Form **990-PF**

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

Open to Public Inspection

For	the ca	alendar year 2023, or tax year be	ginning January 01, 20	23, and ending Decer	ıber 31, 2023					
		oundation nd Julie Shah Foundation				A Emplo	yer identification numbe	r		
		nd street (or P.O. box number if mail	is not delivered to street add	dress)	Room/suite		B Telephone number (see instructions) (614) 602-2248			
,		n, state or province, country, and Z	IP or foreign postal code			C If exer	C If exemption application is pending, check here			
		all that apply: Initial return Final return	☐ Initial retur	•	a former public charity D 1. Foreign organizations, check here 2. Foreign organizations meeting the 85% test,					
		Address change	e Name chan	nge		che	check here and attach computation			
_		type of organization: Section on 4947(a)(1) nonexempt charitable to	501(c)(3) exempt private four				ate foundation status wa n 507(b)(1)(A), check he			
ᆜ						E If the f	oundation is in a 60-mor	ath tarmination		
en	d of y	ket value of all assets at ear (from Part II, col. (c), \$ 422,230	J Accounting method: Other (specify) (Part I, column (d), must be				section 507(b)(1)(B), che			
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)				(a) Revenue and expenses per books	(b) Net inve		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)		
	1	Contributions, gifts, grants, etc., re	eceived (attach schedule)	100,25	5					
	2	Check if the foundation is not requ	ired to attach Sch. B							
	3	Interest on savings and temporary	cash investments .)	0	0			
	4	Dividends and interest from secur	ities	6,60	5	6,606	0			
	5a	Gross rents)	0	0			
	b	Net rental income or (loss) o								
e	6a	Net gain or (loss) from sale of ass)					
Revenue	b 7	Gross sales price for all assets on line 6a								
Be	7 8	Capital gain net income (from Part				0	0			
	9	Net short-term capital gain Income modifications	l				0			
	10a	Gross sales less returns and allowances	1				0			
	b	Less: Cost of goods sold								
	С	Gross profit or (loss) (attach sched	dule)							
	11	Other income (attach schedule)								
	12	Total. Add lines 1 through 11 .		106,86	2	6,606				
	13	Compensation of officers, directo	rs, trustees, etc)	0	0	0		
	14	Other employee salaries and wage	es)	0	0	0		
	15	Pension plans, employee benefits)	0	0	0		
Ses	16a	Legal fees (attach schedule) .	[
Sens	b	Accounting fees (attach schedule)								
ĒĶ	С	Other professional fees (attach so	·							
ative	17	Interest	ŀ)	0	0	0		
iistra	18	Taxes (attach schedule) (see instru	·							
Imir	19	Depreciation (attach schedule) and	· · · · · · · · · · · · · · · · · · ·							
d Ac	20	Occupancy	ŀ)	0	0	0		
) an	21	Travel, conferences, and meetings	ŀ)	0	0	0		
ating	22 23	Printing and publications Other expenses (attach schedule)	ŀ)	0	0	0		
Operating and Administrative Expenses	23 24	Other expenses (attach schedule)								
S		Total operating and administrat Add lines 13 through 23)	0		0		
	25	Contributions, gifts, grants paid	ŀ	5,00				5,000		
	26	Total expenses and disbursemen	nts.Add lines 24 and 25	5,00		0		5,000		
	27	Subtract line 26 from line 12: .								
	a	Excess of revenue over expenses		101,86	2					
	b	Net investment income(if negation	ve, enter -0-)			6,606				
	С	Adjusted net income/if negative	enter -0-) · ·							

