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STATUTE CLEARED
36559514 FEB 28

Form **990**

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)

OMB No. 1545-0047

2003

Open to Public Inspection

0407

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

For the 2003 calendar year, or tax year beginning **AUG 1, 2003** and ending **JUL 31, 2004**

- Check if applicable
- Address change
- Name change
- Initial return
- Final return
- Amended return
- Application pending

Please use IRS label or print or type See Specific Instructions

C Name of organization

TIS, LTD

D Employer identification number

98-0399712

Number and street (or P O box if mail is not delivered to street address)

7110 TASHKENT PL

Room/suite

E Telephone number

998 71 291 9670

City or town, state or country, and ZIP + 4

DULLES, VA 20189-7110

F Accounting method Cash Accrual
 Other (specify) ▶

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates? Yes No

H(b) If "Yes," enter number of affiliates ▶

H(c) Are all affiliates included? **N/A** Yes No (if "No," attach a list)

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

I Group Exemption Number ▶

M Check if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

G Website: **WWW.TASHSCHOOL.ORG**

J Organization type (check only one) 501(c) (**4**) (insert no) 4947(a)(1) or 527

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **1,879,708.**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

		1a		1b		1c		1d	
Revenue	1	Contributions, gifts, grants, and similar amounts received							
		a	Direct public support						
		b	Indirect public support						
		c	Government contributions (grants)						
		d	Total (add lines 1a through 1c) (cash \$ 43,325. noncash \$ _____)						43,325.
		2	Program service revenue including government fees and contracts (from Part VII, line 93)						1,826,451.
		3	Membership dues and assessments						
		4	Interest on savings and temporary cash investments						9,881.
		5	Dividends and interest from securities						
		6a	Gross rents						
		6b	Less rental expenses						
		6c	Net rental income or (loss) (subtract line 6b from line 6a)						
	7	Other investment income (from Schedule B)							
	8a	(A) Securities		(B) Other					
	8b	Less cost or other basis and sales expenses							
	8c	Gain or (loss) (attach schedule)							
	8d	Net gain or (loss) (combine line 8c, columns (A) and (B))							
	9	Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>							
	9a	Gross revenue (not including \$ _____ of contributions reported on line 1a)							
	9b	Less direct expenses other than fundraising expenses							
	9c	Net income or (loss) from special events (subtract line 9b from line 9a)							
	10a	Gross sales of inventory, less returns and allowances							
	10b	Less cost of goods sold							
	10c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)							
	11	Other revenue (from Part VII, line 103)						51.	
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)						1,879,708.	
Expenses	13	Program services (from line 44, column (B))						4,222,780.	
	14	Management and general (from line 44, column (C))						49,997.	
	15	Fundraising (from line 44, column (D))							
	16	Payments to affiliates (attach schedule)							
	17	Total expenses (add lines 13 and 14, column (A))						4,272,777.	
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)						-2,393,069.	
	19	Net assets or fund balances at beginning of year (from line 73, column (A))						540,104.	
	20	Other changes in net assets or fund balances (attach explanation)						0.	
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)						-1,852,965.	

STATUTE UNIT RECEIVED

FEB 24 2012

BRANCH OGDEN

RECEIVED
FEB 21 2012
OGDEN, UT

323001 12-17-03

LHA For Paperwork Reduction Act Notice, see the separate instructions

Form 990 (2003)

90-7

Part II Statement of Functional Expenses All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others Page 2

Table with 5 columns: (A) Total, (B) Program services, (C) Management and general, (D) Fundraising. Rows include: 22 Grants and allocations (attach schedule) cash \$ 2,968,366, noncash \$; 23 Specific assistance to individuals (attach schedule) 81,150; 24 Benefits paid to or for members (attach schedule); 25 Compensation of officers, directors, etc 0; 26 Other salaries and wages; 27 Pension plan contributions; 28 Other employee benefits; 29 Payroll taxes; 30 Professional fundraising fees; 31 Accounting fees; 32 Legal fees 30,051; 33 Supplies 6,774; 34 Telephone; 35 Postage and shipping; 36 Occupancy 60,600; 37 Equipment rental and maintenance; 38 Printing and publications 3,643; 39 Travel; 40 Conferences, conventions, and meetings 2,033; 41 Interest; 42 Depreciation, depletion, etc (attach schedule); 43 Other expenses not covered above (itemize) a, b, c, d; 43e SEE STATEMENT 1 1,120,160; 44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15 4,272,777.

