810652266 07/18/2008 10:48 AM

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047 Open to Public Inspection

Dep Inte	artment o	of the Treasury enue Service		► Th	e organ	ization m	b ay have to	enefit trus o use a co	st or privat py of this re	e found turn to	dation) satisfy) rstate re	· · · eporting r	requirem	ents.		Open to Public	
Α	For the	2007 ca <u>lend</u>	ar yea	r, or tax	year be	ginning		,	and endin	g								
В	Check if a		,	Name	of organ	ization									D	Employe	er identification	n number
	Address c	hange use labe														81-0	065226	6
	Name cha			The	₃ Su	ndar:	i Four	ndati	on, Ir	nc.					Е	Telepho	one number	
П	Initial retur	typ				•			livered to stre	et addre	ss)		Room/s	uite		305-	<u>-613-1</u>	<u>573</u>
H		Snoo		217	/ <u>NW</u>	15 8	Stree	t							_	Account	ing method:	Cash
\sqcup	Terminatio	on Instr		City or	town, st	ate or cou	ntry, and ZI	IP + 4							X	Accrual	Othe	r (specify)
	Amended	return tion	ns.	Mia	<u>ami</u>				FL 33	3136					<u> </u>			
	Application	n pending				-			nexempt ch		H a	and I are	not applica	able to se	ction 5	527 orga	nizations.	
			trus	sts must	attach a	a complet	ed Schedi	ule A (Form	n 990 or 990	-EZ).	,	•	s a group				Ye	s X No
G		e: N/A									H(l	b) If "Ye	es," enter r	number of	f affilia	tes 🕨		
J	Organi	zation type			_		_	_	_	7	H(d	c) Area	all affiliates	s included	l?		Ye	s No
	(check	only one)	X 5	01(c) (<u>3</u>)	∢ (inse	rt no.)	4947(a	a)(1) or	527	_	(If "No	o," attach a li	st. See instr	ructions	.)		
K	Check h	ere 🕨	if the o	rganizatio	n is not a	a 509(a)(3)	supporting	organizatio	on and its gro	ss	H(c	d) Is thi	s a separa	ate return	filed b	y an		==
	receipts	are normally no	t more	than \$25,0	ງ00. A re	turn is not	required, b	out if the org	anization cho	oses			nization co				? Ye :	s X No
	to file a r	return, be sure to	o file a d	complete i	eturn.								up Exemp					
	_								074	001			_		U		n is not requ	
***********		receipts: Add li						Not Acc		,880							Z, or 990-P	'F).
	Part I								sets or F	una B	alan	ces (S	see the	ınstru	Ction	15.)		
	1	Contributions		•			ınts receiv	/ed:		ĺ	. 1							
	a	Contributions									1a		625	7,805	=			
	b	Direct public	suppo	rt (not ind	ciuaea c	on line 1a	1)				1b		02	, 803)			
	C	Indirect public									1c 1d		170	766	=			
	d	Government		,,	, ,	•			20	L	10			_			70	8,571
	_	e Total (add lines 1a through 1d) (cash \$ 785,928 noncash \$ 12,643)										16	+	19	0,3/I			
	2	 Program service revenue including government fees and contracts (from Part VII, line 93) Membership dues and assessments 										3						
	4															-	2	0,140
	5	Interest on sa	avillys Id intor	and tem	cocuriti	oc	Sunenis .								5	-	4	0,140
	6a	Dividends an Gross rents									6a				3			
	b	Less: rental e									6b							
	C	Net rental inc													60			
	7	Other investr)					7			
Jue	8a	Gross amour		`				(4	A) Securities	<i>)</i>	· · · · · · ·		(B) Other	<u></u>	•			
Revenue	00	than inventor							y coountion		8a		(2) Outlot					
å	b	Less: cost or									8b							
	C	Gain or (loss)				- 1					8c							
	d	Net gain or (le						D)		ı					80	ı		
	9	Special even										₽						
	а	Gross revenu	ue (not	includin	g \$,	of	J	•								
		contributions									9a		151	1,169	9			
	b	Less: direct e	expens	es other	than fu	ndraising	expenses	S			9b			1,336				
	С	Net income o									,				90	;	6	9,833
	10a	Gross sales									10a							
	b	Less: cost of	goods	sold						[10b							
	С	Gross profit of	or (loss) from sa	ales of in	nventory	(attach sc	hedule). S	Subtract line	10b fro	om line	10a			100	С		
	11	Other revenu	,		-	,									11	I		5 , 000
	12	Total revenu													12	2		3,544
'n	13	Program serv	vices (f	rom line	44, colu	umn (B))									13			7,120
Expenses	14	Management	t and g	eneral (f	rom line	e 44, colu	mn (C)) .								14	_		6,601
per	15	Fundraising ((from li	ne 44, co	olumn (I	D))									15		1.	5 , 643
Щ	16	Payments to	affiliate	es (attac	h sched	lule)									16	_		0 064
	17	Total expens	ses. A	dd lines	16 and 4	44, colum	nn (A)								17			9,364
sets	18	Excess or (de													18			4,180
Ass	19	· · · · · · · · · · · · · · · · · · ·							19			6,529						
Net Assets	20													±	20			9,793
	21 Privacy	Net assets or y Act and Pap	r tund b	k Reduc	at end	of year. (ombine li	ines 18, 19	9, and 20		<u></u>	<u></u>			21	I		0,916
ins DA/	truction	is.	/G! WU!	n neuut	ALION AC	, House	, 300 1110 1	ospai ate									Form \$	990 (2007)

Statement of

Part II

The Sundari Foundation, Inc. Form 990 (2007)

81-0652266

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4)

Page 2

Functional Expenses organizations at	nd section	1 4947(a)(1) nonexen	npt charitable trusts bi	it optional for others. (S	see the instructions.)
Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach schedule)					
(cash \$)					
If this amount includes foreign grants, check here	22a				
22b Other grants and allocations (attach schedule)					
(cash \$)					
If this amount includes foreign grants, check here	22b				
23 Specific assistance to individuals (attach	220				
	23				
schedule) 24 Benefits paid to or for members (attach	23				
	24				
schedule)	24				
25a Compensation of current officers, directors,					
key employees, etc. listed in	05-				
Part V-A	25a				
b Compensation of former officers, directors,					
key employees, etc. listed in					
Part V-B	25b				
c Compensation and other distributions, not included above,					
to disqualified persons (as defined under section					
4958(f)(1)) and persons described in section 4958(c)(3)(B)	25c				
26 Salaries and wages of employees not included					
on lines 25a, b, and c	26	256 , 775	249,544	7,231	
27 Pension plan contributions not included on					
lines 25a, b, and c	27				
28 Employee benefits not included on lines					
25a – 27	28				
29 Payroll taxes	29				
30 Professional fundraising fees	30				
31 Accounting fees	31				
32 Legal fees	32				
33 Supplies	33				
34 Telephone	34				
35 Postage and shipping	35				
36 Occupancy	36	4,077	2,611	1,466	
37 Equipment rental and maintenance	37	_		_	
38 Printing and publications	38				
39 Travel	39				
40 Conferences, conventions, and meetings	40				-
41 Interest	41				
42 Depreciation, depletion, etc. (attach schedule)	42	24,706	24,706		
43 Other expenses not covered above (itemize):					
a See Statement 2	43a	463,806	400,259	47,904	15,643
L	43b	200,000	100,100		
	43c				
cd	43d				
•	43e				
e	43e				
<u> </u>					
9	43g				
44 Total functional expenses. Add lines 22a					
through 43g. (Organizations completing					
columns (B)-(D), carry these totals to lines	, ,	740 364	677 120	E6 601	15 642
13-15)	44	749,364	677,120	56,601	15,643
Joint Costs. Check ► ☐ if you are following SOP 98-2.	_				
Are any joint costs from a combined educational campaign and	fundraisi	-			Yes X No
If "Yes," enter (i) the aggregate amount of these joint costs\$			nt allocated to Program s		;
(iii) the amount allocated to Management and genera\$; and (iv) the amou	int allocated to Fundraisin	ıg\$	
DAA					Form 990 (2007)

