# \*\* PUBLIC DISCLOSURE COPY \*\* Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 J **Open to Public** Inspection

Department of the Treasury Internal Revenue Service

| B       Charme of organization       D       Employer identification number         Markets       Vasudha Foundation USA Inc       46-3275286         Doing business as       46-3275286         Wintber and street (or P.0. box if mail is not delivered to street address)       Fourisuite       E Telephone number         2850       Field Line Drive       G cost needpta street (or P.0. box if mail is not delivered to street address)       Holmsuite         Bit is a group return       Fouries address of principal officer. KOmal La KrishnasWamy       Fouries address of principal officer. KOmal La KrishnasWamy       Hol is this a group return         Form of organization:       I Stoto (30)       Stoto (10)       (10)       (10)       (10)         J Webste:       Www.vasudhausa.org       Hol (Moscribe the organization' scole 14)       Hold Moscribe to erganization' scole 14)       Hold Moscribe to erganization' scole 14)       Hold Moscribe to erganization' scole 14)         J Webste:       Www.vasudhausa.org       Hold Moscribe of the organization with the broad mission of promoting clean       10         Partitizet       Stota moscribe of voting members of the opowerning body (Part V), line 13)       4       4         A Number of independent voting members of the opowerning body (Part V), line 14)       4       4         S Outhourber of inductas employed in clandary argra 2023 (Part V), line 15)       4  | AF     | or the            | e 2023 calendar year, or tax year beginning and                                   | ending       |                              |                             |  |  |  |
|---|--------|-------------------|---|--------------|------------------------------|-----------------------------|--|--|--|
| Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave<br>Trave  | B c    | heck if           | e: C Name of organization   |              | D Employer identifie         | cation number               |  |  |  |
| Comp Displayers as         Comp Subjects as         Provide and street (or P.O. box if mail is not delivered to street address)         RoomVsite         E         Telephone number           Text         2850 Field Line Drive         G cross meeters         2,518,225.           Marking         Sugar Land, TX 77479         H(a) is this a group return         For subordinates         Telephone number           Provide         F Name and address of principal officer. KOMa1a Krishnaswamy         For subordinates         Telephone number           J Webste:         WWW -VasUdhausa.org         Yes         No           J Webste:         WWW -VasUdhausa.org         H(b) Are stacedomise nuclead?         Yes         No           Hore of vorganization         Torganization mission or most significant activities:         VasUdha USA is a secular         Inon-profit organization with the broad mission of promoting clean           Cock this box         If the organization discontinued its operations or disposed of more than 25% of its net assets.         Number of individuals employed in calendar year 2023 (Part V, line 1a)         4         4           Number of individuals employed in calendar year 2023 (Part V, line 1a)         5         0         0         0           T Total unrelated business taxable income from Form 990-T, Part I, line 11         Prior Year         7a         0.         0         0         0  |        | chang             | e Vasuana Foundation USA Inc  |              |                              |                             |  |  |  |
| Image: Number and steel (of VD, box if mails is not delivered to street address)       Hormsute       Formsute       Elephone number         Image: Number and steel (of VD, box if mails is not delivered to street address)       2550 Field Line Drive       (281) 494-0267         City or town, state or province, country, and ZIP or foreign postal code       Gross neages § 2,518,225.         Minister       Finame and address of principal officer: KOmala Krishnaswamy same as C above       Hig is this a group return for subordinates?       Yes No         I Tax exempt status:       Soft(c)(3) 501(c)() (insert no.)       4947(a)(1) or 527       Hig is this a group return for subordinates included?       Yes No         Minotexit       Www.vasudhausa.org       Hig is this a group return for subordinates?       Yes No         Maintering       Soft(c)(3) 501(c)() (insert no.)       4947(a)(1) or 527       Hig is this a group return for organization: Soft(c) and the print of subordinates?       Yes No         Maintering       I Briefly describe the organization is mission or most significant activities: Vasudha USA is a secular       non-profit organization (Scottinue)       A 4         2 Check this box       if the organization discottinue of the governing body (Part VI, line 1a)       A 4       A 4         4 Number of independent voting members of the governing body (Part VI, line 1a)       A 4       A 4       A 4         5 Total number of volunteers (estimate if necessary)  |        | chang             | e Doing business as   |              | 46-3275286                   |                             |  |  |  |
| Image: Construction of the organization of the organization of the organization of the organization is the organization of the organizatic organization of                |        | Initial<br>return | Number and street (or P.O. box if mail is not delivered to street address)        | Room/suit    | e E Telephone number         |                             |  |  |  |
| etcl       City or town, state or province, country, and ZIP or foreign postal code       Sugar Land, TX 77479         Memory       Sugar Land, TX 77479       H(a) Is this a group return<br>for subordinates include?         Memory       same as C above       H(a) Is this a group return<br>for subordinates include?         I Taxexempt status:       X 501(2)(3)       501(c) (insert no.)       4947(a)(1) or 527         J Website:       Www.vasudhausa.org       H(c) Group exemption number         Form of organization:       X Corporation       Trust       Association         Other       L Year of tormatics:       2014 M State of legal domicile: VA         Part I       Summary       I Briefly describe the organization discortinued its operations or disposed of more than 25% of its net assets.         Number of independent voting members of the governing body (Part VI, line 1a)       3       4         S Total number of individuals employed in calendar year 2023 (Part V, line 2a)       5       0         G Contributions and grants (Part VIII, column (C), line 12       7a       0       0         Total number of individuals employed in calendar year 2023 (Part V, line 1a)       1055       2622.         We contributions and grants (Part VIII, column (A), line 3.4, and 7d)       1055       2622.         No the origin part of the organization discontinue dupare dupare dupart VIII.       1005   |        | ⊥return           |   |              | (281) 49                     | 4-0267                      |  |  |  |
| Build Links       1410, 11A       1417         Base and address of principal officer: KOmala Krishnaswamy       Hai is this agroup fetum         Partial       State as C above       His is this agroup fetum         1       Tax exempt status: X 501(c)(3)       501(c)(       (insert n.o.)         1       Tax exempt status: X 501(c)(3)       501(c)(       (insert n.o.)       4947(a)(1) or       527         1       Tax exempt status: X 501(c)(3)       501(c)(       (insert n.o.)       4947(a)(1) or       527         1       Briefly describe the organization's mission or most significant activities: VASUdha USA is a secular       for outport of promoting clean         2       Check this box       if the organization discontinued its operations or disposed of more than 25% of its net assets.         3       Number of undigmembers of the governing body (Part VI, line 1b)       4       4         4       Number of individuals employed in calendar year 2023 (Part V, line 12)       5       0         6       Total number of individuals employed in calendar year 2023 (Part V, line 12)       7a       0.         6       Total number of individuals employed in calendar year 2023 (Part V, line 12)       10       5       0         9       Program service revenue (Part VIII, column (C), line 12       7a       0.       0       0 <td></td> <td>ated</td> <td>City or town, state or province, country, and ZIP or foreign postal code</td> <td></td> <td><b>G</b> Gross receipts \$</td> <td>2,518,225.</td>  |        | ated              | City or town, state or province, country, and ZIP or foreign postal code          |              | <b>G</b> Gross receipts \$   | 2,518,225.                  |  |  |  |
| Image         PNAme         Production  |        | Amen<br>return    | <sup>ded</sup> Sugar Land, TX 77479   |              | H(a) Is this a group re      | eturn                       |  |  |  |
| ISaline as C above         INO         I Taxexempt status: X, Si Si Ot(3)       Si Ot(2)       No         I Mo if No, "attabusciants incurved" Yes       No         I Mo if No, "attabusciants incurved" Yes       No         I Association       Other L Year of formation: 2014 M State of legal domicile; VA         Part II Summary         1       Briefly describe the organization's mission or most significant activities: Vasudha USA is a secular       non-profit organization's one promoting of promoting clean         2       Check this box       if the organization is continued its operations or disposed of more than 25% of its net assets.         3       Number of individuals employed in calendar year 2023 (Part V, line 2a)       5         4       Value association is disposed of more than 25% of its net assets.         3       Number of individuals employed in calendar year 2023 (Part V, line 2a)       5         6       0       0         6       0       0         7       Total number of individuals employed in calendar year 2023 (Part V, line 2a)       5         6       0       0       0         7       Total number of individuals employed in calendar year 2023 (Part V, line 2a)       0       0     <  |        | tion              | F Name and address of principal officer: Noticata NITSIIIIaSwallig                | Y            | for subordinates             | ? Yes X No                  |  |  |  |
| H(c) Group exemption number         K Form of organization:       Tust       Association       Other       L year of formation:       2014 (Implementation)         Part I       Summary         I       Briefly describe the organization's mission or most significant activities:       Vasudha       USA is a secular         non-profit       organizator       with the broad       most significant activities:       Vasudha       USA is a secular         2       Check this box       if the organization discontinued its operations or disposed of more than 25% of its net assets.       3         3       Number of voting members of the governing body (Part VI, line 1a)       4       4         4       Number of individuals employed in calendar year 2023 (Part VI, line 2a)       5       0         6       Total number of volunteers (estimate if necessary)       6       44         7 a Total number of volunteers (estimate if necessary)       6       0       0         7 a Total unrelated business taxable income from Form 990-T, Part I, line 11       7b       0       0         9       Program service revenue (Part VIII, line 2g)       0       0       0       0         10       Investment income (Part VIII, column (A), lines 3, 4, and 7d)       1055.       262.       1       0       1, 835, 542.   |        | pendi             | <sup>19</sup> same as C above   |              | H(b) Are all subordinates in | cluded? Yes No              |  |  |  |
| K Form of organization:       X Corporation       Trust       Association       Other       L Year of formation:       2014       M State of legal domicile:       VA         Part II       Summary       I Briefly describe the organization's mission or most significant activities:       Vasudha USA is a secular       Image: Composition of promoting clean         2       Check this box       If the organization discontinued its operations or disposed of more than 25% of its net assets.       3         3       Number of voting members of the governing body (Part VI, line 1a)       3       4         4       Number of individuals employed in calendar year 2023 (Part V, line 2a)       6       0         6       Total number of volunteers (estimate if necessary)       7a       0.       0.         7a Total number of volunteers (estimate if necessary)       7b       0.       0.       0.         9       Program service revenue (Part VIII, column (C), line 12       7a       0.       0.       0.         9       Program service revenue (Part VIII, line 3, 4, and 7c)       1.055.       2622.       0.       0.       0.         10       Investment income (Part VIII, column (A), lines 3, 4, and 7c)       1.055.       2622.       1.885, 5422.       2,518, 2251       2,518, 2251         13       Grants and similar amounts paid (Par  | 11     | ax-ex             | empt status: $X$ 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1)                     | or 🗌 52      | If "No," attach a            | list. See instructions      |  |  |  |
| Part I       Summary         1       Briefly describe the organization's mission or most significant activities: Vasudha USA is a secular<br>non-profit organization with the broad mission of promoting clean         2       Check this box       it the organization discontinued its operations or disposed of more than 25% of its net assets.         3       Number of voting members of the governing body (Part VI, line 1a)       3       4         4       Aumber of independent voting members of the governing body (Part VI, line 1a)       4       4         5       Total number of individuals employed in calendary year 2023 (Part V, line 2a)       5       0         6       Ta       7a       0.0.       6         7       Total unrelated business revenue from Part VIII, column (C), line 12       Ta       0.       0.         7       Total unrelated business taxable income from Form 990-T, Part I, line 11       Prior Year       Current Year         8       Contributions and grants (Part VIII, ines 2g)       0.       0.       0.         9       Porgram service revenue (Part VIII, column (A), lines 3, 4, and 7d)       1055.       2622.         11       Other revenue (Part VIII, column (A), lines 4.       0.       0.       0.         12       Total revenue ead lines 8 through 11 (must equal Part IX, column (A), lines 5-10)       0.       0.       0.   | ٦ /    | Vebsi             | te: www.vasudhausa.org  |              | H(c) Group exemptio          | n number                    |  |  |  |
| 1       Briefly describe the organization's mission or most significant activities: Vasudha USA is a secular<br>non-profit organization with the broad mission of promoting clean         2       Check this box       If the organization discontinued its operations or disposed of more than 25% of its net assets.         3       Number of viding members of the governing body (Part VI, line 1a)       3       4         4       Number of independent voting members of the governing body (Part VI, line 1b)       4       4         5       0       6       4         6       4       4       4         7       Total number of individuals employed in calendar year 2023 (Part V, line 2a)       5       0         6       Total number of volunteers (estimate if necessary)       6       4       4         7       Total number of volunteers (estimate if necessary)       6       4       0         7       Total number of volunteers (estimate if necessary)       6       0       0       0         8       Contributions and grants (Part VIII, column (C), line 12       7a       1       8       7a       0   | KF     | orm of            | organization: 🚺 Corporation 🔄 Trust 🔄 Association 🔄 Other                         | L Yea        | r of formation: 2014         | State of legal domicile: VA |  |  |  |
| non-profit organization with the broad mission of promoting clean         2 Check this box       if the organization discontinued its operations or disposed of more than 25% of its net assets.         3 Number of voting members of the governing body (Part VI, line 1a)       3         4 Number of independent voting members of the governing body (Part VI, line 1b)       4         5 Total number of independent voting members of the governing body (Part VI, line 2a)       5         6 Total number of individuals employed in calendar year 2023 (Part V, line 2a)       6         7 a Total number of volunteers (estimate if necessary)       6         7 a Total unrelated business revenue from Part VIII, column (C), line 12       7a         9 Norgram service revenue (Part VIII, line 1h)       1, 835, 437.       2, 517, 963.         9 Program service revenue (Part VIII, line 1h)       1, 835, 542.       2, 518, 225.         10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)       105.       262.         11 Other revenue (Part VIII, column (A), lines 4, lines 1.3)       0.       1, 885, 542.       2, 518, 225.         13 Grants and similar amounts paid (Part IX, column (A), lines 5.0)       0.       0.       0.         15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5.0)       0.       0.       0.         14 Other expenses (Part IX, column (D), line 25)       0.       1, 713, 169.<   |        |                   |   |              |                              |                             |  |  |  |
| 8       Total number of individuals employed in calendar year 2023 (Part V, line 2a)       5       0         6       Total number of individuals employed in calendar year 2023 (Part V, line 2a)       6       0         6       Total number of volunteers (estimate if necessary)       7       0       0         7       a Total unrelated business revenue from Part VIII, column (C), line 12       7       0       0         b       Net unrelated business taxable income from Form 990-T, Part I, line 11       Prior Year       Current Year         8       Contributions and grants (Part VIII, line 1h)       1, 835, 437.       2, 517, 963.         9       Program service revenue (Part VIII, column (A), lines 3, 4, and 7d)       105.       262.         10       Investment income (Part VIII, column (A), lines 3, 4, and 7d)       105.       262.         11       Other revenue (Part VIII, column (A), lines 3, 4, and 7d)       10.835, 542.       2, 518, 225.         13       Grants and similar amounts paid (Part IX, column (A), lines 1-3)       0.       1, 889, 429.         14       Benefits paid to or for members (Part IX, column (A), lines 4)       0.       0.       0.         15       Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)       0.       1, 713, 169.       2, 156, 832.         17 <td< td=""><td></td><td>1</td><td>Briefly describe the organization's mission or most significant activities: Vasu</td><td>dha U</td><td>SA is a secul</td><td>lar</td></td<>  |        | 1                 | Briefly describe the organization's mission or most significant activities: Vasu  | dha U        | SA is a secul                | lar                         |  |  |  |
| 8       Total number of individuals employed in calendar year 2023 (Part V, line 2a)       5       0         6       Total number of individuals employed in calendar year 2023 (Part V, line 2a)       6       0         6       Total number of volunteers (estimate if necessary)       7       0       0         7       a Total unrelated business revenue from Part VIII, column (C), line 12       7       0       0         b       Net unrelated business taxable income from Form 990-T, Part I, line 11       Prior Year       Current Year         8       Contributions and grants (Part VIII, line 1h)       1, 835, 437.       2, 517, 963.         9       Program service revenue (Part VIII, column (A), lines 3, 4, and 7d)       105.       262.         10       Investment income (Part VIII, column (A), lines 3, 4, and 7d)       105.       262.         11       Other revenue (Part VIII, column (A), lines 3, 4, and 7d)       10.835, 542.       2, 518, 225.         13       Grants and similar amounts paid (Part IX, column (A), lines 1-3)       0.       1, 889, 429.         14       Benefits paid to or for members (Part IX, column (A), lines 4)       0.       0.       0.         15       Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)       0.       1, 713, 169.       2, 156, 832.         17 <td< td=""><td>nce</td><td></td><td>non-profit organization with the broad mi</td><td>ssion</td><td>of promotin</td><td>g clean</td></td<>   | nce    |                   | non-profit organization with the broad mi   | ssion        | of promotin                  | g clean                     |  |  |  |
| 8       Total number of individuals employed in calendar year 2023 (Part V, line 2a)       6       0         6       Total number of individuals employed in calendar year 2023 (Part V, line 2a)       6       0         6       Total number of volunteers (estimate if necessary)       7a       0       0         7a       Total unrelated business revenue from Part VIII, column (C), line 12       7b       0       0         9       Program service revenue (Part VIII, line 1h)       Prior Year       1, 835, 437.       2, 517, 963.         9       Program service revenue (Part VIII, column (A), lines 3, 4, and 7d)       105.       262.         10       Investment income (Part VIII, column (A), lines 3, 4, and 7d)       1, 835, 542.       2, 518, 225.         13       Grants and similar amounts paid (Part IX, column (A), lines 1-3)       0.       1, 889, 429.         14       Benefits paid to or for members (Part IX, column (A), lines 1-3)       0.       0.       0.         15       Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)       0.       0.       0.       0.         16       Profexsional fundraising expenses (Part IX, column (A), line 25)       0.       0.       1, 713, 169.       2, 156, 832.         17       Other expenses. Add lines 13-17 (must equal Part X, column (A), line 25)       1,  | nai    | 2                 | Check this box if the organization discontinued its operations or dispos          | sed of mor   | e than 25% of its net ass    | ets.                        |  |  |  |
| 8       Total number of individuals employed in calendar year 2023 (Part V, line 2a)       5       0         6       Total number of individuals employed in calendar year 2023 (Part V, line 2a)       6       0         6       Total number of volunteers (estimate if necessary)       7       0       0         7       a Total unrelated business revenue from Part VIII, column (C), line 12       7       0       0         b       Net unrelated business taxable income from Form 990-T, Part I, line 11       Prior Year       Current Year         8       Contributions and grants (Part VIII, line 1h)       1, 835, 437.       2, 517, 963.         9       Program service revenue (Part VIII, column (A), lines 3, 4, and 7d)       105.       262.         10       Investment income (Part VIII, column (A), lines 3, 4, and 7d)       105.       262.         11       Other revenue (Part VIII, column (A), lines 3, 4, and 7d)       10.835, 542.       2, 518, 225.         13       Grants and similar amounts paid (Part IX, column (A), lines 1-3)       0.       1, 889, 429.         14       Benefits paid to or for members (Part IX, column (A), lines 4)       0.       0.       0.         15       Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)       0.       1, 713, 169.       2, 156, 832.         17 <td< td=""><td>Nel</td><td>3</td><td>Number of voting members of the governing body (Part VI, line 1a)</td><td></td><td>3</td><td>4</td></td<>   | Nel    | 3                 | Number of voting members of the governing body (Part VI, line 1a)                 |              | 3                            | 4                           |  |  |  |
| 5       Total number of individuals employed in calendar year 2023 (Part V, line 2a)       5       0         6       Total number of volunteers (estimate if necessary)       6       44         7 a Total unrelated business revenue from Part VIII, column (C), line 12       7a       0.         9       Net unrelated business taxable income from Form 990-T, Part I, line 11       7b       0.         9       Program service revenue (Part VIII, line 2g)       0.       0.       0.         10       Investment income (Part VIII, column (A), lines 3, 4, and 7d)       105.       262.         11       Other revenue (Part VIII, column (A), lines 5, 64, 8c, 9c, 10c, and 11e)       0.       0.       0.         12       Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), lines 5.       0.       1, 835, 542.       2, 518, 225.         13       Grants and similar amounts paid (Part IX, column (A), lines 1-3)       0.       0.       0.       0.         14       Benefits paid to or for members (Part IX, column (A), line 25)       0.       0.       0.       0.         15       Salaries, other compensation, employee benefits (Part IX, column (A), line 25)       0.       1, 713, 169.       2, 156, 832.         17       Other expenses (Part IX, column (A), line 25)       0.       1, 713, 169.       2, 156, 832.  |        | 4                 |   |              |                              | 4                           |  |  |  |
| b Net unrelated business taxable income from Form 990-T, Part I, line 11         Tb         U.           Prior Year         Current Year           9 Program service revenue (Part VIII, line 2g)         0.         0.           10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)         105.         2662.           11 Other revenue (Part VIII, column (A), lines 3, 6d, 8c, 9c, 10c, and 11e)         0.         0.         0.           12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), lines 1.3)         0.         1,885,542.         2,518,225.           13 Grants and similar amounts paid (Part IX, column (A), lines 1.3)         0.         1,889,429.         0.         0.           14 Benefits paid to or for members (Part IX, column (A), lines 5.10)         0.         0.         0.         0.           15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5.10)         0.         0.         0.         0.           16a Professional fundraising fees (Part IX, column (D), line 25)         0.         1,713,169.         267,403.         1,713,169.         2,156,832.           19 Revenue less expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)         1,713,169.         2,156,832.         1,70,197.         539,651.           20 Total assets (Part X, line 16)         170,197.         539,651.         170,197.   | s<br>S | 5                 |   |              |                              |                             |  |  |  |
| b Net unrelated business taxable income from Form 990-T, Part I, line 11         Tb         U.           Prior Year         Current Year           9 Program service revenue (Part VIII, line 2g)         0.         0.           10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)         105.         2662.           11 Other revenue (Part VIII, column (A), lines 3, 6d, 8c, 9c, 10c, and 11e)         0.         0.         0.           12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), lines 1.3)         0.         1,885,542.         2,518,225.           13 Grants and similar amounts paid (Part IX, column (A), lines 1.3)         0.         1,889,429.         0.         0.           14 Benefits paid to or for members (Part IX, column (A), lines 5.10)         0.         0.         0.         0.           15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5.10)         0.         0.         0.         0.           16a Professional fundraising fees (Part IX, column (D), line 25)         0.         1,713,169.         267,403.         1,713,169.         2,156,832.           19 Revenue less expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)         1,713,169.         2,156,832.         1,70,197.         539,651.           20 Total assets (Part X, line 16)         170,197.         539,651.         170,197.   | /itie  |                   |   |              |                              | 4                           |  |  |  |
| b Net unrelated business taxable income from Form 990-T, Part I, line 11         Tb         U.           Prior Year         Current Year           9 Program service revenue (Part VIII, line 2g)         0.         0.           10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)         105.         2662.           11 Other revenue (Part VIII, column (A), lines 3, 6d, 8c, 9c, 10c, and 11e)         0.         0.         0.           12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), lines 1.3)         0.         1,885,542.         2,518,225.           13 Grants and similar amounts paid (Part IX, column (A), lines 1.3)         0.         1,889,429.         0.         0.           14 Benefits paid to or for members (Part IX, column (A), lines 5.10)         0.         0.         0.         0.           15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5.10)         0.         0.         0.         0.           16a Professional fundraising fees (Part IX, column (D), line 25)         0.         1,713,169.         267,403.         1,713,169.         2,156,832.           19 Revenue less expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)         1,713,169.         2,156,832.         1,70,197.         539,651.           20 Total assets (Part X, line 16)         170,197.         539,651.         170,197.   | cti    |                   |   |              |                              |                             |  |  |  |
| Prior Year         Current Year           9         Program service revenue (Part VIII, line 1h)         1,835,437.         2,517,963.           9         Program service revenue (Part VIII, column (A), lines 2g, 4, and 7d)         105.         262.           10         Investment income (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)         0.         0.         0.           12         Total revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)         1,835,542.         2,518,225.           13         Grants and similar amounts paid (Part IX, column (A), lines 1-3)         0.         1,889,429.           14         Benefits paid to or for members (Part IX, column (A), lines 1-3)         0.         0.         0.           16a         Professional fundraising fees (Part IX, column (A), line 11e)         0.         0.         0.           17         Other expenses (Part IX, column (A), line 25)         0.         1.         7.13,169.         2.67,403.           18         Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)         1.         1.713,169.         2.156,832.           19         Revenue less expenses. Subtract line 18 from line 12         1.22,373.         3.61,393.           24         Total assets (Part X, line 16)         1.70,197.         5.39,651.           24  | <      |                   |   |              |                              | 0.                          |  |  |  |
| 9         Program service revenue (Part VIII, line 2g)         0.         0.           10         Investment income (Part VIII, column (A), lines 3, 4, and 7d)         105.         262.           11         Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)         0.         0.         0.           12         Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)         1,835,542.         2,518,225.           13         Grants and similar amounts paid (Part IX, column (A), lines 1·3)         0.         1,889,429.           14         Benefits paid to or for members (Part IX, column (A), lines 1·3)         0.         0.         0.           15         Salaries, other compensation, employee benefits (Part IX, column (A), lines 5·10)         0.         0.         0.           16a         Professional fundraising fees (Part IX, column (D), line 25)         0.         0.         0.           17         Other expenses (Part IX, column (D), line 25)         0.         1,713,169.         2,156,832.           19         Revenue less expenses. Subtract line 18 from line 12         Beginning of Current Year         End of Year           20         Total assets (Part X, line 16)         170,197.         539,651.         170,197.         539,651.           21         Total liabilities (Part X, line 26)  |        |                   |   |              |                              | Current Year                |  |  |  |
| 9         Program service revenue (Part VIII, line 2g)         0.         0.         0.           10         Investment income (Part VIII, column (A), lines 3, 4, and 7d)         105.         262.           11         Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)         0.         0.         0.           12         Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)         1, 835, 542.         2, 518, 225.           13         Grants and similar amounts paid (Part IX, column (A), lines 1.3)         0.         1, 889, 429.           14         Benefits paid to or for members (Part IX, column (A), line 4)         0.         0.           15         Salaries, other compensation, employee benefits (Part IX, column (A), lines 5·10)         0.         0.           16a         Professional fundraising expenses (Part IX, column (D), line 25)         0.         0.         0.           17         Other expenses (Part IX, column (D), line 25)         0.         1, 713, 169.         2, 156, 8322.           19         Revenue less expenses. Subtract line 18 from line 12         122, 373.         361, 393.           20         Total assets (Part X, line 16)         170, 197.         539, 651.           21         Total liabilities (Part X, line 26)         41, 096.         6, 0000.   | đ      | 8                 | Contributions and grants (Part VIII, line 1h)                                     |              | 1,835,437.                   | 2,517,963.                  |  |  |  |
| 11       Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)       0.       0.       0.         12       Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)       1, 835, 542.       2, 518, 225.         13       Grants and similar amounts paid (Part IX, column (A), lines 1-3)       0.       1, 889, 429.         14       Benefits paid to or for members (Part IX, column (A), line 4)       0.       0.         15       Salaries, other compensation, employee benefits (Part IX, column (A), line 5-10)       0.       0.         16a       Professional fundraising fees (Part IX, column (D), line 25)       0.       0.       0.         17       Other expenses (Part IX, column (D), line 25)       0.       1,713,169.       2,156,832.         19       Revenue less expenses. Subtract line 18 from line 12       122,373.       361,393.         20       Total assets (Part X, line 16)       170,197.       539,651.         21       Total liabilities (Part X, line 26)       41,096.       6,000.         22       Net assets or fund balances. Subtract line 21 from line 20       129,101.       533,651.         Part II       Signature Block       129,101.       533,651.   | ň      | 9                 |   |              | 0.                           | 0.                          |  |  |  |
| 11       Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)       0.       0.       0.         12       Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)       1, 835, 542.       2, 518, 225.         13       Grants and similar amounts paid (Part IX, column (A), lines 1-3)       0.       1, 889, 429.         14       Benefits paid to or for members (Part IX, column (A), line 4)       0.       0.         15       Salaries, other compensation, employee benefits (Part IX, column (A), line 5-10)       0.       0.         16a       Professional fundraising fees (Part IX, column (D), line 25)       0.       0.       0.         17       Other expenses (Part IX, column (D), line 25)       0.       1,713,169.       2,156,832.         19       Revenue less expenses. Subtract line 18 from line 12       122,373.       361,393.         20       Total assets (Part X, line 16)       170,197.       539,651.         21       Total liabilities (Part X, line 26)       41,096.       6,000.         22       Net assets or fund balances. Subtract line 21 from line 20       129,101.       533,651.         Part II       Signature Block       129,101.       533,651.   | eve    | 10                |   |              | 105.                         | 262.                        |  |  |  |
| 12       Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)       1,835,542.       2,518,225.         13       Grants and similar amounts paid (Part IX, column (A), lines 1-3)       0.       1,889,429.         14       Benefits paid to or for members (Part IX, column (A), line 4)       0.       0.         15       Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)       0.       0.         16a       Professional fundraising fees (Part IX, column (A), line 11e)       0.       0.       0.         17       Other expenses (Part IX, column (A), line 11a.11d, 11f-24e)       1,713,169.       2,156,832.         19       Revenue less expenses. Subtract line 18 from line 12       122,373.       361,393.         20       Total assets (Part X, line 16)       170,197.       539,651.         21       Total liabilities (Part X, line 26)       41,096.       6,000.         22       Net assets or fund balances. Subtract line 21 from line 20       129,101.       533,651.         Part II       Signature Block       129,101.       533,651.   | ĉ      | 11                | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)          |              | 0.                           | 0.                          |  |  |  |
| Image: Construct of the second            |        |                   |   |              | 1,835,542.                   | 2,518,225.                  |  |  |  |
| 14Benefits paid to or for members (Part IX, column (A), line 4)0.0.15Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)0.0.16aProfessional fundraising fees (Part IX, column (A), line 11e)0.0.bTotal fundraising expenses (Part IX, column (D), line 25)0.1, 713, 169.17Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)1, 713, 169.2, 156, 832.18Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)1, 713, 169.2, 156, 832.19Revenue less expenses. Subtract line 18 from line 12122, 373.361, 393.20Total assets (Part X, line 16)170, 197.539, 651.21Total liabilities (Part X, line 26)41, 096.6, 000.22Net assets or fund balances. Subtract line 21 from line 20129, 101.533, 651.Part IISignature BlockSignature Block129, 101.533, 651.  |        | 13                | Grants and similar amounts paid (Part IX, column (A), lines 1-3)                  |              | 0.                           | 1,889,429.                  |  |  |  |
| Image: Construct of the problem of |        |                   |   |              | 0.                           | 0.                          |  |  |  |
| If a Professional fundraising fees (Part IX, column (A), line 11e)0.b Total fundraising expenses (Part IX, column (D), line 25)0.17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)1,713,169.18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)1,713,169.19 Revenue less expenses. Subtract line 18 from line 12122,373.20 Total assets (Part X, line 16)170,197.21 Total liabilities (Part X, line 26)41,096.22 Net assets or fund balances. Subtract line 21 from line 20129,101.23 Total Signature BlockSignature Block   | s      | 15                | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) |              | 0.                           | 0.                          |  |  |  |
| 17       Othel expenses (rait X, column (A), lines Traind, Th24e)       17,713,109.       2,156,832.         18       Total expenses. Add lines 13.17 (must equal Part IX, column (A), line 25)       1,713,169.       2,156,832.         19       Revenue less expenses. Subtract line 18 from line 12       122,373.       361,393.         20       Total assets (Part X, line 16)       170,197.       539,651.         21       Total liabilities (Part X, line 26)       41,096.       6,000.         22       Net assets or fund balances. Subtract line 21 from line 20       129,101.       533,651.         Part II       Signature Block       Signature Block       533,651.  | JSe    | 16a               |   |              | 0.                           | 0.                          |  |  |  |
| 17       Othel expenses (rait X, column (A), lines Traind, Th24e)       17,713,109.       2,156,832.         18       Total expenses. Add lines 13.17 (must equal Part IX, column (A), line 25)       1,713,169.       2,156,832.         19       Revenue less expenses. Subtract line 18 from line 12       122,373.       361,393.         20       Total assets (Part X, line 16)       170,197.       539,651.         21       Total liabilities (Part X, line 26)       41,096.       6,000.         22       Net assets or fund balances. Subtract line 21 from line 20       129,101.       533,651.         Part II       Signature Block       Signature Block       533,651.  | bei    | b                 |   | <u> </u>     |                              |                             |  |  |  |
| 18       Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)       1,713,169.       2,156,832.         19       Revenue less expenses. Subtract line 18 from line 12       122,373.       361,393.         10       Beginning of Current Year       End of Year         20       Total assets (Part X, line 16)       170,197.       539,651.         21       Total liabilities (Part X, line 26)       41,096.       6,000.         22       Net assets or fund balances. Subtract line 21 from line 20       129,101.       533,651.         Part II       Signature Block       533,651.  | ŵ      | 17                | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)                      |              |                              | 267,403.                    |  |  |  |
| 19 Revenue less expenses. Subtract line 18 from line 12122,373. 361,393.Beginning of Current YearEnd of Year20Total assets (Part X, line 16)170,197. 539,651.21Total liabilities (Part X, line 26)41,096. 6,000.22Net assets or fund balances. Subtract line 21 from line 20129,101. 533,651.Part IISignature Block   |        |                   |   |              | 1,713,169.                   | 2,156,832.                  |  |  |  |
| Part II Signature Block   |        |                   |   |              | 122,373.                     | 361,393.                    |  |  |  |
| Part II Signature Block   | or     |                   |   | E            |                              |                             |  |  |  |
| Part II Signature Block   | lanc   | 20                | Total assets (Part X, line 16)  |              | 170,197.                     | 539,651.                    |  |  |  |
| Part II Signature Block   | Ass    | 21                |   |              |                              |                             |  |  |  |
| Part II Signature Block   | Net-   | 22                |   |              |                              |                             |  |  |  |
| Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is  |        |                   |   | •            | •                            | •                           |  |  |  |
|   | Und    | er pena           |   | s and stater | nents, and to the best of my | knowledge and belief, it is |  |  |  |

