



MAIL TO:  
Registry of Charitable Trusts  
P.O. Box 903447  
Sacramento, CA 94203-4470

STREET ADDRESS:  
1300 I Street  
Sacramento, CA 95814  
(916) 210-6400

WEBSITE ADDRESS:  
www.oag.ca.gov/charities

## ANNUAL TREASURER'S REPORT ATTORNEY GENERAL OF CALIFORNIA

Section 12586, California Government Code  
11 Cal. Code Regs., Section 301

(FORM CT-TR-1)

(For Registry Use Only)

RECEIVED  
Attorney General's Office

FEB 16 2022

Registry of Charitable Trusts

### PEER 2 PEER FOUNDATION

Name of Organization

5818 CATTLEYA WAY

Address (Number and Street)

SAN RAMON, CA 95482

City or Town, State and ZIP Code

State Charity Registration Number CT0248718

Corporation or Organization No. C 3973951

Federal Employer I.D. No. 81-4918981

For annual accounting period ( beginning 01 / 01 / 2020 ending 12 / 31 / 2020 )

### BALANCE SHEET

#### ASSETS

|                     |                     |
|---------------------|---------------------|
| Cash                | \$ 24,750.30        |
| Savings             | \$ 0.00             |
| Investment          | \$ 0.00             |
| Land/Buildings      | \$ 0.00             |
| Other Assets        | \$ 0.00             |
| <b>TOTAL ASSETS</b> | <b>\$ 24,750.30</b> |

#### LIABILITIES

|                          |                |
|--------------------------|----------------|
| Accounts Payable         | \$ 0.00        |
| Salary Payable           | \$ 0.00        |
| Other Liabilities        | \$ 0.00        |
| <b>TOTAL LIABILITIES</b> | <b>\$ 0.00</b> |

#### FUND BALANCE

Total Assets less Total Liabilities \$ 24,750.30

### REVENUE STATEMENT

#### REVENUE

|                       |                    |
|-----------------------|--------------------|
| Cash Contributions    | \$ 9,412.99        |
| Noncash Contributions | \$ 0.00            |
| Program Revenue       | \$ 0.00            |
| Investments           | \$ 0.00            |
| Special Events        | \$ 0.00            |
| Other Revenue         | \$ 0.00            |
| <b>TOTAL REVENUE</b>  | <b>\$ 9,412.99</b> |

#### EXPENSES

|                                    |                  |
|------------------------------------|------------------|
| Compensation of Officers/Directors | \$ 0.00          |
| Compensation of Staff              | \$ 0.00          |
| Fundraising Expenses               | \$ 0.00          |
| Rent                               | \$ 0.00          |
| Utilities                          | \$ 0.00          |
| Supplies/Postage                   | \$ 0.00          |
| Insurance                          | \$ 0.00          |
| Other Expenses                     | \$ 568.86        |
| <b>TOTAL EXPENSES</b>              | <b>\$ 568.86</b> |

#### NET REVENUE

Total Revenue less Total Expenses \$ 8,844.13

I hereby declare under penalty of perjury that I have examined this report, including accompanying documents, and, to the best of my knowledge and belief, the content is true, correct and complete and I am authorized to sign.

Signature of Authorized Agent

Gnanenthiran Jayanthan  
Printed Name

PRESIDENT  
Title

02/09/2022  
Date