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? See Statement 3	•		Program Service Expenses
All organizations must describe their exempt purpose of clients served, publications issued, etc. Discuss a proganizations and 4947(a)(1) nonexempt charitable	chievements that are trusts must also enter	not measurable. (Section 501(c)(3) and (4) the amount of grants and allocations to others.)	(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a Operation of shelter as women. Provided shelter support services to over infants and toddlers.	r, food, cl	othing and wrap-around	
(Grants and allocations \$		If this amount includes foreign grants, check here	677,120
b See Statement 4		ii tilis amount includes foreign grants, check here	0777120
(Grants and allocations \$)	If this amount includes foreign grants, check here	7
С			
(O		Making and the facility and the latest N	٦
(Grants and allocations \$)	If this amount includes foreign grants, check here	
d			
			_
(Grants and allocations \$)	If this amount includes foreign grants, check here	
e Other program services (attach schedule)			_
(Grants and allocations \$)	If this amount includes foreign grants, check here	
f Total of Program Service Expenses (should e	qual line 44, column (l	B), Program services)	677,120
			Form 990 (2007)

	aitiv	Balance Gricels (Gee the methaliane)						
	Note:	Where required, attached schedules and amounts with column should be for end-of-year amounts only.	ion	(A) Beginning of year		(B) End of year		
	45	Cash—non-interest-bearing				583,949	45	656,524
	46	Savings and temporary cash investments				•	46	366,213
	47a	Accounts receivable	47a		50,786			
	b	Less: allowance for doubtful accounts	47b		_	355,186	47c	50,786
	48a	Pledges receivable	48a					
	b	Less: allowance for doubtful accounts	48b				48c	
	49	Grants receivable					49	
	50a	Receivables from current and former officers, directors						
		key employees (attach schedule)		50a				
	b	Receivables from other disqualified persons (as define	d under	section	n 4958(f)(1)) and			
		persons described in section 4958(c)(3)(B) (att. schedu			.,.,,		50b	
	51a	Other notes and loans receivable (attach	,					
		schedule)	51a					
ssets	b	Less: allowance for doubtful accounts	51b				51c	
Y SS	52	Inventories for sale or use					52	
`	53	Prepaid expenses and deferred charges				16,564		15,069
	54a	Investments—nublicly-traded			Cost FMV		54a	
	b	securities Investments—other securities			Cost FMV		54b	
		(attach schedule)		_] 0031 [] 11111		048	
	55a	Investments—land, buildings, and	55a					
	b	equipment: basis Less: accumulated depreciation (attach	Jou					
	_	schedule)	55b				55c	
	56	Investments—other (attach schedule)					56	
	57a	Land, buildings, and equipment: basis	57a		607,974		30	
	b	Less: accumulated depreciation (attach	Jia		0017511			
		schedule) See Statement 5	57b		31,999	514,562	57c	575,975
	58	Other assets, including program-related investments	370		31,000	311,302	3/6	3131313
	30				,	522,087	58	4,159
	59	Total assets (must equal line 74). Add lines 45 through	 h 50)	1,992,348	59	1,668,726
	60	Accounts payable and accrued expenses				5,819	60	25,345
	61					3/013	61	25/515
	62	Defended and a second					62	
	63	Loans from officers, directors, trustees, and key emplo					UZ	
ties	03	11-1-1	` `				63	
abilitie	64a	Tax-exempt bond liabilities (attach schedule)					64a	
Ë	b	Mortgages and other notes payable (attach schedule)					64b	
	65	Other liabilities (describe See Statemen	+ 7				65	32,465
	03	Other habilities (describe P 200 200 200 200 200 200 200 200 200 2	· · · · · · · · · · · · · · · · · · ·		······ / 		- 00	32/103
	66	Total liabilities. Add lines 60 through 65				5,819	66	57,810
		nizations that follow SFAS 117, check here ► X a				- 7		
	J. 3	67 through 69 and lines 73 and 74.						
S	67	Unrestricted				1,214,093	67	1,610,916
nce	68	Temporarily restricted				772,436	68	
<u>ala</u>	69	Bana and the section of					69	
В В		nizations that do not follow SFAS 117, check here	• ∏ a	ınd				
בַּ	J. 3	complete lines 70 through 74.	ш -					
<u>.</u>	70	Capital stock, trust principal, or current funds					70	
Net Assets or Fund Balances	71	Paid-in or capital surplus, or land, building, and equipm		٠ ا			71	
SS	72	Retained earnings, endowment, accumulated income,					72	
¥.	73	Total net assets or fund balances. Add lines 67 throu					- =	
ž	•	70 through 72. (Column (A) must equal line 19 and co	•					
		equal line 21)		1,986,529	73	1,610,916		
	74	Total liabilities and net assets/fund balances. Add li				1,992,348	74	1,610,916 1,668,726

n 990 (2007) The Sundari Foundacton, The.	oial Statements With Day		Pag
art IV-A Reconciliation of Revenue per Audited Fina	ncial Statements with Reve		
instructions.)			/A
Total revenue, gains, and other support per audited financial statements		a	
Amounts included on line a but not on Part I, line 12:	1 1		
Net unrealized gains on investments	b1		
Donated services and use of facilities	b2		
Recoveries of prior year grants	b3		
Other (specify):			
	b4		
Add lines b1 through b4		b	
Subtract line b from line a			
Amounts included on Part I, line 12, but not on line a:			
Investment expenses not included on Part I, line 6b	d1		
Other (specify):			
Add lines d1 and d2		d	
Total revenue (Part I, line 12). Add lines c and d			
art IV-B Reconciliation of Expenses per Audited Fin	ancial Statements With Exp	enses per ReturnN	/A
Total expenses and losses per audited financial statements		a	
Amounts included on line a but not Part I, line 17:			
Donated services and use of facilities	b1		
Prior year adjustments reported on Part I, line 20	b2		
Losses reported on Part I, line 20	b3		
Other (specify):			
	I= 4		
Add lines b1 through b4		b	
Subtract line b from line a		_	
Amounts included on Part I, line 17, but not on line a:			
Investment expenses not included on Part I, line 6b	d1		
Other (specify):			
	40		
Add lines d1 and d2		d	
Total expenses (Part I line 17) Add lines c and d		▶ e	

Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.) Part V-A

(A) Name and add	iress	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Constance Collins Margulies	Miami	President, D			
217 NW 15th Street	FL 33136	40	0	0	0
Natasha Duwin	Miami Beach	Director			
1446 Lenox Avenue #1	FL 33139	1	0	0	0
Burton Hersh	Coral Gables	VP, Director			
300 Aragon Avenue, Ste 330	FL 33134	5	0	0	0
Marti Mang	Miami	Treasurer, D			
2720 Coral Way	FL 33145	5	0	0	0
Isabel Moros-Rigau	Miami	Director			
35 SW 61st Avenue	FL 33144	5	0	0	0
Peggy Nolan	Hollywood	Director			
1440 Plunkett Street	FL 33020	5	0	0	0
Brian Peterson	Miami	Director			
3901 SW 7th Street	FL 33134	5	0	0	0
Claudia Kitchens	Miami	Director			
2650 SW 27th Avenue, Ste 303	FL 33131	1	0	0	0
Katheryn Villano	Miami	Director			
2453 Inagua Avenue	FL 33133	1	0	0	0
Sydney Cohen	Bay Harbor Island	Secretary			
9120 West Bay Harbor Drive #3b	FL 33154	1	0	0	0

Form	990 (2007) The Sundari Foundation, Inc.	81-0652	266			P	age 6
Pa	rt V-A Current Officers, Directors, Trustees, and Key Emplo	yees (continued)			Yes	No
75a	Enter the total number of officers, directors, and trustees permitted to vote on organ		oard				
_	meetings						
b	Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A,		ted				
	employees listed in Schedule A, Part I, or highest compensated professional and of contractors listed in Schedule A, Part II-A or II-B, related to each other through fami						
	relationships? If "Yes," attach a statement that identifies the individuals and explain				75b		х
	,	1 ()					
С	Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A,	or highest					
	compensated employees listed in Schedule A, Part I, or highest compensated profe						
	independent contractors listed in Schedule A, Part II-A or II-B, receive compensation						
	organizations, whether tax exempt or taxable, that are related to the organization? § the definition of "related organization."				75c		х
	If "Yes," attach a statement that includes the information described in the instruction				730		22
d	Does the organization have a written conflict of interest policy?				75d		Х
***************************************	rt V-B Former Officers, Directors, Trustees, and Key Emplo)the	Ber	efits
	(If any former officer, director, trustee, or key employee received compe				e yea	r, list t	hat
	person below and enter the amount of compensation or other benefits	n the appropriate col				-\ F	
	(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	acco	E) Expe ount and allowan	d other
. N/	A						
Pa	rt VI Other Information (See the instructions.)					Yes	No
76	Did the organization make a change in its activities or methods of conducting activities	ies? If "Yes," attach a					
	detailed statement of each change				76	 	X
77	Were any changes made in the organizing or governing documents but not reported If "Yes," attach a conformed copy of the changes.	to the IRS?			77		
78a	Did the organization have unrelated business gross income of \$1,000 or more during	o the year covered b	v				
	this return?				78a		х
b	If "Yes," has it filed a tax return on Form 990-T for this year?				78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the	e year? If "Yes," atta	ch				
	a statement				79		X
80a	•		h				
	common membership, governing bodies, trustees, officers, etc., to any other exemporanization?				80a	Х	
h	organization? If "Yes," enter the name of the organization ▶ Lotus Endown	nent Fund.	Inc.		oud	41	
	and check wh	ether it is X exem	pt or non	exempt			
81a	Enter direct and indirect political expenditures. (See line 81 instructions.)		31a	0			
h	Did the organization file Form 1120-POI for this year?				81h		X

Form	990 (2007) The Sundari Foundation, Inc. 81	L-065	2266			P	Page 7
Pa	rt VI Other Information (continued)					Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities a	at no cha	ırge				
	or at substantially less than fair rental value?				82a	Х	
b	If "Yes," you may indicate the value of these items here. Do not include this						
	amount as revenue in Part I or as an expense in Part II.						
	(See instructions in Part III.) See Stmt	8	82b	57 , 736			
83a	Did the organization comply with the public inspection requirements for returns and exemption	applicat	ions?		83a	Х	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contribut	tions?		N/A	83b		
84a	Did the organization solicit any contributions or gifts that were not tax deductible?				84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such con	ntribution	s or				
	gifts were not tax deductible?			N/A	84b		
85a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?			N/A	85a		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			N/A	85b		
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the						
	received a waiver for proxy tax owed for the prior year.						
С	Dues, assessments, and similar amounts from members		85c				
d	Section 162(e) lobbying and political expenditures		85d				
е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		85e				
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)		85f				
g	Does the expenientian elect to now the acction 6022(a) toy and the amount on line 9552			N/A	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amour						
	to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditure	es for the	Э				
	following tax year?			N/A	85h		
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12		86a				
b	Gross receipts, included on line 12, for public use of club facilities		86b				
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders		87a				
b	Gross income from other sources. (Do not net amounts due or paid to other						
	sources against amounts due or received from them.)		87b				
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable cor		or				
	partnership, or an entity disregarded as separate from the organization under Regulations sec	ctions					
	301.7701-2 and 301.7701-3? If "Yes," complete Part IX				88a		X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity w						
	meaning of section 512(b)(13)? If "Yes," complete Part XI			•	88b		X
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year und						
	section 4911 ▶ 0 ; section 4912 ▶ 0 ; section	n 4955	>	0			
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit	transacti	on				
	during the year or did it become aware of an excess benefit transaction from a prior year? If "Y	es," atta	ch				
	a statement explaining each transaction				89b		X
С	Enter: Amount of tax imposed on the organization managers or disqualified						
	persons during the year under sections 4912, 4955, and 4958		>	0			
d	persons during the year under sections 4912, 4955, and 4958 Enter: Amount of tax on line 89c, above, reimbursed by the organization		>	0			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited t						
	transaction?				89e		X
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable inst	urance c	ontract?		89f		X
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. I	Did the					
	supporting organization, or a fund maintained by a sponsoring organization, have excess busing	ness hol	dings				
	at any time during the year?				89g		X
90a	at any time during the year? List the states with which a copy of this return is filed FL,NY						
b	Number of employees employed in the pay period that includes March 12, 2007 (See						
	instructions.)			90b			6
91a	The books are in care of ► Constance Collins Margulies		Telephon	e no. ▶ 305-	613	-15	73
	445 Grand Bay Drive, PH1B						
	Located at ▶ Key Biscayne, FL		ZIP + 4 ▶	33149			
b	At any time during the calendar year, did the organization have an interest in or a signature or	other au	thority				
	over a financial account in a foreign country (such as a bank account, securities account, or ot	ther finar	ncial			Yes	No
	account)?				91b		X
	If " Yes," enter the name of the foreign country ▶						
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of F						

and Financial Accounts.

