# \*Form 990-PF

EXTENDED TO NOVEMBER 16, 2020 Return of Private Foundation

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

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

Go to www.irs.gov/Form990PF for instructions and the latest information. Department of the Treasury Internal Revenue Service

For (	alen	dar year 2019 or tax year beginning		, and ending		
Nar	ne of	foundation			A Employer identification	number
A	NV.	I GROUP CHARITABLE FOUN	DATION INC.		83-2896593	
Nun	nber a	nd street (or P O box number if mail is not delivered to street		Room/suite	B Telephone number	
1	1 1	WILLOW WOODS TRAIL			646-387-40	31
City	or to	own, state or province, country, and ZIP or foreign	postal code		C If exemption application is pe	anding, check here
W	AR!	REN, NJ 07059-5565				
G C	heck	all that apply: Initial return	Initial return of a fe	ormer public charity	D 1. Foreign organizations	, check here 🕨 🔙
		Final return	Amended return		2 5	
		Address change	Name change		Foreign organizations med check here and attach cor	mputation
H_ C	heck	type of organization: X Section 501(c)(3) e		04	E If private foundation stat	tus was terminated
<u></u>		ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda		under section 507(b)(1)	(A), check here
		· 1 —	ting method; X Cash	Accrual	F If the foundation is in a 6	. —
-			Other (specify)	\	under section 507(b)(1)	(B), check here ►∟
<b>▶</b>		5,730,173. (Part I, colu				(d) Distriction
<u> </u>	intel	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	2,001,476.		N/A	
	2	Check I if the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	-			
	4	Dividends and interest from securities	73,815.	73,815.		STATEMENT 1
	5a	Gross rents	D. DITUDOS DO DO DOS TRANSPORMENTES. AND STREET	Tertako verakon il depotenti alli i	Ta 2000.000 WOOLING DY SOURCE CONTROL OF THE	
	b	Net rental income or (loss)				
ø	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 1 EEE 00E	41,014.			
enu	b	assets on line 6a 1,333,093.		41 014		
Revenue	7	Capital gain net income (from Part IV, line 2)	73 MARIE 12 12 12 12 12 12 12 12 12 12 12 12 12	41,014.	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	PECEIVED
	8	Net short-term capital gain				222200000000000000000000000000000000000
	9	Income modifications Gross sales less returns		Park Control Control	99	NUG-2-6 7070-10
	Ι.	and allowances	ovana inantahini 1 va 11100000			THE STREET, STREET, VI
	l	Gross profit or (loss)	P. Markin Juni France Service 12, 28, 1, 1964		The state of the s	COENCIT
3	11	Other income		The state of the s		SPEN, PI
N202	12	Totał. Add lines 1 through 11	2,116,305.	114,829.		CONTROL OF THE
<b>9</b>	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
N	14	Other employee salaries and wages				
~	15	Pension plans, employee benefits				
≥ နွ	16a	Legal fees				
چَ دِ		Accounting fees				<del> </del>
٣X	C	Other professional fees				
Ž	17	Interest	611	CAA	ļ	0.
₹Ē	18	Taxes STMT 2	644.	644.		U.
SCANNE instrative Exp	19	Depreciation and depletion				
Adm	20	Occupancy Travel, conferences, and meetings			<del>-</del>	
Ψ	22	Printing and publications				
and	1	Other expenses STMT 3	6,848.	6,271.		578.
Operating	24	Total operating and administrative	-,	· / - · - ·		
era	- '	expenses. Add lines 13 through 23	7,492.	6,915.		578.
ŏ	25	Contributions, gifts, grants paid	175,000.			175,000.
	26	Total expenses and disbursements.				
		Add lines 24 and 25	182,492.	6,915.		175,578.
	27	Subtract line 26 from line 12:	4 000 010			
		Excess of revenue over expenses and disbursements	1,933,813.	107 014	SANTONIO PROPERTISANO.	
		Net investment income (if negative, enter -0-)	55/22/35/35/35/35/35/35/35/35/35/35/35/35/35/	107,914.	N/A	
	C	Adjusted net income (if negative, enter -0-)	BENESOTO ACTOR ACTOR		N/A	IN THE CHIEF STATES

923501 12-17-19 LHA For Paperwork Reduction Act Notice, see instructions.