Par	† II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		End	of year
	•	should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Boo	k Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	19,637		38,893	38,893
	2	Savings and temporary cash investments	0		0	0
	3	Accounts receivable 0				
		Less: allowance for doubtful accounts ⁰	0		0	0
	4	Pledges receivable ⁰				
		Less: allowance for doubtful accounts 0	0		0	0
	5	Grants receivable	0		0	0
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule)				
		Less: allowance for doubtful accounts				
ets	8	Inventories for sale or use	0		0	0
Assets	9	Prepaid expenses and deferred charges	0		0	0
	_	Investments—U.S. and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)				
	11	Investments—land buildings and equipment basis 0				
	•	Less: accumulated depreciation (attach schedule) 0				
	12	Investments – mortgage loans	0		0	0
	13	Investments – other (attach schedule)	247,850		383,337	383,337
		Land huildings and equipment; basis 0	211,1030		303733.	303/33.
		accumulated depreciation (attach schedule) 0				
	15	Other assets (describe)				
	16	Total assets (to be completed by all filers—see the				
		instructions. Also, see page 1, item l)	267,487		422,230	422,230
	17	Accounts payable and accrued expenses	0		0	
	18	Grants payable	0		0	
ties	19	Deferred revenue	0		0	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	0		0	
_	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe)				
	23	Total liabilities (add lines 17 through 22)	0		0	
		Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30.				
æ	24	Net assets without donor restrictions	267,487		422,230	
lanc	25	Net assets with donor restrictions	0		0	
Net Assets or Fund Balances		Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30.				
orF	26	Capital stock, trust principal, or current funds				
sets	27	Paid-in or capital surplus, or land, bldg., and equipment fund				
t As	28	Retained earnings, accumulated income, endowment, or other funds				
<u>ع</u>	29	Total net assets or fund balances (see instructions)	267,487		422,230	
	30	Total liabilities and net assets/fund balances (see instructions)	267,487		422,230	
Par	t III	Analysis of Changes in Net Assets or Fund Balances				
1		al net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agre -of-year figure reported on prior year's return)		1		267,487
2	Ente	er amount from Part I, line 27a		. 2		101,862
3	Othe	er increases not included in line 2 (itemize)		3		52,881
4	Add	lines 1, 2, and 3		. 4		422,230
5	Dec	reases not included in line 2 (itemize)		5		
6	Tota	al net assets or fund balances at end of year (line 4 minus line 5)-Part II, column (b), line	. 6		422,230	

Part	V Capital Gains and Losses for Tax on Investi	ment Income					
	(a) List and describe the kind(s) of property sold (for excommon stock, 200 s	-	use; or	(b) How acquired P—Purchase D—Donation		Date acquired mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a							
b							
С							
d							
е			· .			#NO: /	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		g) Cost or other basis plus expense of sale		(h) Gain or (((e) plus (f) mir	
а							
b							
С							
d							
е							
	Complete only for assets showing gain in column (h)	4) 5 () ()		(I) Gains (Col. (h) ocol. (k), but not less	=		
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) Excess of col. (i) over col. (j), if any		Losses (from	
а							
b							
С							
d							
е						T	
2	· · · · · · · · · · · · · · · · · · ·	ain, also enter in Part I, line 7 oss), enter -0- in Part I, line 7			2		
3	،، Net short-term capital gain or (loss) as defined in sect	**					
	f gain, also enter in Part I, line 8, column (c). See instr	` "			_		
	Part I, line 8		!		3		
Part				-			
	Exempt operating foundations described in section 4st Date of ruling or determination letter:(ar				4		
	All other domestic foundations enter 1.39% (0.0139) o			ructions)	1		92
	enter 4% (0.04) of Part I, line 12, col. (b)						
2	Fax under section 511 (domestic section 4947(a)(1) true	sts and taxable foundations only; ot	hers, ent	er -0-)	2		
3	Add lines 1 and 2				3		92
4	Subtitle A (income) tax (domestic section 4947(a)(1) tru	sts and taxable foundations only; o	thers, ent	er -0-)	4		
5	Tax based on investment income. Subtract line 4 fr	om line 3. If zero or less, enter -0			5		92
	Credits/Payments:		ı	I			
_	2023 estimated tax payments and 2022 overpayment		6a	0			
	Exempt foreign organizations—tax withheld at source		6b				
	Fax paid with application for extension of time to file (6c	0			
	Backup withholding erroneously withheld		6d	0			
	Fotal credits and payments. Add lines 6a through 6d.				7		
_	Enter any penalty for underpayment of estimated tax.				8		0
	Tax due. If the total of lines 5 and 8 is more than line				9		92
	Overpayment. If line 7 is more than the total of lines	•			10		
11	Enter the amount of line 10 to be: Credited to 2024 es	timated tax Refu	nded		11		0

