | | | | | | | 4 | |
| | | | | | | | | | |
| 5 | Reserved | | | | | | | 5 | |
| | | | | | | | | | |
| 6 | Reserved | | | | | | | 6 | |
| _ | D | | | | | | | | |
| 7 | Reserved | | | | | | | 7 | |
| | Danamad | | | | | | | | |
| 8 | Reserved | <u> </u> | | | | | · · · · · · · · · · · · · · · · · · · | 8 | - 000 PF |
| UYA | | | | | | | | | Form 990-PF (2020) |

| | 00-PF (2020) Chandhok Charitable Trust 75-646 | | | Page 4 |
|---------|--|---------------|-------|---------------|
| Part | | instr | uctio | ns) |
| 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 | Reserved | | | <u>37.</u> |
| 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-) 2 | | | |
| 3 | Add lines 1 and 2 | | | 37. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 4 | | | |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 | | | <u>37.</u> |
| 6 | Credits/Payments: | | | |
| а | 2020 estimated tax payments and 2019 overpayment credited to 2020 6a | | | |
| b | Exempt foreign organizations - tax withheld at source | | | |
| С | Tax paid with application for extension of time to file (Form 8868) 6c | | | |
| d | Backup withholding erroneously withheld | | | |
| 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 attached | | | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | | <u>37.</u> |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | | 0. |
| 11 | Enter the amount of line 10 to be: Credited to 2021 estimated tax Refunded | | | 0. |
| Par | 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 participate or | | Yes | No |
| | intervene in any political campaign? | 1a | | _X_ |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the | | | |
| | definition | 1b | | 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. | | | 37 |
| C | Did the foundation file Form 1120-POL for this year? | 1c | | X |
| d | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | | |
| _ | (1) On the foundation. ► \$ (2) On foundation managers. ► \$ | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | | | |
| • | managers. • \$ | 2 | | X |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | | | |
| 2 | 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 | 2 | | X |
| 40 | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 3 4a | | X |
| 4a 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 |
| J | If "Yes," attach the statement required by <i>General Instruction T</i> . | | | |
| 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 | Х | |
| 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 | |
| 8a | Enter the states to which the foundation reports or with which it is registered. See instructions. | | | |
| | LA | | | |
| 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 | х | |
| 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 2020 or the tax year beginning in 2020? See the instructions for Part XIV. If "Yes," complete Part XIV | 9 | | х |
| 10 | Did any persons become substantial contributors during the tax year? | | | |
| | If "Yes," attach a schedule listing their names and addresses | 10 | | X |
| UYA | | orm 99 | 0-PF | (2020) |

Part VII-A Statements Regarding Activities (continued) Yes No At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning Х 11 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person X had advisory privileges? If "Yes," attach statement. See instructions 12 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address ▶ www.chandhok.org Telephone no. ► (504) 310-7766 The books are in care of ▶Vikram Chandhok 14 Located at ▶ 4726 Prytania St New Orleans, LA 70115-4004 ZIP+4 ▶ 70115-4004 15 At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority Yes 16 No X 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 No 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 (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No (5) Transfer any income or assets to a disqualified person (or make any of either available for (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 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 1b Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that Х 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)): At the end of tax year 2020, did the foundation have any undistributed income (Part XIII, lines If "Yes," list the years ▶ 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 Х 2b If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. С Did the foundation hold more than a 2% direct or indirect interest in any business enterprise За If "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 X 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 2020?....