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For	m 99	0-PF (2019) ANVI GROUP CHARITABLE FO	DUNDATION INC.	83-	2896593 Page 2
B	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		of year
_			(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing	3,500,000.	531,078.	531,078.
		Savings and temporary cash investments			
	3	Accounts receivable >			
		Less; allowance for doubtful accounts	Patricia and the July 2001 National Transfer		
	4	Pledges receivable			
		Less, allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
	١.	Less: allowance for doubtful accounts	<u> </u>		
Assets		Inventories for sale or use			
Ass	9	Prepaid expenses and deferred charges			
•	1	Investments - U.S. and state government obligations		4,902,735.	5,199,095.
	l	Investments - corporate stock		4,302,733.	3,133,033.
	I	Investments - corporate bonds	2		
	יין	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation.	<u> </u>		
	I	Investments - mortgage loans			<del></del>
	13	Investments - other			
	14	Land, buildings, and equipment basis			
	4.5	Less accumulated depreciation			···· –
		Other assets (describe   Total assets (to be completed by all filers - see the			· · · · · · · · · · · · · · · · · · ·
	16	instructions. Also, see page 1, item I)	3,500,000.	5,433,813.	5,730,173.
_	17	Accounts payable and accrued expenses	3,300,000.	3,433,013.	
	18	Grants payable			
	19	Deferred revenue			
rabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ē	21	Mortgages and other notes payable	-		
Ē		Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow FASB ASC 958, check here			
s		and complete lines 24, 25, 29, and 30.			
nces	24	Net assets without donor restrictions			
alar	25	Net assets with donor restrictions			地流淌着
Ø P		Foundations that do not follow FASB ASC 958, check here 🕨 🗓			
Š		and complete lines 26 through 30.			
Net Assets or Fund Bala	26	Capital stock, trust principal, or current funds	0.	0.	
ets	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
SS	28	Retained earnings, accumulated income, endowment, or other funds	3,500,000.	5,433,813.	
et/	29	Total net assets or fund balances	3,500,000.	5,433,813.	1964 7 7 7 7
Z				- 400 040	
_	30	Total liabilities and net assets/fund balances	3,500,000.	5,433,813.	
, P	art	Analysis of Changes in Net Assets or Fund Ba	alances		
Ξ	Tatal	not constant fund halances at heginning of year. Part II, column (a) line	20		
		net assets or fund balances at beginning of year - Part II, column (a), line	29	١.	3,500,000.
	•	it agree with end-of-year figure reported on prior year's return) amount from Part I, line 27a		1 2	1,933,813.
		r increases not included in line 2 (itemize)		3	0.
-		lines 1, 2, and 3		- 3	5,433,813.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 29	6	5,433,813.
<u> </u>		the state of the s	1277		Form <b>990-PF</b> (2019)

Form **990-PF** (2019)

Form	990-PF (2019) ANVI GROUP CHARITABLE FOUNDATION	<u> </u>	INC.	8	<u>3-28</u>	<u>96593</u>	Page 4	
Pa	Excise Tax Based on Investment Income (Section 4940(a	), 4	940(b), 4940(e), o	r 494	8 - see	∍ instructior	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and ente	r "N/A	A" on line 1.	× 1			30,21	
	Date of ruling or determination letter (attach copy of letter if necess			100				
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check here				1	1,0	79.	
	of Part I, line 27b			8			1 3	
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of	Part	t I. line 12. col. (b)	3				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, other			"	2		0.	
3	Add lines 1 and 2	o, o			3	1.0	79.	
A	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; other	rs er	nter -O-)		4		0.	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	. 5, 6.		۲	5	1,0	79.	
6	Credits/Payments:			*	<b>3</b> 20 300	(STAMPENDE O		
	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	!	0.				
	Exempt foreign organizations - tax withheld at source	6b		ö.				
	Tax paid with application for extension of time to file (Form 8868)	6c	2,19					
	· · · · · · · · · · · · · · · · · · ·	6d	2,12	0.				
	Backup withholding erroneously withheld  Latel coulds and powers Add lose Sc through Sd	ou	<u></u>	<u>٠٠</u>	7	2 -	199.	
,	Total credits and payments. Add lines 6a through 6d	a d		⊢	8		40.	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached.	eu		_			<del></del>	
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				9	1 (	080.	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		1 000 154	▝	10		0.	
	Enter the amount of line 10 to be: Credited to 2020 estimated tax    Statements Regarding Activities		1,080. Refunded		11		<del></del>	
4074400						Yes	s No	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation	on o	r did it participate or inter	vene ir	1			
	any political campaign?					1a	X	
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes			tefiniti	on	1b	X 3278555554	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of a	ıny m	naterials published or					
	distributed by the foundation in connection with the activities.							
	Did the foundation file Form 1120-POL for this year?					1c	X X	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the ye			^				
	(1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶			<u>0.</u>				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure	e tax	imposed on foundation					
	managers. ► \$0.							
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	7				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 inst	rume	ent, articles of incorporati	n, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes					3	<u>X</u>	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				/-	4a	<u> </u>	
	If "Yes," has it filed a tax return on Form 990-T for this year?				N/A		+	
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	r:						
	By language in the governing instrument, or							
	ullet By state legislation that effectively amends the governing instrument so that no mandatory d	irecti	ons that conflict with the	state la	<b>W</b>			
	remain in the governing instrument?					6 X	—	
7	Did the foundation have at least $$5,000$ in assets at any time during the year? If "Yes," complete	e Par	t II, col. (c), and Part XV			7 X	40.77	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.					_		
	DE							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attor	rney (	General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation					8b X	5 At	
9	Is the foundation claiming status as a private operating foundation within the meaning of section	on 49	942(j)(3) or 4942(j)(5) for	calend	lar			^
	year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," comple	te Pa	art XIV		_	9	X	1
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule li	sting 1	their names and addresses			10	X	
	<del></del>					Form <b>990-PF</b>	(2019)	

