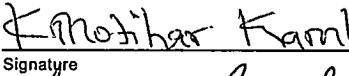


Form CHAR500 This form used for Article 7-A, EPTL and dual filers (replaces forms CHAR 497, CHAR 010 and CHAR 006)	Annual Filing for Charitable Organizations New York State Department of Law (Office of the Attorney General) Charities Bureau - Registration Section 120 Broadway New York, NY 10271 http://www.charitiesnys.com	2012 Open to Public Inspection
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1. General Information		
a. For the fiscal year beginning (mm/dd/yyyy) / 2012 and ending (mm/dd/yyyy)		
b. Check if applicable for NYS: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial filing <input type="checkbox"/> Final filing <input type="checkbox"/> Amended filing <input type="checkbox"/> NY registration pending	c. Name of organization INDIA HOME INC Number and street (or P.O. box if mail not delivered to street address) Room/suite 69-55 260TH PL City or town, state or country and zip + 4 GLEN OAKS, NY 11004	d. Fed. employer ID no. (EIN) (##-####) 20-8747291 e. NY State registration no. (##-##-##) 41-05-63 f. Telephone number 516-859-5125 g. Email

2. Certification - Two Signatures Required			
We certify under penalties of perjury that we reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this report.			
a. President or Authorized Officer	 Signature	Kamohar Karna Motihar, Secy, India Home Printed Name	11/19/13 Date
b. Chief Financial Officer or Treas.	 Signature	AMIT SOOD TRESURER Printed Name	NOV 19 13 Date

3. Annual Report Exemption Information	
a. Article 7-A annual report exemption (Article 7-A registrants and dual registrants) Check → <input type="checkbox"/> if total contributions from NY State (including residents, foundations, corporations, government agencies, etc.) did not exceed \$25,000 and the organization did not engage a professional fund raiser (PFR) or fund raising counsel (FRC) to solicit contributions during this fiscal year.	NOTE: An organization may claim this exemption if no PFR or FRC was used and either: 1) it received an allocation from a federated fund, United Way or incorporated community appeal and contributions from other sources did not exceed \$25,000 or 2) it received all or substantially all of its contributions from one government agency to which it submitted an annual report similar to that required by Article 7-A.
b. EPTL annual report exemption (EPTL registrants and dual registrants) Check → <input type="checkbox"/> if gross receipts did not exceed \$25,000 and assets (market value) did not exceed \$25,000 at any time during this fiscal year.	
For EPTL or Article-7A registrants claiming the annual report exemption under the one law under which they are registered and for dual registrants claiming the annual report exemptions under both laws, simply complete part 1 (General Information), part 2 (Certification) and part 3 (Annual Report Exemption Information) above. Do not submit a fee, do not complete the following schedules and do not submit any attachments to this form.	

4. Article 7-A Schedules	
If you did not check the Article 7-A annual report exemption above, complete the following for this fiscal year:	
a. Did the organization use a professional fund raiser, fund raising counsel or commercial co-venturer for fund raising activity in NY State?	<input type="checkbox"/> Yes * <input checked="" type="checkbox"/> No * If "Yes", complete Schedule 4a.
b. Did the organization receive government contributions (grants)?	<input checked="" type="checkbox"/> Yes * <input type="checkbox"/> No * If "Yes", complete Schedule 4b.

5. Fee Submitted: See last page for summary of fee requirements.	
Indicate the filing fee(s) you are submitting along with this form:	
a. Article 7-A filing fee \$ <u>10.</u> b. EPTL filing fee \$ <u>25.</u> c. Total fee \$ <u>35.</u>	Submit only one check or money order for the total fee, payable to "NYS Department of Law"

6. Attachments - For organizations that are not claiming annual report exemptions under both laws, see last page for required attachments ▶▶▶

The filing fee depends on the organization's Registration Type. For details on Registration Type and filing fees, see the Instructions for Form CHAR500.

Organization's Registration Type	Fee Instructions
• Article 7-A	Calculate the Article 7-A filing fee using the table in part a below. The EPTL filing fee is \$0.
• EPTL	Calculate the EPTL filing fee using the table in part b below. The Article 7-A filing fee is \$0.
• Dual	Calculate both the Article 7-A and EPTL filing fees using the tables in parts a and b below. Add the Article 7-A and EPTL filing fees together to calculate the total fee. Submit a <u>single</u> check or money order for the total fee.

a) Article 7-A filing fee

Total Support & Revenue	Article 7-A Fee
more than \$250,000	\$25
up to \$250,000 *	\$10

* Any organization that contracted with or used the services of a professional fund raiser (PFR) or fund raising counsel (FRC) during the reporting period must pay an Article 7-A filing fee of \$25, regardless of total support and revenue.

b) EPTL filing fee

Net Worth at End of Year	EPTL Fee
Less than \$50,000	\$25
\$50,000 or more, but less than \$250,000	\$50
\$250,000 or more, but less than \$1,000,000	\$100
\$1,000,000 or more, but less than \$10,000,000	\$250
\$10,000,000 or more, but less than \$50,000,000	\$750
\$50,000,000 or more	\$1500

6. Attachments - Document Attachment Check-List

Check the boxes for the documents you are attaching.

