Form **990-PF**

Return of Private Foundation

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

OMB No. 1545-0052

							rust I reated as						2015
Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form as it may be made public. Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.						990pf.	Open to Public Inspection						
For	calen	dar year 2015 d							nd endin			09	-30 , 20 16
Name of foundation									A Employer	identification nu			
NADINDLA CHARITABLE FOUNDATION									43-6783008				
N	umber a	and street (or P.O	. box	number if mail is	s not delivered to	street address)		Ro	om/suite	B Telephone	number (see inst	ructions	3)
1	071 T	WOODFIELD	EST	ATES DR						(314)43	34-4630		
Ci	ty or to	wn, state or provi	nce, c	country, and ZIP	or foreign postal	code				C If exempt	ion application is p	hending	
C	hest	erfield, M	0 6	3017	0.1							Jenung	
G	Check	all that apply:		Initial retu	um	Initial return	of a former public	chari	ty	D 1. Foreig	n organizations, cl	heck he	ere ►
				Final retu	ım	Amended re	etum				-		
				Address	change	Name chan	ge				n organizations me here and attach co		
н	Check	type of organiza	ation:	Σ	Section 501	(c)(3) exempt priv	vate foundation				foundation status		
	1	ion 4947(a)(1) i			_		taxable private four	ndatio	on		07(b)(1)(A), check		
IF	air ma	arket value of al	ll ass	ets at	J Acco	unting method:	X Cash	A	Accrual	E If the four	ndation is in a 60-r	month t	
e	end of	year (from Part	II, co	ol. (c),		ther (specify)					ction 507(b)(1)(B),		
	ine 16)			273,23			e on cash basis.)						
Pa	art I	Analysis	of R		d Expense	S (The total of	() 5			1			(d) Disbursements
		•			may not necess		(a) Revenue an expenses per	ע		investment	(c) Adjusted i		for charitable
		the amounts in	colur	mn (a) (see instr	uctions).)		books		in	icome	income		purposes (cash basis only)
	1	Contributions,	gifts,	grants, etc., re	eceived (attach	schedule)	5,	000					
	2	Check ► X											
	3					ients							
	4		-		-		3,	296					
	5a	Gross rents .											
	b	Net rental inco	ome o	or (loss)									
ъ	6a	Net gain or (lo	oss) f	rom sale of as	sets not on line	e 10							
ň	b	Gross sales price f	for all a	assets on line 6a									
Revenue	7	Capital gain n	et inc	come (from Pa	rt IV, line 2) .								
Å	8	Net short-term	n cap	ital gain									
	9	Income modifi	catio	ns									
	10a	Gross sales less re	turns a	and allowances									
	b	Less: Cost of	good	s sold									
	С	Gross profit or	r (los	s) (attach sche	edule)								
	11	Other income	(atta	ch schedule)									
	12	Total. Add line	es 1 1	through 11 .			8,	296		C			
	13	Compensation	of of	fficers, directo	rs, trustees, etc								
ŝ	14			-									
nsı	15	Pension plans,	, emp	oloyee benefits									
be	16a												
perating and Administrative Expenses	b	Accounting fee	es (at	ttach schedule)	STM108		300					
ive	С												
rat	17												
nist	18	Taxes (attach	sche	dule) (see inst	ructions) .								
mir	19												
Adi	20												
þ	21												
l ar	22												
ing	23												
rat	24	Total operatir	-		-								
əd			-					300		(0
0	25		-					0					0
	26				ents. Add lines	24 and 25 .		300		(0
	27	Subtract line 2											
	a	Excess of rev		-			7,	996					
	b									(
	С	Adjusted net	inco	me (if negative	e, enter -0-)							(D

For Paperwork Reduction Act Notice, see instructions.