Form 990 (200	on) The Sundari Fo	oundation,	Inc.	81-0	652266			P	age 8
Part VI	Other Information (con	itinued)						Yes	No
c At any ti	me during the calendar year, did th	ne organization mainta	ain an office out	side of the United	States?		91c	;	X
If "Yes,"	enter the name of the foreign cour	ntry >							
92 Section	4947(a)(1) nonexempt charitable to	rusts filing Form 990	n lieu of Form 1	1041—Check here					▶ [
and ente	er the amount of tax-exempt interes	st received or accrued	d during the tax	year		▶ 92			
Part VII	Analysis of Income-Pro	oducing Activitie	es (See the	instructions.)					
Note: Enter gr	ross amounts unless otherwise		Unrelated	business income	Excluded b	y section 512, 513, or 514		(E)	
indicated.			(A) Business code	(B) Amount	(C) Exclusion	(D) Amount		elated or opt function	
93 Program	n service revenue:		Business code	Amount	code	Amount		ncome	011
a									
b									
С									
d									
е									
f Medicar	e/Medicaid payments	·							
g Fees an	d contracts from government agen	cies							
	ship dues and assessments								
95 Interest	on savings and temporary cash inv	restments					-	20,	140
	ds and interest from securities						-		
	al income or (loss) from real estate								
a debt-fina	anced property								
b not debt	-financed property								
98 Net rent	al income or (loss) from personal p	roperty							
	vestment income								
100 Gain or	(loss) from sales of assets other th	an inventory							
	me or (loss) from special events							69,	833
102 Gross p	rofit or (loss) from sales of inventor	у							
	evenue: a								
ь Oth	er income							5,	000
С		_							
е		_							
104 Subtotal	(add columns (B), (D), and (E))				0	0		94,	973
105 Total (a	dd line 104, columns (B), (D), and	(E))				>		94,	973
Note: Line 10	5 plus line 1e, Part I, should equal	the amount on line 12	2, Part I.						
Part VIII	Relationship of Activit	ies to the Accon	nplishment	of Exempt Pui	rposes (Se	ee the instruction	ıs.)		
Line No.	Explain how each activity for w	hich income is report	ed in column (E) of Part VII contrib	outed importa	ntly to the accomplish	ment		
▼	of the organization's exempt p	urposes (other than b	y providing fund	ls for such purpose	es).				
N/A									
Part IX	Information Regarding		liaries and I	Disregarded E			s.)		
Name add	(A) dress, and EIN of corporation,	(B) Percentage of	Ns	(C) ature of activities	-	(D) Fotal income	End-	(E) of-year	
partner	ship, or disregarded entity	ownership interes	it	iture or activities		Total moonic	as	ssets	
N/A	<u> </u>		%						
			%						
			%						
			%						
Part X	Information Regarding	Transfers Asso	ciated with	Personal Ben	efit Contra	acts (See the ins	tructio	ns.)	
(a) Did th	e organization, during the year, red	ceive any funds, direc	tly or indirectly,	to pay premiums o	n a personal	benefit contract?	. TY	res X	No
(b) Did th	e organization, during the year, pa	y premiums, directly o	or indirectly, on	a personal benefit	contract?		. 🗌 Y	res X	No
Note: If "Y	es" to (b), file Form 8870 and Forr	m 4720 (see instruction	ons).						

Form **990** (2007)

Part XI	Information Regarding Transfers To is a controlling organization as define			Diete Only II the	organizai	lion	1
	the reporting organization make any transfers to a co	•	ed in section 512(b)(13) of			Yes	No
the C	Code? If "Yes," complete the schedule below for each (A) Name, address, of each controlled entity	(B) Employer ID Number	(C) Descriptior transfer	n of	Amoun	(D) t of tra	X ansfer
a							
b							
c							
	Totals						
	the reporting organization receive any transfers from (b)(13) of the Code? If "Yes," complete the schedule b	•				Yes	No X
	(A) Name, address, of each controlled entity	(B) Employer ID Number	(C) Descriptior transfer	n of	Amoun	(D) t of tra	ansfer
a							
b							
c							
	Totals						
	the organization have a binding written contract in effe		6, covering the interest,		1	Yes	No
Please	Under penalties of perjury, I declare that I have examined and belief, it is true, correct, and complete. Declaration of						
Sign Here	Signature of officer Constance Collins Mar Type or print name and title	gulies	President	Date			
Paid Preparer's	Preparer's signature		Date 7/18/08	Check if self-employed	Preparer's (See Gen. 261-9	Instr. X) 6 – 4	028
Use Only	MILIAPES & C	xie Highway	7, Suite 201	EIN Phone no.	▶ 65-0		

Form **990** (2007)

SCHEDULE A (Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

Employer identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

		Tl	ne Sundari	Foundation,	Inc.		81-065226	6
Part I		the Five Highest Pa					nd Trustee	s
	(a) Name and address	s of each employee paid more \$50,000	CIT OHC. II UN	(b) Title and average hours		(c) Compensation	(d) Contributions to empl. benefit plans & deferred comp.	(e) Expense account and other allowances
Brooke J. I	Pette n Road #1508	Miami Beach FL 33139		Counselor 40		52,615	0	0
Total number of	of other employees paid o		>	0				
Part II-A	Compensation of	the Five Highest Pa	id Independ	ent Contractors	for Pro	fessional S	ervices	
	(See page 2 of the	e instructions. List ea	ch one (whe	ther individuals of	or firms)	. If there are	e none, ente	er "None.")
		of each independent contractor				(b) Type of se) Compensation
NONE		<u> </u>	<u> </u>					
·								
	of others receiving over \$5	50,000 for	_					
professional se		de Free History De	·		· · · · · · · ·	0		
Part II-B	(List each contrac	the Five Highest Patter who performed so none, enter "None."	ervices other	than profession	al servi			s or
		of each independent contractor			3. <i>)</i>	(b) Type of se	rvice (c) Compensation
NONE								
Total number of	of other contractors receiv	ing over						
\$50,000 for oth	ner services							
For Paperwor		see the Instructions for F	orm 990 and F	orm 990-F7		Schedule	A (Form 990	or 990-FZ) 2007

Pa	art III Statements About Activities (See page 2 of the instructions.)		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities \$ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	1		х
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)			
а	Sale, exchange, or leasing of property? See Statement 9	2a	Х	
b	Lending of money or other extension of credit?	2b		x
С	Furnishing of goods, services, or facilities? See Statement 10	2c	х	
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? See Statement 11	2d	х	
е	Transfer of any part of its income or assets?	2e		х
За	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)	3a		х
b	Did the organization have a section 403(b) annuity plan for its employees?	3b		х
С	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c		x
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		х
ta b	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g Did the organization make any taxable distributions under section 4966?	<u>4a</u> 4b		<u>x</u>
c	Did the organization make a distribution to a donor, donor advisor, or related person?	4c		
d	Enter the total number of donor advised funds owned at the end of the tax year			
е	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year			
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts		0	
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year			0

Pa	art I	V Reason for Non-Private Found	ation Status (See	pages 4 through 8	8 of the inst	tructions.)				
l cer	tify th	nat the organization is not a private foundation be A church, convention of churches, or associatio			e box.)					
6		A school. Section 170(b)(1)(A)(ii). (Also comple	te Part V.)							
7		A hospital or a cooperative hospital service orga	anization. Section 170(b))(1)(A)(iii).						
8		A federal, state, or local government or government	mental unit. Section 170((b)(1)(A)(v).						
9		A medical research organization operated in co	njunction with a hospital	. Section 170(b)(1)(A)(i	iii). Enter the h	nospital's nam	e, city,			
	and state ▶									
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the Support Schedule in Part IV-A.)								
11a	X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)								
11b		A community trust. Section 170(b)(1)(A)(vi). (Als	so complete the Suppor	t Schedule in Part IV-A	٩.)					
12	An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions-subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)									
13	An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization: Type II Type III-Functionally Integrated Type III-Other									
		Provide the following inform	ation about the sunnor	rted organizations (S	ee nage 8 of th	e instructions				
Provide the following inform (a) Name(s) of supported organization(s)			(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in		(e) Amount of support			
					Yes	No				
Tota	ıl				<u></u>	>				
14		An organization organized and operated to test	for public safety. Section	n 509(a)(4). (See page	8 of the instru	ctions.)				
		organization organized and operated to test	.c. pablic caloty. Cootion	555(a)(i). (566 page	5 51 415 11151141	J. J. 10. j				

Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting. Calendar year (or fiscal year beginning in) (a) 2006 **(b)** 2005 (d) 2003 (e) Total Gifts, grants, and contributions received. (Do 303,054 224,900 10,590 not include unusual grants. See line 28.) 16 Membership fees received Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the 174,059 174,059 organization's charitable, etc., purpose Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the 14,918 14,918 organization after June 30, 1975 Net income from unrelated business activities not included in line 18 Tax revenues levied for the organization's benefit and either paid to it or expended on 0 its behalf The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge Other income, Attach a schedule, Do not include gain or (loss) from sale of capital assets 10,590 Total of lines 15 through 22 317,972 224,900 10,590 Line 23 minus line 17 24 2,249 25 Enter 1% of line 23 11,069 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 26a b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts 139,755 26b 553,462 c Total support for section 509(a)(1) test: Enter line 24, column (e) 26c **d** Add: Amounts from column (e) for lines: 18 **14,918** 19 154,673 26d 398,789 e Public support (line 26c minus line 26d total) 26e 72.0535% Public support percentage (line 26e (numerator) divided by line 26c (denominator)) 26f Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A(2005) (2004) b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess N/A amounts) for each year: Add: Amounts from column (e) for lines: 20 27c 17 d Add: Line 27a total and line 27b total 27d Public support (line 27c total minus line 27d total) 27e f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) 27g h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) 27h Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

Private School Questionnaire (See page 9 of the instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV) Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, Yes 29 other governing instrument, or in a resolution of its governing body? 29 30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, 31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? 31 If "Yes," please describe: if "No," please explain, (If you need more space, attach a separate statement,) Does the organization maintain the following: Records indicating the racial composition of the student body, faculty, and administrative staff? 32a Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 32b Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 32c d Copies of all material used by the organization or on its behalf to solicit contributions? 32d If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: Students' rights or privileges? 33a Admissions policies? Employment of faculty or administrative staff? 33c Scholarships or other financial assistance? Educational policies? 33e Use of facilities? 33f Athletic programs? 33g Other extracurricular activities? 33h If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization receive any financial aid or assistance from a governmental agency? **b** Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement. Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05

of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation

(To be completed ONLY by an eligible organization that filed Form 5768) N/A Check ▶ a if the organization belongs to an affiliated group. Check ▶ b if you checked "a" and "limited control" provisions at (a) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) 36 Total lobbying expenditures to influence public opinion (grassroots lobbying) 37 Total lobbying expenditures to influence a legislative body (direct lobbying) 38 Total lobbying expenditures (add lines 36 and 37) 39 Other exempt purpose expenditures 40 Total exempt purpose expenditures (add lines 38 and 39) 41 Lobbying nontaxable amount. Enter the amount from the following table- If the amount on line 40 is- Not over \$500,000 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000	
Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) 36 Total lobbying expenditures to influence public opinion (grassroots lobbying) 37 Total lobbying expenditures to influence a legislative body (direct lobbying) 38 Total lobbying expenditures (add lines 36 and 37) 39 Other exempt purpose expenditures 39 Other exempt purpose expenditures (add lines 38 and 39) 40 Total exempt purpose expenditures (add lines 38 and 39) 41 Lobbying nontaxable amount. Enter the amount from the following table- If the amount on line 40 is- Not over \$500,000 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000	eted ng ns
Total lobbying expenditures to influence public opinion (grassroots lobbying) 36 37 Total lobbying expenditures to influence a legislative body (direct lobbying) 38 Total lobbying expenditures (add lines 36 and 37) 39 Other exempt purpose expenditures 40 Total exempt purpose expenditures (add lines 38 and 39) 41 Lobbying nontaxable amount. Enter the amount from the following table- If the amount on line 40 is- Not over \$500,000 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000	
37 Total lobbying expenditures to influence a legislative body (direct lobbying) 38 Total lobbying expenditures (add lines 36 and 37) 39 Other exempt purpose expenditures 40 Total exempt purpose expenditures (add lines 38 and 39) 41 Lobbying nontaxable amount. Enter the amount from the following table- If the amount on line 40 is- Not over \$500,000 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000	
38 Total lobbying expenditures (add lines 36 and 37) 39 Other exempt purpose expenditures 40 Total exempt purpose expenditures (add lines 38 and 39) 41 Lobbying nontaxable amount. Enter the amount from the following table- If the amount on line 40 is- Not over \$500,000 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000	
39 Other exempt purpose expenditures 40 Total exempt purpose expenditures (add lines 38 and 39) 41 Lobbying nontaxable amount. Enter the amount from the following table- If the amount on line 40 is- Not over \$500,000 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000	
40 Total exempt purpose expenditures (add lines 38 and 39) 41 Lobbying nontaxable amount. Enter the amount from the following table- If the amount on line 40 is- Not over \$500,000 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000	
41 Lobbying nontaxable amount. Enter the amount from the following table- If the amount on line 40 is- Not over \$500,000 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000	
If the amount on line 40 is- The lobbying nontaxable amount is- Not over \$500,000 20% of the amount on line 40 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000	
Not over \$500,000 20% of the amount on line 40 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000	
Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000	
Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000	
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000	
Over \$17,000,000 \$1,000,000	
42 Grassroots nontaxable amount (enter 25% of line 41)	
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	
Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.	
4-Year Averaging Period Under Section 501(h)	
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.	
See the instructions for lines 45 through 50 on page 13 of the instructions.)	
Lobbying Expenditures During 4-Year Averaging Period	
Calendar year (or (a) (b) (c) (d) (e)	
fiscal year beginning in) ▶ 2007 2006 2005 2004 Total	
45 Lobbying nontaxable amount	
46 Lobbying ceiling amount (150% of	
46 Lobbying ceiling amount (150% of	
46 Lobbying ceiling amount (150% of line 45(e))	
46 Lobbying ceiling amount (150% of line 45(e))	
46 Lobbying ceiling amount (150% of line 45(e))	
46 Lobbying ceiling amount (150% of line 45(e)) 47 Total lobbying expenditures 48 Grassroots nontaxable amount	
46 Lobbying ceiling amount (150% of line 45(e))	
46 Lobbying ceiling amount (150% of line 45(e)). 47 Total lobbying expenditures	
46 Lobbying ceiling amount (150% of line 45(e)) 47 Total lobbying expenditures 48 Grassroots nontaxable amount 49 Grassroots ceiling amount (150% of line 48(e)) 50 Grassroots lobbying expenditures Part VI-B Lobbying Activity by Nonelecting Public Charities (For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions)	.) N/A
46 Lobbying ceiling amount (150% of line 45(e)). 47 Total lobbying expenditures	•
46 Lobbying ceiling amount (150% of line 45(e)) 47 Total lobbying expenditures 48 Grassroots nontaxable amount 49 Grassroots ceiling amount (150% of line 48(e)) 50 Grassroots lobbying expenditures Part VI-B Lobbying Activity by Nonelecting Public Charities (For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions)	•
46 Lobbying ceiling amount (150% of line 45(e))	•
46 Lobbying ceiling amount (150% of line 45(e)) 47 Total lobbying expenditures 48 Grassroots nontaxable amount 49 Grassroots ceiling amount (150% of line 48(e)) 50 Grassroots lobbying expenditures Part VI-B Lobbying Activity by Nonelecting Public Charities (For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions) During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers b Paid staff or management (Include compensation in expenses reported on lines c through h.)	•
46 Lobbying ceiling amount (150% of line 45(e))	•
46 Lobbying ceiling amount (150% of line 45(e))	•
46 Lobbying ceiling amount (150% of line 45(e))	•
46 Lobbying ceiling amount (150% of line 45(e)) 47 Total lobbying expenditures 48 Grassroots nontaxable amount 49 Grassroots ceiling amount (150% of line 48(e)) 50 Grassroots lobbying expenditures Part VI-B Lobbying Activity by Nonelecting Public Charities (For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions) of the properties of the instructions at the properties of the influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers b Paid staff or management (Include compensation in expenses reported on lines c through h.) c Media advertisements d Mailings to members, legislators, or the public e Publications, or published or broadcast statements f Grants to other organizations for lobbying purposes	•
46 Lobbying ceiling amount (150% of line 45(e)) 47 Total lobbying expenditures 48 Grassroots nontaxable amount 49 Grassroots ceiling amount (150% of line 48(e)) 50 Grassroots lobbying expenditures Part VI-B Lobbying Activity by Nonelecting Public Charities (For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions) During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers b Paid staff or management (Include compensation in expenses reported on lines c through h.) c Media advertisements d Mailings to members, legislators, or the public e Publications, or published or broadcast statements f Grants to other organizations for lobbying purposes g Direct contact with legislators, their staffs, government officials, or a legislative body	•
46 Lobbying ceiling amount (150% of line 45(e)) 47 Total lobbying expenditures 48 Grassroots nontaxable amount 49 Grassroots ceiling amount (150% of line 48(e)) 50 Grassroots lobbying expenditures Part VI-B Lobbying Activity by Nonelecting Public Charities (For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions) of the properties of the instructions at the properties of the influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers b Paid staff or management (Include compensation in expenses reported on lines c through h.) c Media advertisements d Mailings to members, legislators, or the public e Publications, or published or broadcast statements f Grants to other organizations for lobbying purposes	•