<p>For All Filers</p> <p><u>Filing Fee</u></p> <p><input checked="" type="checkbox"/> Single check or money order payable to "NYS Department of Law"</p> <p><u>Copies of Internal Revenue Service Forms</u></p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> IRS Form 990</td> <td><input type="checkbox"/> IRS Form 990-EZ</td> <td><input type="checkbox"/> IRS Form 990-PF</td> </tr> <tr> <td><input type="checkbox"/> All required schedules (including Schedule B)</td> <td><input type="checkbox"/> All required schedules (including Schedule B)</td> <td><input type="checkbox"/> All required schedules (including Schedule B)</td> </tr> <tr> <td><input type="checkbox"/> IRS Form 990-T</td> <td><input type="checkbox"/> IRS Form 990-T</td> <td><input type="checkbox"/> IRS Form 990-T</td> </tr> </table>			<input checked="" type="checkbox"/> IRS Form 990	<input type="checkbox"/> IRS Form 990-EZ	<input type="checkbox"/> IRS Form 990-PF	<input type="checkbox"/> All required schedules (including Schedule B)	<input type="checkbox"/> All required schedules (including Schedule B)	<input type="checkbox"/> All required schedules (including Schedule B)	<input type="checkbox"/> IRS Form 990-T	<input type="checkbox"/> IRS Form 990-T	<input type="checkbox"/> IRS Form 990-T
<input checked="" type="checkbox"/> IRS Form 990	<input type="checkbox"/> IRS Form 990-EZ	<input type="checkbox"/> IRS Form 990-PF									
<input type="checkbox"/> All required schedules (including Schedule B)	<input type="checkbox"/> All required schedules (including Schedule B)	<input type="checkbox"/> All required schedules (including Schedule B)									
<input type="checkbox"/> IRS Form 990-T	<input type="checkbox"/> IRS Form 990-T	<input type="checkbox"/> IRS Form 990-T									

<p>Additional Article 7-A Document Attachment Requirement</p> <p><u>Independent Accountant's Report</u></p> <p><input type="checkbox"/> Audit Report (total support & revenue more than \$250,000)</p> <p><input checked="" type="checkbox"/> Review Report (total support & revenue \$100,001 to \$250,000)</p> <p><input type="checkbox"/> No Accountant's Report Required (total support & revenue not more than \$100,000)</p>

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)

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2012 calendar year, or tax year beginning , 2012 , and ending , 20																														
B Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">C Name of organization INDIA HOME INC</td> <td>D Employer identification no. 20-8747291</td> </tr> <tr> <td colspan="2">Doing Business As</td> <td>E Telephone number (516) 859-5125</td> </tr> <tr> <td>Number and street (or P.O. box if mail is not delivered to street address)</td> <td>Room/suite</td> <td rowspan="2">G Gross receipts \$</td> </tr> <tr> <td>69-55 260TH PL</td> <td></td> </tr> <tr> <td colspan="2">City, town or post office, state, and ZIP code GLEN OAKS, NY 11004</td> <td>220,597</td> </tr> <tr> <td colspan="2">F Name and address of principal officer: AMIT SOOD 448 CHESTNUT ST, WEST HEMPSTEAD, NY 11552</td> <td>H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td> </tr> <tr> <td colspan="2">I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527</td> <td>H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> <tr> <td colspan="2">J Website: WWW.INDIAHOME.ORG</td> <td>H(c) Group exemption number</td> </tr> <tr> <td colspan="2">K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other</td> <td>L Year of formation: 2007</td> </tr> <tr> <td colspan="2"></td> <td>M State of legal domicile: NY</td> </tr> </table>	C Name of organization INDIA HOME INC		D Employer identification no. 20-8747291	Doing Business As		E Telephone number (516) 859-5125	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$	69-55 260TH PL		City, town or post office, state, and ZIP code GLEN OAKS, NY 11004		220,597	F Name and address of principal officer: AMIT SOOD 448 CHESTNUT ST, WEST HEMPSTEAD, NY 11552		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	J Website: WWW.INDIAHOME.ORG		H(c) Group exemption number	K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 2007			M State of legal domicile: NY
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Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: TO MAKE A DIFFERENCE IN THE QUALITY OF LIFE FOR SENIORS OF INDIAN ORIGIN AND PEOPLE WITH SPECIAL NEEDS BY PROVIDING COMPASSIONATE CARE IN CULTURALLY SENSITIVE, INDIAN ENVIRONMENT. TO PROVIDE COMMUNITY SOCIAL SERVICES, HOME CARE SERVICES, ADULT DAY CARE, TRANSPORTATION ETC.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	11
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	8
	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	6
	6	Total number of volunteers (estimate if necessary)	6	15
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
		b Net unrelated business taxable income from Form 990-T, line 34	7b	0
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)		180,016
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		33,810
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		6,771
				220,597
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		112,118
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
		b Total fundraising expenses (Part IX, column (D), line 25) ▶ 12,972		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		133,961
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		246,079	
	19 Revenue less expenses. Subtract line 18 from line 12		(25,482)	
Fund Balances or Net Assets or	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	43,605	7,524
	22	Net assets or fund balances. Subtract line 21 from line 20	87,851	105,072
		(44,246)	(97,548)	