X

| Part | (AII-R | Statements Regarding Activitie | s for which Form | 1 4 <i>1 2</i> 0 May Be F | Requirea (continu | iea) | | |
|---------|------------|--|---|---|---|----------|-----------------------|------|
| 5a | During th | ne year, did the foundation pay or incur any amo | unt to: | | | | Yes | No |
| | (1) Carr | y on propaganda, or otherwise attempt to influer | nce legislation (section 4 | 1945(e))? | Yes X | No | | |
| | (2) Influ | ence the outcome of any specific public election | (see section 4955); or | to carry on, | | | | |
| | direc | ctly or indirectly, any voter registration drive? | | | Yes X | No | | |
| | (3) Prov | ride a grant to an individual for travel, study, or of | ther similar purposes? | | Yes X | No | | |
| | | ride a grant to an organization other than a charit | | | | | | |
| | | ion 4945(d)(4)(A)? See instructions | - | | Yes X | No | | |
| | | ride for any purpose other than religious, charital | | | | | | |
| | | oses, or for the prevention of cruelty to children | | | Yes X | No | | |
| b | | swer is "Yes" to 5a(1)-(5), did any of the transa | | | | | | |
| | • | ons section 53.4945 or in a current notice regard | | · | | 5 | b | |
| | _ | ations relying on a current notice regarding disas | - | | | | | |
| С | _ | swer is "Yes" to question 5a(4), does the founda | | | _ | | | |
| | | it maintained expenditure responsibility for the g | • | | Yes | No | | |
| | | attach the statement required by Regulations se | | | | | | |
| 6a | | oundation, during the year, receive any funds, di | | y premiums | | | | |
| | | sonal benefit contract? | | | Yes X | No | | |
| b | | oundation, during the year, pay premiums, direc | | | | | ь | х |
| | | to 6b, file Form 8870. | | | | | | |
| 7a | At any tir | me during the tax year, was the foundation a par | ty to a prohibited tax she | elter transaction? | Yes X | No | | |
| b | | did the foundation receive any proceeds or have | | | | | b | |
| 8 | | undation subject to the section 4960 tax on payn | | | | | | |
| | remuner | ation or excess parachute payment(s) during the | e year? | | Yes X | No | | |
| Pai | rt VIII | Information About Officers, Dir | ectors, Trustees, | Foundation Ma | anagers, Highly F | aid Em | ploye | es, |
| | | and Contractors | | | | | | |
| 1 | List all o | officers, directors, trustees, and foundation | managers and their co | ompensation. See ir | nstructions. | | | |
| | | (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plan and deferred compensat | s l`´oth | pense ac er allowa | |
| Vik | ram C | handhok | Trustee | | | | | |
| 4726 | Prytani | a St New Orleans, LA 70115-4004 | 01.00 | | | | | |
| Rav: | inder | Chandhok | Trustee | | | | | |
| 610 | View S | St Mountain View, CA 94041 | 01.00 | | | | | |
| Lynı | n Cha | ndhok | Trustee | | | | | |
| 413 | 4th | St Brooklyn, NY 11215 | 01.00 | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| 2 | Comper | nsation of five highest-paid employees (othe | er than those included | on line 1 - see instr | ructions). If none, ente | er | | |
| (a) N | lame and a | ddress of each employee paid more than \$50,000 | (b) Title, and average hours per week | (c) Compensation | (d) Contributions to employee benefit plan | | pense ad | |
| | | | devoted to position | | and deferred compensa | | er allowa | nces |
| | | | | | | | | |
| NON | E | | | | | | | |
| | | | | | | | | |
| NON | E | | | | | | | |
| | | | | | | | | |
| NON | E | | | | | | | |
| | | | | | | | | |
| NON | E | | | | | | | |
| | | | | | | | | |
| NON | E | | | | | | - | |
| | | | | | | | | |
| Total r | number of | other employees paid over \$50,000 | | | | .▶ | | |
| | | | | | | | | |