⊃ari	YI-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		\
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		>
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.			
С	Did the foundation file Form 1120-POL for this year?	1c		✓
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		/
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.	3		✓
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		/
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	 By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 	6		✓
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	7	/	П
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	ОН			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	8b	✓	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2023 or the tax year beginning in 2023? See the instructions for Part XIII. If "Yes," complete Part XIII.	9		\
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	✓	
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		\
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		\
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	✓	
	Website address httpshahfoundorg			
14	The books are in care of SUMMIT SHAH Telephone no. (614) 602-224	8		
	Located at 1181 Perry St , Columbus , OH ZIP+4 43201			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here			
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2023, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		✓
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country			

Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. No Yes 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? **/** 1a(1) (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified **/** 1a(2) 1a(3) / 1a(4) (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or **/** 1a(5) (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 termination of government service, if **/** 1a(6) If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in $Regulations \ section \ 53.4941 (d) - 3 \ or \ in \ a \ current \ notice \ regarding \ disaster \ assistance? \ See \ instructions \ . \ . \ . \ .$ 1b С Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that **/** 1d Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): At the end of tax year 2023, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for **/** If "Yes," list the years 20____, 20___, 20___, 20____ b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to

If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

If "Yes," did it have excess business holdings in 2023 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

20 , 20 , 20 , 20

in 2023?.

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/

/

/

3a

3b

4a

4b

orm	n 990-PF (2023)						Page 6
ar	t VI-B Statements Regarding Activities for Which Form	4720 May Be Required (continued)				
_	During the year, did the foundation pay or incur any amount	to:				Yes	No
	(1) Carry on propaganda, or otherwise attempt to influence legisla	ation (section 4945(e))?			5a(1)		/
	(2) Influence the outcome of any specific public election (see sect		-		Ga(1)		
	indirectly, any voter registration drive?				5a(2)		✓
	(3) Provide a grant to an individual for travel, study, or other similar	lar purposes?			5a(3)		✓
	(4) Provide a grant to an organization other than a charitable, etc. (4)(A)? See instructions	, ,					
	(5) Provide for any purpose other than religious, charitable, scient				5a(4)		<u> </u>
	the prevention of cruelty to children or animals?		5a(5)		✓		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail in Regulations section 53.4945 or in a current notice regarding dis		5b				
С							
d	If the answer is "Yes" to question 5a(4), does the foundation clain	5d					
	maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.		Su				
6a	Did the foundation, during the year, receive any funds, directly or						
L	benefit contract?		6a		✓		
b	Did the foundation, during the year, pay premiums, directly or ind If "Yes" to 6b, file Form 8870.	iirectiy, on a personal benet	it contract?		6b		✓
7a	At any time during the tax year, was the foundation a party to a p	prohibited tax shelter transac	etion?		7a		✓
b	If "Yes," did the foundation receive any proceeds or have any net	t income attributable to the	transaction?		7b		
8	Is the foundation subject to the section 4960 tax on payment(s) of	f more than \$1,000,000 in re	emuneration or				
	excess parachute payment(s) during the year?				8		✓
Par	t VII Information About Officers, Directors, Trustees, Foundation Adout Officers, Directors, Trustees, Foundation About Officers, Directors, Trustees, Poundation About Officers, Directors, D	undation Managers, High	nly Paid Employees,				
	List all officers, directors, trustees, and foundation manage	ers and their compensati	on. See instructions.				
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions employee benefit p and deferred compen	lans	(e) Expense other allow	
umn	mit Shah	Trustee	0		0		0
181	1 Perry St ,Columbus ,OH 43201	1	0		U		0
	ie Kennerly-Shah 1 Perry St ,Columbus ,OH 43201	Trustee	0		0		0
	Compensation of five highest-paid employees (other that "NONE."	an those included on lii	ne 1—see instructions)	. If none, enter	I.		
	(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 employee benef plans and deferre	it	(e) Expense a	