	1990-Pf (2019) ANVI GROUP CHARITABLE FOUNDATION INC. 03-2896	1193		Page 5
i Ka	irtsVII-As Statements Regarding Activities (continued)		Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	,744230;		
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	_12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► EISNERAMPER LLP Telephone no. ► 732-24			
	Located at ► 111 WOOD AVENUE SOUTH, ISELIN, NJ ZIP+4 ►0	<u> 3830-</u>	<u>-27</u>	<u> </u>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		<b>,</b> ▶	· []
	and enter the amount of tax-exempt interest received or accrued during the year	N,		NI -
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16	i Artika	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
₽:	foreign country ►  art VII≥B Statements Regarding Activities for Which Form 4720 May Be Required		Lenen.	350250
شيخوامو	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	16.5	Yes	No
1:	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(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		, a	
	termination of government service, if terminating within 90 days.)  Yes X No			
t	old fany 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  N/A	4.		3.00
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions  N/A  Organizations relying on a current notice regarding disaster assistance, check here	1b	Charles Stanton	eicenne
	E 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 2019?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		1918	25-14
	defined in section 4942(j)(3) or 4942(j)(5)):			
٤	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			ę. <b>3</b>
	6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years ►,,,			
t	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	_2b	***	1 00 miles
(	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
2.	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		470	
38	during the year?  Wes X No		9	
	of "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after			
•	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,			
	Schedule C, to determine if the foundation had excess business holdings in 2019.)  N/A	3b		
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			<u> </u>
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		X
	r.	<sub>200</sub> 990		(0010)

FORM 99U-PF (2019) ANVI GROUP CHARITABLE FOR			03-20903	93 Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4/20 May Be Re	equirea (contir	ued)	
5a During the year, did the foundation pay or incur any amount to:				Yes No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Y	es 🗓 No 🏽	(a) (a) 24
(2) Influence the outcome of any specific public election (see section 4955); o		ctlv.		
any voter registration drive?	, , , , , , , , , , , , , , , , , , , ,		es 🗶 No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	2		es X No	
**		٠ ــــا	es 11 NO	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		_ <b>.</b>	
4945(d)(4)(A)? See instructions		Y	es 🗶 No 🥻	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo			
the prevention of cruelty to children or animals?		Y	es 🗶 No 🏻	4   数数   多到
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described i	n Regulations		
section 53.4945 or in a current notice regarding disaster assistance? See instru		•	N/A	5b
Organizations relying on a current notice regarding disaster assistance, check h				A FOR WALL
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		nad		
			🗀 <b>,</b> , - 🎉	
expenditure responsibility for the grant?	10	/A T	es 🔛 No 📳	
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			-	
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			(集)
a personal benefit contract?		Y	es 🗶 No 🙎	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Пү	es 🗶 No 🥻	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$			-1/	10 No. 3 See 1
	יוטטט,טטט ווו ופוווטוופו מנוטוו טו		es 🗶 No 🕏	
excess parachute payment(s) during the year?	F I-A: M			SEAT   SECURES   CHESSICA
Information About Officers, Directors, Truster Paid Employees, and Contractors	es, Foundation Mar	iagers, <del>H</del> igniy		
		<del> </del>		
1 List all officers, directors, trustees, and foundation managers and the	neir compensation.	1	T 4 15	
/	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allowances
PUŔNA SAGGURTI	OFFICER	ĺ		
11 WILLOW WOODS TRAIL				
WARREN, NJ 07059-5565	0.00	0.	0.	0.
		· · · · ·	1	<u> </u>
SHRIDEVI SAGGURTI	OFFICER			
11 WILLOW WOODS TRAIL		_		<u>:</u>
WARREN, NJ 07059-5565	0.00	0.	0.	0.
ANITA SAGGURTI	OFFICER			
211 W 14th St, 10A, NY, NY 18011	0.03	_	ا م ا	_
VINITA SAGGURTI MATTAY &	]	0		D
1. <u>=</u>	OFFICERS			
RAGHAV MATTAY 1634 BAINBRINGE ST	077.021			
	0	0	0	0
PHILADS LPHIP PA 1914 6  2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none			
2 Compensation of five highest-paid employees (other than those inc		inter MONE.	(d) Contributions to	(a) Evança
(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	(e) Expense account, other
(-, -, -, -, -, -, -, -, -, -, -, -, -, -	devoted to position	(0)	compensation	allowances
NONE				
	1			
	1			
······································	<del></del>	<del></del>	<del>                                     </del>	
	1			
	]			
				<u> </u>
Total number of other employees paid over \$50,000			<b></b>	0
T T T T T T T T T T T T T T T T T T T				990-PF (2010)