| Part VIII | Information About Officers, Directors, Trustees, Foundation Managers, Highly Pai and Contractors (continued) | d Employees, |
|--|--|------------------|
| 3 Five highe | est-paid independent contractors for professional services. See instructions. If none, enter "NONE." | |
| (a) Name and a | ddress of each person paid more than \$50,000 (b) Type of service | (c) Compensation |
| NONE | | |
| | | |
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| NONE | | |
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| NONE | | |
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| NONE | | |
| Tatal | have receiving a result for 000 for mentancianal comings | |
| I otal number of ot | hers receiving over \$50,000 for professional services | |
| Part IX-A | Summary of Direct Charitable Activities | |
| List the foundation' organizations and o | s four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of other beneficiaries served, conferences convened, research papers produced, etc. | Expenses |
| 1 | | |
| | | |
| | FFII F AABI | |
| 2 | | |
| | | |
| | | |
| 3 | | |
| | | |
| | | |
| 4 | | |
| | | |
| Part IX-B | Summary of Program-Related Investments (see instructions) | |
| | argest program-related investments made by the foundation during the tax year on lines 1 and 2. | Amount |
| 1 | agost program rotated intocatione made by the total addition daring the tax year on miles i and zi | 7 tinodit |
| ' | | |
| | | |
| 2 | | |
| | | |
| | | |
| All other program-r | related investments. See instructions. | |
| 3 | | |

Total. Add lines 1 through 3 Form **990-PF**(2020) UYA

| Part | X Minimum Investment Return (All domestic foundations must complete this part. Foreign | gn fo | undations, |
|-------------|--|---------|-----------------|
| | see instructions.) | | |
| 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 | 131,273. |
| b | Average of monthly cash balances | 1b | 8,302. |
| С | Fair market value of all other assets (see instructions) | 1c | |
| d | Total (add lines 1a, b, and c). | 1d | 139,575. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | |
| 3 | Subtract line 2 from line 1d | 3 | 139,575. |
| 4 | Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see instructions) | 4 | 2,094. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 137,481. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 6,874. |
| Part | | j four | ndations |
| | and certain foreign organizations, check here ▶ ☐ and do not complete this part.) | | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 6,874. |
| 2a | Tax on investment income for 2020 from Part VI, line 5 | | |
| b | Income tax for 2020. (This does not include the tax from Part VI.) | | |
| С | Add lines 2a and 2b | 2c | 37. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 6,837. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 6,837. |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0. |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 6,837. |
| Part | XII Qualifying Distributions (see instructions) | | |
| ı aıt | addinying Distributions (See metactions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| а | Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26 | 1a | 21,200. |
| b | Program-related investments – total from Part IX-B. | 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: | | |
| а | Suitability test (prior IRS approval required) | 3a | |
| b | Cash distribution test (attach the required schedule) | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 | 4 | 21,200. |
| 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 | |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4. | 6 | 21,200. |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation | tion qu | alifies for the |
| | section 4940(e) reduction of tax in those years | | |

Form **990-PF**(2020)

d Excess from 2019

Excess from 2020

Form 990-PF (2020) Chandhok Charitable Trust 75-6465433 Page 9 Part XIII Undistributed Income (see instructions) (a) (b) (c) (d) 2019 2020 Corpus Years prior to 2019 6,837. 1 Distributable amount for 2020 from Part XI, line 7 . . . 2 Undistributed income, if any, as of the end of 2020: **b** Total for prior years: Excess distributions carryover, if any, to 2020: 3 From 2015 9,541. 8,317. From 2016 57**,**576. **c** From 2017 10,653. From 2018 6,081. **e** From 2019 92,168. Total of lines 3a through e Qualifying distributions for 2020 from Part XII, line 4: ▶ \$ 21,200. a Applied to 2019, but not more than line 2a. Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election Applied to 2020 distributable amount 6,837. d 14,363. Remaining amount distributed out of corpus. Excess distributions carryover applied to 2020 (If an amount appears in column (d), the same amount must be shown in column (a).) Enter the net total of each column as indicated below: 106,531. Corpus. Add lines 3f, 4c, and 4e. Subtract line 5. . . . **b** Prior years' undistributed income. Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. Subtract line 6c from line 6b. Taxable amount - see instructions e Undistributed income for 2020. Subtract line 4a from line 2a. Taxable amount - see instructions Undistributed income for 2020. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2021. Amounts treated as distributions out of corpus 7 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 2015 not applied on line 5 or line 7 (see instructions) . 9,541. Excess distributions carryover to 2021. 96,990. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: **a** Excess from 2016..... 8,317. 57,576. **b** Excess from 2017 10,653. **c** Excess from 2018

6,081. 14,363.