true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

| Sign                                | Signature of officer                               |                                    | D      | ate                        |  |  |  |  |
|-------------------------------------|--|------------------------------------|--------|----------------------------|--|--|--|--|
| Here Komala Krishnaswamy, President |  |                                    |        |                            |  |  |  |  |
|                                     | Type or print name and title                       |                                    |        |                            |  |  |  |  |
|                                     | Print/Type preparer's name                         | Preparer's signature               | Date   | Check PTIN                 |  |  |  |  |
| Paid                                | Stacy Cullen                                       | Stacy Cullen                       | 04/29/ | 24 self-employed P00974308 |  |  |  |  |
| Preparer                            | Firm's name Aprio, LLP                             |                                    | F      | irm's EIN 57-1157523       |  |  |  |  |
| Use Only                            | Firm's address 2002 Summit Boule                   | vard, Suite 120                    |        |                            |  |  |  |  |
|                                     | Atlanta, GA 30319                                  |                                    | Р      | hone no. (404) 892-9651    |  |  |  |  |
| May the I                           | RS discuss this return with the preparer shown abo | ove? See instructions              |        | X Yes No                   |  |  |  |  |
| LHA For                             | Paperwork Reduction Act Notice, see the separ      | rate instructions. 332001 12-21-23 |        | Form <b>990</b> (2023)     |  |  |  |  |