	<u>-2896.</u>	593 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		-
(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
NONE		
		<del></del>
<del></del>		
	•	0
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities		<u>_</u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 N/A	1	
	1	
	1	
2		
	]	
	<u> </u>	
3		
4	_	
<del></del>	4	
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Т	Amount
1 N/A		, and an
	1	
	1	
2	1	
	1	
	<u> </u>	
All other program-related investments. See instructions.		
3	4	
	4	
	4	
	4	
	4	
	<del> </del>	0.
Total. Add lines 1 through 3		m <b>990-PF</b> (2019)
	Forr	11 330-F F (2019)

Part X Minimu	um Investment Return (All domestic for	undations must complete this p	oart. Foreign four	dations, s	ee instructions )
1 Fair market value of	assets not used (or held for use) directly in carrying	out charitable, etc., purposes:			
a Average monthly fail	market value of securities			1a	2,221,159. 1,444,806.
<b>b</b> Average of monthly	cash balances			1b	<u>1,444,806.</u>
c Fair market value of	all other assets			1c	
d Total (add lines 1a, l	o, and c)			1d	3,665,965.
e Reduction claimed for	or blockage or other factors reported on lines 1a and				
1c (attach detailed e	xplanation)	1e	0.		
2 Acquisition indebted	ness applicable to line 1 assets			2	<u> </u>
3 Subtract line 2 from	line 1d			3	3,665,965.
4 Cash deemed held for	or charitable activities. Enter 1 1/2% of line 3 (for gre	ater amount, see instructions)		4	54,989.
5 Net value of noncha	ritable-use assets. Subtract line 4 from line 3. Ente	r here and on Part V, line 4		5	3,610,976.
6 Minimum investmen	nt return. Enter 5% of line 5			6	180,549.
	utable Amount (see instructions) (Section ganizations, check here  and do not complete.)		ting foundations an	d certain	
1 Minimum investmen	t return from Part X, line 6			1	180,549.
	ncome for 2019 from Part VI, line 5	2a	1,079.		
	. (This does not include the tax from Part VI.)	2b	-		
c Add lines 2a and 2b	,	<u></u>		2c	1,079.
3 Distributable amoun	t before adjustments. Subtract line 2c from line 1			3	179,470.
	nts treated as qualifying distributions			4	0.
5 Add lines 3 and 4	, ,			5	179,470.
6 Deduction from distr	ributable amount (see instructions)			6	0.
7 Distributable amour	nt as adjusted. Subtract line 6 from line 5. Enter here	and on Part XIII, line 1		7	179,470.
	ring Distributions (see instructions)				·
1 Amounts paid (inclu	ding administrative expenses) to accomplish charital	ble, etc., purposes:			
a Expenses, contributi	ons, gifts, etc - total from Part I, column (d), line 26	i		1a	175,578.
<b>b</b> Program-related inv	estments - total from Part IX-B			1b	0.
2 Amounts paid to acc	quire assets used (or held for use) directly in carrying	g out charitable, etc., purposes		2	
3 Amounts set aside for	or specific charitable projects that satisfy the:				
a Suitability test (prior	IRS approval required)			3a	
<b>b</b> Cash distribution tes	st (attach the required schedule)			3b	
	ons. Add lines 1a through 3b. Enter here and on Par	t V, line 8; and Part XIII, line 4		4	175,578.
• •	alify under section 4940(e) for the reduced rate of ta				
income. Enter 1% of	* *			5	1,079.
	distributions. Subtract line 5 from line 4			6	174,499.
Note: The amount of	on line 6 will be used in Part V, column (b), in subsection of tax in those years.	quent years when calculating wheth	er the foundation q	ualifies for t	the section

