(Rev 02/2021)

MAIL TO Registry of Chantable Trusts P O Box 903447 Sacramento, CA 94203-4470

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

WEBSITE ADDRESS

ANNUAL REGISTRATION RENEWAL FEE REPORT TO ATTORNEY GENERAL OF CALIFORNIA

Sections 12586 and 12587, California Government Code 11 Cal. Code Regs. sections 301-306, 309, 311, and 312

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a

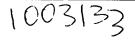
(For Registry 150 Only) Attorney General's Office

DEPARTMENT OF JUSTICE

PAGE 1 of 5

DEC 13 2023

minimum tax of \$800, plus interest, and/or fines or filing penalties. Revenue & Taxation Code section 23703, Government Code section 12586 1. IRS extensions will be honored Repristry of Charitable Trusts 23703, Government Code section 12586 1. IRS extensions will be honored www oag ca gov/charities PEER 2 PEER FOUNDATION Check if: Name of Organization Change of address Amended report List all DBAs and names the organization uses or has used 5818 CATTLEYA WAY CT0248718 State Charity Registration Number Address (Number and Street) SAN RAMON, CA 95482 C 3973951 City or Town, State, and ZIP Code Corporation or Organization No. (925) 788-4250 JAYANTHANC@YAHOO.COM 81-4918981 Telephone Number E-mail Address Federal Employer ID No. ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311, and 312) Make Check Payable to Department of Justice **Total Revenue** Fee **Total Revenue** Fee **Total Revenue** Fee Less than \$50,000 Between \$250,001 and \$1 million \$25 \$100 Between \$20,000,001 and \$100 million \$800 Between \$50,000 and \$100,000 \$50 Between \$1,000,001 and \$5 million Between \$100,000,001 and \$500 million \$1,000 \$200 Between \$100,001 and \$250,000 \$75 Between \$5,000,001 and \$20 million \$400 Greater than \$500 million \$1,200 PART A - ACTIVITIES For your most recent full accounting period (beginning 01 / 01 / 2021 ending 12 / 31 / 2021) list: Total Revenue \$ 1146.19 (including noncash contributions) Noncash Contributions \$ Total Assets \$ 0 14528.39 Program Expenses \$ 11367.93 Total Expenses \$ 11367.93 PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT All questions must be answered. If you answer "yes" to any of the questions below, you must attach a separate page Note: providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required. No During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof, either directly or with an entity in which any such officer, director or trustee had any financial interest? 2. During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds? During this reporting period, were any organization funds used to pay any penalty, fine or judgment? 3. During this reporting period, were the services of a commercial fundraiser, fundraising counsel for charitable purposes, or commercial coventurer used? During this reporting period, did the organization receive any governmental funding? During this reporting period, did the organization hold a raffle for charitable purposes? Does the organization conduct a vehicle donation program? Did the organization conduct an independent audit and prepare audited financial statements in accordance with generally accepted accounting principles for this reporting period? At the end of this reporting period, did the organization hold restricted net assets, while reporting negative unrestricted net assets? 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. Gnanenthiran Jayanthan **PRESIDENT** 12/2/2023 Signature of Authorized Agent Printed Name Date



6560-\$75

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

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

WEBSITE ADDRESS: www_oag ca gov/charities

ANNUAL TREASURER'S REPORT ATTORNEY GENERAL OF CALIFORNIA Attorney General's Office

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

(FORM CT-TR-1)

(For Registry Use Only RECEIVED

DEPARTMENT OF JUSTICE

PAGE 1 of 4

DEC 13 2023

Registry of Charitable Trusts

PEER 2 PEER FOUNDATION	
Name of Organization	State Charity Registration Number CT0248718
5818 CATTLEYA WAY	
Address (Number and Street)	Corporation or Organization No. C 3973951
SAN RAMON, CA 95482	
City or Town, State and ZIP Code	Federal Employer I.D. No. 81-4918981

For annual accounting period (beginning 01 / 01 / 2021 ending 12 / 31 / 2021)

BALANCE SHEET

ASSETS

Cash	\$	14,528.39	• • •
Savings	\$	0.00	
Investment	\$ (0.00	
Land/Buildings	\$	0.00	
Other Assets	\$ (0.00	-
TOTAL ASSETS	\$	14,528.39	

LIABILITIES

Accounts Payable	\$ 0.00	
Salary Payable	\$ 0.00	
Other Liabilities	\$ 0.00	

TOTAL LIABILITIES \$ 0.00

FUND BALANCE

Total Assets less Total Liabilities \$ 14,528.39

REVENUE STATEMENT

REVENUE

Cash Contributions	\$ 1,146.19	
Noncash Contributions	\$ 0.00	
Program Revenue	\$ 0.00	
Investments	\$ 0.00	
Special Events	\$ 0.00	
Other Revenue	\$ 0.00	

-	TOTAL REVENUE	\$ 1,146.19
L		

NET REVENUE

Total Revenue less Total Expenses \$ -10.221.74

EXPENSES

Compensation of Officers/Dire	ctors \$	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	\$	11,367.93	

TOTAL EXPENSES	\$ 11,367.93

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.

Gnanenthiran Jayanthan

PRESIDENT Title

12/2/2023

Signature of Authorized Agent

Printed Name

Date