See Schedule O for Organization Mission Statement Continuation

| Form   | 990 (2023) Vasudha Foundation USA Inc  | 46-3275286                   | Page <b>2</b>    |
|--------|--|------------------------------|------------------|
| Par    | t III Statement of Program Service Accomplishments   |                              |                  |
|        | Check if Schedule O contains a response or note to any line in this Part III   | <u></u>                      | X                |
| 1      | Briefly describe the organization's mission:   |                              |                  |
|        | The broad mission of promoting clean energy and environ  |                              | LY               |
|        | and socially just solutions. Specifically, its aims an are: promote environment friendly, socially just and su                   |                              |                  |
|        | models of development; empower and carry the voices and  |                              |                  |
| 2      | Did the organization undertake any significant program services during the year which were not listed on the                     |                              |                  |
|        | prior Form 990 or 990-EZ?  |                              | XNo              |
|        | If "Yes," describe these new services on Schedule O.   |                              |                  |
| 3      | Did the organization cease conducting, or make significant changes in how it conducts, any program services                      | s? Yes                       | XNo              |
|        | If "Yes," describe these changes on Schedule O.  |                              |                  |
| 4      | Describe the organization's program service accomplishments for each of its three largest program services, i                    |                              |                  |
|        | Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to ot                  | hers, the total expenses, an | d                |
| 4a     | revenue, if any, for each program service reported.<br>(Code:) (Expenses \$2, 133, 395. including grants of \$1, 889, 429. ) (Re | ¢                            | )                |
| та     | a) Developed unbranded communication on low carbon narr  | atives.                      | )                |
|        | b) Developed alternate energy pathway economic and busi  |                              | or               |
|        | scaling up renewable energy and energy efficiency solut  |                              |                  |
|        | to international finance.  |                              |                  |
|        | c) Developed tools for estimating GHG emissions estimat  |                              | a –              |
|        | part of capacity building and empowering civil society   | groups in the                |                  |
|        | South.<br>d) Created training programs on clean energy solutions   | and on                       |                  |
|        | addressing climate change.   |                              |                  |
|        | addressing crimate change.   |                              |                  |
|        |  |                              |                  |
|        |  |                              |                  |
| 4b     | (Code:) (Expenses \$ including grants of \$ ) (Re  | evenue \$                    | )                |
|        |  |                              |                  |
|        |  |                              |                  |
|        |  |                              |                  |
|        |  |                              |                  |
|        |  |                              |                  |
|        |  |                              |                  |
|        |  |                              |                  |
|        |  |                              |                  |
|        |  |                              |                  |
|        |  |                              |                  |
| 4c     | (Code: ) (Expenses \$ including grants of \$ ) (Re   |                              | )                |
|        |  |                              | /                |
|        |  |                              |                  |
|        |  |                              |                  |
|        |  |                              |                  |
|        |  |                              |                  |
|        |  |                              |                  |
|        |  |                              |                  |
|        |  |                              |                  |
|        |  |                              |                  |
|        |  |                              |                  |
|        |  |                              |                  |
| 4d     | Other program services (Describe on Schedule O.)   |                              |                  |
|        | (Expenses \$ including grants of \$ ) (Revenue \$  | )                            |                  |
| 4e     | Total program service expenses     2,133,395.  |                              | <b>90</b> (2023) |
| 332000 | 2 12-21-23   | Form 9                       | ee (2023)        |
| 552002 | 3  |                              |                  |

Form 990 (2023) Vasudha Foundation USA Inc Part IV Checklist of Required Schedules

|        |  |      | Yes | No       |
|--------|--|------|-----|----------|
| 1      | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  |      |     |          |
|        | If "Yes," complete Schedule A  | 1    | Х   |          |
| 2      | Is the organization required to complete Schedule B, Schedule of Contributors? See instructions  | 2    | Х   |          |
| 3      | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for  |      |     |          |
|        | public office? If "Yes," complete Schedule C, Part I   | 3    |     | _X_      |
| 4      | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect   |      |     | 77       |
| _      | during the tax year? If "Yes," complete Schedule C, Part II  | 4    |     | Х        |
| 5      | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or   | _    |     | х        |
| ~      | similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III  | 5    |     | ~        |
| 6      | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to  | 6    |     | х        |
| 7      | provide advice on the distribution or investment of amounts in such funds or accounts? <i>If</i> "Yes," <i>complete Schedule D, Part I</i> Did the organization receive or hold a conservation easement, including easements to preserve open space, | 0    |     | - 23     |
| '      | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II   | 7    |     | x        |
| 8      | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete   | -    |     |          |
| •      | Schedule D, Part III   | 8    |     | х        |
| 9      | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for  |      |     |          |
|        | amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?  |      |     |          |
|        | If "Yes," complete Schedule D, Part IV   | 9    |     | Х        |
| 10     | Did the organization, directly or through a related organization, hold assets in donor-restricted endowments   |      |     |          |
|        | or in quasi-endowments? If "Yes," complete Schedule D, Part V  | 10   |     | Х        |
| 11     | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,  |      |     |          |
|        | as applicable.   |      |     |          |
| а      | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,  |      |     |          |
|        | Part VI  | 11a  | Х   |          |
| b      | Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total   |      |     | v        |
|        | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  | 11b  |     | Х        |
| С      | Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total  | 110  |     | х        |
| Ч      | assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i><br>Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in                                 | 11c  |     | <u> </u> |
| u      | Part X, line 16? If "Yes," complete Schedule D, Part IX  | 11d  |     | х        |
| е      | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X  | 11e  |     | X        |
| f      |  |      |     |          |
|        | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X   | 11f  |     | х        |
| 12a    | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete  |      |     |          |
|        | Schedule D, Parts XI and XII   | 12a  |     | Х        |
| b      | Was the organization included in consolidated, independent audited financial statements for the tax year?  |      |     |          |
|        | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  | 12b  |     | Х        |
| 13     | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  | 13   |     | X        |
| 14a    | Did the organization maintain an office, employees, or agents outside of the United States?  | 14a  |     | Х        |
| b      | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,  |      |     |          |
|        | investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000   |      |     | v        |
| 45     | or more? If "Yes," complete Schedule F, Parts I and IV   | 14b  |     | X        |
| 15     | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any  | 45   | х   |          |
| 16     | foreign organization? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i><br>Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to                                       | 15   | 27  |          |
| 10     | or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  | 16   |     | х        |
| 17     | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,  | 10   |     |          |
|        | column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I.</i> See instructions   | 17   |     | х        |
| 18     | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines   |      |     |          |
|        | 1c and 8a? If "Yes," complete Schedule G, Part II  | 18   |     | х        |
| 19     | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"   |      |     |          |
|        | complete Schedule G, Part III  | 19   |     | х        |
| 20a    | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  | 20a  |     | Х        |
| b      | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?   | 20b  |     |          |
| 21     | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or  |      |     |          |
|        | domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II  | 21   | 000 | X        |
| 332003 | 3 12-21-23   | ⊦orm | 330 | (2023)   |

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 Form 990 (2023)
 Vasudha Foundation USA Inc
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 Part IV
 Checklist of Required Schedules (continued)
 Vas
 No

|        |   |           | Yes | No     |
|--------|---|-----------|-----|--------|
| 22     | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on               |           |     |        |
|        | Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III   | 22        |     | X      |
| 23     | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current |           |     |        |
|        | and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete              |           |     |        |
|        | Schedule J  | 23        |     | X      |
| 24a    | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the     |           |     |        |
|        | last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete          |           |     |        |
|        | Schedule K. If "No," go to line 25a   | 24a       |     | X      |
| b      | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?                           | 24b       |     |        |
| С      | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease        |           |     |        |
|        | any tax-exempt bonds?   | 24c       |     |        |
| d      | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?                     | 24d       |     |        |
| 25a    | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit                |           |     |        |
|        | transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I                               | 25a       |     | X      |
| b      | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and  |           |     |        |
|        | that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete       |           |     |        |
|        | Schedule L, Part I  | 25b       |     | X      |
| 26     | Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current             |           |     |        |
|        | or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%                     |           |     |        |
|        | controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II                          | 26        |     | X      |
| 27     | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, |           |     |        |
|        | creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled |           |     |        |
|        | entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III    | 27        |     | X      |
| 28     | Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,     |           |     |        |
|        | instructions for applicable filing thresholds, conditions, and exceptions):   |           |     |        |
| а      | A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If            |           |     |        |
|        | "Yes," complete Schedule L, Part IV   | 28a       |     | X      |
| b      | A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV                             | 28b       |     | X      |
|        | A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If                    |           |     |        |
|        | "Yes," complete Schedule L, Part IV   | 28c       |     | X      |
| 29     | Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M                     | 29        |     | X      |
| 30     | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation |           |     |        |
|        | contributions? If "Yes," complete Schedule M  | 30        |     | X      |
| 31     | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I          | 31        |     | X      |
| 32     | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete            |           |     |        |
|        | Schedule N, Part II   | 32        |     | X      |
| 33     | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations                  |           |     |        |
|        | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I   | 33        |     | X      |
| 34     | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and   |           |     |        |
|        | Part V, line 1  | 34        |     | X      |
| 35a    | Did the organization have a controlled entity within the meaning of section 512(b)(13)?                                     | 35a       |     | X      |
| b      | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity   |           |     |        |
|        | within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2                                     | 35b       |     |        |
| 36     | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  |           |     |        |
|        | If "Yes," complete Schedule R, Part V, line 2   | 36        |     | X      |
| 37     | Did the organization conduct more than 5% of its activities through an entity that is not a related organization            |           |     |        |
|        | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI                | 37        |     | X      |
| 38     | Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?              |           |     |        |
|        | Note: All Form 990 filers are required to complete Schedule O   | 38        | Х   |        |
| Par    | t V Statements Regarding Other IRS Filings and Tax Compliance   |           |     |        |
|        | Check if Schedule O contains a response or note to any line in this Part V  | <u></u> . |     |        |
|        |   |           | Yes | No     |
| 1a     | Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a   |           |     |        |
| b      | Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0  |           |     |        |
| с      | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming          |           |     |        |
|        | (gambling) winnings to prize winners?   | 1c        | Х   |        |
| 332004 | 12-21-23  | Form      | 990 | (2023) |
|        | 4   |           |     |        |

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| Form       | 990 (2023) Vasudha Foundation USA Inc  | 46-3275                      | 286       | P           | age <b>5</b> |
|------------|--|------------------------------|-----------|-------------|--------------|
| Par        | t V Statements Regarding Other IRS Filings and Tax Compliance (continued)  |                              |           |             |              |
|            |  |                              | _         | Yes         | No           |
| <b>2</b> a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,  |                              |           |             |              |
|            | filed for the calendar year ending with or within the year covered by this return  | 2a 0                         |           |             |              |
|            | If at least one is reported on line 2a, did the organization file all required federal employment tax retur  | ns?                          | 2b        |             |              |
|            |  |                              | 3a        |             | X            |
|            | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule  |                              | 3b        |             |              |
| 4a         | At any time during the calendar year, did the organization have an interest in, or a signature or other a  |                              |           |             | 37           |
|            | financial account in a foreign country (such as a bank account, securities account, or other financial a   | iccount)?                    | 4a        |             | X            |
| b          | If "Yes," enter the name of the foreign country  |                              |           |             |              |
| _          | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A   | ccounts (FBAR).              | _         |             | v            |
|            | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  |                              | 5a        |             | X<br>X       |
|            | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa   |                              | 5b        |             |              |
|            | If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  |                              | <u>5c</u> |             |              |
| 6a         | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the   |                              |           |             | х            |
|            |  |                              | <u>6a</u> |             |              |
| d          | If "Yes," did the organization include with every solicitation an express statement that such contribut  |                              | 0         |             |              |
| -          | were not tax deductible?   |                              | 6b        |             |              |
| 7          | Organizations that may receive deductible contributions under section 170(c). Did the exemptation receive a payment in graph of $C_{2}^{0}$ mode path, so a contribution and path for goods and co   | viene provided to the powerQ | 7-        |             | х            |
|            | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set  |                              | 7a        |             |              |
|            |  |                              | 7b        |             |              |
| С          | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was to file Form 20202  | as required                  | 7.        |             | х            |
| لم         | to file Form 8282?   | 7d                           | 7c        |             | <u> </u>     |
|            | If "Yes," indicate the number of Forms 8282 filed during the year  | · · · · ·                    | 7e        |             | х            |
| e<br>f     | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c<br>Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr  |                              | 7e<br>7f  |             | X            |
| f          | If the organization received a contribution of qualified intellectual property, did the organization file Fo   |                              | 7g        |             |              |
| g          | If the organization received a contribution of qualified intellectual property, did the organization me received a contribution of cars, boats, airplanes, or other vehicles, did the organization me received a contribution of cars, boats, airplanes, or other vehicles, did the organization me received a contribution of cars, boats, airplanes, or other vehicles, did the organization me received a contribution of cars, boats, airplanes, or other vehicles, did the organization me received a contribution of cars, boats, airplanes, or other vehicles, did the organization me received a contribution of cars, boats, airplanes, or other vehicles, did the organization me received a contribution of cars, boats, airplanes, or other vehicles, did the organization me received a contribution of cars, boats, airplanes, or other vehicles, did the organization me received a contribution of cars, boats, airplanes, or other vehicles, did the organization me received a contribution of cars, boats, airplanes, or other vehicles, did the organization me received a contribution of cars, boats, airplanes, or other vehicles, did the organization me received a contribution of cars, boats, airplanes, or other vehicles, did the organization me received a contribution of cars, boats, airplanes, or other vehicles, did the organization me received a contribution of cars, boats, airplanes, or other vehicles, did the organization me received a contribution of cars, boats, airplanes, or other vehicles, did the organization me received a contribution of cars, boats, airplanes, or other vehicles, did the organization me received a contribution of cars, boats, airplanes, or other vehicles, did the organization me received a contribution of cars, boats, airplanes, or other vehicles, did the organization me received a contribution of cars, boats, airplanes, or other vehicles, did the organization me received a contribution of cars, boats, airplanes, airpla |                              | 79<br>7h  |             |              |
| h<br>8     | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained  |                              |           |             |              |
| U          | an approximation the second process business heldings at any time during the year?   | -                            | 8         |             |              |
| 9          | Sponsoring organization have excess business nothings at any time during the year?   |                              |           |             |              |
| a          |  |                              | 9a        |             |              |
|            |  |                              | 9b        |             |              |
| 10         | Section 501(c)(7) organizations. Enter:  |                              | 55        |             |              |
| a          | Initiation fees and capital contributions included on Part VIII, line 12   | 10a                          |           |             |              |
|            | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  | 10b                          |           |             |              |
|            | Section 501(c)(12) organizations. Enter:   |                              |           |             |              |
|            | Gross income from members or shareholders  | 11a                          |           |             |              |
|            | Gross income from other sources. (Do not net amounts due or paid to other sources against  |                              |           |             |              |
|            | amounts due or received from them.)  | 11b                          |           |             |              |
| 12a        | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form   |                              | 12a       |             |              |
|            | If "Yes," enter the amount of tax-exempt interest received or accrued during the year  | 12b                          |           |             |              |
| 13         | Section 501(c)(29) qualified nonprofit health insurance issuers.   | · · · ·                      |           |             |              |
|            | Is the organization licensed to issue qualified health plans in more than one state?   |                              | 13a       |             |              |
|            | <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.   |                              |           |             |              |
| b          | Enter the amount of reserves the organization is required to maintain by the states in which the   |                              |           |             |              |
| -          | organization is licensed to issue qualified health plans   | 13b                          |           |             |              |
| с          | Enter the amount of reserves on hand   | 13c                          |           |             |              |
|            |  |                              | 14a       |             | Х            |
|            | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu  |                              | 14b       |             |              |
| 15         | Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune   |                              |           |             |              |
|            | excess parachute payment(s) during the year?   |                              | 15        |             | Х            |
|            | If "Yes," see the instructions and file Form 4720, Schedule N.   |                              |           |             |              |
| 16         | Is the organization an educational institution subject to the section 4968 excise tax on net investmen   | t income?                    | 16        |             | Х            |
|            | If "Yes," complete Form 4720, Schedule O.  |                              |           |             |              |
| 17         | Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac  | tivities                     |           |             |              |
|            | that would result in the imposition of an excise tax under section 4951, 4952 or 4953?   |                              | 17        |             |              |
|            | If "Yes," complete Form 6069.  |                              |           |             |              |
| 332005     | 12-21-23   |                              | Form      | 9 <b>90</b> | (2023)       |
|            | 5  |                              |           |             |              |

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 Vasudha Foundation USA Inc
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 Part VI
 Governance, Management, and Disclosure.
 For each "Yes" response to lines 2 through 7b below, and for a "No" response
 Page

 to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

| Check if Schedule O contains a response or note to any line in this Part VI |  |
|---|--|
| Section A. Governing Body and Management                                    |  |