NONE

Total number of other employees paid over \$50,000

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compensation

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Part \	Information About Officers, Directors, Trus and Contractors (continued)	stees, Foundation Managers, Highly Paid Employees,	
3 Fiv	re highest-paid independent contractors for p	professional services. See instructions. If none, enter "NONE."	
(a) N	lame and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
Total n	umber of others receiving over \$50,000 for p	rofessional services	
Part \	/III-A Summary of Direct Charitable Activitie	s	
	e foundation's four largest direct charitable activities during zations and other beneficiaries served, conferences conven	the tax year. Include relevant statistical information such as the number of ed, research papers produced, etc.	Expenses
1			
2			
3			
4			
Part \	/III-B Summary of Program-Related Investm	nents (see instructions)	
Descri	be the two largest program-related investments made by the	e foundation during the tax year on lines 1 and 2.	Amount
1			
2			

All other program-related investments. See instructions.

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	383,337
b	Average of monthly cash balances	1b	38,893
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	422,230
е	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	422,230
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions).	4	6,333
5	instructions) . Net value of noncharitable-use assets. Subtract line 4 from line 3	5	415,897
6	Minimum investment return. Enter 5% (0.05) of line 5	6	20,795
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part IX, line 6	1	20,795
2a	Tax on investment income for 2023 from Part V, line 5		
b	Income tax for 2023. (This does not include the tax from Part V.)		
С	Add lines 2a and 2b	2c	92
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	20,703
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	20,703
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1	7	20,703
Part	XI Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	5,000
b	Program-related investments—total from Part VIII-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	0
	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	4	5,000

Part XII Undistributed Income (see instructions)

1 G	L XII				
		(a) Corpus	(b) Years prior to 2022	(c) 2022	(d) 2023
1	Distributable amount for 2023 from Part X, line 7				20,703
2	Undistributed income, if any, as of the end of 2023:				
а	Enter amount for 2022 only			0	
b	Total for prior years: 20, 20, 20		0		
3 a	Excess distributions carryover, if any, to 2023: From 2018				
b	From 2019				
С	From 2020				
d	From 2021				
e	From 2022				
†	Total of lines 3a through e	143,464			
4	Qualifying distributions for 2023 from Part XI, line 4: \$ 5,000				
	Applied to 2022, but not more than line 2a			0	
	Applied to undistributed income of prior years (Election required—see instructions)				
	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2023 distributable amount				0
е	Remaining amount distributed out of corpus	5,000			
5	Excess distributions carryover applied to 2023 (If an amount appears in column (d), the same amount must be shown in column (a).)	20,703			20,703
6	Enter the net total of each column as	.,			
	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	127,761			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0		
С	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		
d	Subtract line 6c from line 6b. Taxable				
	amount—see instructions		0		
е	Undistributed income for 2022. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
f	Undistributed income for 2023. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2024.				0
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)	0			
8	Excess distributions carryover from 2018 not applied on line 5 or line 7 (see instructions).	0			
9	Excess distributions carryover to 2024. Subtract lines 7 and 8 from line 6a	127,761			
10	Analysis of line 9:				
а					
b	Excess from 2020				
С	Excess from 2021				
d	Excess from 2022 0				
е	Excess from 2023				
					5 000 DT (2222)

