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**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

Open to Public

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Department of the Treasury ► The organization may have to use a copy of this return to satisfy state reporting requirements Inspection Internal Revenue Service For the 2009 calendar year, or tax year beginning and ending Please Check if applicable C Name of organization Friends of Shanghai American School Foundat D Employer identification number use IRS Address change Doing Business As 52-1957233 label or print or Name change Number and street (or P O box if mail is not delivered to street address) E Telephone number Room/suite type. Initial return IPO BOX 5910 609-452-0990 See Specific Terminated City or town, state or country, and ZIP + 4 instruc-08543-5910 G Gross receipts \$ 2.654.189 Amended return tions Application pending Name and address of principal officer H(a) Is this a group return for affiliates? Ralph H. Jahr 15 Roszel Road, PO Box 5910, Princeton, NJ 08540 H(b) Are all affiliates included? Tax-exempt status 501(c) ( 3) **◄** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) Website: ▶ none H(c) Group exemption number ▶ X Corporation K Form of organization Trust Association Other > L Year of formation 1995 M State of legal domicile Part I Summary Briefly describe the organization's mission or most significant activities: Organized & operated for charitable and educational purposes, and its primary purpose shall be furnishing financial Activities & Governance and other assistance to educational institutions located within and without of the United States Support American Education overseas, by providing textbooks, schools supplies and other financial support Check this box ▶ If the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of employees (Part V, line 2a) 5 0 Total number of volunteers (estimate if necessary) . 6 Total gross unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, line 34 7b 0 Prior Year **Current Year** 8 Contributions and grants (Part VIII, line 1h) 164,096 9 Program service revenue (Part VIII, line 2g) 0 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) -26,425 -113,668 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . 11 193,104 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) -26.425 243,532 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 454,076 0 14 Benefits paid to or for members (Part IX, column (A), line 4). 0 15 Salaries, ethe confessation, employee benefits (Part IX, column (A), lines 5–10) 0 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 otal fundraising expenses (Part IX, column (D), line 25) b A MEZ Offier expenses (Part IX, column (A), lines 11a–11d, 11f–24f) Total expenses. Add lines 182-17 (must equal Part IX, column (A), line 25) 17 34,972 32,891 18 34,972 486,967 Revenue less expenses Subtract line 18 from line 12 19 -61,397 -243,435 Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 1,307,011 1,064,004 21 Total liabilities (Part X, line 26). 7,874 8,303 Net assets or fund balances Subtract line 21 from line 20 1.299.137 1,055,701 Part II Signature Block 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 **∌**-Sign Signature of offi Here Treasurer Ralph Type or print name and title Preparer's Check if Preparer's identifying number signature (see instructions) Paid employed Preparer's Firm's name (or yours EIN Use Only if self-employed). address, and ZIP + 4 Phone no

May the IRS discuss this return with the preparer shown above? (see instructions)

- 6	Statement of Program Service Accomplishments	
1	Briefly describe the organization's mission:	
	To furnish financial and administrative aid and support educational programs to organizations located int he U.S. and abro	nad
2	Did the organization undertake any significant program services during the year which were not listed on	
-		X No
	If "Yes," describe these new services on Schedule O.	V KO
_		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
		X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants an	nd
	allocations to others, the total expenses, and revenue, if any, for each program service reported.	
	(Code ) (Expenses \$ 454,076 including grants of \$ 0 ) (Revenue \$	0)
74	Provide financial assistance for American Education	)
	Provide financial assistance for American Education	
	••••••	
4b	(Code) (Expenses \$0 including grants of \$0 ) (Revenue \$	0)
	•••••••••••••••••••••••••••••••••••••••	
	•••••••••••••••••••••••••••••••••••••••	
	•••••••••••••••••••••••••••••••••••••••	·
	••••••	
4c	(Code ) (Expenses \$ 0 including grants of \$ 0 ) (Revenue \$	0)
	•••••••••••••••••••••••••••••••••••••••	
		<b></b>
4d	Other program services (Describe in Schedule O)	
	(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)	
4e	Total program service expenses ► 454,076	