|        |   |                           |          | Yes          | No     |  |  |  |  |  |
|--------|---|---------------------------|----------|--------------|--------|--|--|--|--|--|
| 1a     | Enter the number of voting members of the governing body at the end of the tax year                                     | 1a                        | 4        |              |        |  |  |  |  |  |
|        | If there are material differences in voting rights among members of the governing body, or if the governing             |                           |          |              |        |  |  |  |  |  |
|        | body delegated broad authority to an executive committee or similar committee, explain on Schedule O.                   |                           |          |              |        |  |  |  |  |  |
| b      | Enter the number of voting members included on line 1a, above, who are independent                                      | 1b                        | 4        |              |        |  |  |  |  |  |
| 2      | Did any officer, director, trustee, or key employee have a family relationship or a business relationship               | with any other            |          |              |        |  |  |  |  |  |
|        | officer, director, trustee, or key employee?  |                           | 2        |              | X      |  |  |  |  |  |
| 3      | Did the organization delegate control over management duties customarily performed by or under the                      | direct supervision        |          |              |        |  |  |  |  |  |
|        | of officers, directors, trustees, or key employees to a management company or other person?                             |                           | 3        |              | X      |  |  |  |  |  |
| 4      | Did the organization make any significant changes to its governing documents since the prior Form 99                    | 0 was filed?              | 4        |              | X      |  |  |  |  |  |
| 5      | Did the organization become aware during the year of a significant diversion of the organization's asse                 | ts?                       | 5        |              | Х      |  |  |  |  |  |
| 6      | Did the organization have members or stockholders?  |                           | 6        |              | X      |  |  |  |  |  |
| 7a     | Did the organization have members, stockholders, or other persons who had the power to elect or app                     | point one or              |          |              |        |  |  |  |  |  |
|        | more members of the governing body?   |                           | 7a       |              | X      |  |  |  |  |  |
| b      | Are any governance decisions of the organization reserved to (or subject to approval by) members, sto                   | ockholders, or            |          |              |        |  |  |  |  |  |
|        | persons other than the governing body?  |                           | 7b       |              | Х      |  |  |  |  |  |
| 8      | Did the organization contemporaneously document the meetings held or written actions undertaken during the year         | by the following:         |          |              |        |  |  |  |  |  |
| а      | a The governing body?   |                           |          |              |        |  |  |  |  |  |
| b      |   |                           |          |              |        |  |  |  |  |  |
| 9      | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reac              | hed at the                |          |              |        |  |  |  |  |  |
|        | organization's mailing address? If "Yes," provide the names and addresses on Schedule O                                 |                           | 9        |              | Х      |  |  |  |  |  |
| Sec    | tion B. Policies (This Section B requests information about policies not required by the Internal Rev                   |                           |          |              |        |  |  |  |  |  |
|        |   | ,                         |          | Yes          | No     |  |  |  |  |  |
| 10a    | Did the organization have local chapters, branches, or affiliates?  |                           | 10a      |              | Х      |  |  |  |  |  |
|        | If "Yes," did the organization have written policies and procedures governing the activities of such cha                |                           |          |              |        |  |  |  |  |  |
|        | and branches to ensure their operations are consistent with the organization's exempt purposes?                         |                           | 10b      |              |        |  |  |  |  |  |
| 11a    | Has the organization provided a complete copy of this Form 990 to all members of its governing body                     | before filing the form?   | 11a      | Х            |        |  |  |  |  |  |
| b      | <b>b</b> Describe on Schedule O the process, if any, used by the organization to review this Form 990.                  |                           |          |              |        |  |  |  |  |  |
| 12a    | 2a Did the organization have a written conflict of interest policy? If "No," go to line 13                              |                           |          |              |        |  |  |  |  |  |
| b      | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise t |                           | 12b      |              |        |  |  |  |  |  |
| с      | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Ye                  | es," describe             |          |              |        |  |  |  |  |  |
|        | on Schedule O how this was done   | <i>`</i>                  | 12c      |              |        |  |  |  |  |  |
| 13     | Did the organization have a written whistleblower policy?   |                           | 13       |              | Х      |  |  |  |  |  |
| 14     | Did the organization have a written document retention and destruction policy?  |                           | 14       | Х            |        |  |  |  |  |  |
| 15     | Did the process for determining compensation of the following persons include a review and approval                     | by independent            |          |              |        |  |  |  |  |  |
|        | persons, comparability data, and contemporaneous substantiation of the deliberation and decision?                       |                           |          |              |        |  |  |  |  |  |
| а      | The organization's CEO, Executive Director, or top management official  |                           | 15a      |              | Х      |  |  |  |  |  |
| b      | Other officers or key employees of the organization   |                           | 15b      |              | Х      |  |  |  |  |  |
|        | If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.                                      |                           |          |              |        |  |  |  |  |  |
| 16a    | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem             | ent with a                |          |              |        |  |  |  |  |  |
|        | taxable entity during the year?   |                           | 16a      |              | Х      |  |  |  |  |  |
| b      | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate              | e its participation       |          |              |        |  |  |  |  |  |
|        | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organized               | zation's                  |          |              |        |  |  |  |  |  |
|        | exempt status with respect to such arrangements?  |                           | 16b      |              |        |  |  |  |  |  |
| Sec    | tion C. Disclosure  |                           |          |              |        |  |  |  |  |  |
| 17     | List the states with which a copy of this Form 990 is required to be filed VA   |                           |          |              |        |  |  |  |  |  |
| 18     | Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and                  | d 990-T (section 501(c)(3 | s) only) | availal      | ole    |  |  |  |  |  |
|        | for public inspection. Indicate how you made these available. Check all that apply.                                     |                           |          |              |        |  |  |  |  |  |
|        | X Own website Another's website X Upon request Other (explain   | on Schedule O)            |          |              |        |  |  |  |  |  |
| 19     | Describe on Schedule O whether (and if so, how) the organization made its governing documents, cor                      | ,                         | nd finan | cial         |        |  |  |  |  |  |
|        | statements available to the public during the tax year.   |                           |          |              |        |  |  |  |  |  |
| 20     | State the name, address, and telephone number of the person who possesses the organization's book                       | s and records             |          |              |        |  |  |  |  |  |
|        | Komala Krishnaswamy - (281) 494-0267  |                           |          |              |        |  |  |  |  |  |
|        | 2850 Field Line Drive, Sugar Land, TX 77479   |                           |          |              |        |  |  |  |  |  |
| 332006 | 12-21-23  |                           | Forn     | 1 <b>990</b> | (2023) |  |  |  |  |  |
|        | б   |                           |          |              |        |  |  |  |  |  |

|          | <b>^</b> | non one official of |          | Divestave  | Tweetees   |                | Linkest | <b>A</b>   |
|----------|----------|---------------------|----------|------------|------------|----------------|---------|------------|
| Part VII | 00       | mpensation of       | omcers,  | Directors, | i rustees, | Key Employees, | Fignest | Compensate |
|          | Em       | ployees, and I      | ndepende | ent Contra | ctors      |                |         |            |

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.
List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List all of the organization's current key employees, if any. See the instructions for deminition of key employees.

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

| (A)<br>Name and title          | (B)<br>Average   | (C)<br>Position<br>(do not check more than one |  |         |   |                     |      | <b>(D)</b><br>Reportable                                    | <b>(E)</b><br>Reportable                                      | <b>(F)</b><br>Estimated   |
|--------------------------------|--|--|--|---------|---|---------------------|------|---|---|---|
| Name and the                   | hours per  | box  | do not check mor<br>ox, unless persor<br>officer and a direc |         |   | s both              | ı an | compensation  | compensation  | amount of   |
|                                | week<br>(list any<br>hours for<br>related<br>organizations<br>below<br>line) | stee or director                               | Institutional trustee  | Officer |   | Highest compensated |      | from<br>the<br>organization<br>(W-2/1099-MISC/<br>1099-NEC) | from related<br>organizations<br>(W-2/1099-MISC/<br>1099-NEC) | other<br>compensation<br>from the<br>organization<br>and related<br>organizations |
| (1) Komala Krishnaswamy        | 10.00  |  |  |         |   |                     |      |   |   |   |
| President                      |  | Х  |  | X       |   |                     |      | 0.  | 0.  | 0.  |
| (2) Paul Clemens               | 1.00   |  |  |         |   |                     |      |   |   | 2   |
| Vice President                 | 1 00   | Х  |  | X       |   |                     |      | 0.  | 0.  | 0.  |
| (3) Arathi Ramachandran        | 1.00   |  |  |         |   |                     |      |   |   | 0   |
| Secretary                      | 1 00   | Х  |  | X       | - | -                   |      | 0.  | 0.  | 0.  |
| (4) Neela Srinivasan<br>Member | 1.00   | x  |  |         |   |                     |      | 0.  | 0.  | 0.  |
|                                |  | ^  |  |         |   |                     |      | 0.  | 0.  | 0.  |
|                                |  |  |  |         |   |                     |      |   |   |   |
|                                |  |  |  |         |   |                     |      |   |   |   |
|                                |  |  |  |         |   |                     |      |   |   |   |
|                                |  |  |  |         |   |                     |      |   |   |   |
|                                |  |  |  |         |   |                     |      |   |   |   |
|                                |  |  |  |         |   |                     |      |   |   |   |
|                                |  |  |  |         |   |                     |      |   |   |   |
|                                |  |  |  |         |   |                     |      |   |   |   |
|                                |  |  |  |         |   |                     |      |   |   |   |
|                                |  | l  |  |         |   |                     |      |   |   |   |
|                                |  |  |  |         |   |                     |      |   |   |   |
|                                |  |  |  |         |   |                     |      |   |   |   |
|                                |  |  |  |         |   |                     |      |   |   |   |
|                                |  |  |  |         |   |                     |      |   |   |   |
|                                |  |  |  |         |   |                     |      |   |   |   |
|                                |  |  |  |         |   |                     |      |   |   |   |
|                                |  |  |  |         |   |                     |      |   |   |   |
| 332007 12-21-23                | I  |  |  |         | I | I                   | I    | 1   |   | Form <b>990</b> (2023)  |

7

332007 12-21-23

Form 990 (2023)

|   | 990 (2023) Vasudha H  | oundati  | on                             | U                     | SA                    | I              | nc                               |                       |  | 46-32  | <u>2752</u> | 286               | Pa  | age <b>8</b>  |
|---|---|--|--------------------------------|-----------------------|-----------------------|----------------|----------------------------------|-----------------------|--|--|-------------|-------------------|---|---------------|
| Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) |   |  |                                |                       |                       |                |                                  |                       |  |  |             |                   |   |               |
|   | (A)<br>Name and title   | <b>(B)</b><br>Average<br>hours per<br>week                           | box<br>offi                    | not cl<br>, unles     | Pos<br>heck<br>ss per | more<br>rson i | )<br>than o<br>s both<br>pr/trus | n an                  | (D)<br>Reportable<br>compensation<br>from  | <b>(E)</b><br>Reportable<br>compensation<br>from related | I           | am                | (F)<br>timate<br>nount<br>other                   |               |
|   |   | (list any<br>hours for<br>related<br>organizations<br>below<br>line) | Individual trustee or director | Institutional trustee | Officer               | Key employee   | Highest compensated<br>employee  | Former                | the<br>organization<br>(W-2/1099-MISC/<br>1099-NEC)  | organizations<br>(W-2/1099-MIS<br>1099-NEC)              |             | fr<br>orga<br>and | pensa<br>om the<br>anizati<br>d relate<br>nizatio | e<br>on<br>ed |
|   |   |  |                                |                       |                       |                |                                  |                       |  |  |             |                   |   |               |
|   |   |  |                                |                       |                       |                |                                  |                       |  |  |             |                   |   |               |
|   |   |  |                                |                       |                       |                |                                  |                       |  |  |             |                   |   |               |
|   |   |  |                                |                       |                       |                |                                  |                       |  |  |             |                   |   |               |
|   |   |  |                                |                       |                       |                |                                  |                       |  |  |             |                   |   |               |
|   |   |  |                                |                       |                       |                |                                  |                       |  |  |             |                   |   |               |
|   | Subtotal<br>Total from continuation sheets to Part VI   | , Section A  |                                |                       |                       |                |                                  |                       | 0.   |  | 0.0.0.      |                   |   | 0.            |
| _ <u>d</u><br>2   | Total (add lines 1b and 1c)<br>Total number of individuals (including but no<br>compensation from the organization  |  |                                |                       |                       |                |                                  |                       | • -  | 000 of reportable  | -           |                   |   | 0.            |
| 3   | Did the organization list any <b>former</b> officer,<br>line 1a? If "Yes," complete Schedule J for su   | -  |                                | •                     | •                     |                |                                  | Ŭ                     | • •  |  | [           | 3                 | Yes   | No<br>X       |
| 4<br>5  | For any individual listed on line 1a, is the su<br>and related organizations greater than \$150<br>Did any person listed on line 1a receive or a                                  | m of reportabl<br>),000? <i>If</i> "Yes,                             | e co<br>" <i>co</i>            | mpe<br>mple           | ensa<br>ete S         | tion<br>Sche   | and<br>and                       | oth<br>9 <i>J f</i> a | er compensation from the form the form the form the formation of the forma | he organization  |             | 4                 |   | X             |
|   | rendered to the organization? <i>If</i> "Yes," <i>com</i><br>tion <b>B. Independent Contractors</b>   |  |                                |                       |                       |                |                                  |                       |  |  |             | 5                 |   | Х             |
| 1   | Complete this table for your five highest con<br>the organization. Report compensation for t  |  |                                |                       |                       |                |                                  |                       |  |  | ensat       | ion fro           | m   |               |
|   | the organization. Report compensation for the calendar year ending with or within the organization's tax year.         (A)       (B)         Name and business address       NONE |  |                                |                       |                       |                |                                  |                       | С  | (C<br>omper  |             | ۱                 |   |               |
|   |   |  |                                |                       |                       |                |                                  |                       |  |  |             |                   |   |               |
|   |   |  |                                |                       |                       |                |                                  |                       |  |  |             |                   |   |               |
|   |   |  |                                |                       |                       |                |                                  |                       |  |  |             |                   |   |               |
| 2   | Total number of independent contractors (ir   | ncluding but no  | ot lin                         | nitec                 | d to f                | thos           | se lis                           | ted                   | above) who received mo   | ore than   |             |                   |   |               |
|   | \$100,000 of compensation from the organiz  | zation   |                                |                       |                       | (              | )                                |                       |  |  |             |                   | 000   |               |

Form **990** (2023)

332008 12-21-23

| Form  | 1 990 (    | (2023) Vasudha Found  | dation USA            | A Inc                       |  | 46-3275                              | 286 Page <b>9</b>  |
|---|------------|---|-----------------------|-----------------------------|--|--------------------------------------|--|
| Pa  | rt VII     | Statement of Revenue  |                       |                             |  |                                      |  |
|   |            | Check if Schedule O contains a response   | e or note to any line | e in this Part VIII         | <u>.</u>                                     |                                      |  |
|   |            |   |                       | <b>(A)</b><br>Total revenue | (B)<br>Related or exempt<br>function revenue | (C)<br>Unrelated<br>business revenue | <b>(D)</b><br>Revenue excluded<br>from tax under<br>sections 512 - 514 |
| ts ts   | 1 a        | Federated campaigns 1a  |                       |                             |  |                                      |  |
| ran   | b          | Membership dues 1b  |                       |                             |  |                                      |  |
| S, G  | с          |   |                       |                             |  |                                      |  |
| àifts<br>ar ∕   | d          | Related organizations 11  |                       |                             |  |                                      |  |
| is, (<br>imil   | е          | Government grants (contributions) 1e  |                       |                             |  |                                      |  |
| Contributions, Gifts, Grants<br>and Other Similar Amounts | f          | similar amounts not included above 1f 2   | ,517,963.             |                             |  |                                      |  |
| ontr<br>d C   | g          | Noncash contributions included in lines 1a-1f   |                       |                             |  |                                      |  |
| ano   | h          | Total. Add lines 1a-1f  |                       | 2,517,963.                  |  |                                      |  |
|   |            |   | Business Code         |                             |  |                                      |  |
| се  | 2 a        |   |                       |                             |  |                                      |  |
| Program Service<br>Revenue                                | b          |   |                       |                             |  |                                      |  |
| n Si<br>ent   | С          |   |                       |                             |  |                                      |  |
| ran<br>3ev  | d          |   |                       |                             |  |                                      |  |
| rog   | е          |   |                       |                             |  |                                      |  |
| Ъ   | f          | 1 3   |                       |                             |  |                                      |  |
|   | g          |   |                       |                             |  |                                      |  |
|   | 3          | Investment income (including dividends, inte  |                       | 262.                        |  |                                      | 262.   |
|   |            | other similar amounts)  |                       | 202.                        |  |                                      | 202.   |
|   | 4          | Income from investment of tax-exempt bond   |                       |                             |  |                                      |  |
|   | 5          | Royalties   | (ii) Personal         |                             |  |                                      |  |
|   | •          |   | (ii) Fersonal         |                             |  |                                      |  |
|   |            | Gross rents 6a  |                       |                             |  |                                      |  |
|   |            |   |                       |                             |  |                                      |  |
|   | C<br>A     |   |                       |                             |  |                                      |  |
|   |            | Net rental income or (loss)         Gross amount from sales of         (i) Securities |                       |                             |  |                                      |  |
|   | <i>i</i> a | assets other than inventory <b>7a</b>   |                       |                             |  |                                      |  |
|   | h          | Less: cost or other basis   |                       |                             |  |                                      |  |
| е   | , D        | and sales expenses <b>7b</b>  |                       |                             |  |                                      |  |
| venue   | ·          | Gain or (loss)  |                       |                             |  |                                      |  |
|   |            | Net gain or (loss)  |                       |                             |  |                                      |  |
| er F  |            | Gross income from fundraising events (not   |                       |                             |  |                                      |  |
| Other Re  | 0 4        | including \$ of   |                       |                             |  |                                      |  |
| 0   |            | contributions reported on line 1c). See   |                       |                             |  |                                      |  |
|   |            | Part IV, line 18  | a                     |                             |  |                                      |  |
|   | b          | Less: direct expenses 8   |                       |                             |  |                                      |  |
|   |            |   |                       |                             |  |                                      |  |
|   |            | Gross income from gaming activities. See  |                       |                             |  |                                      |  |
|   |            |   | a                     |                             |  |                                      |  |
|   | b          | Less: direct expenses 9   | b                     |                             |  |                                      |  |
|   |            |   |                       |                             |  |                                      |  |
|   |            | Gross sales of inventory, less returns  |                       |                             |  |                                      |  |
|   |            | and allowances 10   | Da                    |                             |  |                                      |  |
|   | b          | Less: cost of goods sold 10   | )b                    |                             |  |                                      |  |
|   |            | Net income or (loss) from sales of inventory  |                       |                             |  |                                      |  |
| ŝ   |            |   | Business Code         |                             |  |                                      |  |
| e on:   | 11 a       |   |                       |                             |  |                                      |  |
| cellaneo<br>evenue  | b          |   |                       |                             |  |                                      |  |
| Miscellaneous<br>Revenue                                  | с          |   |                       |                             |  |                                      |  |
| Misc<br>B   | d          | All other revenue   |                       |                             |  |                                      |  |
| 2   | е          | Total. Add lines 11a-11d  |                       |                             |  |                                      |  |
|   | 12         | Total revenue. See instructions   |                       | 2,518,225.                  | 0.   | 0.                                   | 262.   |
| 33200   | 9 12-21    | -23   |                       |                             |  |                                      | Form <b>990</b> (2023)   |