Form **990-PF** (2019)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				179,470.
				1/3,110.
2 Undistributed income, if any, as of the end of 2019			6,612.	
a Enter amount for 2018 only			0,012.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2019:		<del>0•</del>		
1 1				
a From 2014				
<b>b</b> From 2015				
c From 2016				
d From 2017	namilimminimminimen. 2 28 5	i sunthinumbil lab holimbili.	rannanananana GTETTEEnanta C. W.	Sportformfulling ( ) A W Allafabor of C
e From 2018				
f Total of lines 3a through e		********		
4 Qualifying distributions for 2019 from				
Part XII, line 4: ► \$ 175,578.				
a Applied to 2018, but not more than line 2a			6,612.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2019 distributable amount				168,966.
e Remaining amount distributed out of corpus	0.			
Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'			•	
undistributed income for which a notice of				•
deficiency has been issued, or on which				
the section 4942(a) tax has been previously assessed		0.		
		•		<u> </u>
d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions		<u></u>	<del>-</del>	
e Undistributed income for 2018. Subtract line			0.	
4a from line 2a. Taxable amount - see instr.				
f Undistributed income for 2019. Subtract				ı
lines 4d and 5 from line 1. This amount must				10,504.
be distributed in 2020				10,304.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	,	i		
may be required - see instructions)	0.			
8 Excess distributions carryover from 2014				i
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2020.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2015			,	
b Excess from 2016				
c Excess from 2017				
d Excess from 2018				
e Excess from 2019				- 000 PE

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Form **990-PF** (2019)

		OUP CHARITA			83-28	96593 Page 10
	rt XIV Private Operating Fo	<u>`</u> _	<del></del>	A, question 9)	N/A	
1 a	If the foundation has received a ruling o	r determination letter that	it is a private operating			
	foundation, and the ruling is effective for	\		▶ └		
b	Check box to indicate whether the found		ig foundation described in		4942(j)(3) or 49	(42(j)(5)
2 a	Enter the lesser of the adjusted net	Tax year		Prior 3 years	1	
	income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
	investment return from Part X for	Ì	<b>\</b>			
	each year listed					
b	85% of line 2a					
C	Qualifying distributions from Part XII,					
	line 4, for each year listed					
đ	Amounts included in line 2c not					
	used directly for active conduct of					
	exempt activities				<del></del>	
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:					
a	"Assets" alternative test - enter:		/			
	(1) Value of all assets					
	(2) Value of assets qualifying	Ì				
	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	/	ľ	`	V	
	listed			<u> </u>	<del>\</del>	
C	"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)	<b>/</b>			<del>                                     </del>	
	(2) Support from general public and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)				<u> </u>	
	(3) Largest amount of support from					
	an exempt organization					<del></del>
Do	(4) Gross investment income irt XV   Supplementary Info	rmation (Comple	to this part only if	the foundation	had \$5,000 or mor	o in affects
Pa	at any time during the			the loundation	nau φο,σοσ σι mor	e iii assets
	<u> </u>					<del></del>
1	Information Regarding Foundatio	•	h 00/ -f th- total again		favordation before the class	f t
а	List any managers of the foundation wh year (but only if they have contributed n	o nave contributed more i nore than \$5 000), (See si	inan 2% of the total contr ection 507(d)(2).)	ibutions received by the	toundation before the clos-	e of any tax
C E	E STATEMENT 4	(000 0	00			
	List any managers of the foundation wh	a own 100/ or mars of th	a stack of a comparation (	or an equally large porty	on of the authorobin of a na	rtnorohin or
D	other entity) of which the foundation has		, ,	or arrequally large porti	on or the ownership of a pa	านเธารแบบเ
NO	-,					
2	Information Regarding Contributi	on Grant Gift Loan	Scholarship etc. Pro	ograms:		
2	Check here <b>X</b> if the foundation of			-	not accept upsolicited requi	ests for funds. If
	the foundation makes gifts, grants, etc.,					7313 101 101103, 11
	The name, address, and telephone number				-	
a	The hame, address, and telephone humb	Joi of officer address of th	a paraon to whom applied	onould be uddles.		
—	The form in which applications should b	e submitted and informat	ion and materials they sh	ould include:	<u> </u>	
_	The term in which approaches a second of					
c	Any submission deadlines:					
						<del></del>
d	Any restrictions or limitations on awards	s, such as by geographica	il areas, charitable fields,	kinds of institutions, or	other factors:	