Pref: small orgs in S LA, CA, NYC

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Form 990-PF(2020)

Limit \$2000/recipient/year-us.less

| 3 Grants and Contributions Paid During the Year of | 1 | ayment | 1 | Ι |
|---|--|--------------------------------|----------------------------------|---------|
| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of recipient | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | Toolpicit | | |
| a Paid during the year Community Services Agency 204 Stierlin Rd | | | | |
| Mountain View, CA 94043 | | ₽C | unrestricted | 4,000. |
| Citizens for Responsibility and Ethics in Washington 1101 K St N.W. | | | | |
| Washington, DC 20005 | | PC | unrestricted | 1,000. |
| World Central Kitchen 655 New York Ave., N.W> Ste. 6th Floor | | | | |
| Washington, DC 20001 | | ₽C | unrestricted | 1,500. |
| New Orleans Jazz & Heritage Foundation 1205 N. Rampart St | | | | |
| New Orleans, LA 70116 | | PC | unrestricted | 1,600. |
| Upaya Zen Center 1404 Cerro Gordon Rd | F (| | OPY | 1 000 |
| Santa Fe, NM 87501 | | PC | unrestricted | 1,000. |
| Made in New Orleans Foundation 900 Camp St Ste. 4C13 New Orleans, LA 70130 | | PC | unrestricted | 1,000. |
| Unity of Whidbey | | PC | uniestricted | 1,000. |
| 701 La Cana St Coupeville, WA 98239 | | PC | unrestricted | 1,000. |
| Krewe of Red Beans | | | | , |
| 818 Gallier St | | | | |
| New Orleans, LA 70117 | | PC | Feed the Front Line NOLA | 1,000. |
| | | | > 3a | 21,200. |
| b Approved for future payment | | | | |
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| Table | | | | |
| Total | | | > 3b | |

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| Ente | | s amounts unless otherwise indicated. | | usiness income | Excluded by sect | ion 512, 513, or 514 | (a) |
|------|--------|--|----------------------|---------------------------------------|-----------------------|----------------------|---|
| 1 | | ram service revenue: | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | (e) Related or exemp function income (See instructions. |
| • | | | | | | | , |
| | b . | | | | | | |
| | C | | | | | | |
| | d | | | | | | |
| | e | | | | | | |
| | f | | | | | | |
| | - | Fees and contracts from government agencies | | | | | |
| 2 | _ | abership dues and assessments | | | | | |
| 3 | | est on savings and temporary cash investments | | | | | |
| 4 | | lends and interest from securities. | | | 14 | 2,644. | |
| 5 | | rental income or (loss) from real estate: | | | | 2/011: | |
| Ŭ | | Debt-financed property | | | | | |
| | | Not debt-financed property | | | | | |
| 6 | | rental income or (loss) from personal property | | | | | |
| 7 | | er investment income. | | | | | |
| 8 | | or (loss) from sales of assets other than inventory | | | | | |
| 9 | | ncome or (loss) from special events | | | | | |
| 10 | | ss profit or (loss) from sales of inventory. | | | | | |
| 11 | | er revenue: a | | | | | |
| ••• | | | | | | | |
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| | е — | _ | | | | | |
| 12 | _ | otal. Add columns (b), (d), and (e) | | | | 2,644. | |
| | | II. Add line 12, columns (b), (d), and (e) | | | | | 2,644. |
| | | sheet in line 13 instructions to verify calculations.) | | | | | 2,011. |
| | | 7-B Relationship of Activities to the A | Accomplish | nent of Exemi | nt Purposes | | |
| | e No. | Explain below how each activity for which income is | | | | ortantly to the acc | omplishment |
| | ▼ | of the foundation's exempt purposes (other than by | • | . , | | • | |
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Form 990-PF (2020) Chandhok Charitable Trust 75-6465433 Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations**

