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## SCHEDULE A

(Form 990 or 990-EZ)

## Public Charity Status and Public Support

Complete if the organization is a section 5 1(c)(3) organization or a section 4947(a)(1) nonexempt cl aritable trust.

aritable trust.

► See separate instructions.

OMB No 1545-0047 2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

TURIXISH AMERICAN INICOUNTRAL & EDUCATION FOUND

► Attach to Form 990 or Form 990-EZ.

Employer identification number 20 - 8438607

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	rt I			ty Status (All organiz					uctions				
The	orga			ause it is (For lines 1 th									
1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).											
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)											
3		A hospital or a coop	perative hospital se	ervice organization desci	ribed in <b>se</b>	ction 170(	ь)(1)(A)(iii	i).					
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hos								spital's n	ame,		
		city, and state											
5		An organization ope	erated for the bene	fit of a college or univer	sity owned	or operate	ed by a go	vernment	al unit des	cribed in			
		section 170(b)(1)(A				•							
6		A federal, state, or k	ocal government o	r governmental unit des	cribed in s	ection 170	D(Ь)(1)(А)(	v).					
7				a substantial part of its					n the aene	ral public			
		described in section							3	•			
8	П			on 170(b)(1)(A)(vi). (Con	nplete Pari	: (1)							
9	X						ontribution	ns membe	ership fees	and gros	5		
		An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and receipts from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33 1/3% of support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses									_		
				e 30, 1975 See section				511 lax, 110	om basine	5505			
10	$\Box$			ed exclusively to test for		-		(a)(A)					
11	П	-	•	ed exclusively for the be		•			carny out i	the			
• •				poned organizations des		•			•				
										e section			
		509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h											
e	$\Box$	a  Type I b Type II c Type III-Functionally integrated d Type III-Other											
_	ш	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section											
		509(a)(1) or section		ers and other than one t	or more pu	iblicly supp	orted orga	anizations	described	in section			
					00 45-4-4	- <del>-</del> 1 -	T U .	T 111					
f				letermination from the IF			Type II, or	Type III SI	rbbouing				_
_													٠ . ٢
9			ue, nas the organi	zation accepted any gift	or contrib	ution from	any of the	!					
		following persons?											T
			o directly or indirectly controls, either alone or together with persons described in (ii)							F	Yes	No	
		and (iii) below, the governing body of the supported organization?									11g(i)	<u> </u>	
		(ii) A family member of a person described in (i) above?								• • • • •	11g(ii)		ļ
											11g(iii)		<u> </u>
h		Provide the following	g information abou	it the organizations the c	organizatio	n supports	· ·						
	(ī) N	ame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)	(iv) Is the organization (v) Did you notify (vi) Is the					( <b>v</b> ณี) Amount of			
		organization			in col (i) listed in your governing document?		1 -		organization in col (i) organized in the US?		support		
					Yes	No	Yes	No	Yes	No			
									}		İ		
					<u> </u>	<u> </u>					<del></del>		
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rata													

