STATE OF CALIFORNIA RRF-1						DEPARTMENT OF J		
(Rev. 02/2021) IN	1						E 1 of 5	
MAIL TO: Registry of Charitable Trusts P.O. Box 903447 Sacramento, CA 94203-4470	ANNUAL REGISTRATION RENEWAL FE					(For Registry Use	Only)	And DEPARTME
STREET ADDRESS:		tions 12586 and 12						
1300 I Street Sacramento, CA 95814		Cal. Code Regs. se this report annually no						
(916) 210-6400	organization's a	ccounting period may re \$800, plus interest, and/	esult in the loss of ta	ax exemption and t	he assessment of a			
WEBSITE ADDRESS: www.oag.ca.gov/charities		3; Government Code se						
COCUMEC FOUNDATION I	10 7			Check if:				
GOSUMEC FOUNDATION USA Name of Organization				Change of address				
List all DBAs and names the organization	uses or has used			Amended	report			
177 TELLES LN				State Charity Registration Number CT0287193				
Address (Number and Street)								
FREMONT, CA 94539 City or Town, State, and ZIP Code				Corporation or Organization No. 5422111				
(510) 516-7677 BINDRAEP@GMAIL.COM								
Telephone Number E-mail Address				Federal Employer ID No. <u>92–1826702</u>				
ANNUAL I	REGISTRATION	RENEWAL FEE SC Make Check Pay				11, and 312)		
Total Revenue	<u>Fee</u>	Total Revenue		<u>Fee</u>	Total Revenue		F	<u>ee</u>
Less than \$50,000 Between \$50,000 and \$100,000 Between \$100,001 and \$250,000				ion \$200	Between \$100,0	10,001 and \$100 milli 100,001 and \$500 mil 10 million	lion \$	300 1,000 1,200
PART A – ACTIVITIES		4						
For your most recent full a	accounting peri	od (beginning	1/01/23	ending	12/31/23) list:		
Total Revenue \$								
(including noncash contributions)	519,90	7. Noncash Co	ntributions \$		0. Total A	ssets \$ <u>38</u>	39,09	92.
Program Ex	kpenses \$	129,250.		Total Expense	s\$ <u>13</u>	0,814.		
PART B – STATEMENTS	REGARDIN					REPORT		
Note: All questions must be an	nswered. If you	answer "yes" to a	ny of the quest	ions below, yo	ou must attach a	separate page		
providing an explanation						-	Yes	No
1 During this reporting period, officer, director or trustee thereof,	were there any either directly o	contracts, loans, leases r with an entity in	or other financial which any such	transactions bety officer, director	ween the organization or trustee had any	ation and any financial interest?		Χ
2 During this reporting period,	was there any th	ieft, embezzlemer	nt, diversion or	misuse of the	organization's charita	ble property or funds?		Х
3 During this reporting period, were any organization funds used to pay any penalty, fine or judgment?								Х
4 During this reporting period, v coventurer used?	were the service	s of a commercial fu	ındraiser, fundrai	sing counsel fo	or charitable purpose	s, or commercial		Χ
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?								Χ
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 re	stricted net assets,	while reportin	g negative unrest	ricted net assets?		Χ
I declare under penalty of perju and belief, the content is true,					documents, and	to the best of my kn	owledg	je
	SAN	JAY BINDRA		PRESIDEN	[
Signature of Authorized Agent	Printed			Title		Date		