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D	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	year
ГС	art II	should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less: allowance for doubtful accounts			
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less: allowance for doubtful accounts			
ssets	8	Inventories for sale or use			
SS	9	Prepaid expenses and deferred charges			
∢	10a	Investments - U.S. and state government obligations (attach schedule)			
	b	Investments - corporate stock (attach schedule)			
	c	Investments - corporate bonds (attach schedule) STM138	334,948	342,944	273,232
	11	Investments - land, buildings, and equipment: basis			
		Less: accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment: basis			
		Less: accumulated depreciation (attach schedule)			
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	334,948	342,944	273,232
	17	Accounts payable and accrued expenses		-	
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
iab	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ►)			
	23	Total liabilities (add lines 17 through 22)	0	0	
s		Foundations that follow SFAS 117, check here · · · · · · ▶ and complete lines 24 through 26 and lines 30 and 31.			
ЭСe	24	Unrestricted			
Fund Balanc	25	Temporarily restricted			
ä	26	Permanently restricted			
pu		Foundations that do not follow SFAS 117, check here			
		and complete lines 27 through 31.			
Assets or	27	Capital stock, trust principal, or current funds			
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds	334,948	342,944	
τÞ	30	Total net assets or fund balances (see instructions)	334,948	342,944	
Net	31	Total liabilities and net assets/fund balances (see			
		instructions)	334,948	342,944	
Pa	art II	Analysis of Changes in Net Assets or Fund Balanc	es		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30 (must agree with		
	end-o	of-year figure reported on prior year's return)		1	334,948
2	Enter	amount from Part I, line 27a		2	7,996
3	Othe	r increases not included in line 2 (itemize)		3	
4	Add I	ines 1, 2, and 3			342,944
		eases not included in line 2 (itemize)		5	
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	342,944
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Part IV Capital Gains and	Losses for Tax on Investme	ent Income	;			
			(b) How acquired		-1 (-1)	Dete celd
(a) List and describe the 2-story brick warehouse	kind(s) of property sold (e.g., real estate, e; or common stock, 200 shs. MLC Co.)		P-Purchase D-Donation	(c) Date acquire (mo., day, yr.		Date sold o., day, yr.)
	-,,,		D-Donation	(,),)	, (,, , , ,
1a						
b						
C						
d						
e						
		() 2 (
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or o plus expen) Gain or (loss) plus (f) minus (
а						
b						
С						
d						
e						
Complete only for assets showing g	gain in column (h) and owned by the f	oundation on 1	2/31/69	(I) Gain	s (Col. (h) gain	minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess over col. (j		col. (k), bi	ut not less than ses (from col. (h	-0-) or
а						
b						
C						
d						
e						
	If gain, also ent	ter in Part I, line	e7 1			
2 Capital gain net income or (net cap	ital loss) f (loss), enter -		7	2		
2 Not about tarm consisted agin or (loss				-		-
3 Net short-term capital gain or (loss	, , , , ,	,				
•	olumn (c) (see instructions). If (loss), e		••}			
Part I, line 8			J	3		
Part V Qualification Unde	r Section 4940(e) for Reduc	ed Tax on I	Net Investme	nt Income		
(For optional use by domestic private for	oundations subject to the section 494)(a) tax on net i	investment income	e.)		
((,				
If section 4940(d)(2) applies, leave this	part blank.					
					Π.	
Was the foundation liable for the sectio			the base period?		L Y	es X No
If "Yes," the foundation does not qualify	under section 4940(e). Do not comp	lete this part.				
1 Enter the appropriate amount in ea	ch column for each year; see the instr	ructions before	making any entrie	es.		
(a)	(b)		(c)		(d)	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value of n	(c) ioncharitable-use as:	sets (co	Distribution ra (b) divided by	itio
, , , , , , ,	, , , , , ,			(00		
2014						
2013			304,8		0.0	
2012			260,7	03	0.0	
2011	2,107		178,6	55	0.01179	4
2010	8,585		167,4	79	0.05126	
2 Total of line 1 column (d)					0 06205	4
2 Total of line 1, column (d)				. 2	0.06305	4
3 Average distribution ratio for the 5-	year base period - divide the total on I	ine 2 by 5, or b	by the			
number of years the foundation has	been in existence if less than 5 years	s		. 3	0.01261	1
4 Enter the net value of noncharitable	e-use assets for 2015 from Part X line	•5		. 4		
				· -		-
5 Multiply line 4 by line 3				. 5		0
6 Enter 1% of net investment income	(1% of Part I, line 27b)			. 6		
	. ,					
7 Add lines 5 and C				_		~
7 Add lines 5 and 6				. 7		0
8 Enter qualifying distributions from P	art XII, line 4			. 8		
If line 8 is equal to or greater than li	ine 7, check the box in Part VI, line 1b	, and complete	that part using a	1% tax rate. Se	e the	
Part VI instructions.		•				