Sche	edule A (Form	990 or 990-EZ) 2007	The Sundari	Foundation,	Inc.	81-0652266		Pa	age 7
Pa	art VII	_	•			ationships With Noncharita	ble		,
		Exempt Organiza	ations (See page 1	4 of the instruction	1S.)				
51	Did the repo	orting organization direc	ctly or indirectly engage i	n any of the following wi	th any other o	rganization described in section			
	501(c) of the	e Code (other than sec	tion 501(c)(3) organization	ons) or in section 527, re	elating to politi	cal organizations?			
а	Transfers from	om the reporting organi	ization to a noncharitable	e exempt organization of	f:			Yes	No
	(i) Cash						51a(i)		X
	(ii) Other	assets					a(ii)		X
b	Other transa								
	(i) Sales	or exchanges of asset	s with a noncharitable ex	cempt organization			b(i)		X
	(ii) Purch	ases of assets from a r	noncharitable exempt org	ganization			b(ii)		X
	(iii) Renta	l of facilities, equipmer	nt, or other assets				b(iii)		X
	(iv) Reiml	oursement arrangemen	nts				b(iv)		X
	(v) Loans						b(v)		X
	(vi) Perfo	rmance of services or r	nembership or fundraisir	ng solicitations			b(vi)		X
С	Sharing of fa	acilities, equipment, ma	ailing lists, other assets, o	or paid employees			С		X
d						ways show the fair market value of t	he		
	goods, othe	r assets, or services giv	ven by the reporting orga	anization. If the organiza	tion received	ess than fair market value in any			
	transaction	or sharing arrangemen	t, show in column (d) the	value of the goods, oth	er assets, or s	ervices received:			
	(a)	(b)	(с			(d)			
	Line no.	Amount involved	Name of noncharitable	e exempt organization	Descri	otion of transfers, transactions, and sharing	g arrange	ments	
N/	A								

52a	_	ectly affiliated with, or related to, one or more ta Code (other than section 501(c)(3)) or in section	· · · · · · · · · · · · · · · · · · ·	Yes X No

2a	Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations	_	_	
	described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	Yes	X	Ν
b	If "Yes," complete the following schedule:			

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		
	T	l

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

Name of organization

Schedule of Contributors

OMB No. 1545-0047

Supplementary Information for line 1 of Form 990, 990-EZ, and 990-PF (see instructions) Department of the Treasury Internal Revenue Service

Employer identification number

The Sundari Fo	oundation, Inc.	81-0652266						
Organization type (check one	Organization type (check one):							
Filers of:	Section:							
Form 990 or 990-EZ	X 501(c)(3) (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							
organization can check boxes	covered by the General Rule or a Special Rule . (Note: Only a section 501(c)(7), (8), or (1 for both the General Rule and a Special Rule—see instructions.)	0)						
General Rule—								
	g Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money e contributor. (Complete Parts I and II.)	or						
Special Rules—								
under sections 509(a)	3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the r (1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contributior % of the amount on line 1 of these forms. (Complete Parts I and II.)							
during the year, aggre	r), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributions or bequests of more than \$1,000 for use exclusively for religious, chariducational purposes, or the prevention of cruelty to children or animals. (Complete Parts	table,						
during the year, some not aggregate to more the year for an exclusion applies to this organizerom.	(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributions for use exclusively for religious, charitable, etc., purposes, but these contributions that were received ively religious, charitable, etc., purpose. Do not complete any of the Parts unless the Gen eration because it received nonexclusively religious, charitable, etc., contributions of \$5,000.	outions did during eral Rule O or more						
Caution: Organizations that a 990-EZ, or 990-PF), but they r	re not covered by the General Rule and/or the Special Rules do not file Schedule B (Form nust check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form eet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	n 990,						

Page 1 of 1 of Part I

Name of organization
The Sundari Foundation, Inc.

Employer identification number

81-0652266

Part I	Contributors (See Specific Instructions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	Constance Collins 445 Grand Bay Drive PH1B Key Biscayne FL 33149	\$18,777	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	Elizabeth & Jay Lotspeich 4415 Sabal Palm Road Miami FL 33137	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	Martin Margulies 445 Grand Bay Drive, PH1B Key Biscayne FL 33149	\$175,060	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4	Vivian Pfeiffer Christie's 550 Baltimore Way Suite 800 Coral Gables FL 33134	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5	Axel Stein Sotheby's 800 Douglas Road Coral Gables FL 33134	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
6	Sagmore GP Corp 1177 Kane Concourse Suite 201 Bay Harbor Islands FL 33154	\$ <u>21,070</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)

Form **4562**

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

OMB No. 1545-0172
2007
Attachment

Name(s) shown on return

The Sundari Foundation, Inc.