| | 1 | Did th | e organization direc | ctly or indir | rectly eng | jage in | any of the | e following | with any o | ther organiza | ation described | l in section 50 | 01(c) | | Yes | No |
|-----|----------------|----------------|--|----------------|--------------|-------------|---------------|-------------------|---------------------------------------|-----------------|---------------------|------------------|-----------------------------|----------|----------|------|
| | | (other | than section 501(c | :)(3) organ | izations) | or in s | ection 527 | 7, relating | to political | organizations | ? | | | | | |
| | | | | | | | | | | | | | | | | |
| | а | Trans | fers from the report | ting founda | ation to a | nonch | aritable e | xempt org | anization of | : | | | | | | |
| | | | ash | | | | | | | | | | | 1a(1) | | X |
| | | (2) O | ther assets | | | | | | | | | | | 1a(2) | | X |
| | b | Other | transactions: | | | | | | | | | | | | | |
| | | (1) S | ales of assets to a r | noncharita | ble exem | pt orga | anization. | | | | | | | 1b(1) | | Х |
| | | (2) P | urchases of assets | from a no | ncharitab | le exer | mpt orgar | nization | | | | | | 1b(2) | | X |
| | | (3) R | ental of facilities, ed | quipment, | or other a | assets | | | | | | | | 1b(3) | | Х |
| | | (4) R | eimbursement arra | ngements | | | | | | | | | | 1b(4) | | х |
| | | (5) Lo | oans or loan guaran | itees | | | | | | | | | | 1b(5) | | х |
| | | (6) P | erformance of servi | ices or me | mbership | or fun | ndraising | solicitation | ıs | | | | | 1b(6) | | х |
| | | | ng of facilities, equip | | | | | | | | | | | 1c | | х |
| | | | answer to any of the | | - | | | | - | | | | | the ac | ods. | |
| | | | assets, or services | | | | | _ | | | | | | _ | | |
| | | | gement, show in col | - | | - | | | | | | , | | | 9 | |
| (a) | Line | | b) Amount involved | | | | | mpt organiz | | | ription of transf | ers, transaction | ns. and sha | ring arr | angem | ents |
| (/ | | | , | (-, | | | | | | (.,) | | , | , | | | |
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| 2 | а | Is the | foundation directly | or indirect | ly affiliate | ed with, | , or relate | d to, one o | or more tax- | exempt orga | nizations desc | ribed in secti | on 501(c) | | | |
| | | (other | than section 501(c | (3)) or in | section 5 | 27?. | | | | | | | | Yes | 1 | No |
| | b | If "Yes | s," complete the foll | lowing sch | nedule. | | | | | | | | | | | |
| | | | (a) Name of org | anization | | | (| (b) Type o | of organizat | ion | (c) | Description of | of relations | hip | | |
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| | | | nder penalties of perjury, rrect, and complete. Dec | | | | | | | | | | | | | |
| Sig | ın | \ | nect, and complete. Det | cialation of p | reparer (our | er triair t | ахрауст) із і | based on an | I I I I I I I I I I I I I I I I I I I | willon preparer | rias ariy kilowicag | ю. | May the IRS the preparer | | | |
| Hei | | | | | | | | | T: | rustee | | | instructions. | SHOWIT | JOIOW: C | 500 |
| | | Si | gnature of officer or t | rustee | | | | Date | Tit | le | | | | Y | es 🗌 | No |
| Pai | id | • | Print/Type preparer' | 's name | | | Preparer' | 's signature |) | | Date | Check | if F | TIN | | |
| | e pa | rer | | | | | | | | | | - 1 | mployed | | | |
| | | nly | Firm's name | | | | | | | | ı | Firm's EIN | <u> </u> | | | |
| US | . U | ıııy | Firm's address | | | | | | | | | Phone no. | • | | | |
| | | | | | | | | | | | | | | | | |