Rart XV Supplementary Information 3 Grants and Contributions Paid During the				
3 Grants and Contributions Paid During the  Recipient	If recipient is an individual.	ayinent		_
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	-	
Paid during the year				
BALVIKAS-RAMAKRISHNA MISSION	NONE	PC	UNRESRICTED USE BY	
10321 COMMONWEALTH BLVD FAIRFAX, VA 22032			CHARITY	10,00
ATIMA, TA 22002				
CITIZENS SCHOOLS	NONE	PC	UNRESRICTED USE BY	
1 BEACON STREET BOSTON, MA 02108			CHARITY	10,00
50510N, PA 02100			<del></del>	10,00
FRANKLIN TOWNSHIP FOOD BANK	NONE	PC	UNRESRICTED USE BY	
224 CHURCHILL AVE SOMERSET, NJ 08873			CHARITY	15,00
SOMERSEI, NO VOOTS				
FRIARS SENIOR SOCIETY	NONE	PC	UNRESRICTED USE BY	
2415 6TH STREET #1603 PHILADELPHIA, PA 19106			CHARITY	5,00
THE MEDITAL TATE OF THE PROPERTY OF THE PROPER				
HINDU TEMPLE & CULTURAL SOCIETY	NONE	PC	UNRESRICTED USE BY	
ONE BALAJI TEMPLE DRIVE BRIDGEWATER, NJ 08807			CHARITY	10,00
	NTINUATION SHEE	T(S)	► 3a	175,00
b Approved for future payment				· · · ·
NOVE				
NONE				
Total		-	<b>▶</b> 3b	

3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
HTCS-SPECIAL NEEDS CHILDREN	NONE	PC	UNRESRICTED USE BY	
3565 3RD AVE			CHARITY	
BRONX, NY 10456	1			1,00
THE PARTY OF THE P	NONE	PC	INDECOTORD HEE BY	
HUNTSMAN CANCER FOUNDATION 500 HUNTSMAN WAY	NONE	PC	UNRESRICTED USE BY CHARITY	
SALT LAKE CITY, UT 84109-1238			CHARITI	10,00
SALI MAN CITT, OT 04103-1230	<del></del>			20,00
LETS BREAKTHROUGH	NONE	PC	UNRESRICTED USE BY	
4 W 43RD ST #715			CHARITY	
NEW YORK, NY 10036		<del> </del>		10,00
MEMORIAL SLOAN KETTERING CANCER	NONE	PC	UNRESRICTED USE BY	
CENTER			CHARITY	
1275 YORK AVENUE				
NEW YORK, NY 10065	-			10,00
METROPOLITAN MUSEUM OF ART	NONE	PC	UNRESRICTED USE BY	
100 FIFTH AVENUE			CHARITY	
NEW YORK, NY 10028				3,50
	L		INTERNATIONAL MAR DV	
MOUNT BETHEL VOLUNTEER FIRE COMPANY 128 MT. BETHEL ROAD	NONE	PC	UNRESRICTED USE BY CHARITY	
WARREN, NJ 07059				51
PENN CLUB EMPLOYEE FUND	NONE	PC	UNRESRICTED USE BY	
30 w 44TH ST	•		CHARITY	
NEW YORK, NY 10036				5(
PRATHAM USA	NONE	PC	UNRESRICTED USE BY	
55 EXCHANGE PLACE SUITE 402			CHARITY	15,0
NEW YORK, NY 10005				15,00
READ ALLIANCE	NONE	PC	UNRESRICTED USE BY	
160 BROADWAY 8TH FLOOR EAST BUILDING			CHARITY	
NEW YORK, NY 10038			,	5,0
SHRINER HOSPITAL FOR CHILDREN	NONE	PC	UNRESRICTED USE BY	
2900 ROCKY POINT DRIVE			CHARITY	
TAMPA, FL 33607	1			10,00 125,00

