STATE OF CALIFORNIA RRF-1						DEPARTMENT OF J	USTICE E 1 of 5		
(Rev. 09/2017) IN MAIL TO:						(For Registry Use			
Registry of Charitable Trusts P.O. Box 903447 Sacramento, CA 94203-4470 (916) 210-6400	ANNUAL REGISTRATION RENEW TO ATTORNEY GENERAL OF				ORNIA		- ,,	-	
STREET ADDRESS: 1300   Street		ions 12586 and 12587, Cal. Code Regs. section							
Sacramento, CA 95814 (916) 210-6400	organization's ac	it this report annually no later counting period may result in t	the loss of tax exer	nption and th	e assessment of a				
WEBSITE ADDRESS: www.ag.ca.gov/charities/	section 2	f \$800, plus interest, and/or fin 3703; Government Code sectio	n 12586.1. IRS exte	ensions will b	e honored.				
TAMIL CULTURAL CENTER					Check if: Change of address				
Name of Organization				Amended report					
List all DBAs and names the organization	uses or has used				·				
P.O. BOX 362329 Address (Number and Street)				State Charity Registration Number <u>CT0258983</u>					
MILPITAS, CA 95036 City or Town, State and ZIP Code				Corporation or Organization No. 3528367					
(510) 449-6458 TREASURER@SFBATM.ORG				Federal Employer ID No. 46-1349088					
Telephone Number E-mail Address ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 C									
		Make Check Payable				i i, and 512)			
Gross Annual Revenue	Fee	Gross Annual Revenue		<u>Fee</u>	Gross Annual Revenue Fee				
Less than \$25,000 Between \$25,000 and \$100,000	0 Between \$100,001 and \$250,00 \$25 Between \$250,001 and \$1 milli			\$50 \$75	. , ,				
PART A – ACTIVITIES									
For your most recent full a	accounting peri	od (beginning]	/01/19	ending	12/31/19	) list:			
Gross Annual Revenue \$	100,047	7. Noncash Contribu	itions \$		0. Total A	ssets \$ <u>1</u>	75,97	12.	
Program E>	(penses \$	0.	Total	Expenses	s \$	0.			
PART B – STATEMENTS Note: All guestions must be ar									
providing an explanation							Yes	No	
1 During this reporting period, officer, director or trustee thereof,	were there any either directly o	contracts, loans, leases or oth r with an entity in which	er financial transa any such offic	er, director o	veen the organiza r trustee had any f	ation and any financial interest?		Х	
2 During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?								Х	
<b>3</b> During this reporting period, were any organization funds used to pay any penalty, fine or judgment?								Х	
4 During this reporting period, were the services of a commercial fundraiser, fundraising counsel for charitable purposes, or commercial coventurer used?								X	
5 During this reporting period, did the organization receive any governmental funding?								Х	
6 During this reporting period, did the organization hold a raffle for charitable purposes?								Х	
7 Does the organization conduct a vehicle donation program?								Х	
8 Did the organization conduct an independent audit and prepare audited financial statements in accordance with generally accepted accounting principles for this reporting period?								Х	
9 At the end of this reporting p	eriod, did the or	ganization hold restricted	net assets, while	e reporting	negative unrest	ricted net assets?		X	
I declare under penalty of perju and belief, the content is true, o				ipanying c	locuments, and	to the best of my kn	owled	ge	
		A RAJESH		ASURER					
Signature of Authorized Agent	Printed		Title			Date			