		83008		age 4		
Pai	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	structions	5)			
1a	Exempt operating foundations described in section 4940(d)(2), check here A and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0		
	here ► and enter 1% of Part I, line 27b					
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of					
	Part I, line 12, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0		
3	Add lines 1 and 2					
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) . 4			0		
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- . 5			0		
6	Credits/Payments:					
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a					
b	Exempt foreign organizations - tax withheld at source					
С	Tax paid with application for extension of time to file (Form 8868) 6c					
d	Backup withholding erroneously withheld					
7	Total credits and payments. Add lines 6a through 6d 7					
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9					
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10					
11	Enter the amount of line 10 to be: Credited to 2016 estimated tax Refunded 11					
Pai	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No		
	participate or intervene in any political campaign?	. 1a		Х		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see					
	Instructions for the definition)?	. 1b		X		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials					
	published or distributed by the foundation in connection with the activities.			Х		
С	c Did the foundation file Form 1120-POL for this year?					
d						
	(1) On the foundation. (2) On foundation managers. (3) On foundation managers.					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					
	on foundation managers.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	. 2		_X		
	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of					
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	. 3		Х		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			Х		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	. 4b				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. 5		X		
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	 By language in the governing instrument, or 					
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that 					
	conflict with the state law remain in the governing instrument?			Х		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV .	. 7	Х			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	MO	_				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	. 8b	Х			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or					
	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"					
	complete Part XIV	. 9		Х		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their					
	names and addresses			X		
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Pa	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address NADINDLACHARITABLEFOUNDATION.ORG			
14	The books are in care of CHENNAIAH C NADINDLA Telephone no. 3	14-434-4	630	
	Located at ► 1071 WOODFIELD ESTATES DR, Chesterfield, MO ZIP+4 ► 6	3017		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041-Check here	••••		►
	and enter the amount of tax-exempt interest received or accrued during the year 15			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority	[Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
		No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	Na		
		No		
		No		
		No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	No		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
		No		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
-	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
с	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2015?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2015?	No		
	If "Yes," list the years ,,,			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
-				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	N		
		No		
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or diagraphical persons after May 26, 1060; (2) the lange of the 5 year period (or langer period approved by the			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section $4943(c)(7)$ to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10 \pm 15 \pm or 20 year first phase holding period? (Use Schedule C. Form 4720 to determine if the			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had average husiness holdings in 2015).	26		
4a	foundation had excess business holdings in 2015.)	<u>3b</u> 4a		<u> </u>
4a b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4 d		
U	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		
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Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)	
5a	During the year did the foundation pay or incur any amount to:		
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	es 🛛 No	
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on,		
	directly or indirectly, any voter registration drive?	es 🛛 No	
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	es No	
	(4) Provide a grant to an organization other than a charitable, etc., organization described in		
	section 4945(d)(4)(A)? (see instructions)	es 🛛 No	
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational		
	purposes, or for the prevention of cruelty to children or animals?	es 🗌 No	
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in		
	Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?	5b	
	Organizations relying on a current notice regarding disaster assistance check here	▶□	
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax	_	
	because it maintained expenditure responsibility for the grant?	es No	
	If "Yes," attach the statement required by Regulations section 53.4945-5(d).	_	
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums		
	on a personal benefit contract?	es No	
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b	
	If "Yes" to 6b, file Form 8870.		
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	es No	
b	If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

,,, _,, _	3			
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
CHENNAIAH C NADINDLA	TRUSTEE			
1071 WOODFIELD ESTATES DR, MO 63017	0.00	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000				0
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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." 3 (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE ► . . .