3 Grants and Contributions Paid During the	(Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	COURTRACTOR	Amount
SPHINX SENIOR SOCIETY	NONE	PC	UNRESRICTED USE BY	
203 EAST 72ND ST APT 15E			CHARITY	
NEW YORK, NY 10021				5,0
ST JUDES MISSION	NONE	PC	UNRESRICTED USE BY	
262 DANNY THOMAS PLACE			CHARITY	10,00
MEMPHIS, TN 38105				
STRIVE	NONE	PC ,	UNRESRICTED USE BY	
205 EAST 122ND STREET 3RD FL			CHARITY	
NEW YORK, NY 10035		-		10,00
CONTINUENT DARWING ALLIANCE	NONE	PC	UNRESRICTED USE BY	
STUDENT PARTNER ALLIANCE 561 SPRINGFIELD AVE	NOME	**	CHARITY	
SUMMIT, NJ 07901				10,00
				,
THE FRICK COLLECTION	NONE	PC	UNRESRICTED USE BY	
1 E 70TH ST			CHARITY	
NEW YORK, NY 10021				2,32
TRUSTEES UNIVERSITY OF PENNSYLVANIA	NONE	PC	UNRESRICTED USE BY CHARITY	
421 CURIE BLVD PHILADELPHIA, PA 19104			CHARITI	10,00
UNICEF	NONE	PC	UNRESRICTED USE BY	
125 MAIDEN LANE			CHARITY	
NEW YORK, NY 10038			<del></del>	10,10
WARREN TOWNSHIP POLICE PBA PO BOX 4212	NONE	PC	UNRESRICTED USE BY CHARITY	
WARREN, NJ 07059			C.M.L.L	1,00
				, , , , ,
WARREN TOWNSHIP RESCUE SQUAD	NONE	PC	UNRESRICTED USE BY	
6 BARDY RD #5634			CHARITY	
WARREN, NJ 07059				5
WASUTNOTON VALLEY DESCUE SOUAD	NONE	PC	UNRESRICTED USE BY	
WASHINGTON VALLEY RESCUE SQUAD 4 WILLOW ST	HOME	"	CHARITY	
BLACKWOOD, NJ 08012				5
Total from continuation sheets			<del></del>	

Form 990-P	F (2019) ANVI GROUP CHAI	RITABLE	FOUNDATION ]	INC.	. 83-	<u>2896593 Page 12</u>
Part XV	Analysis of Income-Produ	cing Activit	ties			
Enter arass	amounts unless otherwise indicated.	Unrelate	ed business income		ided by section 512, 513, or 514	(e)
Litter gross	amounts amoss other was maloutou.	(a)	(b)	(C) Exclu-	(d)	Related or exempt
		(a) Business	Amount	sion	Amount	function income
1 Program	service revenue:	code	7 1110 2110	code	, and an	
a				<u> </u>		
b						
	·		_			<del>-</del>
·			·		-	
'		· <del> </del>		1	-	
g Fees	and contracts from government agencies		ļ	<u> </u>		
2 Members	ship dues and assessments			ļ		
3 Interest	on savings and temporary cash					
investme	ents					
4 Dividend	s and interest from securities					73,815.
•	al income or (loss) from real estate:	ALW. SEE		x		
		- Miller Van Liber Van 1889	The transportance of the second second	. in substitutes	Section of the Control of the Contro	#1-(4943)*#\$(44,c*4, / 24464)**********************************
	-financed property			<del> </del>		
	lebt-financed property					·
6 Net renta	al income or (loss) from personal		1			
property				<u> </u>		
7 Other inv	vestment income					
8 Gain or (	loss) from sales of assets other					
than inve	•					41,014.
				<u> </u>	1	
	me or (loss) from special events	<b>—</b>	<del></del>	$\vdash$		
	ofit or (loss) from sales of inventory		· · · · · · · · · · · · · · · · · · ·	├		
11 Other rev	venue;					
a				<u> </u>		
b			<u></u>			
C						
e						
	. Add columns (b), (d), and (e)		0.	1276	0.	114,829.
		many a supplement of		Total Assum	•	114,829.
	dd line 12, columns (b), (d), and (e)				13	114,027.
(See worksh	neet in line 13 instructions to verify calculations.)					
Part XV	Relationship of Activities t	to the Acco	omplishment of Exe	empt	Purposes	
Services content and seed.	- Ukonocom		· · · · · · · · · · · · · · · · · · ·		<del></del>	- · · ·
Line No.	Explain below how each activity for which inco	ome is reported	in column (e) of Part XVI-A	contril	buted importantly to the accon	nplishment of
▼	the foundation's exempt purposes (other than	by providing fu	inds for such purposes).			
5	INTEREST AND DIVIDENDS	PROVIDI	ED CASH FOR C	HAF	RITABLE CONTRI	BUTIONS.
8	PROCEEDS FROM SALES PRO					
	111001111111111111111111111111111111111		<u> </u>			
		•				<del></del>
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					<del></del>	