Joint Costs Check if you are following SOP 98-2
Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
If "Yes," enter (i) the aggregate amount of these joint costs \$, (ii) the amount allocated to Program services \$, (iii) the amount allocated to Management and general \$, and (iv) the amount allocated to Fundraising \$

Part III Statement of Program Service Accomplishments

Table with 2 columns: Description, Program Service Expenses. Row a: SEE STATEMENT 3 (Grants and allocations \$ 3,049,516.) 4,222,780. Row b: (Grants and allocations \$) Row c: (Grants and allocations \$) Row d: (Grants and allocations \$) Row e: Other program services (attach schedule) (Grants and allocations \$) Row f: Total of Program Service Expenses (should equal line 44, column (B), Program services) 4,222,780.

Part IV Balance Sheets

Note. Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year	(B) End of year
Assets	45 Cash - non-interest-bearing	768,413.	226,298.
	46 Savings and temporary cash investments		
	47 a Accounts receivable	1,144.	
	b Less allowance for doubtful accounts		
	48 a Pledges receivable		
	b Less allowance for doubtful accounts		
	49 Grants receivable		
	50 Receivables from officers, directors, trustees, and key employees		
	51 a Other notes and loans receivable		
	b Less allowance for doubtful accounts		
	52 Inventories for sale or use		
	53 Prepaid expenses and deferred charges		25,377.
	54 Investments - securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		
	55 a Investments - land, buildings, and equipment basis		
	b Less accumulated depreciation		
56 Investments - other			
57 a Land, buildings, and equipment basis			
b Less accumulated depreciation			
58 Other assets (describe _____)	29,800.		
59 Total assets (add lines 45 through 58) (must equal line 74)	813,633.	252,819.	
Liabilities	60 Accounts payable and accrued expenses	35,298.	39,286.
	61 Grants payable		
	62 Deferred revenue	238,231.	454,442.
	63 Loans from officers, directors, trustees, and key employees		
	64 a Tax-exempt bond liabilities		
	b Mortgages and other notes payable STMT 6		1,612,056.
	65 Other liabilities (describe _____)		0.
66 Total liabilities (add lines 60 through 65)	273,529.	2,105,784.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74		
	67 Unrestricted	540,104.	-1,852,965.
	68 Temporarily restricted		
	69 Permanently restricted		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74		
	70 Capital stock, trust principal, or current funds		
	71 Paid-in or capital surplus, or land, building, and equipment fund		
	72 Retained earnings, endowment, accumulated income, or other funds		
73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)	540,104.	-1,852,965.	
74 Total liabilities and net assets / fund balances (add lines 66 and 73)	813,633.	252,819.	

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part VI Other Information Yes No

76 Did the organization engage in any activity not previously reported to the IRS? 77 Were any changes made in the organizing or governing documents but not reported to the IRS? 78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? b If "Yes," has it filed a tax return on Form 990-T for this year? 79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? 80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? b If "Yes," enter the name of the organization SEE STATEMENT 7 and check whether it is exempt or nonexempt 81 a Enter direct or indirect political expenditures See line 81 instructions b Did the organization file Form 1120-POL for this year? 82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? b If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III) 83 a Did the organization comply with the public inspection requirements for returns and exemption applications? b Did the organization comply with the disclosure requirements relating to quid pro quo contributions? 84 a Did the organization solicit any contributions or gifts that were not tax deductible? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? b Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year c Dues, assessments, and similar amounts from members d Section 162(e) lobbying and political expenditures e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices f Taxable amount of lobbying and political expenditures (line 85d less 85e) g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? 86 501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 12 b Gross receipts, included on line 12, for public use of club facilities 87 501(c)(12) organizations Enter a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX 89 a 501(c)(3) organizations. Enter Amount of tax imposed on the organization during the year under section 4911 N/A, section 4912 N/A, section 4955 N/A b 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Enter Amount of tax on line 89c, above, reimbursed by the organization 90 a List the states with which a copy of this return is filed NONE b Number of employees employed in the pay period that includes March 12, 2003 91 The books are in care of THE ORGANIZATION Telephone no 998 71 291 9670

Located at 7110 TASHKENT PL, DULLES, VA ZIP + 4 20189-7110

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a TUITION FEES					1,826,451.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	9,881.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a OTHER INCOME					51.
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		9,881.	1,826,502.
105 Total (add line 104, columns (B), (D), and (E))					1,836,383.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of the instructions)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
93A	TUITION RECIEVED TO SUPPORT EXEMPT PURPOSE.
103A	OTHER INCOME GENERATED IN CONNECTION WITH EXEMPT PURPOSE.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

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.