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
-	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
-	
All other program-related investments. See instructions.	
3	
•	
Total. Add lines 1 through 3	
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Pa	tt X Minimum Investment Return (All domestic foundations must complete this part. Foreign	foundations,	
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	0
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	0
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	0
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0
6	Minimum investment return. Enter 5% of line 5	6	0
Pa	rt XI Distributable Amount (see instructions) (Section <u>4942(j)(3)</u> and (j)(5) private operating for	undations	
	and certain foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2015 from Part VI, line 5 2a		
b	Income tax for 2015. (This does not include the tax from Part VI.) 2b		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	0
Pa	rt XII Qualifying Distributions (see instructions)		
ı a			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	0
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 .	4	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	e foundation	
	qualifies for the section 4940(e) reduction of tax in those years.		

EEA

Form 990-PF (2015) NADINDLA CHARITABLE FOUNDATION

Page 9

u	t XIII Undistributed Income (see instru	610115)			
	Distributable amount for 2015 from Part XI,	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
		•			
	Undistributed income, if any, as of the end of 2015:				
	Enter amount for 2014 only				
	Total for prior years				
	Total for prior years:,,				
	Excess distributions carryover, if any, to 2015: From 2010				
	From 2011				
	From 2012				
	From 2013				
	From 2014				
	Total of lines 3a through e				
	Qualifying distributions for 2015 from Part XII,				
	line 4: ► \$				
	Applied to 2014, but not more than line 2a				
)	Applied to undistributed income of prior years				
	(Election required - see instructions)				
;	Treated as distributions out of corpus (Election				
	required - see instructions)				
I	Applied to 2015 distributable amount				
•	Remaining amount distributed out of corpus				
	Excess distributions carryover applied to 2015 .				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)				
	Enter the net total of each column as				
	indicated below:				
	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 .				
	Prior years' undistributed income. Subtract				
	line 4b from line 2b				
;	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed Subtract line 6c from line 6b. Taxable				
•					
	amount - see instructions				
;	Undistributed income for 2014. Subtract line				
	4a from line 2a. Taxable amount - see				
	instructions				
	Undistributed income for 2015. Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2016				
	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)				
	Excess distributions carryover from 2010 not				
	applied on line 5 or line 7 (see instructions)				
	Excess distributions carryover to 2016.				
	Subtract lines 7 and 8 from line 6a				
	Analysis of line 9:				
	Excess from 2011				
	Excess from 2012				
;	Excess from 2012				
	Excess from 2014				
	Excess from 2015				

Form §	990-PF (2015) NADINDLA	CHARITABLE FOUR	NDATION		43-6783008	Page 10
Part	XIV Private Operating Four	dations (see inst	ructions and Par	t VII-A, question 9)		
1a	If the foundation has received a ruling or	determination letter th	at it is a private opera	ating		
	foundation, and the ruling is effective for	2015, enter the date of	the ruling		•	
b	Check box to indicate whether the found	ation is a private opera	ting foundation descr	ibed in section	4942(j)(3) or 494	42(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
	investment return from Part X for each year listed	()	.,			
b	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test - enter: (1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
С	 "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) 					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Part				he foundation had	\$5,000 or more in	assets at
	any time during the yea	r - see instructio	ns.)			
1 a	Information Regarding Foundation M List any managers of the foundation who before the close of any tax year (but only	o have contributed mo	re than 2% of the tota ted more than \$5,000	al contributions received t)). (See section 507(d)(2)	by the foundation .)	
b	CHENNAIAH C NADINDLA List any managers of the foundation who ownership of a partnership or other entit				portion of the	
2	NONE Information Regarding Contribution,	Grant. Gift. Loan. Sch	olarship, etc., Prog	rams:		
	Check here K if the foundation only unsolicited requests for funds. If the foundation other conditions, complete items 2a, b, c	y makes contributions ndation makes gifts, gr	to preselected charit	able organizations and do		
а	The name, address, and telephone num	ber or e-mail address	of the person to whor	m applications should be	addressed:	
b	The form in which applications should b	e submitted and inform	nation and materials t	hey should include:		
c	Any submission deadlines:					