Form 990 (2023) Vasudha Foundation USA Inc Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

|                 | Check if Schedule O contains a respons   |                              |   |  |                                       |
|-----------------|--|------------------------------|---|--|---------------------------------------|
|                 | not include amounts reported on lines 6b,<br>8b, 9b, and 10b of Part VIII.                                 | <b>(A)</b><br>Total expenses | <b>(B)</b><br>Program service<br>expenses | <b>(C)</b><br>Management and<br>general expenses | <b>(D)</b><br>Fundraising<br>expenses |
| 1               | Grants and other assistance to domestic organizations  |                              |   |  |                                       |
|                 | and domestic governments. See Part IV, line 21   |                              |   |  |                                       |
| 2               | Grants and other assistance to domestic  |                              |   |  |                                       |
|                 | individuals. See Part IV, line 22  |                              |   |  |                                       |
| 3               | Grants and other assistance to foreign   |                              |   |  |                                       |
|                 | organizations, foreign governments, and foreign  |                              |   |  |                                       |
|                 | individuals. See Part IV, lines 15 and 16  | 1,889,429.                   | 1,889,429.                                |  |                                       |
| 4               | Benefits paid to or for members  |                              |   |  |                                       |
| 5               | Compensation of current officers, directors,   |                              |   |  |                                       |
|                 | trustees, and key employees  |                              |   |  |                                       |
| 6               | Compensation not included above to disqualified  |                              |   |  |                                       |
|                 | persons (as defined under section 4958(f)(1)) and  |                              |   |  |                                       |
|                 | persons described in section 4958(c)(3)(B)   |                              |   |  |                                       |
| 7               | Other salaries and wages   |                              |   |  |                                       |
| 8               | Pension plan accruals and contributions (include   |                              |   |  |                                       |
|                 | section 401(k) and 403(b) employer contributions)  |                              |   |  |                                       |
| 9               | Other employee benefits  |                              |   |  |                                       |
| 10              | Payroll taxes  |                              |   |  |                                       |
| 11              | Fees for services (nonemployees):  |                              |   |  |                                       |
| а               | Management   |                              |   |  |                                       |
| b               | Legal  | 10 500                       |   | 10 506   |                                       |
| С               | Accounting   | 10,536.                      |   | 10,536.  |                                       |
| d               | Lobbying   |                              |   |  |                                       |
| е               | Professional fundraising services. See Part IV, line 17  |                              |   |  |                                       |
| f               | Investment management fees   |                              |   |  |                                       |
| g               | Other. (If line 11g amount exceeds 10% of line 25,   | 100 700                      | 100 700                                   |  |                                       |
|                 | column (A), amount, list line 11g expenses on Sch 0.)  | 199,700.                     | 199,700.                                  |  |                                       |
| 12              | Advertising and promotion  | 20.                          |   | 20.  |                                       |
| 13              | Office expenses  | 20.                          | 18,218.                                   | 6,073.   |                                       |
| 14              | Information technology   | 24,291.                      | 10,210.                                   | 0,075.   |                                       |
| 15              | Royalties  |                              |   |  |                                       |
| 16              | Occupancy  | 26,048.                      | 26,048.                                   |  |                                       |
| 17              | Travel   | 20,040.                      | 20,040.                                   |  |                                       |
| 18              | Payments of travel or entertainment expenses for any federal, state, or local public officials             |                              |   |  |                                       |
| 10              | Conferences, conventions, and meetings   |                              |   |  |                                       |
| 19<br>20        | н Г  |                              |   |  |                                       |
| 20<br>21        | Payments to affiliates   |                              |   |  |                                       |
| 22              | Depreciation, depletion, and amortization  | 2,065.                       |   | 2,065.   |                                       |
| 23              | Insurance  | _,                           |   | _,   |                                       |
| 24              | Other expenses. Itemize expenses not covered   |                              |   |  |                                       |
|                 | above. (List miscellaneous expenses on line 24e. If<br>line 24e amount exceeds 10% of line 25, column (A), |                              |   |  |                                       |
|                 | amount, list line 24e expenses on Schedule 0.)   | 3,580.                       |   | 3,580.   |                                       |
|                 | Financial Fees   | 1,012.                       |   | 1,012.   |                                       |
|                 | Registrations  | 1,012.                       |   | 1,012.   |                                       |
| c<br>d          |  | • ± ∪ ± •                    |   |  |                                       |
|                 | All other expenses   |                              |   |  |                                       |
| е<br>25         | Total functional expenses. Add lines 1 through 24e   | 2,156,832.                   | 2,133,395.                                | 23,437.  | 0.                                    |
| <u>25</u><br>26 | Joint costs. Complete this line only if the organization   | _,,,                         |   | 20,20,4  | <u> </u>                              |
| 20              | reported in column (B) joint costs from a combined   |                              |   |  |                                       |
|                 | educational campaign and fundraising solicitation.   |                              |   |  |                                       |
|                 | Check here if following SOP 98-2 (ASC 958-720)   |                              |   |  |                                       |
| 332010          | ) 12-21-23   |                              |   | I  | Form <b>990</b> (2023)                |

332010 12-21-23

09150429 795476 106872

32

33

129,101.

170,197.

32

33

533,651.

539,651.

Form 990 (2023)

| Vasudha | Foundation | USA | Inc |
|---------|------------|-----|-----|
|---------|------------|-----|-----|

Check if Schedule O contains a response or note to any line in this Part X

Total net assets or fund balances

Total liabilities and net assets/fund balances

(A) Beginning of year (B) End of year 170,194. 460. 1 1 Cash - non-interest-bearing 169,191. Savings and temporary cash investments 2 2 Pledges and grants receivable, net 3 3 370,000. Accounts receivable, net 4 4 Loans and other receivables from any current or former officer, director, 5 trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined 6 6 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 7 Notes and loans receivable, net Assets 8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 9 **10a** Land, buildings, and equipment: cost or other 2,070. basis. Complete Part VI of Schedule D \_\_\_\_\_ 10a 2,070. 3. 0. b Less: accumulated depreciation 10b 10c 11 11 Investments - publicly traded securities Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 Intangible assets 14 14 Other assets. See Part IV, line 11 15 15 170,197. 539,651. 16 **Total assets.** Add lines 1 through 15 (must equal line 33) 16 6,000. Accounts payable and accrued expenses 17 17 18 18 Grants payable 41,096. 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to any current or former officer, director, Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% 22 controlled entity or family member of any of these persons Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 of Schedule D 41,096. 6,000. 26 26 Total liabilities. Add lines 17 through 25 X Organizations that follow FASB ASC 958, check here Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 129,101. 533,651. 27 Net assets without donor restrictions 27 Net assets with donor restrictions 28 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 30 31 Retained earnings, endowment, accumulated income, or other funds 31

| 990 ( | 2023 | )    |       |
|-------|------|------|-------|
| ŀΧ    | Ba   | ance | Sheet |

| Form | 990 (2023) Vasudha Foundation USA Inc  | 46-     | -3275286 | Pag  | <sub>ge</sub> 12 |
|------|--|---------|----------|------|------------------|
| Pa   | rt XI Reconciliation of Net Assets   |         |          |      |                  |
|      | Check if Schedule O contains a response or note to any line in this Part XI  |         |          |      |                  |
|      |  |         |          |      |                  |
| 1    | Total revenue (must equal Part VIII, column (A), line 12)  | 1       | 2,518    | , 22 | 25.              |
| 2    | Total expenses (must equal Part IX, column (A), line 25)   | 2       | 2,156    | , 8  | 32.              |
| 3    | Revenue less expenses. Subtract line 2 from line 1   | 3       | 361      | ., 3 | 93.              |
| 4    | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))                          | 4       | 129      | ,1   | 01.              |
| 5    | Net unrealized gains (losses) on investments   | 5       |          |      |                  |
| 6    | Donated services and use of facilities   | 6       |          |      |                  |
| 7    | Investment expenses  | 7       |          |      |                  |
| 8    | Prior period adjustments   | 8       | 43       | ,1   | 57.              |
| 9    | Other changes in net assets or fund balances (explain on Schedule O)   | 9       |          |      | 0.               |
| 10   | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,                 |         |          |      |                  |
|      | column (B))  | 10      | 533      | , 6  | 51.              |
| Pa   | rt XII Financial Statements and Reporting  |         |          |      |                  |
|      | Check if Schedule O contains a response or note to any line in this Part XII                                       |         |          |      |                  |
|      |  |         |          | Yes  | No               |
| 1    | Accounting method used to prepare the Form 990: Cash X Accrual Other   |         |          |      |                  |
|      | If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule     | Ο.      |          |      |                  |
| 2a   | Were the organization's financial statements compiled or reviewed by an independent accountant?                    |         | 2a       |      | X                |
|      | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed    | on a    |          |      |                  |
|      | separate basis, consolidated basis, or both:   |         |          |      |                  |
|      | Separate basis Consolidated basis Both consolidated and separate basis   |         |          |      |                  |
| b    | Were the organization's financial statements audited by an independent accountant?                                 |         | 2b       |      | X                |
|      | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate   | basis,  |          |      |                  |
|      | consolidated basis, or both:   |         |          |      |                  |
|      | Separate basis Consolidated basis Both consolidated and separate basis   |         |          |      |                  |
| с    | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the | audit,  |          |      |                  |
|      | review, or compilation of its financial statements and selection of an independent accountant?                     |         | 2c       |      | L                |
|      | If the organization changed either its oversight process or selection process during the tax year, explain on Sch  | edule C | ).       |      |                  |
| 3a   | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the    |         |          |      |                  |
|      | Uniform Guidance, 2 C.F.R. Part 200, Subpart F?  |         |          |      | X                |
| b    | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi | red auc | lit      |      |                  |
|      | or audits, explain why on Schedule O and describe any steps taken to undergo such audits                           |         | 3b       |      | I                |

Form **990** (2023)

332012 12-21-23

Department of the Treasury Internal Revenue Service

(Form 990)

### **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

|                              | OMB No. 1545-0047            |  |  |  |
|------------------------------|------------------------------|--|--|--|
|                              | 2023                         |  |  |  |
|                              | Open to Public<br>Inspection |  |  |  |
| Employer identification numb |                              |  |  |  |

### Name of the organization

|      | Vasudha Foundation USA Inc 46 |  |                        |   |                                     | 6-3275286       |                  |                    |                            |
|------|-------------------------------|--|------------------------|---|-------------------------------------|-----------------|------------------|--------------------|----------------------------|
| Pa   | art I                         | Reason for Public (  | Charity Status.        | (All organizations must c                             | omplete th                          | nis part.) S    | ee instructions  | S.                 |                            |
| The  | organ                         | ization is not a private found   |                        |   |                                     |                 |                  |                    |                            |
| 1    |                               | A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). |                        |   |                                     |                 |                  |                    |                            |
| 2    |                               | A school described in sect   | ion 170(b)(1)(A)(ii).  | Attach Schedule E (Form                               | n 990).)                            |                 |                  |                    |                            |
| 3    |                               | A hospital or a cooperative  |                        |   |                                     | (b)(1)(A)(ii    | ii).             |                    |                            |
| 4    |                               | A medical research organization  | ation operated in co   | njunction with a hospital                             | described                           | in sectio       | n 170(b)(1)(A)   | (iii). Enter       | the hospital's name,       |
|      |                               | city, and state:   |                        |   |                                     |                 |                  |                    |                            |
| 5    |                               | An organization operated for   | or the benefit of a co | llege or university owned                             | or operate                          | ed by a go      | overnmental un   | it describe        | ed in                      |
|      |                               | section 170(b)(1)(A)(iv). (C   | Complete Part II.)     |   |                                     |                 |                  |                    |                            |
| 6    |                               | A federal, state, or local gov   | vernment or governn    | nental unit described in                              | section 17                          | 70(b)(1)(A)     | (v).             |                    |                            |
| 7    |                               | An organization that norma   | lly receives a substa  | ntial part of its support fr                          | om a gove                           | ernmental       | unit or from the | e general p        | oublic described in        |
|      |                               | section 170(b)(1)(A)(vi). (C   | omplete Part II.)      |   |                                     |                 |                  |                    |                            |
| 8    | X                             | A community trust describe   | ed in section 170(b)   | (1)(A)(vi). (Complete Parl                            | : II.)                              |                 |                  |                    |                            |
| 9    |                               | An agricultural research org   | anization described    | in section 170(b)(1)(A)(i                             | x) operate                          | ed in conju     | unction with a l | and-grant          | college                    |
|      |                               | or university or a non-land-g  | grant college of agric | ulture (see instructions).                            | Enter the ı                         | name, city      | , and state of t | he college         | or                         |
|      |                               | university:  |                        |   |                                     |                 |                  |                    |                            |
| 10   |                               | An organization that norma   | lly receives (1) more  | than 33 1/3% of its supp                              | ort from c                          | ontributior     | ns, membershij   | o fees, and        | d gross receipts from      |
|      |                               | activities related to its exem   | npt functions, subjec  | t to certain exceptions; a                            | and (2) no                          | more than       | 33 1/3% of its   | support f          | rom gross investment       |
|      |                               | income and unrelated busir   | ness taxable income    | (less section 511 tax) fro                            | m busines                           | ses acqui       | red by the orga  | anization a        | ifter June 30, 1975.       |
|      |                               | See section 509(a)(2). (Cor  | mplete Part III.)      |   |                                     |                 |                  |                    |                            |
| 11   |                               | An organization organized a  | and operated exclus    | ively to test for public sat                          | ety. See                            | section 50      | 09(a)(4).        |                    |                            |
| 12   |                               | An organization organized a  | and operated exclus    | ively for the benefit of, to                          | perform t                           | he functio      | ns of, or to car | ry out the         | purposes of one or         |
|      |                               | more publicly supported or   | ganizations describe   | d in <b>section 509(a)(1)</b> o                       | r section !                         | 509(a)(2).      | See section 5    | <b>09(a)(3).</b> ( | Check the box on           |
|      |                               | lines 12a through 12d that   | describes the type o   | f supporting organizatior                             | and com                             | plete lines     | 12e, 12f, and    | 12g.               |                            |
| а    |                               | <b>Type I.</b> A supporting orga   | -                      | -   | •                                   | -               |                  |                    |                            |
|      |                               | the supported organization   |                        |   | majority o                          | of the direc    | ctors or trustee | s of the su        | ipporting                  |
|      |                               | organization. You must o   | -                      |   |                                     |                 |                  |                    |                            |
| b    |                               | <b>Type II.</b> A supporting org   | -                      |   |                                     |                 | -                |                    | -                          |
|      |                               | control or management o  |                        |   | ame perso                           | ns that co      | ntrol or manag   | e the supp         | ported                     |
|      |                               | organization(s). You mus   | -                      |   |                                     |                 |                  |                    |                            |
| C    |                               | J Type III functionally inte   |                        |   |                                     |                 |                  | y integrate        | d with,                    |
|      | . —                           | its supported organization   |                        |   |                                     |                 |                  |                    |                            |
| c    |                               | J Type III non-functionally  |                        |   |                                     |                 |                  | -                  |                            |
|      |                               | that is not functionally int   |                        | • •   | •                                   |                 | -                | an attentiv        | /eness                     |
| -    |                               | requirement (see instructi   |                        | •   |                                     |                 |                  |                    |                            |
| e    |                               | Check this box if the orga<br>functionally integrated, or  |                        |   |                                     |                 | турет, турет     | , type iii         |                            |
| f    | Ente                          | er the number of supported of  |                        | nany integrated supportin                             | ig organiz                          | ation.          |                  |                    |                            |
| ģ    |                               | vide the following information   | •                      | d organization(s).                                    |                                     |                 |                  |                    |                            |
|      |                               | i) Name of supported   | (ii) EIN               | (iii) Type of organization                            | (iv) Is the orga<br>in your governi | nization listed | (v) Amount of    | monetary           | (vi) Amount of other       |
|      |                               | organization   |                        | (described on lines 1-10<br>above (see instructions)) | Yes                                 | No              | support (see ins | structions)        | support (see instructions) |
|      |                               |  |                        |   |                                     |                 |                  |                    |                            |
|      |                               |  |                        |   |                                     |                 |                  |                    |                            |
|      |                               |  |                        |   |                                     |                 |                  |                    |                            |
|      |                               |  |                        |   |                                     |                 |                  |                    |                            |
|      |                               |  |                        |   |                                     |                 |                  |                    |                            |
|      |                               |  |                        |   |                                     |                 |                  |                    |                            |
|      |                               |  |                        |   |                                     |                 |                  |                    |                            |
|      |                               |  |                        |   |                                     |                 |                  |                    |                            |
|      |                               |  |                        |   |                                     |                 |                  |                    |                            |
|      |                               |  |                        |   |                                     |                 |                  |                    |                            |
| Tota | al                            |  |                        |   |                                     |                 |                  |                    |                            |

Part II

Vasudha Foundation USA Inc

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

| Sec      | ction A. Public Support  |                       |                       |                       |                     |                                |                  |
|----------|--|-----------------------|-----------------------|-----------------------|---------------------|--------------------------------|------------------|
| Cale     | ndar year (or fiscal year beginning in)  | (a) 2019              | <b>(b)</b> 2020       | (c) 2021              | (d) 2022            | (e) 2023                       | (f) Total        |
| 1        | Gifts, grants, contributions, and membership fees received. (Do not                |                       |                       |                       |                     |                                |                  |
|          | include any "unusual grants.")   | 222,785.              | 270,673.              | 287,973.              | 1835437.            | 2517963.                       | 5134831.         |
| 2        | Tax revenues levied for the organ-<br>ization's benefit and either paid to         |                       |                       |                       |                     |                                |                  |
| 3        | or expended on its behalf<br>The value of services or facilities                   |                       |                       |                       |                     |                                |                  |
| Ŭ        | furnished by a governmental unit to  |                       |                       |                       |                     |                                |                  |
|          | the organization without charge  |                       |                       |                       |                     |                                |                  |
| 4        | Total. Add lines 1 through 3   | 222,785.              | 270,673.              | 287,973.              | 1835437.            | 2517963.                       | 5134831.         |
|          | The portion of total contributions   |                       |                       |                       |                     |                                |                  |
|          | by each person (other than a   |                       |                       |                       |                     |                                |                  |
|          | governmental unit or publicly  |                       |                       |                       |                     |                                |                  |
|          | supported organization) included   |                       |                       |                       |                     |                                |                  |
|          | on line 1 that exceeds 2% of the   |                       |                       |                       |                     |                                |                  |
|          | amount shown on line 11,   |                       |                       |                       |                     |                                |                  |
|          | column (f)   |                       |                       |                       |                     |                                |                  |
| 6        | Public support. Subtract line 5 from line 4.                                       |                       |                       |                       |                     |                                | 5134831.         |
| Sec      | ction B. Total Support   |                       |                       |                       |                     |                                |                  |
| Cale     | ndar year (or fiscal year beginning in)  | (a) 2019              | <b>(b)</b> 2020       | (c) 2021              | (d) 2022            | (e) 2023                       | <b>(f)</b> Total |
| 7        | Amounts from line 4  | 222,785.              | 270,673.              | 287,973.              | 1835437.            | 2517963.                       | 5134831.         |
| 8        | Gross income from interest,  |                       |                       |                       |                     |                                |                  |
|          | dividends, payments received on  |                       |                       |                       |                     |                                |                  |
|          | securities loans, rents, royalties,  |                       |                       |                       |                     |                                |                  |
|          | and income from similar sources $\dots$  | 34.                   | 35.                   | 15.                   | 104.                | 262.                           | 450.             |
| 9        | Net income from unrelated business   |                       |                       |                       |                     |                                |                  |
|          | activities, whether or not the   |                       |                       |                       |                     |                                |                  |
|          | business is regularly carried on   |                       |                       |                       |                     |                                |                  |
| 10       | Other income. Do not include gain  |                       |                       |                       |                     |                                |                  |
|          | or loss from the sale of capital   |                       |                       |                       |                     |                                |                  |
|          | assets (Explain in Part VI.)   |                       |                       |                       |                     |                                |                  |
| 11       | Total support. Add lines 7 through 10  |                       |                       |                       |                     |                                | 5135281.         |
|          | Gross receipts from related activities,  |                       | ,                     |                       |                     | 12                             |                  |
| 13       | First 5 years. If the Form 990 is for the  | ne organization's fir | rst, second, third, 1 | ourth, or fifth tax y | ear as a section 5/ | 01(c)(3)                       |                  |
| <u> </u> | organization, check this box and stor  |                       |                       |                       |                     |                                |                  |
|          | ction C. Computation of Publi  |                       | -                     |                       |                     |                                | 99.99 %          |
|          | Public support percentage for 2023 (I  |                       |                       |                       |                     | 14                             | <u> </u>         |
|          | Public support percentage from 2022  |                       |                       |                       |                     | 15                             |                  |
| 108      | 33 1/3% support test - 2023. If the other have The experimentiate multilized       |                       |                       |                       |                     |                                | V                |
| h        | stop here. The organization qualifies  |                       | •                     |                       |                     | ar mara abaali thi             |                  |
| D        | 33 1/3% support test - 2022. If the c  |                       |                       | 1                     |                     |                                |                  |
| 47-      | and <b>stop here.</b> The organization qual  |                       |                       |                       |                     | ad line 14 is 100/ 4           |                  |
| 178      | <b>10% -facts-and-circumstances test</b><br>and if the organization meets the fact |                       |                       |                       |                     |                                |                  |
|          | -  |                       |                       | -                     | -                   | -                              |                  |
| h        | meets the facts-and-circumstances te<br>10% -facts-and-circumstances test          | -                     |                       | • • • •               | -                   | 7a and line 15 is <sup>-</sup> |                  |
| N        | more, and if the organization meets th   | 0                     |                       |                       |                     |                                |                  |
|          | organization meets the facts-and-circu   |                       |                       |                       |                     |                                |                  |
| 18       | Private foundation. If the organization  |                       | •                     |                       |                     |                                |                  |
|          |  |                       |                       | ., ,                  | ,                   |                                | (Form 990) 2023  |

| Schedule A |         |                |                          | Foundation       |                   |
|------------|---------|----------------|--------------------------|------------------|-------------------|
| Part III   | Support | : Schedule for | <sup>r</sup> Organizatio | ons Described in | Section 509(a)(2) |