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Par	YIII Private Operating Foundations	(see instructions and	d Part VI-A, question 9))		
1a	If the foundation has received a ruling or d foundation, and the ruling is effective for 2					
b	Check box to indicate whether the foundate	ion is a private operatin	g foundation described in	n section 4942(j)(3) or] 4942(j)(5)	
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum investment return from Part IX for each year listed	(a) 2023	(b) 2022	(c) 2021	(d) 2020	(e) Total
b	85% (0.85) of line 2a					
C	Qualifying distributions from Part XI, line 4, for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test-enter:					
	(1) Value of all assets					
.	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed					
С	"Support" alternative test—enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on					
	securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	an exempt organization					
			. :6 41 6	ΦΕ 000 - w i t	-1	
Par	Supplementary Information (C any time during the year—see		y ii the loundation had	\$5,000 or more in assets	aı	
1 a	Information Regarding Foundation Man List any managers of the foundation who before the close of any tax year (but only is Summit Shah and Julie Kennerly-Shah	nave contributed more the fitney have contributed			ndation	
b	List any managers of the foundation who cownership of a partnership or other entity)	own 10% or more of the			the	
2	Information Regarding Contribution, Gr Check here if the foundation only ma unsolicited requests for funds. If the found complete items 2a, b, c, and d. See instru	kes contributions to pre ation makes gifts, grant	selected charitable organ			
а	The name, address, and telephone number	r or email address of the	e person to whom applica	ations should be addressed:		
b	The form in which applications should be	submitted and information	on and materials they sho	uld include:		
С	Any submission deadlines:					
d	Any restrictions or limitations on awards, s factors:	such as by geographica	l areas, charitable fields, l	kinds of institutions, or other	r	
						Form 990-PF (2023)

Par	t XIV Supplementary Information (continue	ed)			
3 Gr	rants and Contributions Paid During the Year or	Approved for Future Paymen	t		
	Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
		or substantial contributor	recipient		
a	Paid during the year Statements				
see	Statements				
Tota	1				5,000
b	Approved for future payment		1		

Part XV-A Analysis of Income-Producing Activities

Enter	gross amounts unless otherwise indicated.	Unrelated bus	iness income	Excluded by	section 512, 513, or 514	(e)
1	Program service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
	a					
	b					
	d					
	e					
	f					
_	g Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities					
5	Net rental income or (loss) from real estate:					
	a Debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events .					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue: a					
	b					
	С					
	d					
12	e		0		0	0
	Subtotal. Add columns (b), (d), and (e)		0		0	0
13	Subtotal. Add columns (b), (d), and (e)					0
13 See v	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations					
13 See v	Subtotal. Add columns (b), (d), and (e)					
13 See v Part	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations. XV-B Relationship of Activities to the	Accomplishment o	f Exempt Purpose	s	13	0
13 See v Part	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations. XV-B Relationship of Activities to the	Accomplishment of	f Exempt Purpose:	S antributed imports	13	0
13 See v Part	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XV-B Relationship of Activities to the No. Explain below how each activity for which	Accomplishment of	f Exempt Purpose:	S antributed imports	13	0
13 See v Part	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XV-B Relationship of Activities to the No. Explain below how each activity for which	Accomplishment of	f Exempt Purpose:	s ntributed importa	13	0
13 See v Part	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XV-B Relationship of Activities to the No. Explain below how each activity for which	Accomplishment of	f Exempt Purpose:	s ntributed importa	13	0
13 See v Part	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XV-B Relationship of Activities to the No. Explain below how each activity for which	Accomplishment of	f Exempt Purpose:	s ntributed importa	13	0
13 See v	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XV-B Relationship of Activities to the No. Explain below how each activity for which	Accomplishment of	f Exempt Purpose:	s ntributed importa	13	0
13 See v	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XV-B Relationship of Activities to the No. Explain below how each activity for which	Accomplishment of	f Exempt Purpose:	s ntributed importa	13	0
13 See v Part	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XV-B Relationship of Activities to the No. Explain below how each activity for which	Accomplishment of	f Exempt Purpose:	s ntributed importa	13	0
13 See v Part	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XV-B Relationship of Activities to the No. Explain below how each activity for which	Accomplishment of	f Exempt Purpose:	s ntributed importa	13	0
13 See v Part	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XV-B Relationship of Activities to the No. Explain below how each activity for which	Accomplishment of	f Exempt Purpose:	s ntributed importa	13	0
13 See v Part	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XV-B Relationship of Activities to the No. Explain below how each activity for which	Accomplishment of	f Exempt Purpose:	s ntributed importa	13	0
13 See v Part	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XV-B Relationship of Activities to the No. Explain below how each activity for which	Accomplishment of	f Exempt Purpose:	s ntributed importa	13	0
13 See v Part	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XV-B Relationship of Activities to the No. Explain below how each activity for which	Accomplishment of	f Exempt Purpose:	s ntributed importa	13	0
13 See v Part	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XV-B Relationship of Activities to the No. Explain below how each activity for which	Accomplishment of	f Exempt Purpose:	s ntributed importa	13	0
13 See v Part	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XV-B Relationship of Activities to the No. Explain below how each activity for which	Accomplishment of	f Exempt Purpose:	S antributed imports	13	0
13 See v Part	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XV-B Relationship of Activities to the No. Explain below how each activity for which	Accomplishment of	f Exempt Purpose:	S antributed imports	13	0
13 See v Part	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XV-B Relationship of Activities to the No. Explain below how each activity for which	Accomplishment of	f Exempt Purpose:	S antributed imports	13	0
13 See v Part	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XV-B Relationship of Activities to the No. Explain below how each activity for which	Accomplishment of	f Exempt Purpose:	S antributed imports	13	0
13 See v Part	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XV-B Relationship of Activities to the No. Explain below how each activity for which	Accomplishment of	f Exempt Purpose:	S antributed imports	13	0
13 See v Part	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XV-B Relationship of Activities to the No. Explain below how each activity for which	Accomplishment of	f Exempt Purpose:	S antributed imports	13	0
13 See v Part	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations XV-B Relationship of Activities to the No. Explain below how each activity for which	Accomplishment of	f Exempt Purpose:	S antributed imports	13	0