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	▶ AMIT SOOD Signature of officer	Date
	▶ AMIT SOOD, TREASURER Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name NEETU SOLANKI CPA	Preparer's signature NEETU SOLANKI CPA	Date 11-20-2013	Check <input type="checkbox"/> if PTIN self-employed	PTIN P01027745
	Firm's name ▶ TATIYA ACCOUNTAX INC	Firm's EIN ▶			
	Firm's address ▶ 99 Mayflower Ave Williston Park NY 11596	Phone no. 516-742-4145			

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

1 Briefly describe the organization's mission:

TO MAKE A DIFFERENCE IN THE QUALITY OF LIFE FOR SENIORS OF INDIAN ORIGIN AND PEOPLE WITH SPECIAL NEEDS BY PROVIDING COMPASSIONATE CARE IN CULTURALLY SENSITIVE, INDIAN ENVIRONMENT. TO PROVIDE COMMUNITY SOCIAL SERVICES, HOME CARE SERVICES, ADULT DAY CARE, TRANSPORTATION ETC.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 184,923 including grants of \$) (Revenue \$ 33,810) SERVED SENIORS BY PROVIDING PROGRAMS THAT INCLUDED: YOGA, MEDITATION, SPIRITUAL DISCUSSIONS, ENGLISH, COMPUTERS AND CITIZENSHIP CLASSES, RECREATIONAL ACTIVITIES, TRIPS, ARTS ETC. SERVED 200-250 SENIORS / WEEK AT 4-5 CENTERS. CAREGIVER PROGRAM WAS STARTED IN JULY 2010 IN COLLABORATION WITH SUNNYSIDE COMMUNITY SERVICES.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 184,923

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	X	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 1a-14b regarding Form 1096, Form W-2G, Form W-3, and other IRS filings.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included in line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 List the states with which a copy of this Form 990 is required to be filed NY; 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website, Another's website, Upon request, Other (explain in Schedule O); 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.; 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: AMIT SOOD (516) 859-5125 448 CHESTNUT ST WEST HEMPSTEAD, NY 11552

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) AMIT SOOD TREASURER	5.00			X				0	0	0
(2) DR BHUVANA DORAI VICE-PRESIDENT	5.00			X				0		
(3) DR KIRAN DAVE PRESIDENT	10.00			X				0		
(4) GEETA MENON MEDICAL SERVICES OFFICER	2.00			X						
(5) GNANENDRA SINHA BOARD MEMBER	5.00			X				0		
(6) JANAK DATT BOARD MEMBER	1.00			X				0		
(7) JAYA BAHADKAR BOARD MEMBER	5.00			X				0		
(8) KAMLA MOTIHAR SECRETARY	10.00			X				0		
(9) MASOOD MIRZA BOARD MEMBER	1.00			X				0		
(10) PAULOSE ARIKUPURATHI PUBLIC RELATIONS OFFICER	1.00			X				0		
(11) SHANTI RANASINGHE BOARD MEMBER	5.00			X				0		
(12)										
(13)										
(14)										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and director/trustee)							(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		I	D	T	O	K	H	F			
(15)											
(16)											
(17)											
(18)											
(19)											
(20)											
(21)											
(22)											
(23)											
(24)											
(25)											
1b Sub-total											
c Total from continuation sheets to Part VII, Section A											
d Total (add lines 1b and 1c)								0	0	0	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

Part VIII Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c 61,575					
	d Related organizations	1d					
	e Government grants (contributions)	1e 30,002					
	f All other contributions, gifts, grants, and similar amounts not included above	1f 88,439					
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f ▶		180,016				
Program Service Revenue	2a ADULT CARE & INTER GENE	Business Code 624110	33,810	33,810			
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f ▶		33,810				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶						
	4 Income from investment of tax-exempt bond proceeds . . . ▶						
	5 Royalties ▶						
	6a Gross rents	(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss)					
		d Net rental income or (loss) ▶					
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)					
		d Net gain or (loss) ▶					
	8a Gross income from fundraising events (not including \$ 61,575 of contributions reported on line 1c). See Part IV, line 18 a						
	b Less: direct expenses b						
	c Net income or (loss) from fundraising events ▶						
	9a Gross income from gaming activities. See Part IV, line 19 a						
b Less: direct expenses b							
c Net income or (loss) from gaming activities ▶							
10a Gross sales of inventory, less returns and allowances a							
b Less: cost of goods sold b							
c Net income or (loss) from sales of inventory ▶							
Miscellaneous Revenue		Business Code					
11a							
b							
c							
d All other revenue	900099		6,771	6,771			
e Total. Add lines 11a-11d ▶			6,771				
12 Total revenue. See instructions ▶			220,597	40,581	0	0	

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	106,706	99,266	7,440	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	5,412	5,081	331	
11	Fees for services (non-employees):				
a	Management				
b	Legal	5,540	5,540		
c	Accounting	2,400	2,400		
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	2,315	2,315		
12	Advertising and promotion	852	852		
13	Office expenses	2,149		2,149	
14	Information technology	2,769		2,769	
15	Royalties				
16	Occupancy	7,717	1,867	5,850	
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	735		735	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,875		1,875	
23	Insurance	13,764		13,764	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	TELEPHONE & COMMUNICATIONS	5,347		5,347	
b	TRANSPORTATION	10,777	8,647	2,130	
c	FOOD	21,369	21,369		
d	INTERGENERATIONAL ACTIVITIES	13,612	13,612		
e	All other expenses	42,740	23,974	5,794	12,972
25	Total functional expenses. Add lines 1 through 24e	246,079	184,923	48,184	12,972
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response to any question in this Part X