Vasudha Foundation USA Inc

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

| Sec   | ction A. Public Support  |                       |                      |                           |                     |                 |                       |
|-------|--|-----------------------|----------------------|---------------------------|---------------------|-----------------|-----------------------|
| Cale  | ndar year (or fiscal year beginning in)  | (a) 2019              | (b) 2020             | (c) 2021                  | (d) 2022            | (e) 2023        | (f) Total             |
| 1     | Gifts, grants, contributions, and  |                       |                      |                           |                     |                 |                       |
|       | membership fees received. (Do not  |                       |                      |                           |                     |                 |                       |
|       | include any "unusual grants.")   |                       |                      |                           |                     |                 |                       |
| 2     | Gross receipts from admissions,<br>merchandise sold or services per-<br>formed, or facilities furnished in<br>any activity that is related to the<br>organization's tax-exempt purpose |                       |                      |                           |                     |                 |                       |
| 3     | Gross receipts from activities that  |                       |                      |                           |                     |                 |                       |
|       | are not an unrelated trade or bus-   |                       |                      |                           |                     |                 |                       |
| 4     | Tax revenues levied for the organ  |                       |                      |                           |                     |                 |                       |
| •     | ization's benefit and either paid to<br>or expended on its behalf  |                       |                      |                           |                     |                 |                       |
| 5     | The value of services or facilities  |                       |                      |                           |                     |                 |                       |
| Ū     | furnished by a governmental unit to  |                       |                      |                           |                     |                 |                       |
|       | the organization without charge  |                       |                      |                           |                     |                 |                       |
| 6     | Total. Add lines 1 through 5   |                       |                      |                           |                     |                 |                       |
| 7a    | Amounts included on lines 1, 2, and 3 received from disgualified persons   |                       |                      |                           |                     |                 |                       |
| b     | Amounts included on lines 2 and 3 received<br>from other than disqualified persons that<br>exceed the greater of \$5,000 or 1% of the<br>amount on line 13 for the year                |                       |                      |                           |                     |                 |                       |
| c     | Add lines 7a and 7b  |                       |                      |                           |                     |                 |                       |
|       | Public support. (Subtract line 7c from line 6.)  |                       |                      |                           |                     |                 |                       |
| Sec   | ction B. Total Support   |                       |                      |                           |                     |                 |                       |
| Cale  | ndar year (or fiscal year beginning in)  | (a) 2019              | <b>(b)</b> 2020      | (c) 2021                  | (d) 2022            | (e) 2023        | (f) Total             |
| 9     | Amounts from line 6  |                       |                      |                           |                     |                 |                       |
| 10a   | Gross income from interest,<br>dividends, payments received on<br>securities loans, rents, royalties,<br>and income from similar sources   |                       |                      |                           |                     |                 |                       |
| b     | Unrelated business taxable income  |                       |                      |                           |                     |                 |                       |
|       | (less section 511 taxes) from businesses   |                       |                      |                           |                     |                 |                       |
|       | acquired after June 30, 1975   |                       |                      |                           |                     |                 |                       |
| c     | Add lines 10a and 10b  |                       |                      |                           |                     |                 |                       |
|       | Net income from unrelated business<br>activities not included on line 10b,<br>whether or not the business is<br>regularly carried on   |                       |                      |                           |                     |                 |                       |
| 12    | Other income. Do not include gain<br>or loss from the sale of capital<br>assets (Explain in Part VI.)  |                       |                      |                           |                     |                 |                       |
| 13    | Total support. (Add lines 9, 10c, 11, and 12.)   |                       |                      |                           |                     |                 |                       |
| 14    | First 5 years. If the Form 990 is for the  | he organization's fi  | rst, second, third,  | fourth, or fifth tax      | year as a section 5 | 501(c)(3) organ | ization,              |
|       | check this box and stop here   |                       |                      |                           |                     |                 |                       |
| Sec   | ction C. Computation of Publ   | ic Support Per        | rcentage             |                           |                     |                 |                       |
| 15    | Public support percentage for 2023 (   | line 8, column (f), d | livided by line 13,  | column (f))               |                     | 15              | %                     |
|       | Public support percentage from 2022  |                       |                      |                           |                     | 16              | %                     |
|       | ction D. Computation of Inves  |                       | •                    |                           |                     |                 |                       |
| 17    | Investment income percentage for 2   | 023 (line 10c, colur  | mn (f), divided by l | ne 13, column (f))        |                     | 17              | %                     |
|       | Investment income percentage from  |                       |                      |                           |                     | 18              | %                     |
| 19a   | 33 1/3% support tests - 2023. If the   |                       |                      |                           |                     |                 | ne 17 is not          |
|       | more than 33 1/3%, check this box a  |                       |                      |                           |                     |                 |                       |
| b     | <b>33 1/3% support tests - 2022.</b> If the  | -                     |                      |                           |                     |                 |                       |
|       | line 18 is not more than 33 1/3%, che  |                       |                      |                           |                     |                 |                       |
| 20    | Private foundation. If the organization  | on did not check a    | box on line 14, 19   | <u>a, or 19b, check t</u> | his box and see ins |                 |                       |
| 33202 | 23 12-21-23  |                       | 15                   |                           |                     | Sched           | ule A (Form 990) 2023 |

Schedule A (Form 990) 2023

Part IV Supporting Organizations

Section A. All Supporting Organizations

3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a

### 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.

Vasudha Foundation USA Inc

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? // "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- **5a** Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes." answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to 6 anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes." complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disgualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - b Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to determine whether the organization had excess business holdings.)

1

2

Yes No

9b

9c

10a

| dule A (F | orm 990 | 2023 | Vasudha | Foundation | USA | Inc |  |
|-----------|---------|------|---------|------------|-----|-----|--|
|-----------|---------|------|---------|------------|-----|-----|--|

2

1

Yes No

| Par | t IV                     | Supporting Organizations (continued)  |     |     |    |
|-----|--------------------------|---|-----|-----|----|
|     |                          |   |     | Yes | No |
| 11  | Has th                   | he organization accepted a gift or contribution from any of the following persons?  |     |     |    |
| а   | A pers                   | son who directly or indirectly controls, either alone or together with persons described on lines 11b and   |     |     |    |
|     | 11c b                    | elow, the governing body of a supported organization?   | 11a |     |    |
| b   | A fam                    | ily member of a person described on line 11a above?   | 11b |     |    |
| с   | A 35%                    | 6 controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide  |     |     |    |
|     |                          | in Part VI.   | 11c |     |    |
| Sec | tion E                   | 3. Type I Supporting Organizations  |     |     |    |
|     |                          |   |     | Yes | No |
| 1   | more<br>direct<br>effect | the governing body, members of the governing body, officers acting in their official capacity, or membership of one or<br>supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,<br>ors, or trustees at all times during the tax year? <i>If</i> " <i>No</i> ," <i>describe in</i> <b>Part VI</b> <i>how the supported organization(s)</i><br><i>ively operated, supervised, or controlled the organization's activities. If the organization had more than one supported</i><br><i>ization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the</i> |     |     |    |
|     |                          | orted organizations and what conditions or restrictions, if any, applied to such powers during the tax year.  | 1   |     |    |
| 0   |                          | a arganization onerate for the henefit of any symposized arganization other than the symposized   |     |     |    |

2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,

supervised or controlled the supporting organization

| Section C. Type II Supporting Organizations |
|---|
|---|

1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in* **Part VI** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)* 

| Section D | . All Type III | Supporting | Organizations |
|-----------|----------------|------------|---------------|

|   |  |   | Yes | No |
|---|--|---|-----|----|
| 1 | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the         |   |     |    |
|   | organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax  |   |     |    |
|   | year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the |   |     |    |
|   | organization's governing documents in effect on the date of notification, to the extent not previously provided?       | 1 |     |    |
| 2 | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported       |   |     |    |
|   | organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how     |   |     |    |
|   | the organization maintained a close and continuous working relationship with the supported organization(s).            | 2 |     |    |
| 3 | By reason of the relationship described on line 2, above, did the organization's supported organizations have a        |   |     |    |
|   | significant voice in the organization's investment policies and in directing the use of the organization's             |   |     |    |
|   | income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's           |   |     |    |
|   | supported organizations played in this regard.   | 3 |     |    |

### Section E. Type III Functionally Integrated Supporting Organizations

| I Check the box next to the method that the organization used to satisfy the integral Part Lest during the year 1500 IIISU UC | I Part Test during the year (see instructions). | Check the box next to the method that the organization used to satisfy the Integral P |
|---|---|---|
|---|---|---|

- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

| с | The organization supported a governmental entity. | Describe in Part VI how you supported a governmental entity (see instructions). |  |
|---|---|---|--|
|   |   |   |  |

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- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**

**a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "No" provide details in **Part VI.** 

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.* 332025 12-21-23

 Yes
 No

 2a

 2a

 2b

 2b

 3a

 3b

| Schedule A | (Form 9 | 90) 202 |
|------------|---------|---------|
|------------|---------|---------|

# Schedule A (Form 990) 2023 Vasudha Foundation USA Inc Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

|      |  | <u> </u>   |                       |                                |
|------|--|------------|-----------------------|--------------------------------|
| 1    | Check here if the organization satisfied the Integral Part Test as a qualifyin |            |                       | Part VI). See instructions.    |
|      | All other Type III non-functionally integrated supporting organizations must   | t complete | Sections A through E. | (-) -                          |
| Sect | ion A - Adjusted Net Income  |            | (A) Prior Year        | (B) Current Year<br>(optional) |
| _1   | Net short-term capital gain  | 1          |                       |                                |
| 2    | Recoveries of prior-year distributions   | 2          |                       |                                |
| 3    | Other gross income (see instructions)  | 3          |                       |                                |
| 4    | Add lines 1 through 3.   | 4          |                       |                                |
| 5    | Depreciation and depletion   | 5          |                       |                                |
| 6    | Portion of operating expenses paid or incurred for production or               |            |                       |                                |
|      | collection of gross income or for management, conservation, or                 |            |                       |                                |
|      | maintenance of property held for production of income (see instructions)       | 6          |                       |                                |
| 7    | Other expenses (see instructions)  | 7          |                       |                                |
| 8    | Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)                   | 8          |                       |                                |
| Sect | ion B - Minimum Asset Amount   |            | (A) Prior Year        | (B) Current Year<br>(optional) |
| 1    | Aggregate fair market value of all non-exempt-use assets (see                  |            |                       |                                |
|      | instructions for short tax year or assets held for part of year):              |            |                       |                                |
| а    | Average monthly value of securities  | 1a         |                       |                                |
| b    | Average monthly cash balances  | 1b         |                       |                                |
| с    | Fair market value of other non-exempt-use assets                               | 1c         |                       |                                |
| d    | Total (add lines 1a, 1b, and 1c)   | 1d         |                       |                                |
| е    | Discount claimed for blockage or other factors                                 |            |                       |                                |
|      | (explain in detail in Part VI):  |            |                       |                                |
| 2    | Acquisition indebtedness applicable to non-exempt-use assets                   | 2          |                       |                                |
| 3    | Subtract line 2 from line 1d.  | 3          |                       |                                |
| 4    | Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,    |            |                       |                                |
|      | see instructions).   | 4          |                       |                                |
| 5    | Net value of non-exempt-use assets (subtract line 4 from line 3)               | 5          |                       |                                |
| 6    | Multiply line 5 by 0.035.  | 6          |                       |                                |
| 7    | Recoveries of prior-year distributions   | 7          |                       |                                |
| 8    | Minimum Asset Amount (add line 7 to line 6)                                    | 8          |                       |                                |
| Sect | ion C - Distributable Amount   |            |                       | Current Year                   |
| 1    | Adjusted net income for prior year (from Section A, line 8, column A)          | 1          |                       |                                |
| 2    | Enter 0.85 of line 1.  | 2          |                       |                                |
| 3    | Minimum asset amount for prior year (from Section B, line 8, column A)         | 3          |                       |                                |
| 4    | Enter greater of line 2 or line 3.   | 4          |                       |                                |
| 5    | Income tax imposed in prior year   | 5          |                       |                                |
| 6    | Distributable Amount. Subtract line 5 from line 4, unless subject to           |            |                       |                                |
|      | emergency temporary reduction (see instructions).                              | 6          |                       |                                |
| -    |  |            | 1 <b>T</b> III II     |                                |

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see 7 instructions).

Schedule A (Form 990) 2023

332026 12-21-23

 Schedule A (Form 990) 2023
 Vasudha Foundation USA Inc
 4

 Part V
 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)
 (continued)

|  | <u>()(.)</u>                  |                               | ieu) |                                  |
|--|-------------------------------|-------------------------------|------|----------------------------------|
| Section D - Distributions  |                               | ·                             |      | Current Year                     |
| 1 Amounts paid to supported organizations to accomplish exe                    | mpt purposes                  |                               | 1    |                                  |
| 2 Amounts paid to perform activity that directly furthers exemp                | ot purposes of supported      |                               |      |                                  |
| organizations, in excess of income from activity                               |                               |                               | 2    |                                  |
| 3 Administrative expenses paid to accomplish exempt purpose                    | es of supported organizations | 3                             | 3    |                                  |
| 4 Amounts paid to acquire exempt-use assets                                    |                               |                               | 4    |                                  |
| 5 Qualified set-aside amounts (prior IRS approval required - pr                | ovide details in Part VI)     |                               | 5    |                                  |
| 6 Other distributions ( <i>describe in</i> <b>Part VI</b> ). See instructions. |                               |                               | 6    |                                  |
| 7 Total annual distributions. Add lines 1 through 6.                           |                               |                               | 7    |                                  |
| 8 Distributions to attentive supported organizations to which the              | he organization is responsive |                               |      |                                  |
| (provide details in <b>Part VI</b> ). See instructions.                        |                               |                               | 8    |                                  |
| 9 Distributable amount for 2023 from Section C, line 6                         |                               |                               | 9    |                                  |
| 10 Line 8 amount divided by line 9 amount                                      |                               |                               | 10   |                                  |
| •  | (i)                           | (ii)                          |      | (iii)                            |
| Section E - Distribution Allocations (see instructions)                        | Excess Distributions          | Underdistribution<br>Pre-2023 | าร   | Distributable<br>Amount for 2023 |
| 1 Distributable amount for 2023 from Section C, line 6                         |                               |                               |      |                                  |
| 2 Underdistributions, if any, for years prior to 2023 (reason-                 |                               |                               |      |                                  |
| able cause required - explain in Part VI). See instructions.                   |                               |                               |      |                                  |
| 3 Excess distributions carryover, if any, to 2023                              |                               |                               |      |                                  |
| a From 2018  |                               |                               |      |                                  |
| b From 2019  |                               |                               |      |                                  |
| c From 2020  |                               |                               |      |                                  |
| d From 2021  |                               |                               |      |                                  |
| e From 2022  |                               |                               |      |                                  |
| f Total of lines 3a through 3e   |                               |                               |      |                                  |
| g Applied to underdistributions of prior years                                 |                               |                               |      |                                  |
| h Applied to 2023 distributable amount   |                               |                               |      |                                  |
| i Carryover from 2018 not applied (see instructions)                           |                               |                               |      |                                  |
| j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.                       |                               |                               |      |                                  |
| 4 Distributions for 2023 from Section D,                                       |                               |                               |      |                                  |
| line 7: \$   |                               |                               |      |                                  |
| a Applied to underdistributions of prior years                                 |                               |                               |      |                                  |
| <b>b</b> Applied to 2023 distributable amount                                  |                               |                               |      |                                  |
| c Remainder. Subtract lines 4a and 4b from line 4.                             |                               |                               |      |                                  |
| 5 Remaining underdistributions for years prior to 2023, if                     |                               |                               |      |                                  |
| any. Subtract lines 3g and 4a from line 2. For result greater                  |                               |                               |      |                                  |
| than zero, explain in <b>Part VI.</b> See instructions.                        |                               |                               |      |                                  |
| 6 Remaining underdistributions for 2023. Subtract lines 3h                     |                               |                               |      |                                  |
| and 4b from line 1. For result greater than zero, explain in                   |                               |                               |      |                                  |
| Part VI. See instructions.   |                               |                               |      |                                  |
| 7 Excess distributions carryover to 2024. Add lines 3j                         |                               |                               |      |                                  |
| and 4c.  |                               |                               |      |                                  |
| 8 Breakdown of line 7:   |                               |                               |      |                                  |
| a Excess from 2019   |                               |                               |      |                                  |
| b Excess from 2020   |                               |                               |      |                                  |
| c Excess from 2021   |                               |                               |      |                                  |
|  |                               |                               |      |                                  |