Part XVI	Inform	nation	Regarding Transfers	s to and Trar	sactions and Rela	ationships With No	ncharital	ole Exempt Organization	ıs.			
in se		(c) (oth	directly or indirectly er er than section 501(c)(ribed			Yes	No
a Trans	sfers from	the re	porting foundation to	a noncharitab	le exempt organiza	ition of:						
(1)	Cash									1a(1)		✓
(2)	Other asse	ets .								1a(2)		✓
]	
	(1) Sales of assets to a noncharitable exempt organization								1b(1)		/	
				•						1b(2)		\
(3) ⊨	Rental of f	acilitie	s, equipment, or other	assets .						1b(3)		✓
			arrangements							1b(4)		\
(5) ∟	oans or lo	oan gu	arantees							1b(5)		\
(6) F	Performan	ce of s	services or membershi	p or fundraisi	ng solicitations .					1b(6)		✓
c Shari	ing of fac	ilities,	equipment, mailing list	ts, other asse	ts, or paid employe	ees				1c		✓
servi	ces given	by the		. If the founda	-	• •	-	show the fair market value ansaction or sharing arra	-			
(a) Line no.	Ť		mount involved		of noncharitable exe	mpt organization	(d) Description of transfers, tra	ansactions, and	I sharing a	rrangemer	nts
secti	on 501(c)(es," comp	(3)) or in plete th	n section 527? e following schedule.					described in section 501		[Yes	✓ No
	(a	I) Name	of organization		(b) Type o	of organization		(c) Descri	iption of relatio	nship		
	1											
							=	s and statements, and to the preparer has any knowledge	-	wledge an	d belief, it	is true,
Sign					,	1		, , , , ,	May the IDC	diagragath	ia vatuum i	. vialo
Here	SU	MMIT	SHAH			02/08/2024	TRUSTI	EE	May the IRS the preparer			MILIT
	Sig	ınature	of officer or trustee			Date	Title			ions.	Yes	No
			Print/Type preparer's nar	me	Preparer's signa	ture		Date	Charl	if	PTIN	
Paid									Check self-em			
Preparer		}	Firm's par					Firm's FIN				
Use Only	•	-	Firm's name					Firm's EIN				
		1	Firm's address					Phone no				

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Summit and Julie Shah Foundation

Schedule of Contributors

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Employer identification number