Identifying number 81-0652266

	ess or activity to which this form relates ndirect Depreciati	on							
*********			arty Under Co	otion 170					_
Pa	Irt I Election To Expens						Danti		
	Note: If you have a				re you	complete	Part I.	1	105.000
1	Maximum amount. See the instruct	-		sses				1	125,000
2	Total cost of section 179 property p							2	
3	Threshold cost of section 179 prope	•						3	500,000
4	Reduction in limitation. Subtract line							4	
5	Dollar limitation for tax year. Subtract line	4 from line 1. If zero or	less, enter -0 If mar	ried filing separa	itely, see i	nstructions		5	
	(a) Description	of property		(b) Cost (bus	iness use	only) (c) Elected co	st	
6									
7	Listed property. Enter the amount for	rom line 29				7			
8	Total elected cost of section 179 pr	operty. Add amounts	s in column (c), line	es 6 and 7	· · · · · —			8	
9	Tentative deduction. Enter the sma		_	• • • • • • • • • • • • • • • • • • • •				9	
0	Carryover of disallowed deduction t							10	
1	Business income limitation. Enter the							11	
2	Section 179 expense deduction. Ac							12	
3	Carryover of disallowed deduction t					13			
	: Do not use Part II or Part III below f			۷		13			
	rt II Special Depreciation			rociation (Do not	includo li	stad pror	orty '	\(\(\(\) \\ \(\) \(\
							sted prop	Terty.	(See instructions.)
4	Special allowance for qualified New						`		
_	property) and cellulosic biomass et		placed in service of	during the tax	year (see	e instructions)	14	
5	Property subject to section 168(f)(1	·						15	04 506
6	Other depreciation (including ACRS							16	24,706
Pa	rt III MACRS Depreciati	on (Do not incl			ınstru	ctions.)			
			Sect	ion A				1	
7	MACRS deductions for assets place	ed in service in tax y	ears beginning be	fore 2007				17	0
8	If you are electing to group any assets pl								
	Section B-As	sets Placed in Ser	vice During 2007	Tax Year Usi	ng the G	eneral Depre	eciation Sy	stem	
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for dep (business/investmonly-see instruc	ent use	ecovery eriod	(e) Convention	n (f) M	ethod	(g) Depreciation deduction
9a	3-year property								
b	5-year property								
С	7-year property								
d	10-year property								
	15-year property								
f	20-year property								
ď	25-year property			25	yrs.		S/I		
	Residential rental				5 yrs.	MM	S/I		
"	property				5 yrs.	MM	S/I		
-	Nonresidential real					MM	S/I		
i	property			39	yrs.		1		
	' ' '	oto Blood in Convi	 	v Voor Hoine	the Alte	MM ernative Den	S/		
		ets Placed in Servi	le During 2007 Ta	IX Teal Using	the Aite	mative Dep			<u> </u>
0a	Class life						S/I		
	12-year				yrs.		S/		
	40-year			40	yrs.	MM	S/	_	
Pa	art IV Summary (see inst							1	T
21	Listed property. Enter amount from	line 28						21	
22	Total. Add amounts from line 12, lin	nes 14 through 17, li	nes 19 and 20 in c	olumn (g), an	d line 21				
	Enter here and on the appropriate I	ines of your return. I	Partnerships and S	corporations	see ins <u>tı</u>	r <u></u>		22	24,706
23	For assets shown above and place	d in service during th	ne current year,						
	enter the portion of the basis attribu		· ·			23			

Form 99 (n	Sp	ecial Events Scl	hedule		2007
roim 330		dar year 2007, or tax year beg	inning	, and ending		2001
lame	·			_	Employer Ide	entification Number
The Sun	dari Found	lation, Inc.			81-065	2266
		(A)	(B)	(C)	Others	Total
Gross receipts Less contribu Gross revenue Less direct ex Net income (los	kpenses	151,169 0 151,169 81,336 69,833	0 0 0 0	0 0 0 0 0	0 0 0 0 0	151,169 0 151,169 81,336 69,833
Description:	(A) <u>Ben</u>	efit art aucti	on			
	(C)					
	Others					

810652266 The Sundari Foundation, Inc.

81-0652266 Federal Statements 7/18/2008 10:47 AM

FYE: 12/31/2007

Statement 1 - Form 990, Line 20 - Other Changes in Net Assets or Fund Balances

Description	Amount
Write-off of unconditional promise to give Rent expense - in-kind donated use of space	\$ -450,577 -69,216
Total	\$ -519,793

810652266 The Sundari Foundation, Inc.

81_0652266 Federal Statements

FYE: 12/31/2007

Statement 2 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	 Total Expenses	_	Program Service	_	Mgt & General	_	Fund- Raising
Expenses	\$	\$		\$		\$	
Food and meals	127,984		127,984				
Grants to other organizations	17,696		17,696				
Insurance	37,862		37,105		757		
Materials and supplies	31,749		31,749				
Marketing and development	10,359				10,359		
Office expenses	39,109		38,327		782		
Professional fees	54,991		21,553		33,438		
Property taxes	35,646		34,933		713		
Resource and grant develop.	15,643						15,643
Repairs and maintenance	50,072		49,071		1,001		
Utilities	 42,695		41,841	_	854		
Total	\$ 463,806	\$	400,259	\$_	47,904	\$_	15,643

7/18/2008 10:47 AM

810652266 The Sundari Foundation, Inc. 81-0652266 **Federal Statements**

FYE: 12/31/2007

Statement 3 - Form 990, Part III - Organization's Primary Exempt Purpose

Description

The Foundation is organized for charitable and educational purposes, including specifically, providing relief to homeless, poor, distressed and disadvantaged women. By way of example, such relief is intended to include (a) provision of basic human services and resources for women, such as shelter, housing, food, basic skills and job training; (b) defense and advancement of human and civil rights secured by law; (c) advancement of education, elimination of prejudice and discrimination, and promotion of enlightened social consciousness of and for their dignity, humanity and needs; (d) combating community deterioration and juvenile delinquency; (e) creation and maintenance of parks and recreation, featuring women in the arts, for the benefit of urban neighborhoods and communities; and (f) providing resources for the empowerment of disenfranchised women.