		(A)		(B)	
		Beginning of year		End of year	
Assets	1	Cash - non-interest-bearing	10,846	1	4,460
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4985(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	45,944		
	10b	Less: accumulated depreciation	42,880		
			32,759	10c	3,064
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
15	Other assets. See Part IV, line 11		15		
16	Total assets. Add lines 1 through 15 (must equal line 34)	43,605	16	7,524	
Liabilities	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	30,000	22	40,000
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	45,000	24	45,000
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	12,851	25	20,072
	26	Total liabilities. Add lines 17 through 25	87,851	26	105,072
Net Assets of Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	(44,246)	27	(97,548)
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	(44,246)	33	(97,548)	
34	Total liabilities and net assets/fund balances	43,605	34	7,524	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	220,597
2	Total expenses (must equal Part IX, column (A), line 25)	2	246,079
3	Revenue less expenses. Subtract line 2 from line 1	3	(25,482)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	(44,246)
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	(20,507)
9	Other changes in net assets or fund balances (explain in Schedule O)	9	(7,313)
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	(97,548)

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2012

Open to Public Inspection

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization

INDIA HOME INC

Employer identification number

20-8747291

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 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 exempt 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)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I
 - b Type II
 - c Type III-Functionally integrated
 - d Type III-Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	36,965	47,483	121,831	179,464	190,769	576,512
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	36,965	47,483	121,831	179,464	190,769	576,512
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						233,354
6 Public support. Subtract line 5 from line 4						343,158

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	36,965	47,483	121,831	179,464	190,769	576,512
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						576,512
12 Gross receipts from related activities, etc. (see instructions)					12	64,856
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	59.52	%
15 Public support percentage from 2011 Schedule A, Part II, line 14	15	65.76	%
16a 33 1/3% support test - 2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>			
b 33 1/3% support test - 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>			
17a 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>			
b 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>			
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>			

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Table with 7 columns: (a) 2008, (b) 2009, (c) 2010, (d) 2011, (e) 2012, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or bus. under sec 513; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2008, (b) 2009, (c) 2010, (d) 2011, (e) 2012, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 13 Total support. (Add lines 9, 10c, 11, and 12.)

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 3 columns: Description, Line Number, Percentage. Rows include: 15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f)); 16 Public support percentage from 2011 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

Table with 3 columns: Description, Line Number, Percentage. Rows include: 17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f)); 18 Investment income percentage from 2011 Schedule A, Part III, line 17

19a 33 1/3% support tests - 2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. See separate instructions.

Name of the organization INDIA HOME INC

Employer identification number 20-8747291

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate contributions to (during year), 3 Aggregate grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply). 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Table: Held at the End of the Tax Year. 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year. 4 Number of states where property subject to conservation easement is located. 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year. 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year. 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. 1b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1. (ii) Assets included in Form 990, Part X. 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1. b Assets included in Form 990, Part X.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment ▶ _____ %
 - b Permanent endowment ▶ _____ %
 - c Temporarily restricted endowment ▶ _____ %
- The percentages in lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|-----------------------------|--------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
- b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		45,944	42,880	3,064
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				3,064

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CREDIT CARD PAYABLE	17,330
(3) PAYROLL TAXES PAYABLE	2,742
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	20,072

2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements		1	220,597
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e		
3	Subtract line 2e from line 1		3	220,597
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	220,597

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements		1	253,392
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	7,313	
e	Add lines 2a through 2d	2e		7,313
3	Subtract line 2e from line 1		3	246,079
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	246,079

Part XIII Supplemental Information

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

Other expenses not included on Form 990 (Part XII, line 2d)

EXCESS AUDIT REPORT DEPR OVER TAX DEPR \$7,313

Part XIII Supplemental Information (continued)

02. Other expenses included on Form 990 (Part XII, line 4b)

ACCRUED INTEREST EXPENSE ON TAX RETURN \$5,907

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		<u>ANNUAL DINNER</u>		<u>NONE</u>	(add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	61,575		61,575
	2	Less: Contributions	48,603		48,603
	3	Gross income (line 1 minus line 2)	12,972		12,972
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs	4,437		4,437
	7	Food and beverages	4,437		4,437
	8	Entertainment	1,200		1,200
	9	Other direct expenses	2,898		2,898
	10	Direct expense summary. Add lines 4 through 9 in column (d) ▶			
11	Net income summary. Combine line 3, column (d), and line 10 ▶				

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1	Gross revenue		
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d) ▶				()
8	Net gaming income summary. Combine line 1, column d, and line 7 ▶				

9 Enter the state(s) in which the organization operates gaming activities: _____
 a Is the organization licensed to operate gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain: _____

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

Transactions With Interested Persons

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**
▶ **Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.**

OMB No. 1545-0047

2012

Open to Public Inspection

INDIA HOME INC

Employer identification number

20-8747291

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					

- 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____
- 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
(1) PAULOSE ARIKUPURATHI	BOARD MEMBER	WORKING CAPITAL	X		5,000	5,000		X	X			X
(2) AMIT SOOD	TREASURER	WORKING CAPITAL	X		15,000	15,000		X	X			X
(3) KIRAN DAVE	PRESIDENT	WORKING CAPITAL	X		20,000	20,000		X	X			X
(4)												
(5)												
Total ▶						\$ 40,000						