Form 990-PF Taxes Expenses

Supporting Details for Form 990-PF, Part I, Line 18

| (a) Description | (b) Revenue and expenses per books | | | (e) Disbursement for charitable purpose |
|------------------------|--|----|----|---|
| Sec 4940(e) excise tax | 62. | 0. | 0. | 0. |
| | 0. | 0. | 0. | 0. |
| | 0. | 0. | 0. | 0. |
| | 0. | 0. | 0. | 0. |
| | 0. | 0. | 0. | 0. |
| | 0. | 0. | 0. | 0. |
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| | 0. | 0. | 0. | 0. |
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| | 0. | 0. | 0. | 0. |

EFILE COPY

Form 990-PF Balance Sheet

Supporting Details for Form 990-PF, Part II, Line 10a, 10b, and 10c

Investments - U.S. and state government obligations

| US Govt. | Securities | State and Local Govt. Securities | | | |
|--------------------------------------|--------------------------------|----------------------------------|---|--|--|
| (b) End of Year Book Value | (c) End of Year Fair Market | (b) End of Year Book Value | (c) End of Year Fair Market | | |
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| | | | | | |
| | (b) End of Year | | (b) End of Year (c) End of Year (b) End of Year | | |

Investments - U.S. and state government obligations

| | (b) End of Year | (c) End of Year |
|---|-----------------|-----------------|
| (a) Description | Book Value | Fair Market |
| | | |
| Apple Inc. common stock | 26,183. | <u> 26,183.</u> |
| Nuveen Corp. Income Target Term Fund | 9,200. | 9,200. |
| Pfizer Inc. common stock | 9,584. | 9,584. |
| Southwest Airlines common stock | 9,322. | 9,322. |
| US Bancorp common stock | 9,223. | 9,223. |
| Verizon Communications common stock | 10,575. | 10,575. |
| Viatris Inc. common stock | 600. | 600. |
| Janus Henderson Global Research fund | 13,386. | 13,386. |
| Neuberger Berman Sustainable Equity Investor Fund | 9,520. | 9,520. |
| Pax Sustainable Allocation Investor Fund | 8,916. | 8,916. |

Investments - corporate bonds

| investments - corporate bonds | | | | | | | |
|-------------------------------|--|---|--|--|--|--|--|
| (a) Description | | (b) End of Year (c) End of Book Value Fair Mar | | | | | |
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Form 990-PF Balance Sheet

Supporting Details for Form 990-PF, Part II, Line 10a, 10b, and 10c

Investments - U.S. and state government obligations

| Investments - U | .S. and state gover | nment obligations | | |
|---|-------------------------------|--------------------------------|-------------------------------|--------------------------------|
| US Govt. Securities State and Local Govt. | | | | |
| (a) Description | (b) End of Year Book Value | (c) End of Year Fair Market | (b) End of Year Book Value | (c) End of Year Fair Market |
| | | | | |
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| Investments - U | .S. and state gover | nment obligations | | |
| | | | /I=) [= -f)/ | (a) E = 1 - (a) (a) |

| | (b) End of Year | (c) End of Year |
|---------------------------------|-----------------|-----------------|
| (a) Description | Book Value | Fair Market |
| Schwab S&P 500 Index Fund | 36,037. | 36,037. |
| T Rowe Price Equity Income Fund | 8,824. | 8,824. |
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Investments - corporate bonds

| investments - corporate bonds | | | | | | | |
|-------------------------------|--|---|--|--|--|--|--|
| (a) Description | | (b) End of Year (c) End of Book Value Fair Mar | | | | | |
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| Name of organization | Employer identifying number |
|---------------------------|-----------------------------|
| Chandhok Charitable Trust | 75-6465433 |

Form 990-PF Analysis of Changes

Supporting Details for Form 990-PF, Part III, Lines 3 and 5

| Ot | her Increases | |
|----|--|--------|
| 3 | Other increases not included in line 2 (itemize) Description | Amount |
| | Gain in investment value | 8,584 |
| | | |
| | her Decreases Decreases not included in line 2 (itemize) Description | Amount |
| | | |
| | | |