Statement 4 - Form 990, Part III, Line b - Statement of Program Service Accomplishments

Description Donated design and marketing services 2,200 Donated professional services as director 10,000 Donated professional services 1,600 Donated legal services 34,936 Donated medical consulting services 4,000 Donated use of facility 5,000 Total 57,736

810652266 The Sundari Foundation, Inc. 81-0652266 **Fed**

Federal Statements

FYE: 12/31/2007

Statement 5 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment

|--|

Beschiption					
	_	Beginning of Year	Accum Depr	End of Year	Accum Depr
Building	\$	430,124 \$	895 \$	430,124 \$	11,648
Vehicles	Ą	430,124 Ş	095 Ş	430,124 \$	11,040
Leasehold improvements		26,827	1,597	26,827	5,429
		12,684	366	91,338	2,073
Furniture and equipment		52,220	4,435	59,685	12,849
Total	\$	521,855 \$	7,293 \$	607,974 \$	31,999

Statement 6 - Form 990, Part IV, Line 58 - Other Assets

Description	Beginning of Year	 End of Year
Uncond promises to give, net of disc Security deposit	\$ 519,793 2,294	\$ 4,159
Total	\$ 522,087	\$ 4,159

Statement 7 - Form 990, Part IV, Line 65 - Other Liabilities

Description	Beginning of Year	 End of Year
Payroll taxes payable Unemployment taxes payable Sales tax payable Refundable advances	\$	\$ 630 514 13,070 18,251
Total	\$ 0	\$ 32,465

810652266 The Sundari Foundation, Inc.

Federal Statements

FYE: 12/31/2007

Statement 8 - Form 990, Part VI, Line 82b - Donated Services

Description	 Amount
Donated design and marketing services Donated professional services as director	\$ 2,200 10,000
Donated professional services	1,600
Donated legal services Donated medical consulting services	34,936 4,000
Donated use of facility	 5,000
Total	\$ 57,736

7/18/2008 10:47 AM

810652266 The Sundari Foundation, Inc.

Federal Statements

FYE: 12/31/2007

81-0652266

7/18/2008 10:47 AM

Statement 9 - Schedule A, Part III, Line 2a - Sale, Exchange, or Lease of Property

Description

The Foundation had leased premises operated as a shelter and resource center for homeless women, for the sum of \$1 per year annual base rent, from Seventh House, LLLP., an entity owned indirectly by Constance Collins Margulies, President and a member of the Board of The Foundation, until December 25, 2007, when the lease was terminated. The Foundation paid its utilities, taxes, and insurance for the lease premises. The lease was conditioned upon The Foundation's operation of a free shelter for homeless women at the premises.

Statement 10 - Schedule A, Part III, Line 2c - Furnishing of Goods, Services or Facilities

Description

Constance Collins Margulies, president and member of the board of the Foundation provided free services as director to the organization.

Statement 11 - Schedule A, Part III, Line 2d - Payment of Compensation / Reimbursement of Exp

Description

The Foundation reimburses officers and employees (without further compensation) the actual cost for expenses incurred in the ordinary course of the Foundation's business.

FYE: 12/31/2007

810652266 The Sundari Foundation, Inc. 81-0652266 Federal Asset Report Form 990, Page 1

07/18/2008 10:47 AM

		Date		Bus Sec	Basis			
Asset	Description	In Service	Cost	<u>%</u> 179Bonus	for Depr	PerConv Meth	Prior	Current
Other	Depreciation:							
1	2 Kenmore Laundry	12/31/05	1,648		1,648	7 MO S/L	235	236
2	10 Compact fridges, appliances	12/31/05	2,568		2,568	7 MO S/L	367	367
3	Appliances	12/31/05	289		289	7 MO S/L	41	42
4	Dishwasher, appliances	12/31/05	1,981		1,981	7 MO S/L	283	283
5	Beds/mattresses	12/31/05	9,129		9,129	7 MO S/L	1,304	1,304
6 7	Dresser Bedside & living room tables	12/31/05 12/31/05	256 3,555		256 3,555	7 MO S/L 7 MO S/L	37 508	36 508
8	Chairs & cushions	12/31/05	5,538		5,538	7 MO S/L 7 MO S/L	791	791
9	Small appliances/kitchen equip	12/31/05	1,343		1,343	7 MO S/L	192	192
10	Bristol camera	12/31/05	1,193		1,193	7 MO S/L	170	171
11	Freezer	5/26/06	943		943	7 MO S/L	79	134
12	Refrigerator	6/28/06	482		482	7 MO S/L	34	69
13	B&H Camera	8/21/06	910		910		43	130
14	Generator Varov comics	8/21/06	3,625		3,625	7 MO S/L	173 51	517
15 16	Xerox copier Laptop computer	10/09/06 11/02/06	1,416 2,311		1,416 2,311	7 MO S/L 5 MO S/L	77	202 462
17	Furniture	11/30/06	1,863		1,863	7 MO S/L	22	266
18	Computer printer	11/30/06	935		935	5 MO S/L	16	187
19	Beds	11/30/06	940		940		11	134
20	Furniture	12/31/06	11,295		11,295	7 MO S/L	0	1,614
21	Leasehold-shed	9/05/06	3,509		3,509		117	351
22	Leasehold-200 amp transfer switches	9/07/06	2,300		2,300		77	230
23	Leasehold-Leon Johnson	9/30/06	6,875		6,875		172	687
24 25	Honda van	7/28/06	26,827 426,900		26,827	7 MO S/L 40 MO S/L	1,597 889	3,832 10,673
26	Building Building-Bilzin Sumberg	12/11/06 12/11/06	810		420,900 810		2	20
27	Building-AAA Locksmith	12/11/06	1,764		1,764	40 MO S/L	4	44
28	Building-Martinez & Martinez	12/27/06	650		650	40 MO S/L	0	16
29	HP laptop comp for Rochelle	4/19/07	1,229		1,229	5 MO S/L	0	164
30	Tiles & labor - improvements	1/01/07	6,802		6,802	40 MO S/L	0	170
31	Fence	1/23/07	8,466		8,466		0	194
33	New roof	5/03/07	4,500		4,500		0	75
	P205-D Notebook and 2 year warranty	10/05/07	1,337		1,337	5 MO S/L	0	67
35 36	Improvements - Florida & Key Bldrs Improvements - Florida & Key Bldrs	8/22/07 10/10/07	12,643 8,568		12,643 8,568	50 MO S/L 50 MO S/L	0	84 43
37	Improvements - Florida & Key Bldrs	11/02/07	20,661		20,661	50 MO S/L	0	69
38	Improvements - Florida & Key Bldrs	12/07/07	8,435		8,435		ő	14
40	4 wicker chairs, 3 wicker loveseats	3/07/07	792		792	7 MO S/L	ő	94
41	Dishwasher - Sears	8/20/07	900		900	5 MO S/L	0	60
42	2 wash/drying - Sears	8/20/07	2,390		2,390	5 MO S/L	0	159
43	Roof repairs - 229	11/19/07	4,500		4,500		0	8
44	New panels & wiring-Bruce Flanagan	12/03/07	4,079		4,079	50 MO S/L	0	7
	Total Other Depreciation	_	607,157		607,157	-	7,292	24,706
	Total ACRS and Other Depreciation		607,157		607,157	=	7,292	24,706
	Grand Totals		607,157		607,157		7,292	24,706
	Less: Dispositions Less: Start-up/Org Expensed		0		0		0	0
	Net Grand Totals	=	607,157		607,157	- -	7,292	24,706

810652266 The Sundari Foundation, Inc.

Federal Statements

7/18/2008 10:48 AM

FYE: 12/31/2007

Form 990, Part I, Line 1b - Direct Public Support

Description	 Cash	Noncash	 Total
Other contributions Contributions from Schedule B	\$ 320,255 294,907	\$ 12,643	\$ 332,898 294,907
Total	\$ 615,162	\$ 12,643	\$ 627,805

810652266 The Sundari Foundation, Inc.
81-0652266 Federal Statements

7/18/2008 10:48 AM

FYE: 12/31/2007

Special Events Direct Expenses

Description	Amount
Benefit art auction	\$
Other Expenses	81,336
SubTotal	81,336
SubTotal (Others)	81,336
Total	81,336

Direct expenses other than fundraising expenses reported on Form 990, page 1, line 9b.