Schedule A (Form 990) 2023

d Excess from 2022 e Excess from 2023

| Schedule A     | (Form 990) 2023   | Vasudh   | a Foundatio   | on USA Inc  |  | 46-3275286  | Page <b>8</b> |
|----------------|---|--|---|---|--|---|---------------|
| Part VI        | Supplemental<br>Part IV, Section A,<br>line 1; Part IV, Sec | <b>Information.</b> Pro<br>lines 1, 2, 3b, 3c, 4b<br>tion D, lines 2 and 3;<br>6, and 8; and Part V, | ovide the explanation<br>, 4c, 5a, 6, 9a, 9b, 9c<br>Part IV, Section E, lir | s required by Part I<br>c, 11a, 11b, and 11c<br>nes 1c, 2a, 2b, 3a, a | l, line 10; Part II, line 17a<br>; Part IV, Section B, lines | or 17b; Part III, line 12;<br>s 1 and 2; Part IV, Section<br>t V, Section B, line 1e; Par | C,            |
|                |   |  |   |   |  |   |               |
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|                |   |  |   |   |  |   |               |
|                |   |  |   |   |  |   |               |
| 332028 12-21-2 | 3   |  |   |   |  | Schedule A (Form 99   | 90) 2023      |

\*\* PUBLIC DISCLOSURE COPY \*\*

## **Schedule of Contributors**

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2023

Employer identification number

| (Form | 990) |  |
|-------|------|--|
|       |      |  |

Schedule B

Department of the Treasury Internal Revenue Service

Name of the organization

| Vasudha                        | Foundation | USA | Inc |
|--------------------------------|------------|-----|-----|
| Organization type (check one): |            |     |     |

| 46-3275286 |
|------------|
|------------|

| Filers of:         | Section:   |
|--------------------|--|
| Form 990 or 990-EZ | $\fbox{3}$ 501(c)( 3) (enter number) organization                                |
|                    | 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation |
|                    | 527 political organization   |
| Form 990-PF        | 501(c)(3) exempt private foundation  |
|                    | 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**

X 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), 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 totaling \$5,000 or more during the year for an *exclusively* set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in t

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), 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).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Name of organization

Employer identification number

-

46-3275286

### Vasudha Foundation USA Inc

| Part I     | Contributors (see instructions). Use duplicate copies of Part I if additional | space is needed.           |  |
|------------|---|----------------------------|--|
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c)<br>Total contributions | (d)<br>Type of contribution  |
| 1          |   | \$ <u>1,298,816.</u>       | Person X<br>Payroll<br>Noncash<br>(Complete Part II for<br>noncash contributions.) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c)<br>Total contributions | (d)<br>Type of contribution  |
| 2          |   | \$ <u>887,500.</u>         | Person X<br>Payroll<br>Noncash<br>(Complete Part II for<br>noncash contributions.) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c)<br>Total contributions | (d)<br>Type of contribution  |
| 3          |   | \$270,000.                 | Person X<br>Payroll<br>Noncash<br>(Complete Part II for<br>noncash contributions.) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c)<br>Total contributions | (d)<br>Type of contribution  |
| 4          |   | \$61,647.                  | Person X<br>Payroll<br>Noncash<br>(Complete Part II for<br>noncash contributions.) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c)<br>Total contributions | (d)<br>Type of contribution  |
|            |   | \$                         | Person<br>Payroll<br>Noncash<br>(Complete Part II for<br>noncash contributions.)   |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c)<br>Total contributions | (d)<br>Type of contribution  |
|            |   | \$                         | Person<br>Payroll<br>Noncash<br>(Complete Part II for<br>noncash contributions.)   |

Schedule B (Form 990) (2023)

Page **2** 

323452 12-26-23

| Schedule | В | (Form | 990) | (2023) |
|----------|---|-------|------|--------|
|----------|---|-------|------|--------|

Name of organization

Page **3** 

Vasudha Foundation USA Inc

Employer identification number

46-3275286

| Part II                      | Noncash Property (see instructions). Use duplicate copies of Pa | art II if additional space is needed.           | 1                    |
|------------------------------|---|---|----------------------|
| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given                    | (c)<br>FMV (or estimate)<br>(See instructions.) | (d)<br>Date received |
|                              |   |   |                      |
|                              |   | \$  |                      |
| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given                    | (c)<br>FMV (or estimate)<br>(See instructions.) | (d)<br>Date received |
|                              |   |   |                      |
|                              |   | \$  |                      |
| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given                    | (c)<br>FMV (or estimate)<br>(See instructions.) | (d)<br>Date received |
|                              |   |   |                      |
|                              |   | \$  |                      |
| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given                    | (c)<br>FMV (or estimate)<br>(See instructions.) | (d)<br>Date received |
|                              |   |   |                      |
|                              |   | \$  |                      |
| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given                    | (c)<br>FMV (or estimate)<br>(See instructions.) | (d)<br>Date received |
|                              |   |   |                      |
|                              |   | \$  |                      |
| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given                    | (c)<br>FMV (or estimate)<br>(See instructions.) | (d)<br>Date received |
|                              |   |   |                      |
|                              |   | \$  |                      |

| Schedule        | B (Form 990) (2023)  |  |                                    |  | Page <b>4</b> |  |
|-----------------|--|--|------------------------------------|--|---------------|--|
| Name of o       | organization   |  |                                    | Employer identification                          | number        |  |
| Vasudi          | ha Foundation USA Inc  |  |                                    | 46-3275286                                       |               |  |
| Part III        | Exclusively religious, charitable, etc., contribution  |  |                                    | ), (8), or (10) that total more than \$1,000 for | r the year    |  |
|                 | from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, completing Part III, enter the total of exclusively religious. | haritable, etc., contributions of \$1,00 | <b>10 or less</b> for the year     | . (Enter this info. once.)                       |               |  |
| (a) No.         | Use duplicate copies of Part III if additional s   | space is needed.                         |                                    |  |               |  |
| from<br>Part I  | (b) Purpose of gift  | (c) Use of gift                          |                                    | (d) Description of how gift is held              | b             |  |
| <u> </u>        |  |  |                                    |  |               |  |
|                 |  |  |                                    |  |               |  |
|                 |  |  |                                    |  |               |  |
|                 |  | (e) Transfer (                           | of gift                            |  |               |  |
|                 |  | (-)                                      |                                    |  |               |  |
|                 | Transferee's name, address, a  | nd <b>ZIP</b> + 4                        | Relati                             | onship of transferor to transferee               |               |  |
|                 |  | _  |                                    |  |               |  |
|                 |  |  |                                    |  |               |  |
| (a) No.         |  |  |                                    |  |               |  |
| from<br>Part I  | (b) Purpose of gift  | (c) Use of gift                          |                                    | (d) Description of how gift is held              | d             |  |
|                 |  |  |                                    |  |               |  |
|                 |  |  |                                    |  |               |  |
|                 |  |  | [                                  |  |               |  |
|                 |  | (e) Transfer (                           | of gift                            |  |               |  |
|                 |  |  |                                    |  |               |  |
|                 | Transferee's name, address, a  | Relati                                   | onship of transferor to transferee |  |               |  |
|                 |  |  |                                    |  |               |  |
|                 |  |  |                                    |  |               |  |
| (a) No.         |  |  |                                    |  |               |  |
| `from<br>Part I | (b) Purpose of gift  | (c) Use of gift                          |                                    | (d) Description of how gift is held              | d             |  |
|                 |  |  |                                    |  |               |  |
|                 |  |  |                                    |  |               |  |
|                 |  |  |                                    |  |               |  |
|                 |  | (e) Transfer (                           | of gift                            |  |               |  |
|                 | Transferee's name, address, a  | nd ZIP + 4                               | Relati                             | onship of transferor to transferee               |               |  |
|                 |  | _  |                                    |  |               |  |
|                 |  | -  |                                    |  |               |  |
|                 |  |  |                                    |  |               |  |
| (a) No.<br>from | (b) Purpose of gift  | (c) Use of gift                          |                                    | (d) Description of how gift is held              | d             |  |
| Part I          |  |  |                                    |  |               |  |
|                 |  |  |                                    |  |               |  |
|                 |  |  |                                    |  |               |  |
|                 |  | (e) Transfer (                           | of gift                            |  |               |  |
|                 |  |  | Si girt                            |  |               |  |
|                 | Transferee's name, address, a  | nd ZIP + 4                               | Relati                             | onship of transferor to transferee               |               |  |
|                 | <u> </u>   | [  |                                    |  |               |  |
|                 |  | [  |                                    |  |               |  |
|                 |  |  |                                    |  |               |  |

Schedule B (Form 990) (2023)

### 09150429 795476 106872

|       |                        | Supplemente                                     | L Einensiel Stateme   | nto            |                   | OMB No. 15                    | 45-0047        |
|-------|------------------------|---|---|----------------|-------------------|-------------------------------|----------------|
|       | HEDULE D               |   | al Financial Stateme  |                |                   |                               | <u>)</u><br>)) |
| (Forn | n 990)                 |   | nization answered "Yes" on Form 9<br>, 11a, 11b, 11c, 11d, 11e, 11f, 12a, o |                |                   |                               | 23             |
|       | ment of the Treasury   | A   | ttach to Form 990.  |                |                   | Open to                       |                |
|       | Revenue Service        |   | 0 for instructions and the latest info                                      | ormation.      | <b>F</b> armeland | Inspecti                      |                |
| Nam   | e of the organizati    | Vasudha Foundation                              | IISA Inc  |                |                   | er identification<br>46-32752 |                |
| Par   | tl Organiza            | ations Maintaining Donor Advise                 |   | nds or Ac      |                   |                               |                |
|       |                        | n answered "Yes" on Form 990, Part IV, lin      |   |                | oountor           | Outplete if th                | C              |
|       |                        |   | (a) Donor advised funds   | (              | b) Funds a        | and other accou               | nts            |
| 1     | Total number at er     | nd of year                                      |   | · · ·          | ,                 |                               |                |
| 2     |                        | f contributions to (during year)                |   |                |                   |                               |                |
| 3     |                        | f grants from (during year)                     |   |                |                   |                               |                |
| 4     |                        | t end of year                                   |   |                |                   |                               |                |
| 5     |                        | on inform all donors and donor advisors in v    |   | dvised fund    | s                 |                               |                |
|       | -                      | on's property, subject to the organization's    | -   |                |                   | Yes                           | No No          |
| 6     |                        | on inform all grantees, donors, and donor a     |   |                |                   |                               |                |
|       | for charitable purp    | ooses and not for the benefit of the donor o    | r donor advisor, or for any other purp                                      | ose conferri   | ng                |                               |                |
|       | impermissible priv     | ate benefit?                                    | -   |                |                   | 🔄 Yes                         | No No          |
| Par   | t II Conserv           | ation Easements. Complete if the org            | ganization answered "Yes" on Form 9   | 90, Part IV,   | line 7.           |                               |                |
| 1     | Purpose(s) of cons     | servation easements held by the organization    | on (check all that apply).  |                |                   |                               |                |
|       | Preservation           | n of land for public use (for example, recrea   | tion or education) Preservation   | on of a histo  | rically imp       | ortant land area              |                |
|       | Protection o           | f natural habitat                               | Preservatio   | on of a certif | ied histori       | c structure                   |                |
|       | Preservation           | n of open space                                 |   |                |                   |                               |                |
| 2     | Complete lines 2a      | through 2d if the organization held a qualif    | ied conservation contribution in the f                                      | orm of a cor   | servation         | easement on th                | e last         |
|       | day of the tax year    | r.  |   |                | Hel               | ld at the End of th           | e Tax Year     |
| а     | Total number of co     | onservation easements                           |   |                | 2a                |                               |                |
| b     | Total acreage rest     | ricted by conservation easements                |   |                | 2b                |                               |                |
| с     | Number of conser       | vation easements on a certified historic stru   | ucture included on line 2a  |                | 2c                |                               |                |
| d     | Number of conser       | vation easements included on line 2c acqui      | ired after July 25, 2006, and not   |                |                   |                               |                |
|       | on a historic struc    | ture listed in the National Register            |   |                | 2d                |                               |                |
| 3     | Number of conser       | vation easements modified, transferred, rele    | eased, extinguished, or terminated by                                       | y the organiz  | ation duri        | ng the tax                    |                |
|       | year                   |   |   |                |                   |                               |                |
| 4     | Number of states       | where property subject to conservation eas      | sement is located   |                |                   |                               |                |
| 5     | Does the organiza      | tion have a written policy regarding the per    | iodic monitoring, inspection, handling                                      | g of           |                   |                               |                |
|       | violations, and enf    | orcement of the conservation easements it       | holds?  |                |                   | Yes                           | No             |
| 6     | Staff and voluntee     | r hours devoted to monitoring, inspecting,      | handling of violations, and enforcing                                       | conservation   | n easemer         | nts during the ye             | ar             |
|       |                        |   |   |                |                   |                               |                |
| 7     | Amount of expens       | es incurred in monitoring, inspecting, hand     | lling of violations, and enforcing cons                                     | ervation eas   | ements dı         | uring the year                |                |
|       |                        |   |   |                |                   |                               |                |
| 8     | Does each conser       | vation easement reported on line 2d above       | satisfy the requirements of section 1                                       | 70(h)(4)(B)(i) |                   |                               |                |
|       | and section 170(h)     |   |   |                |                   | Ves                           | No             |
| 9     | In Part XIII, descrit  | be how the organization reports conservation    | on easements in its revenue and expe  | ense stateme   | ent and           |                               |                |
|       | balance sheet, and     | d include, if applicable, the text of the footn | ote to the organization's financial sta                                     | tements tha    | t describe        | es the                        |                |
|       | organization's acc     | ounting for conservation easements.             | <b>A</b>  |                |                   |                               |                |
| Par   |                        | ations Maintaining Collections of               |   | r Other Si     | milar As          | ssets.                        |                |
|       | Complete in            | f the organization answered "Yes" on Form       | 990, Part IV, line 8.   |                |                   |                               |                |
| 1a    | If the organization    | elected, as permitted under FASB ASC 95         | 8, not to report in its revenue stateme                                     | ent and bala   | nce sheet         | works                         |                |
|       | of art, historical tre | easures, or other similar assets held for pub   | lic exhibition, education, or research                                      | in furtheran   | ce of publ        | ic                            |                |
|       | service, provide in    | Part XIII the text of the footnote to its finan | ncial statements that describes these                                       | items.         |                   |                               |                |
| b     | If the organization    | elected, as permitted under FASB ASC 95         | 8, to report in its revenue statement a                                     | and balance    | sheet wor         | rks of                        |                |

| 5   |                |
|---|----------------|
| art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of p | ublic service, |
| provide the following amounts relating to these items.  |                |
| (i) Revenue included on Form 990, Part VIII, line 1   | \$             |
|   | •              |

| 33205 | 1 09-28-23   |                            |
|-------|--|----------------------------|
| LHA   | For Paperwork Reduction Act Notice, see the Instructions for Form 990.   | Schedule D (Form 990) 2023 |
| b     | Assets included in Form 990, Part X  | \$                         |
| а     | Revenue included on Form 990, Part VIII, line 1  | \$                         |
|       | the following amounts required to be reported under FASB ASC 958 relating to these items:                                    |                            |
| 2     | If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide | de                         |
|       | (ii) Assets included in Form 990, Part X   | \$                         |
|       |  | Ψ                          |