Please Sign Here: Signature of officer *[Signature]* Date *4/10/12* Type or print name and title *Ed. Kautzmann Business Manager*

Paid Preparer's Use Only: Preparer's signature *Julia J. Bruich, CPA* Date *4/7/12* Check if self-employed Preparer's SSN or PTIN _____

Firm's name (or yours if self-employed), address, and ZIP + 4: **CLIFTON LARSON ALLEN LLP**
9515 DEERECO RD - SUITE 500
TIMONIUM, MARYLAND 21093-2184

EIN: _____ Phone no: **(410) 453-0900**

FORM 990	OTHER EXPENSES			STATEMENT 1
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
INSURANCE	11,060.		11,060.	
TEACHING MATERIALS	134,879.	134,879.		
MISCELLANEOUS EXPENSE	79.		79.	
EDUCATION SERVICES & TRAINING	31,184.	31,184.		
IRC 3401(D)(2) SALARIES & WAGES	701,843.	701,843.		
SUBSCRIPTION	14,654.	14,654.		
SOCIAL ACTIVITY FEES	9,693.	9,693.		
RECRUITING AGENCY SERVICE FEES	32,796.	32,796.		
COMPENSATION PAID TO NON-US WORKERS	183,972.	183,972.		
TOTAL TO FM 990, LN 43	1,120,160.	1,109,021.	11,139.	

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 2
PART III

EXPLANATION

THE ORGANIZATION'S EXEMPT PURPOSE IS TO PROVIDE SUPPORT AND ASSIST TASHKENT INTERNATIONAL HEALTH AND EDUCATION SERVICES IN THE OPERATION OF TASHKENT INTERNATIONAL SCHOOL WHICH PROVIDES A WORLD CLASS EDUCATION FOR CHILDREN OF EMBASSY PERSONNEL AND EXPATRIATE AND LOCAL FAMILIES IN TASHKENT, UZBEKISTAN.

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT 3

DESCRIPTION OF PROGRAM SERVICE ONE

THE ORGANIZATION'S EXEMPT PURPOSE IS TO PROVIDE SUPPORT AND ASSIST TASHKENT INTERNATIONAL HEALTH AND EDUCATION SERVICES IN THE OPERATION OF TASHKENT INTERNATIONAL SCHOOL WHICH PROVIDES A WORLD CLASS EDUCATION FOR CHILDREN OF EMBASSY PERSONNAL AND EXPATRIATE AND LOCAL FAMILIES IN TASHKENT, UZBEKISTAN.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE A	3,049,516.	4,222,780.

FORM 990 CASH GRANTS AND ALLOCATIONS STATEMENT 4

CLASSIFICATION	DONEE'S NAME	DONEE'S ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
	TASHKENT INTERNATIONAL SCHOOL	38 SARAKULSKAYA STREET, TASHKENT, 100005, UZBEKISTAN	NONE	2,968,366.
TOTAL INCLUDED ON FORM 990, PART II, LINE 22				2,968,366.

FORM 990 SPECIFIC ASSISTANCE TO INDIVIDUALS STATEMENT 5

DESCRIPTION	AMOUNT
SCHOLARSHIPS	81,150.
TOTAL TO FORM 990, PART II, LINE 23	81,150.

FORM 990

OTHER NOTES AND LOANS PAYABLE

STATEMENT 6

LENDER'S NAMETERMS OF REPAYMENTOVERSEAS PRIVATE
INVESTMENT CORPORATION17 EQUAL INSTALLMENTS -
THE 15TH DAY OF EACH
APRIL & OCTOBERDATE OF
NOTEMATURITY
DATEORIGINAL
LOAN AMOUNTINTEREST
RATE

06/28/04

10/15/13

1,600,000.

8.22%

SECURITY PROVIDED BY BORROWERPURPOSE OF LOANMORTGAGE ON PROPERTY IN
UZBEKISTAN

SCHOOL BUILDING REMODELING

RELATIONSHIP OF LENDER

N/A

DESCRIPTION OF CONSIDERATIONFMV OF
CONSIDERATIONBALANCE DUE

N/A

0.

1,612,056.

TOTAL INCLUDED ON FORM 990, PART IV, LINE 64, COLUMN B

1,612,056.

FORM 990

IDENTIFICATION OF RELATED ORGANIZATIONS
PART VI, LINE 80B

STATEMENT 7

NAME OF ORGANIZATIONEXEMPTNONEXEMPTTASHKENT INTERNATIONAL HEALTH AND EDUCATION
SERVICES

X