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				

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

Schedule L (Form 990 or 990-EZ) 2012

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Name of the organization

Employer identification number

INDIA HOME INC

20-8747291

01. Form 990 governing body review (Part VI, line 11)

GOVERNING BODY APPROVED

02. Governing documents, etc, available to public (Part VI, line 19)

AVAILABLE UPON REQUEST

03. Explanation of other changes in net assets or fund balances (Part XI, line

BOOK VS TAX DEPRECIATION ADJ (\$7,313)

04. List of other fees for services expenses (Part IX, line 11g)

CONSULTING EXPENSES \$2,315

TOTAL \$2,315

05. List of other expenses (Part IX, line 24e)

OTHER EXPENSES - PROGRAM SERVICES

EMPLOYEE IMMIGRATION \$3,150

YOGA \$8,460

PHYSICAL THERAPY \$1,950

SUPPLIES \$3,612

VOLUNTEERS DAY \$2,617

POETRY BOOK \$4,185

TOTAL \$23,974

Name of the organization

Employer identification number

INDIA HOME INC

20-8747291

OTHER EXPENSES - MGMT. & GENERAL

BANK CHARGES \$932

MISCELLANEOUS \$449

SUPPLIES \$1,761

FINANCE CHARGES \$2,652

TOTAL \$5,794

OTHER EXPENSES - FUNDRAISING

FUNDRAISING EVENTS \$12,972

Depreciation and Amortization (Including Information on Listed Property)

Department of the Treasury Internal Revenue Service (99)

See separate instructions. Attach to your tax return.

2012 Attachment Sequence No. 179

Name(s) shown on return: INDIA HOME INC; Business or activity to which this form relates: FORM 990 - 1; Identifying number: 20-8747291

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

Table with 13 rows for Section 179 election. Includes fields for maximum amount, total cost, threshold cost, reduction in limitation, and dollar limitation.

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

Table with 3 rows for Special Depreciation Allowance and Other Depreciation (lines 14, 15, 16).

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

Table with 2 rows for MACRS Deductions (lines 17, 18).

Section B - Assets Placed in Service During 2012 Tax Year Using the General Depreciation System

Table with 7 columns: (a) Classification of property, (b) Month and year placed in service, (c) Basis for depreciation, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction. Rows include 3-year, 5-year, 7-year, 10-year, 15-year, 20-year, 25-year property, Residential rental property, and Nonresidential real property.

Section C - Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System

Table with 7 columns: (a) Class life, (b) 12-year, (c) 40-year, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction.

Part IV Summary (See instructions.)

Table with 3 rows for Summary (lines 21, 22, 23). Line 21: Listed property amount 1,875. Line 22: Total amount 1,875. Line 23: Portion of basis attributable to section 263A costs.

For Paperwork Reduction Act Notice, see separate instructions.

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No

Table with columns: (a) Type of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation deduction, (i) Elected section 179 cost.

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 25

26 Property used more than 50% in a qualified business use:

Table for 26: VAN, 20080422, 100%, 45,944, 45,944, 5, 200 DB-HY, 1,875

27 Property used 50% or less in a qualified business use:

Table for 27: Multiple rows with columns for percentage and S/L status.

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28 1,875

29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

Table for 30-36: Miles driven (30-33) and availability for personal use (34-36) for six vehicles.

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

Table for 37-41: Questions regarding written policies, personal use, and qualified demonstration use.

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

Table for 42: Amortization of costs that begins during your 2012 tax year.

42 Amortization of costs that begins during your 2012 tax year (see instructions):

Table for 42: Multiple rows for amortization details.

43 Amortization of costs that began before your 2012 tax year 43

44 Total. Add amounts in column (f). See the instructions for where to report 44

Name(s) as shown on return

FEIN

INDIA HOME INC

20-8747291

OTHER EXPENSES - PROGRAM SERVICES

Description	Amount
EMPLOYEE IMMIGRATION	\$ 3,150
YOGA	8,460
PHYSICAL THERAPY	1,950
SUPPLIES	3,612
VOLUNTEERS DAY	2,617
POETRY BOOK	4,185
Total:	\$ 23,974

OTHER EXPENSES - MANAGEMENT & GENERAL

Description	Amount
BANK CHARGES	\$ 932
MISCELLANEOUS	449
SUPPLIES	1,761
FINANCE CHARGES	2,652
Total:	\$ 5,794

FUNDRAISING

Description	Amount
FUNDRAISING EVENTS	\$ 12,972
Total:	\$ 12,972

PRIOR PERIOD ADJUSTMENTS

Description	Amount
PRIOR PERIOD BOOK VS TAX DEPRECIATION ADJ	\$ (20,507)
Total:	\$ -20,507

SCH D: PART XII

Description	Amount
EXCESS AUDIT REPORT DEPR OVER TAX DEPR	\$ 7,313
Total:	\$ 7,313

Name(s) as shown on return

FEIN

INDIA HOME INC

20-8747291

Description	Amount
INTERGENERATIONAL ACTIVITIES	\$ 17,617
DAY CARE	5,440
Total:	\$ 23,057

MISCELLANEOUS - ALL OTHER REVENUE

Description	Amount
DEBT - CANCELLATION	\$ 6,771
Total:	\$ 6,771

India Home Inc

Year Ended December 31, 2012

Financial Statements & Independent Accountants Audit Report

India Home Inc

Year Ended December 31, 2012

CONTENTS

	PAGE
Independent Auditor's Report	1
<u>Financial Statements</u>	
Statement of Financial Position	2
Statement of Activities	3
Statement of Functional Expenses	4
Statement of Cash Flows	5
Notes to Financial Statements	6-9



Independent Auditors' Report

The Board of Directors India Home Inc.