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C,			
_	Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have	1		
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			}
	complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11		Х
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
•	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.  Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that			
	addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete			ł
	Schedule D, Parts XI, XII, and XIII	12	Х	
12A	Was the organization included in consolidated, independent audited financial statements for the tax  Yes No			
	year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I.	14b	Χ	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	} '		
4-	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	]		
40	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17_		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	ا مد ا		
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	40		
20	If "Yes," complete Schedule G, Part III	19	<b>-</b>	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		

Form 990 (2009) Friends of Shanghai American School Foundation

Part IV Checklist of Required Schedules (continued)

•			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> </u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		<u> </u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K If "No," go to line 25	24a		_X_
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	Ì i		l
_	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Χ_
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?	07		
20	If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
_	Part IV instructions for applicable filing thresholds, conditions, and exceptions).  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	200		
a b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28a		X
D	Schedule L, Part IV	28b		x
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a	200		<del>  ^-</del>
v	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,	1		[
	Part IV	28c	х	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			<u> </u>
	conservation contributions? If "Yes," complete Schedule M	30		Ιx
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N,</i>			
• •	Part I	31		Ιx
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?			
	If "Yes," complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
		Form	agn	(2009)

Paŗ	Statements Regarding Other IRS Filings and Tax Compliance			
4-	Estantha sumbar sanatad in Bay 2 of Farm 4000 Arrival Community of Tarrival of	SUMMER	Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
<b>b</b>	U.S. Information Returns. Enter -0- if not applicable			
b C	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> this return. (see	100 mg		**************************************
	instructions)			13.
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			40.00
	this return?	3a	102.4.1	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	ł		
	account)?	4a		Х
b	If "Yes," enter the name of the foreign country ▶	477	"	*, ", ",
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			-31 / 34V
	and Financial Accounts.		<u> </u>	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	_5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	1_		,,
60		<u>5c</u>		X
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?			"
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	_ 6a		X
•	gifts were not tax deductible?	6b		ŀ
7	Organizations that may receive deductible contributions under section 170(c).	***		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	37/3		
	and services provided to the payor?	7a	<b></b>	Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		Х
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		Х
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		<u> </u>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			l
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring		ļ	
	organization, have excess business holdings at any time during the year? .	8_	<u> </u>	<u> </u>
9	Sponsoring organizations maintaining donor advised funds.		<b> </b>	
a b	Did the organization make any taxable distributions under section 4966?  Did the organization make a distribution to a deposit	9a	<u> </u>	<del></del>
10	Did the organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter	9b		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b	+		
11	Section 501(c)(12) organizations. Enter.	1		
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources	7		
	against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes." enter the amount of tax-exempt interest received or accrued during the year 12b		l	1

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Х
6	Does the organization have members or stockholders?	6		Х
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? .	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		C	
	the year by the following			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		X
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal			
Reve	enue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	}		
	form?	11	X	
11A				
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	ļ
14	Does the organization have a written document retention and destruction policy?	14	X	14070, 200,000
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b	150 A THE PARTY OF	X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a	K.K.O.	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			Zin E
	the organization's exempt status with respect to such arrangements?	16b		L
	tion C. Disclosure			_
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s	only)		
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of inter	est		
	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of t			
	organization ► International Schools Services, Inc 609-452-09	90		
	15 Roszel Road, Princeton, NJ 08543			

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

  List persons in the following order: individual trustees or directors; institutional trustees, officers; key employees; highest compensated employees, and former such persons

Check this box if the organization did not compensate any current officer, director, or trustee (A) (B) (C) (D) (E) (F) Position (check all that apply) Name and Title Average Reportable Reportable Estimated compensation hours per Officer compensation amount of Individual trustee Key employee Highest compensated Institutional trustee week from from related other nployee director organizations (W-2/1099-MISC) compensation from the the organization (W-2/1099-MISC) organization and related organizations William McGrath Director 5 Х 0 0 Rick Wang President 5 Х 0 Roger G. Hove Х Secretary 5 0 0 Ralph H Jahr Х Treasurer 0