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Form 990-PF (2015) NADINDLA CHARITABLE FOUNDATION

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
HINDU TEMPLE OF ST LOUIS				
725 WEIDMAN RD			Charitable	
Ballwin, MO 63011		POF	Contribution	1,598
KUCHIPUDI ART ACADEMY				
ST LOUIS MO			Charitable	
Saint Louis, MO 63101		POF	Contribution	250
Saint Louis, MO 03101		POF	Concribación	250
LIONS CLUB OF SCUNDERABAD				
101254 WEST MARREDPALLY			Eye medicines for	
SECUNDERBAD, SECUNDERABAD IN 500026		POF	medical use	126,197
Total			▶ 3a	128,045
b Approved for future payment				
		1		

43-6783008

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Form 990-PF (2015) NADINDIA CUADITADIE ECIMDATION Part XVI-A A

Form 990-PF (2015) NADINDLA CHARITABL	E FOUNDATION	г		43-67830	08 Page 12
Part XVI-A Analysis of Income-Producin	ng Activities				-
Enter gross amounts unless otherwise indicated.	Unrelated	business income	Excluded by sec	tion 512, 513, or 514	(e)
	(a) Business	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
1 Program service revenue:	code				
а					

1 Program service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions.)
	0000				
с					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments .					
4 Dividends and interest from securities			14		
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					<u> </u>
10 Gross profit or (loss) from sales of inventory					
11 Other revenue: a					
b					
C					
d					
е					
12 Subtotal. Add columns (b), (d), and (e) $\ldots \ldots$					
13 Total. Add line 12, columns (b), (d), and (e)				13	
(See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the					
Line No. Explain below how each activity for which in accomplishment of the foundation's exempt p	come is repoi	ted in column (e) of	Part XVI-A con	tributed importantly to t	

Form 99	90-PF (2		ADINDLA CHARII								67830			age 13
Part	XVII	Information	n Regarding Tra	ansfers	To and Tran	sactions	s and	Relatior	nships	With	Non	charita	ble	
			ganizations											
1 D	id the or	ganization direc	ctly or indirectly enga	ge in any	of the following	with any oth	er orga	nization de	scribed				Yes	No
		-	Code (other than section		-	-	-							
	rganizati		,	()	() 0	,		, U						
	-		ing foundation to a ne	oncharitat	le exempt organ	ization of:								
			•••••									1a(1)		х
•	•													X
•			•••••	• • • • •		• • • • •				· • •		1a(2)		
		sactions:												37
•			noncharitable exempt	-								1b(1)		X
-	-		from a noncharitable		-							1b(2)		X
-	-		quipment, or other ass									1b(3)		X
-	-		ngements									1b(4)		Х
(5	i) Loans	s or loan guarar	ntees									1b(5)		X
(6	6) Perfo	rmance of servi	ices or membership o	or fundrais	ing solicitations					••		1b(6)		X
c S	haring o	f facilities, equi	pment, mailing lists, o	ther asse	ts, or paid employ	yees				••		1c		Х
d lf	the ansv	ver to any of the	e above is "Yes," con	nplete the	following schedu	ule. Column	(b) sho	ould always	show the	e fair r	narket			
V	alue of th	e acods other	assets, or services g	niven hv tl	e reporting foun	dation If the	e found	ation receiv	t seal hav	han fs	air mark	ot		
		•	-											
			or sharing arrangeme				-							
(a) Line I	no. (b) A	mount involved	(c) Name of none	charitable e	exempt organization	n (d	i) Descr	iption of trans	sters, trans	saction	is, and s	naring arra	angeme	Ints
2 2 le	the four	dation directly	or indirectly affiliated	with or r	alated to one or	more tax-ex	vomnt (vragnization	20					
		,			-		•	nyanizatioi	13				v	1
			(c) of the Code (other	than sec	100501(c)(3)) or	In section 5	527 ?	• • • • •		•••		Y€	es X	No
b If	"Yes," c	omplete the foll	owing schedule.											
	(a) Name of organ 	nization		(b) Type of organ	nization			(c) Des	cription	n of relat	ionship		
•														
	Linder or	nalties of periury	declare that I have examine	d this return	including accompany	ing schedules	and state	ments and to	the hest of n	ny know	vledne an	d helief it is	true	
6 :~~	correct, a	and complete. Decla	declare that I have examine aration of preparer (other that	an taxpayer)	is based on all information	ation of which p	preparer h	has any knowle	edge.	IIY KIIOW	neuge all	ה מכוופו, ונ 2	aue,	
Sign					1						May the	IRS discus	s this ret	urn
Here	Сні	ENNAIAH C	NADINDLA			TRU	STEE				with the (see inst	preparer sh		
		ature of officer or tru	ustee		Date	Title							Yes	X No
		Print/Type prepare	er's name	Prepa	rer's signature			Date		Check	X if	PTIN		
Paid		JOHN LAUX	EA	JOHN	I LAUX EA		n	1-30-20	17	self-err		P0034	7783	
Prep	arer	Firm's name	CHAMBERLIN				۳ ۲		Firm's EIN		,			
						01 111C								
Use	Uniy	Firm's address	► 1630 DES PE						Phone no.		000	1100		
			Saint Louis	5 MU 63	131					314	-909-			(001 -)
EEA												Form 99	10-PF	(2015)