We have Audited the accompanying statement of financial position of India Home Inc. as of December 31, 2012 and the related Statements of activities and changes in net assets, functional expenses and cash flows for the year then ended. These financial statements are the responsibility of India Home Inc.'s management. Our Responsibility is to express an opinion on these financial statements based on our audit.

We Conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those Standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

As described in Note 2(a), these financial statements have been prepared on the cash basis of accounting, which is a comprehensive basis of accounting other than generally accepted accounting principles. Accordingly the accompanying financial statements are not intended to present financial position and results of operations in conformity with generally accepted accounting principles.

In our opinion, the financial statements referred to in the first paragraph above present fairly, in all material respects, the financial position of India Home Inc. for the year ended December 31, 2012 and the changes in its net assets for the year then ended on the basis of accounting described in note 2(a) to these financial statements.

Shrinivas & Elliott LLP

11/12/2013

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India Home Inc

Statement of Financial Position

Cash Basis

December 31, 2012

(with summarized financial information as of December 31, 2011)

	<u>ASSETS</u>	<u>2012</u>	<u>2011</u>
Cash & cash Equivalents		\$ 4,460	\$ 10,846
Fixed Asset (see note 3)		\$ 3,064	\$ 12,253
Other assets			-
Total Assets		<u>\$ 7,524</u>	<u>\$ 23,099</u>
 <u>LIABILITIES & NET ASSETS</u> 			
	Liabilities		
Loans (see note 4)		\$ 85,000	\$ 75,000
Other payables & liabilities		\$ 20,072	\$ 12,851
Total Liabilities		<u>\$ 105,072</u>	<u>\$ 87,851</u>
	 <u>Net Assets</u>		
Net assets (Unrestricted)		\$ (97,548)	\$ (64,752)
Total Net Assets		<u>\$ (97,548)</u>	<u>\$ (64,752)</u>
Total Liabilities and Net Assets		<u>\$ 7,524</u>	<u>\$ 23,099</u>

See Independent Auditor's Report

The accompanying notes are integral part of these statements

India Home Inc

Statement of Activities and Changes in Net Assets

Cash Basis

For the Year Ended December 31, 2012

(with summarized financial information as of December 31, 2011)

	2012	2011
<u>REVENUE & OTHER SUPPORTS</u>	(Unrestricted)	(Unrestricted)
Contributions	\$ 88,439	\$ 92,365
Program Service Revenue	\$ 28,370	\$ 27,445
Fundraising Revenue	\$ 61,575	\$ 25,307
Government Contracts	\$ 30,002	\$ 14,354
Grants	\$ -	\$ 19,993
Debt Cancellation	\$ 6,771	\$ -
Adult Care Service Revenue	\$ 5,440	\$ -
Total Revenue and other Support	\$ 220,597	\$ 179,464
<u>EXPENSES</u>	(Unrestricted)	(Unrestricted)
Program services	\$ 184,922	\$ 127,206
Support services	\$ 55,498	\$ 24,206
Fundraising expenses	\$ 12,972	\$ 11,100
Total Expenses	\$ 253,392	\$ 162,512
Changes in Net Assets	\$ (32,795)	\$ 16,952
Net Assets at the beginning of the year	\$ (64,752)	\$ (81,704)
Net Assets at the end of the year	\$ (97,547)	\$ (64,752)

See Independent Auditor's Report

The accompanying notes are integral part of these statements

India Home Inc

Statement of Functional Expenses

Cash Basis

For the Year Ended December 31, 2012

(with summarized financial information as of December 31, 2011)