923621 12-17-19

F <u>orm 990-Pl</u>				FOUNDATION		83-28		Pa	age <b>13</b>
Part XV			nsfers to ar	nd Transactions a	nd Relationshi	ips With Noncha	ritable		
4 5 411	Exempt Organ		- ( ) - ( - 11			504/-)		Yes	No
	e organization directly or indi than section 501(c)(3) orgai					on 501(c)	İ	163	140
•	ers from the reporting found	•		•					
(1) Ca	· · ·	ation to a nononam	abio champt org	ameadon of			1a(1)		X
	ther assets						1a(2)	_	Х
٠,	transactions:								
(1) Sa	ales of assets to a noncharita	able exempt organiz	ation				15(1)		Х
(2) Pi	urchases of assets from a no	oncharitable exempt	organization				1b(2)		X
(3) R	ental of facilities, equipment,	, or other assets					1b(3)	ļ	X
	eimbursement arrangements	3					1b(4)	ļ	X
	oans or loan guarantees						1b(5)	$\overline{}$	X
` '	erformance of services or me	•	-				1b(6)		X
	ng of facilities, equipment, ma answer to any of the above is				wave chow the fair r	narket value of the good	L 1c	ente.	<u> </u>
	vices given by the reporting t			• •				, ,	
	n (d) the value of the goods,				,,		,		
(a) Line no	(b) Amount involved			exempt organization	(d) Description	of transfers, transactions, a	nd sharing arr	angemei	nts
			N/A						
		<del></del>							
		ļ							
		<del> </del>			-				
		+							
-	· · · · · · · · · · · · · · · · · · ·	+		- <del></del>					
	·	+		_					
		+		•	·-				
		1							
						<del></del>			
	foundation directly or indirec	•		or more tax-exempt organ	izations described			TV	л
	tion 501(c) (other than section		section 527?				Yes	L	No
b it Yes	s," complete the following sch (a) Name of or			(b) Type of organization	1	(c) Description of relation	nshin		
	N/A	gamzatton		(b) Typo of organization		(a) cooripion or rolate	р		
	21, 22								
	nder penalties of perjury, I declare nd belief, it is true, correct, and cor						May the IRS	discuss 1	this
Sign   " Here		5 6 1-1-1				shown below? See instr			
	Cupatura of afficer or trusto	agguri		8/17/2020	OFFICE Title	SR	X Yes	<b>.</b>	No
	Signature of officer or truster  Print/Type preparer's n		Preparer's si	onature *	Date	Check If PTI	N		
	Transcripte preparer 5 ii	idi i i i	Ι Ιτυραίτι ο δί		54.0	self- employed	••		
Paid	SCOTT TEST	A		Sot Seite	07/28/2020		00003	620	
Prepare			LLP		· · · · · · · · · · · · · · · · · · ·	Firm's EIN ► 13-			
Use On		<b></b>							
	Firm's address ▶ 11	L1 WOOD A	VENUE SO	OUTH .		1			

ISELIN, NJ 08830-2700

Phone no. 732-243-7000 Form **990-PF** (2019)

### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

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

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

OMB No 1545-0047

2019

**Employer identification number** Name of the organization ANVI GROUP CHARITABLE FOUNDATION INC. 83-2896593 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 X 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** X 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 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 \$

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

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization

Employer identification number

#### ANVI GROUP CHARITABLE FOUNDATION INC.

83-2896593

WIAT A	SKOUP CHARITABLE FOUNDATION INC.		-2030333
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	PURNA & SHRIDEVI SAGGURTI  11 WILLOW WOODS TRAIL  WARREN, NJ 07059-5565	\$ 2,001,476.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Omnicash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occupate Part II for noncash contributions )

Name of organization

Employer identification number

#### ANVI GROUP CHARITABLE FOUNDATION INC.

83-2896593

art II.	Noncash Property (see instructions) Use duplicate copies of Pa	<del></del>	-2896593
**************************************	(see instructions) ose duplicate copies of ra	T I I additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions )	(d) Date received
-	57,721 SHARES OF BANK OF AMERICA CORP (BAC)		
		 	12/13/19
(-)			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
			-
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		_	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		s	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
			<del> </del>
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1			
_			
453 11-06-	10		90, 990-EZ, or 990-PF) (2

923454 11-06-19

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

FORM 990-PF	DIVIDENDS	AND INTER	EST FROM	SECURI	TIES S	TATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A REVE S PER B	NUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM
MERRILL LYNCH 86B-02017 MERRILL LYNCH	36,130.		0. 36	,130.	36,130.	
86B-02019 MERRILL LYNCH	23,330.	,	0. 23	,330.	23,330.	
86B-02020	14,355.	,	0. 14	,355.	14,355.	
TO PART I, LINE 4	73,815.	,	0. 73	,815.	73,815.	
					1	
FORM 990-PF		TAX	ES		S	TATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOME	(D) CHARITABLI PURPOSES
FOREIGN TAXES		644.		644.		0
TO FORM 990-PF, PG	1, LN 18	644.		644.		0
FORM 990-PF		OTHER E	XPENSES		s	TATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOME	(D) CHARITABLI PURPOSES
ACCOUNTING FEES INVESTMENT FEES	_	1,155. 5,693.		578. 693.		578 0
		6,848.	6,			578

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT 4

NAME OF MANAGER

PURNA SAGGURTI SHRIDEVI SAGGURTI