Pa	rt VII Section A. Officers, Directors, Tru	ustees, Key Em	ploy	ees	, and	Hig	hest	l Co	mpensated Em	ployees (contin	ued)
	` (A)	(B)			(0	C)			(D)	(E)	(F)
	Name and title	Average hours per week	or director	_	(chec Officer	k Key employee	Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
				й			ated				
						_					
					_						
						L					
										_	
1b	Total							<b>•</b>	0	0	C
2	Total number of individuals (including but ne reportable compensation from the organization)		se lis	ted a	abovi 0	e) wl	no re	ceiv	ed more than \$1	00,000 in	
	Teportable compensation from the organiza				<u> </u>						Yes No
3	Did the organization list any former officer, employee on line 1a? If "Yes," complete Sc	hedule J for suc	ch inc	livid	ual.				•	<u> </u>	3 X
4	For any individual listed on line 1a, is the su the organization and related organizations of individual									uch	4 X
5	Did any person listed on line 1a receive or a services rendered to the organization? If "Y								rganization for	,	5 X
Sec	tion B. Independent Contractors										
1	Complete this table for your five highest concompensation from the organization	npensated inde	pend	lent	contr	acto	rs th	at re	ceived more tha	n \$100,000 of	_
	(A) Name and business a	eddress							(B) Description of ser	vices Co	(C) empensation
		<del></del>						<u> </u>			
			-					-			
	<del></del>							-	<del> </del>	<del></del>	
	Total number of independent contractors (in	actuding but not	limit	ad to	tho	يرا مع	tod.	L	(a) who received	<del></del>	(
~	more than \$100,000 in compensation from	-		ou it	, 1110	oe iii	n <del>c</del> u i	aDUV	e, wito received	' <u> </u> ,	, ,

52-1957233

Part	t VIII	Statement of Revenue							
	* 75.			-		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
N N	1a	Federated campaigns		1a	0		TEVERIDO		512, 610, 6, 614
Contributions, gifts, grants and other similar amounts	l -		- F	1b					1
20 0	b	•	<u> </u>	1c					
fts,	l.	Fundraising events	<u>-</u>			į		į	
ia g	d	Related organizations		1d	0				
Si mis	е	Government grants (contributions)	· · · · · · · · · · · · · · · · · · ·	1e	0			′ .~	" - '* · 14
ar S	f	All other contributions, gifts, grants,			İ			<b>\</b>	}
غِ خِ		similar amounts not included above		1f	164,096	ļ		ļ	
ğ	g	Noncash contributions included in I	ines 1a-1f <sup>.</sup> \$		0				
_೧ ⊭	h	Total. Add lines 1a-1f	<u> </u>		▶	164,096			
ą					Business Code				
Ę.	2a			- 1		0	L		
Ş.	b					0			
<u> </u>	С					0			
5	d					0			
E	l e					0			
Program Service Revenue	f	All other program service revenue .							
Р.	a	Total. Add lines 2a–2f.				0	\ v		
							<u></u>		<u> </u>
	3	Investment income (including divide	enus, interest		_	42 000			42 000
		other similar amounts) .			🟲	42,808			42,808
	4	Income from investment of tax-exer	npt bona prod	cee	is . 🟲	0	<del></del>	<del> </del>	<del> </del>
	5	Royalties	<del></del>			0		ļ	<sub>1</sub>
	l _		(ı) Real	_	(II) Personal	•			
	6a	Gross Rents	ļ			٨.			, `
	b	Less: rental expenses	ļ				4		<u> </u>
	С	Rental income or (loss) .	L	0	0			ļ <u></u>	
	d	Net rental income or (loss)			. •	0			<u> </u>
	7a	Gross amount from sales of	(i) Securities	·	(II) Other				
		assets other than inventory	2,254,	181	0				
	b	Less cost or other basis	1						
	ł	and sales expenses	2,410,	357	o		٤		,
	l c	Gain or (loss)	-156,		0		<b>%</b>		
	d	Net gain or (loss) .				-156,476		-	-156,476
	8a	Gross income from fundraising							
e		events (not including \$	0						
ē	1	of contributions reported on line 1c							
ě		See Part IV, line 18.	<i>)</i> .	а	ام				
Other Revenue	Ь	Less direct expenses		b					
ţ	"	Net income or (loss) from fundraisi		U		0	7/		
Ó	00	Gross income from gaming activities	•	•				<del> </del>	1
	Ja	0 0 000		_					
	١.			a					
	l	Less: direct expenses		b			<del></del>	ļ	<del>                                     </del>
	C	Net income or (loss) from gaming a	activities .			0			<del> </del>
	10a	Gross sales of inventory, less							
		returns and allowances	•	а	0				
	1	3		b	0				
	c	Net income or (loss) from sales of	nventory .		▶	0			<del></del>
		Miscellaneous Revenue			Business Code			ļ	
	11a	Unrealized GAINS	<del></del>			193,104			193,104
	b					0			
	С					0			
	d	All other revenue .				0			
	e	Total. Add lines 11a-11d				193,104			
	12	Total revenue. See instructions		-	. ▶	243,532		) c	79,436
									Form <b>990</b> (2009)

### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

Do i	not include amounts reported on lines 6b,	(A) but are not red	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
2	organizations in the U.S. See Part IV, line 21	0		1	
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	o			
3	Grants and other assistance to governments,		·	- VAN SAN SAN	
•	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	454,076	454,076		7,7
4	Benefits paid to or for members	0		12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	*: 535 M
5	Compensation of current officers, directors,				
	trustees, and key employees	0			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	0			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	0 0			
10	Payroll taxes	0			
11	Fees for services (non-employees):				
a	Management	o			
b	Legal	295		295	
С	Accounting	19,160	• • •	19,160	
d	Lobbying	0			
е	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	12,113		12,113	
g	Other	0			
12	Advertising and promotion	0			
13 14	Office expenses	0			
15	Royalties	0		<u></u>	
16	Occupancy	0			
17	Travel	0	· <del>-</del> ·		
18	Payments of travel or entertainment expenses				<u> </u>
	for any federal, state, or local public officials	o			
19	Conferences, conventions, and meetings [	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0	0		0
23	Insurance	913		913	
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.)				
а	Ponk Food	72		72	*
b	Communication Fees	338		338	
С		0			
d		0			
е		0			
f	All other expenses	0			
25	Total functional expenses. Add lines 1 through 24f	486,967	454,076	32,891	0
26	Joint costs. Check here ► If following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising				
	solicitation				1

**Balance Sheet** Part X (B) (A) End of year Beginning of year 1 Cash—non-interest-bearing . . . . 1 2 75,582 2 12,818 3 Pledges and grants receivable, net . 3 0 0 4 0 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 0 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete 0 6 7 0 Notes and loans receivable, net . . . 7 Inventories for sale or use . . . 8 8 9 Prepaid expenses and deferred charges 456 9 456 10a 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D **b** Less accumulated depreciation. 10b ol 10c 11 Investments—publicly traded securities 1,230,973 1,050,730 11 12 Investments—other securities See Part IV, line 11 . . . . 12 0 13 Investments—program-related See Part IV, line 11 . ol 13 0 14 Intangible assets . . . 0 14 0 Other assets. See Part IV, line 11 . . . 15 0 15 0 16 Total assets. Add lines 1 through 15 (must equal line 34) 1,307,011 16 1,064,004 7,874 17 Accounts payable and accrued expenses 17 8,303 Grants payable . . . . 18 18 Deferred revenue . . . 19 19 20 20 Tax-exempt bond liabilities . . . 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties ol 23 0 24 0 0 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities Complete Part X of Schedule D ol 25 0 26 Total liabilities. Add lines 17 through 25 7,874 26 8.303 Organizations that follow SFAS 117, check here ▶ X and **Fund Balances** complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets. 100,940 27 85,832 28 Temporarily restricted net assets 498,197 28 269,869 29 Permanently restricted net assets 700,000 29 700,000 Organizations that do not follow SFAS 117, check here▶ Net Assets or and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds . . . 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances 1,299,137 33 1,055,701 Total liabilities and net assets/fund balances 1,307,011 1,064,004

Part	XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in	ŀ		
	Schedule O.			,
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
b	Were the organization's financial statements audited by an independent accountant?	2b	Х	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		Х
	If the organization changed either its oversight process or selection process during the tax year, explain in	7	1 .	01/ 4
	Schedule O.		·	'
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were	ł		,
	issued on a consolidated basis, separate basis, or both			
	X Separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Form **990** (2009)

### SCHEDULE A (Form 990 or 990-EZ)

## **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

► See separate instructions.