	<u>Program</u>	<u>General &</u>	<u>Fundraising</u>	<u>2012</u>	<u>2011</u>
	<u>Services</u>	<u>Administrative</u>		<u>Total</u>	<u>Total</u>
Salaries	\$ 99,266	\$ 7,440	\$ -	\$ 106,706	\$ 48,504
Payroll taxes & Fringe Benefits	\$ 5,081	\$ 331	\$ -	\$ 5,412	\$ 3,607
Employee Immigration Expenses	\$ 3,150	\$ -	\$ -	\$ 3,150	\$ -
Fundraising Events	\$ -	\$ -	\$ 12,972	\$ 12,972	\$ 11,100
Advertising and promotion	\$ 852	\$ -	\$ -	\$ 852	\$ 4,345
Automobile Expenses	\$ 8,647	\$ -	\$ -	\$ 8,647	\$ -
Yoga Program Expenses	\$ 8,460	\$ -	\$ -	\$ 8,460	\$ -
Bank Fees	\$ -	\$ 932	\$ -	\$ 932	\$ 739
Poetry Book Printing	\$ 4,185	\$ -	\$ -	\$ 4,185	\$ -
Finance charges	\$ -	\$ 2,652	\$ -	\$ 2,652	\$ 3,242
Conferences	\$ -	\$ 735	\$ -	\$ 735	\$ 3,310
Depreciation	\$ -	\$ 9,188	\$ -	\$ 9,188	\$ 9,188
Insurance	\$ -	\$ 13,764	\$ -	\$ 13,764	\$ 8,599
Office expenses	\$ -	\$ 2,149	\$ -	\$ 2,149	\$ 1,497
Miscellaneous	\$ -	\$ 449	\$ -	\$ 449	\$ 494
Supplies	\$ 3,612	\$ 1,761	\$ -	\$ 5,373	\$ 2,463
Professional Services	\$ 12,205	\$ -	\$ -	\$ 12,205	\$ 10,159
Rent	\$ 1,867	\$ 5,850	\$ -	\$ 7,717	\$ 1,300
Telephone & Postage	\$ -	\$ 5,347	\$ -	\$ 5,347	\$ 4,905
Meals	\$ 21,369	\$ -	\$ -	\$ 21,369	\$ 14,313
Cruise expenses	\$ 13,612	\$ -	\$ -	\$ 13,612	\$ 26,364
Travel / Transportation	\$ -	\$ 2,130	\$ -	\$ 2,130	\$ 6,405
Volunteers Day Expenses	\$ 2,617	\$ -	\$ -	\$ 2,617	\$ -
Computer expenses	\$ -	\$ -	\$ -	\$ -	\$ 978
Website & Internet	\$ -	\$ 2,769	\$ -	\$ 2,769	\$ 1,000
Total expenses	\$ 184,922	\$ 55,498	\$ 12,972	\$ 253,392	\$ 162,512

See Independent Auditor's Report

The accompanying notes are integral part of these statements

India Home Inc

Statement of Cash Flows

For the Year Ended December 31, 2012

(with summarized financial information as of December 31, 2011)

	2012	2011
<u>CASH FLOWS FROM OPERATING ACTIVITIES</u>		
Changes in Net Assets	\$ (32,795)	\$ 16,952
Adjustments to reconcile changes in net assets to net cash provided by (used in) operating activities:		
Depreciation and Amortization expenses	\$ 9,188	\$ 9,188
Changes in:		
Prepaid expenses	\$ -	\$ 408
Payroll Liabilities	\$ 1,180	\$ 1,158
Net Cash Provided by (used in) Operating activities	\$ (22,427)	\$ 27,706
<u>CASH FLOWS FROM INVESTING ACTIVITIES</u>		
Changes in other assets	\$ -	\$ -
Net Cash Provided by (used in) investing activities	\$ -	\$ -
<u>CASH FLOWS FROM FINANCING ACTIVITIES</u>		
Bank Overdraft	\$ -	\$ 893
Credit Cards & Loans	\$ 16,041	\$ (17,808)
Net cash provided by (used in) financing activities	\$ 16,041	\$ (16,915)
Net Decrease in cash and cash equivalents	\$ (6,386)	\$ 10,791
Cash and cash equivalents, beginning	\$ 10,846	\$ 55
Cash and cash equivalents, ending	\$ 4,460	\$ 10,846

See Independent Auditor's Report

The accompanying notes are integral part of these statements

India Home Inc
Notes to Financial Statements
For the Year Ended December 31, 2012

Note 1: Nature of Organization

- a. India Home Inc. is a not for Profit Organization incorporated in New York in 2007. It is exempt from U.S. federal income taxes under Section 501©(3) of the internal Revenue Code and from State Income tax under comparable law.
- b. The objective of the organization is to make a difference in the quality of life for seniors and people with special needs by providing quality care in a culturally sensitive environment by collaborating with other not for profit organizations, for profit organizations, Community members, health care professionals, community organizations and Government organizations.

India Home Inc. Provides services for Seniors which include yoga and Meditation, spiritual lectures and discussions, medical, social and legal information, English, computers and citizenship classes, recreational activities including movies, music and games, festival and birthday celebrations, activities including arts, crafts and group discussions, trips to parks, museums and beaches etc.

India Home Inc. seeks to Provide Community health and social services, home care Services, adult social day program, adult day health care center, dementia adult day care center, transportation services, development of senior housing and retirement communities, assisted living facilities and enhanced assisted living facilities, nursing homes for sub acute care, long term care, respite care and hospice care.

Note 2: Significant Accounting Policies

a. Basis of accounting

The accompanying financial statements have been prepared on the cash basis of accounting, which is a comprehensive basis of accounting rather than generally accepted accounting principles. Non-cash transactions are not recognized in the financial statements. The cash basis differs from generally accepted accounting principles primarily due to the effects of accounts receivable and accounts payable not being reflected in the accompanying financial statements.

b. Financial Statement Presentation

Financial statement presentation follows the requirements of the financial accounting standards Board in its Statement of Financial Accounting Standards, *Financial Statements of Not -for-profit , Organization SFAS No.117*. Under SFAS No. 117, the organization is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets.