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury

Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

2015

Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

Name of the organization

NADINDLA	CHARITABLE	FOUNDATION

►

43-6783
42 6802

Employer identification number
43-6783008

Organization type (check one):	Organization	type	check one):
--------------------------------	--------------	------	-----------	----

Filers of:	Section:
Form 990 or 990-EZ	501(c)() (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	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

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, 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. Do not 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

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. EEA Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

EEA

Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Name of organization

NADINDLA CHARITABLE FOUNDATION

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CATHY CALLAWAY Saint Louis Saint Louis, MO 63101	\$126,197	PersonImage: Constraint of the second se
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Page 2

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization NADINDLA CHARITABLE FOUNDATION

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

Noncash Froperty (see instructions). Ose duplicate copi		
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Eye medicine and medical supplies	_	
	\$\$	01-31-2016
(b) Description of noncash property given	(C) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
	Description of noncash property given (b) (b) Description of noncash property given (b) Description of noncash property given	Description of noncash property given FMV (or estimate) (see instructions) Eye medicine and medical supplies \$ 126,197 (b) (c) Description of noncash property given (c) (b) FMV (or estimate) (see instructions) (b) S

Pa

43-6783008

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Federal S	upporting Statemer	nts 2	2015 PG01
Name(s) as shown on return		FE	IN
NADINDLA CHARITABLE FOUNDATION	7		43-6783008
	Part II - Line 1 orporate Bond Sc	• •	Statement #138
Category	ВОҮ	Book Value	E EOY FMV
PEOPLES BANK	100,000	77,00	0 77,000
JPZ	27,060	26,48	0 26,480
UBS	50,131	19,25	9 19,259
MONEY MARKET FUND	157,757	220,20	5 150,493
Totals	334,948	342,944	<u>4</u> 273,232

2015 PG01	1001 SOCIAL SECURITY INTITUER 43-6783008	Statement #108~	
Your So			table pose
	ŗ	-	able
lt able	table	itable	
		Schedule	Charitable purpose
		- Accounting Fees Schedule	Adjusted net income
		- Line 16(b)	Net
		Form 990PF - Part I	Net es investment
		Form 99	Revenue and expenses
	DATION		
	TTABLE FOUNDAT		
	NADINDLA CHARITABLE FOUNDATION		Description

STM~.LD