EEA

N/A

P	art II Support Schedule for Or	ganizations	Described in	Sections 170	(b)(1)(A)(iv) ar	nd 170(b)(1)(A)(	(vi)
_	(Complete only if you checked th	e box on line 5,	7, or 8 of Part I)			<u> </u>	
_	ection A. Public Support						
Ca	lendar year (ør fiscal year beginning in) ▶	(a) 2005	( <b>b</b> ) 2006	(c) 2007	( <b>d</b> ) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 3		<del>-</del>	<del> </del>	<del> </del>		·
5	The portion of total contributions by each		-		<u> </u>		
	person (other than a governmental unit or		1		1		1
	publicly supported organization) included				]		
	on line 1 that exceeds 2% of the amount		1		1		1
_	shown on line 11, column (f)		<del></del>	<del> </del>	<del></del>		<del></del>
_	Public support. Subtract line 5 from In 4		<u> † </u>	<u> </u>	<u> </u>		1
	lendar year (or fiscal year beginning in)	(a) 2005	( <b>b</b> ) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Amounts from line 4	(a) 2003	(2) 2000	(0,2007	(4) 2000	(0) 2003	(1) (5.4.
-	Gross income from interest, dividends payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support Add lines 7 through 10 .						
12	Gross receipts from related activities, etc (se	e instructions)				. 12	
	First five years. If the Form 990 is for the or organization, check this box and stop here	<u></u> . <i>.</i> .	<u></u>				▶□
Se	ection C. Computation of Public Si	upport Perc	entage -		<u>-</u>		
	Public support percentage for 2009 (line 6, c						%
	Public support percentage from 2008 Sched						%
16	a 33 1/3% support test - 2009. If the organiza						r ·
	and stop here. The organization qualifies as						▶ 🗌
- 1	b 33 1/3% support test - 2008 If the organiza						
	box and stop here. The organization qualified						
17	a 10%-facts-and-circumstances test - 2009						22-2
	more, and if the organization meets the "fact			•	•		. 🗖
Į	organization meets the "facts-and-circumsta b 10%-facts-and-circumstances test - 2008 more, and if the organization meets the "fact	3. If the organiza	ation did not check	a box on line 13,	16a, 16b, or 17a,	and line 15 is 10%	
18	organization meets the "facts-and-circumsta Private foundation. If the organization did n	nces" test. The	organization quali	ies as a publicly s	upported organiz	ation	

## Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you	checked the box (	on line 9 of Part I)	
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Si	ection A Public Support	e box on line 5 of	rant)					
_	llendar year (or fiscal year beginning in) >	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total	
1	Gifts grants, contributions, and membership fees received (Do not include any "unusual grants")	N/A	N/A	NIA	42655	259, 931	302,581	
2	Gross receipts from admissions, merchandise, sold or services performed, or fac- lities furnished in any activity that is related to the organization's tax-exempt purpose			,-	_	_		
3	Gross receipts from activities that are not an unrelated trade or bus under sec 513			_				
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.		_	_				
5	The value of services or facilities furnished by a governmental unit to the organization without charge	_	_	_				
6	Total. Add lines 1 through 5				42655	259931	300, = 85	
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons		_	_				
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year.	_	_	_	_	-		
¢	Add lines 7a and 7b : .		<del></del>		Ti Ti	Q.	Ø	
8	Public support (Subtract line 7c from line 6.).				‡ ‡	302.586		
	ction B. Total Support							
	endar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total	
9	Amounts from line 6				42655	359551	302 570	
iva	payments received on securities loans rents royalties and income from similar sources		_					
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30 1975	_	<u> </u>			-		
	Add lines 10a and 10b		_					
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	_	_	_		-		
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)					_		
13	Total support. (Add lines 9, 10c, 11, and 12)	<u></u>					302,083	
	First five years. If the Form 990 is for the organization, check this box and stop here.			rth, or fifth tax yea	r as a section 501(c	)(3)	▶ □	
	tion C. Computation of Public Su	port Percent	age					
15	Public support percentage for 2009 (line 8, co	olumn (f) dıvıded	by_line_13, colum	n (f))		15	100%	
16	Public support percentage from 2008 Schedu	ule A Part III line	15	<u> </u>	<u> </u>	16	100%	
	tion D. Computation of Investmen					······································	- <del></del>	
17	grand grand too, column (i) divided by line to, column (i),						<del></del>	
	Investment income percentage from 2008 Sc		•			18	%	
	33 1/3% support tests - 2009. If the organization is not more than 33 1/3%, check this box is	and st <b>op here</b> . Ti	ne organization q	ualifies as a public	ly supported organ	ization	▶ □	
	33 1/3% support tests - 2008. If the organization 18 is not more than 33 1/3%, check this b	oox and stop her	e. The organizatio	on qualifies as a pi	ublicly supported or	rganization		
20	Private Foundation If the organization did n	ot check a box or	n line 14, 19a or	19b, check this bo	x and see instruction	ons	. <u>   .</u> ▶   🔲 _	