Unrestricted Net Assets :- Consists of assets, public support, program revenues and investment earnings which are available and used for charitable activities, operations

India Home Inc
Notes to Financial Statements
For the year ended December 31, 2012

Summary of Significant Accounting Policies (Continued)

Financial Statement Presentation (Continued)

and Programs. Unrestricted net assets represent the portion of net assets of the Organization that is neither permanently restricted nor temporarily restricted by donor-imposed stipulations. Contributions are considered available for unrestricted use unless specifically restricted by the donor.

Temporarily Restricted Net Assets:- include funds with donor imposed restrictions that permit the donee organization to expend the assets as specified and are satisfied either by passage of time or by actions of the organization. Resources of this nature originate from gifts, grants, bequests and investment income earned on restricted funds.

Permanently Restricted Net Assets - Include resources, which have a permanent donor-imposed restriction which stipulates that the assets are to be maintained permanently, but permits the Organization to expend part or all of the income derived from the donated assets.

c. Functional Expenses

The Organization allocates their expenses on a functional basis among its various programs and support services. Expenses that can be identified with a specific Program and/or support service are allocated directly according to their natural expenditure classification.

d. Contributions, Gifts, and Grants

The Organization follows the requirements of the financial Accounting Standards Board in its Statement of Financial Accounting Standards, Accounting for Contributions Received and Contributions Made. The Financial Accounting Standard requires that Contributions be recorded as receivables and revenues and requires the organization to distinguish between contributions received for each net asset category in accordance with donor-imposed restrictions. Contributions may include gifts of cash, collection items, or promises to give. Contributions, including unconditional promises to give, are recognized as revenues in the period received. Conditional promises to give are not recognized until they become unconditional, that is, at the time when the conditions on which they depend are substantially met. Contributions of assets other than cash are reported at their estimated fair value. Contributions to be received after one year are discounted at an appropriate discount rate commensurate with the risk involved, when such amounts are considered material. Support that is restricted by the donor is reported as an increase in temporarily or permanently restricted net assets depending on the nature of the restriction until restriction conditions are satisfied, at which time temporarily restricted net assets are reclassified to unrestricted net assets.

India Home Inc
Notes to Financial Statements
For the year ended December 31, 2012

Summary of Significant Accounting Policies (Continued)

Financial Statement Presentation (Continued)

e. Revenue Recognition

The Organization reports gifts of land, building, and equipment as unrestricted support unless explicit donor stipulations specify how the donated assets must be used. Gifts of long-lived assets with explicit restrictions that specify how the assets are to be used and gifts of cash or other assets that must be used to acquire long lived assets are reported as restricted Support.

f. Cash and Cash Equivalents

The Organization considers as cash equivalents all highly liquid investments, which can be converted into known amounts of cash and have a maturity period of ninety days or less at the time of purchase. Excluded from this Definition of cash equivalents are such amounts that represent funds that have been designated by the Board for Investment. Money market deposits maintained in checking and saving accounts that are available for current operations.

g. Fixed assets and depreciation

The Organization capitalizes at cost, if purchased, or if donated, at fair market value at the date of receipt. Expenditures for maintenance, repairs and renewals are charged to expenses as incurred; whereas major betterments are capitalized as additions to property and equipment. Depreciation of Property and equipment is computed using the straight-line method over the estimated useful lives of the assets as follows:

Motor Vehicle

5 Yrs

Fixed Assets at December 31, 2012 and 2011 consist of the following:

	2012	2011
Vehicle – estimated useful life 5 years	\$ 45,944	\$ 45,944
Less: Accumulated depreciation	\$ 42,880	\$ 33,691
	\$ 3,064	\$ 12,253

Depreciation for the years ended December 31, 2012 and 2011 were \$9,188 each year.

India Home Inc

Notes to Financial Statements

For the year ended December 31, 2012

Note 3: Other Payables & Liabilities:

Credit Card	\$17,330
Payroll Tax	\$ 2,742
	<u>\$20,072</u>

Note 4: Related party disclosure

Of the total principal amount of loans of \$ 85,000, \$40,000 represents principal amount due to individuals who are members of Board of Directors. Of these, \$ 5,000 does not carry any interest and is payable on demand. The balance of loans in the amount of \$35,000 carry an interest rate of 8%. As per the original terms of the loan, the interest is payable at the end of each year for the first three years and the entire principal amount of loan is payable on or before a day which is three years from the date on which the loan is made. The loan agreement has been modified and the loan term has been extended to five years. No interest payment has been made until December 31, 2012. The unpaid interest due to members of Board of Directors as of 12/31/2012 and 12/31/2011 were \$6624 and \$4,317

Note 5: Loans

The Principal amount Outstanding on loans payable as of 12/31/2011 and 12/31/2012 were \$75,000 and \$85000. The new loan of \$10,000 from Board Member was obtained on 08/13/2012. The loans in the amount of \$35,000 from members of Board of Directors and \$ 45,000 from third parties carry an interest rate of 8%. As per the original terms of the loan , the interest is payable at the end of each year for the first three years and the entire principal amount of loan is payable on or before a day which is three years from the date on which the loan is made. The loan agreement has been modified and the loan term has been extended to five years. No interest payment has been made until December 31, 2012. The accumulated unpaid interest due to members of Board of Directors and to third parties as of 12/31/12 were \$6624 and \$13,133. The accumulated unpaid interest due to members of Board of Directors and to third parties as of 12/31/11 were \$4,317 and \$9,533.

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