82-5461159

Organization type (ch	eck one):		
Filers of:	Section:		
Form 990 or 990-EZ	501(c) () organization		
	4947(a)(1) nonexempt charitable trust not treate	ed as a private foundation	
	527 political organization		
Form 990-PF	501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as	s a private foundation	
	501(c)(3) taxable private foundation		
Check if your organizati	on is covered by the General Rule or a Special Rule	Đ.	
Note: Only a section 50	01(c)(7), (8), or (10) organization can check boxes for bo	th the General Rule and a Special Rule. See instructions	
General Rule			
	ation filing Form 990, 990-EZ, or 990-PF that received, omplete Parts I and II. See instructions for determining	during the year, contributions totaling \$5,000 or more (in a contributor's total contributions.	n money or property) from any one
Special Rules			
(vi), that check		990-EZ that met the 331/3% support test of the regulation and that received from any one contributor, during the yii) Form 990-EZ, line 1. Complete Parts I and II.	
more than \$1,0		rm 990 or 990-EZ that received from any one contributory, or educational purposes, or for the prevention of crue and address), II, and III.	
for religious, c during the yea received none	haritable, etc., purposes, but no such contributions to r for an exclusively religious, charitable, etc., purpose. xclusively religious, charitable, etc., contributions	rm 990 or 990-EZ that received from any one contributor taled more than \$1,000. If this box is checked, enter here Don't complete any of the parts unless the General Rule	e the total contributions that were received
5 1 1	or more during the year		\$
		pecial Rules doesn't file Schedule B (Form 990), but it m PF, Part I, line 2, to certify that it doesn't meet the filing r	
For Paperwork Reduc	tion Act Notice, see the separate instructions.	Cat. No. 10642I	Form 990PF (2023)

Name of the organization

Summit and Julie Shah Foundation

Employer identification number 82-5461159

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(c) Type of contribution
1	Summit Shah and Julie Kennerly-Shah 1181 Perry St Columbus, OH 43201	\$ 87,105	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(c) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(c) Type of contribution
		*	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(c) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(c) Type of contribution
		**	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(c) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2023)

Name of the organization

Summit and Julie Shah Foundation

Employer identification number

82-5461159

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.			
(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	
		\$		
(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	
		\$		
		ı	Schedule B (Form 990) (2023)	

Page 4

Name of the organization

Summit and Julie Shah Foundation

Employer identification number

82-5461159

Part III

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)

\$
Use duplicate copies of Part III if additional space is needed.

7-3 NI-				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
		(e) Transfe	r of gift	
	Transferee's name, address, an	d ZIP + 4	F	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gi	ift	(d) Description of how gift is held
		(e) Transfer		
	Transferee's name, address, an	d ZIP + 4	F	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gi	ift	(d) Description of how gift is held
		(e) Transfer of gift		
	Transferee's name, address, an	d ZIP + 4	F	Relationship of transferor to transferee
()))				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gi	ift	(d) Description of how gift is held
		(e) Transfer		
	Transferee's name, address, an	d ZIP + 4	F	Relationship of transferor to transferee

Name of the Organization	EIN
Summit and Julie Shah Foundation	82-5461159

Grants and Contributions Paid during the year - Part XIV Line 3a

S. No.	Name	Address	Foundation status	Amount
1	Shree Samkit Charitable Trust	401 Santosh Villa 4th Floor,Daulat Nagar Road No. 8 Borivali,Mumbai,IN IN 400066	NC	5,000

Food Assistance

Form 990PF Statements 2023

Name of the Organization Summit and Julie Shah Foundation		Employer identification number 82-5461159	
Statement name: Other Investments - Part II Line 13			
Description:	Stocks and Bonds		
BOY:	\$247,850		
EOY:	\$383,337		
EOY - FMV:	\$383,337		
Statement name: Changes in Net Assets - Part III Line 3			
Explanation:	Stock and Bonds		
Amount:	\$52,881		

Form 990PF Statements 2023

Name of the Organization
Summit and Julie Shah Foundation
Statement name: Substantial Contributor - Part VI A Line 10

Name:
Summit Shah and Julie Kennerly-Shah
Address:
1181 Perry St, Columbus, OH 43201