| Sche   |  | Foundation             |           |                 |                |               | 4                 | 16-32       | 75286            | 5 Р    | age <b>2</b> |
|--------|--|------------------------|-----------|-----------------|----------------|---------------|-------------------|-------------|------------------|--------|--------------|
| Par    | t III Organizations Maintaining Co   | ollections of Art      | , Hist    | orical Tre      | easures, or    | r Other S     | Similar           | Assets      | <b>i</b> (contir | nued)  |              |
| 3      | Using the organization's acquisition, accessio   | n, and other records   | , checl   | k any of the f  | following that | make sigr     | nificant u        | se of its   |                  |        |              |
|        | collection items (check all that apply).   |                        |           |                 |                |               |                   |             |                  |        |              |
| а      | Public exhibition  | d                      |           | Loan or exc     | hange progra   | am            |                   |             |                  |        |              |
| b      | Scholarly research   | е                      |           | Other           |                |               |                   |             |                  |        |              |
| с      | Preservation for future generations  |                        |           |                 |                |               |                   |             |                  |        |              |
| 4      | Provide a description of the organization's col  | lections and explain   | how th    | ney further th  | ne organizatio | n's exemp     | ot purpos         | e in Part   | XIII.            |        |              |
| 5      | During the year, did the organization solicit or   | receive donations of   | f art, hi | istorical treas | sures, or othe | er similar as | ssets             |             |                  |        |              |
|        | to be sold to raise funds rather than to be main   | intained as part of th | e orga    | nization's co   | llection?      |               |                   |             | Yes              |        | No           |
| Par    | t IV Escrow and Custodial Arrang   | jements Complete       | e if the  | organizatior    | n answered "   | Yes" on Fo    | orm 990,          | Part IV, li | ne 9, or         |        |              |
|        | reported an amount on Form 990, Part   | : X, line 21.          |           |                 |                |               |                   |             |                  |        |              |
| 1a     | Is the organization an agent, trustee, custodia  | ın, or other intermedi | ary for   | contributior    | ns or other as | sets not in   | cluded            |             | _                |        | _            |
|        | on Form 990, Part X?   |                        |           |                 |                |               |                   | 🗆           | Yes              |        | No           |
| b      | If "Yes," explain the arrangement in Part XIII a   | nd complete the follo  | owing     | table:          |                |               |                   |             |                  |        |              |
|        |  |                        |           |                 |                |               |                   |             | Amoun            | t      |              |
| С      | Beginning balance  |                        |           |                 |                |               | 1c                |             |                  |        |              |
| d      | Additions during the year  |                        |           |                 |                |               | 1d                |             |                  |        |              |
| е      | Distributions during the year  |                        |           |                 |                |               | 1e                |             |                  |        |              |
| f      | Ending balance   |                        |           |                 |                |               | 1f                |             |                  |        |              |
|        | Did the organization include an amount on Fo   |                        |           |                 |                |               | ?<br>             | L           | Yes              |        |              |
|        | If "Yes," explain the arrangement in Part XIII.  |                        |           |                 |                |               |                   |             |                  |        |              |
| Par    | <b>t V Endowment Funds</b> Complete if t   |                        |           |                 |                |               | J) Throo y        | ears back   | (a) Four         | Vooro  | haali        |
|        |  | (a) Current year       | 1 (a)     | Prior year      | (c) Two year   | S DACK (C     | <b>i)</b> Thee ye | Ears Dack   | (e) Four         | years  | DACK         |
| 1a     | Beginning of year balance  |                        |           |                 |                |               |                   |             |                  |        |              |
| b      | Contributions  |                        |           |                 |                |               |                   |             |                  |        |              |
| с      | Net investment earnings, gains, and losses   |                        |           |                 |                |               |                   |             |                  |        |              |
| d      | Grants or scholarships   |                        |           |                 |                |               |                   |             |                  |        |              |
| е      | Other expenditures for facilities  |                        |           |                 |                |               |                   |             |                  |        |              |
|        | and programs   |                        |           |                 |                |               |                   |             |                  |        |              |
|        | Administrative expenses  |                        |           |                 |                |               |                   |             |                  |        |              |
| g      | End of year balance  |                        | /i:       |                 |                |               |                   |             |                  |        |              |
| 2      | Provide the estimated percentage of the curre  | •                      | -         | g, column (a    | )) held as:    |               |                   |             |                  |        |              |
| a<br>L | Board designated or quasi-endowment  |                        | _%        |                 |                |               |                   |             |                  |        |              |
| u<br>o | Permanent endowment  | %                      |           |                 |                |               |                   |             |                  |        |              |
| С      | ,  | -                      |           |                 |                |               |                   |             |                  |        |              |
| 20     | The percentages on lines 2a, 2b, and 2c should Are there endowment funds not in the posses |                        | ion the   | at are hold ar  | ad administor  | ad for the    |                   |             |                  |        |              |
| Ja     | organization by:   | SIGH OF THE OFGALIZAT  |           | at are neiù ai  |                |               |                   |             | ſ                | Yes    | No           |
|        | (i) Unrelated organizations?   |                        |           |                 |                |               |                   |             | 3a(i)            |        |              |
|        |  |                        |           |                 |                |               |                   |             | 3a(ii)           |        |              |
| b      | If "Yes" on line 3a(ii), are the related organizat   |                        |           |                 |                |               |                   |             |                  |        |              |
| 4      | Describe in Part XIII the intended uses of the   |                        |           |                 |                |               |                   |             |                  |        | <u> </u>     |
| Par    | t VI Land, Buildings, and Equipme  |                        | mont      |                 |                |               |                   |             |                  |        |              |
|        | Complete if the organization answered  |                        | Part IV   | V, line 11a. S  | See Form 990   | , Part X, lir | ne 10.            |             |                  |        |              |
|        | Description of property  | (a) Cost or ot         | her       | (b) Cost        | t or other     | (c) Acc       | cumulate          | d           | (d) Boo          | k valu | e            |
|        |  | basis (investm         |           | • • •           | (other)        | • •           | eciation          | -           | (, 200           |        |              |
| 1a     | Land   |                        |           |                 |                |               |                   |             |                  |        |              |
|        | Buildings  |                        |           |                 |                |               |                   |             |                  |        |              |
|        | Leasehold improvements   |                        |           |                 |                |               |                   |             |                  |        |              |
|        | Equipment  |                        |           | 1               | 2,070.         |               | 2,07              | /0.         |                  |        | 0.           |
|        | Other  |                        |           |                 |                |               |                   |             |                  |        |              |
|        | Add lines 1a through 1e. (Column (d) must ec   | •                      | (, line 1 | 10c. column     | <i>(B</i> ))   |               |                   |             |                  |        | 0.           |
|        |  |                        |           |                 | ,              |               |                   | Schedule    | D (Form          | 1 990) | ) 2023       |

| Part VII               | Investments - Other Securities<br>Complete if the organization answered "Yes" | on Form 990, Part IV, line                | 11b. See Form 990, Part X, line 12.       |                        |
|------------------------|---|---|---|------------------------|
| (a) Descri             | ption of security or category (including name of security)                    | (b) Book value                            | (c) Method of valuation: Cost or en       | d-of-year market value |
| (1) Financ             | ial derivatives   |   |   |                        |
| (2) Closely            | y held equity interests   |   |   |                        |
| (3) Other              |   |   |   |                        |
| (A)                    |   |   |   |                        |
| (B)                    |   |   |   |                        |
| (C)                    |   |   |   |                        |
| (D)                    |   |   |   |                        |
| (E)                    |   |   |   |                        |
| (F)                    |   |   |   |                        |
| (G)                    |   |   |   |                        |
| (H)                    |   |   |   |                        |
|                        | (b) must equal Form 990, Part X, line 12, col. (B))                           |   |   |                        |
| Part VII               | I Investments - Program Related.  | J   |   |                        |
|                        | Complete if the organization answered "Yes"                                   | on Form 990, Part IV, line                | 11c. See Form 990, Part X, line 13.       |                        |
|                        | (a) Description of investment   | (b) Book value                            | (c) Method of valuation: Cost or en       | d-of-year market value |
| (1)                    |   |   |   | •                      |
| (2)                    |   |   |   |                        |
| (3)                    |   |   |   |                        |
| (4)                    |   |   |   |                        |
| (5)                    |   |   |   |                        |
| (6)                    |   |   |   |                        |
| (7)                    |   |   |   |                        |
| (8)                    |   |   |   |                        |
| <u>(8)</u><br>(9)      |   |   |   |                        |
|                        | (b) must equal Form 990, Part X, line 13, col. (B))                           |   |   |                        |
| Part IX                | Complete if the organization answered "Yes"                                   | on Form 990, Part IV, line<br>Description | 11d. See Form 990, Part X, line 15.       | (b) Book value         |
| (1)                    |   |   |   |                        |
| (2)                    |   |   |   |                        |
| (3)                    |   |   |   |                        |
| (4)                    |   |   |   |                        |
| (5)                    |   |   |   |                        |
| (6)                    |   |   |   |                        |
| (7)                    |   |   |   |                        |
| (8)                    |   |   |   |                        |
| (9)                    |   |   |   |                        |
| Total. (Coli<br>Part X | umn (b) must equal Form 990, Part X, line 15, co<br><b>Other Liabilities</b>  |   |   |                        |
|                        | Complete if the organization answered "Yes"                                   | on Form 990, Part IV, line                | 11e or 11f. See Form 990, Part X, line 25 |                        |
| 1.                     | (a) Description of liability  |   |   | (b) Book value         |
| (1) Fe                 | deral income taxes  |   |   |                        |
| (2)                    |   |   |   |                        |
| (3)                    |   |   |   |                        |
| (4)                    |   |   |   |                        |
| (5)                    |   |   |   |                        |
| (6)                    |   |   |   |                        |
| (7)                    |   |   |   |                        |
| (8)                    |   |   |   |                        |
| (9)                    |   |   |   |                        |
|                        | umn (b) must equal Form 990, Part X, line 25, co                              | ы. (В))                                   |   |                        |
|                        | y for uncertain tax positions. In Part XIII, provide                          |   |   | hat reports the        |
|                        | zation's liability for uncertain tax positions under                          |   |   |                        |

Vasudha Foundation USA Inc

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Schedule D (Form 990) 2023

| Sche | dule D (Form 990) 2023 Vasudha Foundation USA                                   | Inc               | 46-3275286 Page 4 |
|------|---|-------------------|-------------------|
| Par  | t XI Reconciliation of Revenue per Audited Financial Stat                       | ements With Reven | ue per Return     |
|      | Complete if the organization answered "Yes" on Form 990, Part IV, lin           | ie 12a.           |                   |
| 1    | Total revenue, gains, and other support per audited financial statements        |                   |                   |
| 2    | Amounts included on line 1 but not on Form 990, Part VIII, line 12:             |                   |                   |
| а    | Net unrealized gains (losses) on investments                                    | 2a                |                   |
| b    | Donated services and use of facilities  | 2b                |                   |
| с    | Recoveries of prior year grants   | 2c                |                   |
| d    | Other (Describe in Part XIII.)  | 2d                |                   |
| е    | Add lines 2a through 2d   |                   |                   |
| 3    | Subtract line 2e from line 1  |                   |                   |
| 4    | Amounts included on Form 990, Part VIII, line 12, but not on line 1:            | 1 1               |                   |
| а    | Investment expenses not included on Form 990, Part VIII, line 7b                | 4a                |                   |
| b    | Other (Describe in Part XIII.)  | 4b                |                   |
| с    | Add lines 4a and 4b   |                   |                   |
| 5    | Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) | )                 |                   |
| Pa   | t XII Reconciliation of Expenses per Audited Financial Sta                      | -                 | nses per Return   |
|      | Complete if the organization answered "Yes" on Form 990, Part IV, lin           | le 12a.           |                   |
| 1    |   |                   |                   |
| 2    | Amounts included on line 1 but not on Form 990, Part IX, line 25:               |                   |                   |
| а    | Donated services and use of facilities  |                   |                   |
| b    | Prior year adjustments  |                   |                   |
| с    | Other losses  |                   |                   |
| d    | Other (Describe in Part XIII.)  |                   |                   |
| е    | Add lines 2a through 2d   |                   |                   |
| 3    | Subtract line 2e from line 1  |                   |                   |
| 4    | Amounts included on Form 990, Part IX, line 25, but not on line 1:              |                   |                   |
| а    | Investment expenses not included on Form 990, Part VIII, line 7b                |                   |                   |
| b    | Other (Describe in Part XIII.)  | 4b                |                   |
| С    | Add lines 4a and 4b   |                   |                   |
| 5    | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18  | <u>8.)</u>        |                   |
| Pa   | t XIII Supplemental Information   |                   |                   |

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

332054 09-28-23

| SCHEDULE F<br>(Form 990)                               |   | Statement of Activities Outside the United States<br>Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. |   |                      |   |  |  |
|--|---|---|---|----------------------|---|--|--|
| Attach to Form 990.                                    |   |   |   | 1110 14D, 10, 0      |   | <b>ZUZJ</b><br>pen to Public   |  |
| Department of the Treasury<br>Internal Revenue Service | Go to w                                   | ww.irs.gov/Form   | 990 for instructions and the latest in  | nformation.          |   | ispection  |  |
| Name of the organization                               |   |   |   |                      | Employer ide  | ntification number   |  |
| Vasudha Found  | ation USA                                 | Inc   |   |                      | 46-3275   | 286  |  |
|  |   | ctivities Out   | side the United States. Comple  | ete if the organ     | ization answere   | d "Yes" on   |  |
|  | art IV, line 14b.                         | a maintain raaar  | ds to substantiate the amount of its gra  | nto and other        | agistango   |  |  |
| -  | -   |   | he selection criteria used to award the   |                      | -   | Yes No   |  |
| 2 For grantmakers. [<br>United States.                 | Describe in Part V the                    | e organization's  | procedures for monitoring the use of its  | grants and ot        | her assistance o  | outside the  |  |
| 3 Activities per Region                                |   |   | n be duplicated if additional space is n  |                      |   |  |  |
| <b>(a)</b> Region                                      | (b) Number of<br>offices<br>in the region | (c) Number of<br>employees,<br>agents, and<br>independent<br>contractors<br>in the region   | (d) Activities conducted in the region<br>(by type) (such as, fundraising, pro-<br>gram services, investments, grants to<br>recipients located in the region) | is a pro<br>describe | vity listed in (d)<br>gram service,<br>specific type<br>(s) in the region | (f) Total<br>expenditures<br>for and<br>investments<br>in the region |  |
|  |   |   |   |                      |   |  |  |
|  |   |   |   |                      |   |  |  |
|  |   |   |   |                      |   |  |  |
|  |   |   |   |                      |   |  |  |
|  |   |   |   |                      |   |  |  |
|  |   |   |   |                      |   |  |  |
|  |   |   |   |                      |   |  |  |
|  |   |   |   |                      |   |  |  |
| 3 a Subtotal   | 0   | 0   |   |                      |   | 0.   |  |
| <b>b</b> Total from continuat                          | tion                                      | 0   |   |                      |   | 0.   |  |
| sheets to Part I<br>c Totals (add lines 3a             |   |   |   |                      |   | 0.   |  |
| and 3b)  | 0   | 0   |   |                      |   | 0.   |  |

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2023

OMB No. 1545-0047

LHA 332071 11-29-23

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

| 1<br>(a) Name of organization | <b>(b)</b> IRS code section and EIN (if applicable) | (c) Region | <b>(d)</b> Purpose of grant | <b>(e)</b> Amount of cash grant | (f) Manner of cash disbursement | <b>(g)</b> Amount of<br>noncash<br>assistance | <b>(h)</b> Description<br>of noncash<br>assistance | (i) Method of<br>valuation (book, FMV<br>appraisal, other) |
|-------------------------------|---|------------|-----------------------------|---------------------------------|---------------------------------|---|--|--|
|                               |   |            | The Grant aims to           |                                 |                                 |   |  |  |
|                               |   |            | facilitate the              |                                 |                                 |   |  |  |
|                               |   |            | development of a low        |                                 |                                 |   |  |  |
|                               |   | South Asia | carbon and efficient        | 1084015.                        | Wire Transfer                   | ٥.  |  |  |
|                               |   |            | The Grant aims to           |                                 |                                 |   |  |  |
|                               |   |            | facilitate the              |                                 |                                 |   |  |  |
|                               |   |            | development of a low        |                                 |                                 |   |  |  |
|                               |   | South Asia | carbon and efficient        | 723,641.                        | Wire Transfer                   | ٥.  |  |  |
|                               |   |            | Achieving Net Zero          |                                 |                                 |   |  |  |
|                               |   |            | with Development &          |                                 |                                 |   |  |  |
|                               |   | South Asia | Other Co-Benefits.          | 91 773                          | Wire Transfer                   | Ο.  |  |  |
|                               |   | South Asia | other co-benerits.          | 01,773.                         |                                 | 0.  |  |  |
|                               |   |            |                             |                                 |                                 |   |  |  |
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|                               |   |            |                             |                                 |                                 |   |  |  |
|                               |   |            |                             |                                 |                                 |   |  |  |

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax

exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

See Part V for Column (d) descriptions

Schedule F (Form 990) 2023

3 0 Vasudha Foundation USA Inc

46-3275286

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

| (a) Type of grant or assistance | <b>(b)</b> Region | (c) Number of recipients | (d) Amount of cash grant | <b>(e)</b> Manner of cash disbursement | <b>(f)</b> Amount of noncash assistance | (g) Description of noncash assistance | <b>(h)</b> Method of<br>valuation<br>(book, FMV,<br>appraisal, other) |
|---------------------------------|-------------------|--------------------------|--------------------------|--|---|---------------------------------------|---|
|                                 |                   |                          |                          |  |   |                                       |   |
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|                                 |                   |                          |                          |  |   |                                       |   |
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|                                 |                   |                          |                          |  |   |                                       |   |
|                                 |                   |                          |                          |  |   |                                       |   |

Schedule F (Form 990) 2023

Page 3

|         |                      |   | Foundation | USA | Inc |
|---------|----------------------|---|------------|-----|-----|
| Part IV | <b>Foreign Forms</b> | 6 |            |     |     |

| 1 | Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes,"   |     |      |
|---|--|-----|------|
|   | the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign      |     |      |
|   | Corporation (see the Instructions for Form 926)  | Yes | X No |
| 2 | Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may |     |      |
|   | be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and       |     |      |
|   | Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a      |     |      |
|   | U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)                        | Yes | X No |
| 3 | Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes,"      |     |      |
|   | the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to       |     |      |
|   | Certain Foreign Corporations (see the Instructions for Form 5471)  | Yes | X No |
| 4 | Was the organization a direct or indirect shareholder of a passive foreign investment company or a           |     |      |
|   | qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621,   |     |      |
|   | Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing            |     |      |
|   | Fund (see the Instructions for Form 8621)  | Yes | X No |
| 5 | Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes,"      |     |      |
|   | the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain           |     |      |
|   | Foreign Partnerships (see the Instructions for Form 8865)  | Yes | X No |
| 6 | Did the organization have any operations in or related to any boycotting countries during the tax year? If   |     |      |
|   | "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see      |     |      |
|   | the Instructions for Form 5713; don't file with Form 990)  | Yes | X No |
|   |  |     |      |

Schedule F (Form 990) 2023

| Schedule F    | (Form 990) 2023 Vasudha Foundation USA Inc  | 46-3275286                       | Page 5 |
|---------------|---|----------------------------------|--------|
|               | Supplemental Information<br>Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (acc<br>investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting m<br>(estimated number of recipients), as applicable. Also complete this part to provide any additional in | ethod); and Part III, column (c) |        |
| Part I        | , Line 2:   |                                  |        |
| a) Per        | iodic reporting from the grantees on the project d  | leliverables and                 |        |
| output        | s as per the grant agreement.   |                                  |        |
| b) Per        | iodic online review of the progress to discuss the  | e reports                        |        |
| <u>submit</u> | ted by the grantees.  |                                  |        |
| c) Ann        | ual submission of accounts and in case required, a  | udited project                   |        |
| acount        | s.  |                                  |        |
| d) Anr        | ual review of the project implementation along wit  | h external                       |        |
| review        | ers which could also inlcude the principals.  |                                  |        |
|               |   |                                  |        |
| Part I        | I, Column (d):  |                                  |        |
| Regior        | : South Asia  |                                  |        |
| (d) Pu        | rpose of Grant: The Grant aims to facilitate the d  | levelopment of a                 |        |
| low ca        | rbon and efficient energy development and a transi  | tion framework                   |        |
| <u>for th</u> | e state of Uttar Pradesh and Maharashtra and achie  | eving Net Zero                   |        |
| with I        | evelopment & Other Co-Benefits.   |                                  |        |
|               |   |                                  |        |
| Regior        | : South Asia  |                                  |        |
| (d) Pu        | rpose of Grant: The Grant aims to facilitate the d  | levelopment of a                 |        |
| low ca        | rbon and efficient energy development and a transi  | tion framework                   |        |
|               | e state of Uttar Pradesh and Maharashtra.   |                                  |        |
| for th        |   |                                  |        |

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| Open to Public<br>Inspection |  |  |  |  |  |  |
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| ntification number<br>5286   |  |  |  |  |  |  |
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| review and approval.         |  |  |  |  |  |  |
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|                              |  |  |  |  |  |  |

Form 990, Part VI, Section C, Line 19:

The governing documents and financial statements are made available to

whoever sought the same. Soft copy is provided to the requestor by email.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. LHA 332211 11-14-23

Schedule O (Form 990) 2023