Part XV Supplementary Information (continued)

| 3 Grants and Contributions Paid During the Year of | T | ayınıcını | | |
|--|--|--------------------------------|----------------------------------|--------|
| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of recipient | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | | |
| a Paid during the year Operation Restoration | | | | |
| P.O. Box 56894 | | | | |
| New Orleans, LA 70156 | | PC | unrestricted | 500. |
| The Bail Project | | | | |
| P.O. Box 750 | | | | |
| Venice, CA 90294 | | PC | unrestricted | 500. |
| Project Prosper of Florida 1156 Pavia Dr | | | | |
| Apopka, FL 32703 | | PC | GLITS Inc. | 500. |
| FRRC Education Fund | | | | |
| 4081 L.B. McLeod Rd Ste. B | | 20 | 1 | 1 000 |
| Orlando, FL 32811 | | PC | Fines and Fees campaign | 1,000. |
| The Historic New Orleans Collection 520 Royal St | | | DDV | |
| New Orleans, LA 70130 | | PC | unrestricted | 100. |
| Harry Tompson Center | | | | |
| 130 Baronne St New Orleans, LA 70112 | | PC | unrestricted | 500. |
| | | | | |
| Hour Children, Inc. 36-11 12th St | | | | |
| Astoria, NY 11106 | | PC | unrestricted | 750. |
| RIP Medical Debt | | | | |
| 80 Theodore Fremd Ave | | | | |
| Rye, NY 10580 | | PC | unrestricted | 1,000. |
| Total | | | . 3a | |
| b Approved for future payment | | | | |
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| Total | | | | |

Part XV Supplementary Information (continued)

| 3 Grants and Contributions Paid During the Year o | | | | |
|--|--|--------------------------------|----------------------------------|--------|
| <u> </u> | If recipient is an individual, show any relationship to any foundation manager | Foundation status of recipient | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| Foundation for Advancement of Haitian Midwives 711 Amsterdam Ave Ste. 3B | | | | |
| New York, NY 10025 | | PC | unrestricted | 250. |
| 1011 1011, 111 10015 | | | | |
| Decarcerate PA | | | | |
| P.O. Box 40764 | | | | |
| Philadelphia, PA 19107 | | PC | unrestricted | 300. |
| | | | | |
| Amistad Law Project | | | | |
| P.O. Box 9148 | | 5.0 | | 200 |
| Philadelphia, PA 19139 | | PC | unrestricted | 300. |
| Brooklyn Defender Services | | | | |
| 177 Livingston St. Ste. 7th Floor | | | | |
| Brooklyn, NY 11201 | | PC | unrestricted | 500. |
| | | | | |
| Sylvia Rivera Law Project | | | | |
| 147 W. 24th St. Ste. 5th Floor | | | | |
| New York, NY 10011 | | PC | unrestricted | 250. |
| | | | | |
| National Advocates for Pregnant Women | | | | |
| 875 6th Ave. Ste. 1807 | | 20 | | 500 |
| New York, NY 10001 | | PC | unrestricted | 500. |
| National Network of Abortion Funds | | | | |
| 9450 SW Gemini Dr Ste. PMB 16009 | | | | |
| Beaverton, OR 97008 | | PC | unrestricted | 500. |
| , | | | | |
| Changing Woman Initiative | | | | |
| 460 Saint Michaels Dr Ste. 804 | Ł | | | |
| Santa Fe, NM 87505 | | PC | unrestricted | 500. |
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Part XV Supplementary Information (continued)

| Paciniant | | | | |
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| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of recipient | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| The Door 121 Avenue of the Americas | | | | |
| New York, NY 10013 | | PC | unrestricted | 250. |
| New IOIR, NI 10013 | | PC | unrestricted | 250. |
| The Ali Forney Center | | | | |
| 224 W. 35th St. Ste. 15th Floor | | | | |
| New York, NY 10001 | | PC | unrestricted | 250. |
| Women's Medical Fund | | | | |
| P.O. Box 40748 | | | | |
| Philadelphia, PA 19107 | | PC | unrestricted | 150. |
| The Harmony Singers of Pittsburgh | | | | |
| P.O. Box 571 | | L | | |
| Bethel Park, PA 15102 | | PC | unrestricted | 500. |
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