Open to Public Inspection

OMB No 1545-0047

		organization							Employe	r identificat	ion numb	er	
			merican School						52-1957233				
Par				narity Status (All or						<u>nstructio</u>	ns.		
	orgar			ation because it is: (Fo									
1	$\vdash$			rches, or association of			ed in sec	tion 170(	(b)(1)(A)(i	).			
2	H			on 170(b)(1)(A)(ii). (Ai		•		.=	4				
3	H			nospital service organi									
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:											
5	Ш			r the benefit of a colle (Complete Part II )	ge or univ	ersity owi	ned or op	erated by	a govern	mental ur	nit descr	ibed	
6		A federal, st	ate, or local gov	ernment or governme	ntal unit d	described	ın sectioi	n 170(b)(	1)(A)(v).				
7	X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)											
8				I in section 170(b)(1)	•	Complete I	Part II)						
9	$\Box$							om contri	ibutions, r	members	hip fees.	and o	ross
		An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III)											
10		An organizat	tion organized a	nd operated exclusive	ly to test	for public	safety. S	ee sectio	n 509(a)(	4).			
11				nd operated exclusive			_			•	ry out th	е	
	purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h												
		a Type		Type II c		e III–Fund					ype III-	-Other	
е	$\Box$			y that the organization			-	-	bv one or				
	_			on managers and other									on
		509(a)(1) or	section 509(a)(2	2)									
f			zation received a , check this box	a written determination	n from the	RS that	ıt ıs a Typ	е I, Туре	II, or Typ	e III supp	orting		
g		Since Augus following per		the organization acce	pted any	gift or cor	itribution f	from any	of the				
				or indirectly controls,				persons o	described	ın (II)		Yes	No
				verning body of the su		organizatio	on?				11g(i)		
				person described in (i y of a person describe		· (II) above			•		11g(ii) 11g(iii)		
h				ation about the suppoi				•	•	• •	ניישניין		<del></del>
(1)		of supported	(II) EłN	(iii) Type of organization (described on lines 1–9	(iv) Is the o	organization sted in your	(v) Did y	ou notify	(vı) l organızat	s the		Amount support	of
	orge			above or IRC section (see instructions))	governing	document?		of your cort?		zed in the S ?			
				(,,,	Yes	No	Yes	No	Yes	No	1		
						<u> </u>	 			<u> </u>			0
				i.									0
		··				-							
							_		_		_		0
							-		-				0
													0
Tota						1							0

rar					1)(A)(IV) and	170(B)(1)(A)(	VI)
Sect	(Complete only if you checked to ion A. Public Support	the box on line	e 5, 7, 01 6 01	Pail I.)	·		
	ndar 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.")	270,917					469,822
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.	0	0				0
3	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0				0
4	Total. Add lines 1 through 3	270,917	17,039	17,770	О	164,096	469,822
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).	7348 					
6	Public support. Subtract line 5 from line 4		1	.1	,, ******		469,822
Sect	ion B. Total Support					•	
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	270,917	17,039	17,770	О	164,096	469,822
9	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	29,795 ·	45,617	52,975	-26,425	79,437	181,399
	activities, whether or not the business is regularly carried on						0
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	0	0				0
11	Total support. Add lines 7 through 10.		, ,	, Gala	,		651,221
12	Gross receipts from related activities, etc. (s	ee instructions	5)	•		12	
13	First five years. If the Form 990 is for the organization, check this box and stop here ion C. Computation of Public Support			rd, fourth, or fit	th tax year as a	a section 501(c)	▶ □
14	Public support percentage for 2009 (line 6, c			column (fl)		14	72 14%
15	Public support percentage from 2008 Sched				• •	15	76 64%
16a	33 1/3% support test–2009. If the organiza and stop here. The organization qualifies as	tion did not che	eck the box on	line 13, and lir	ne 14 is 33 1/39		
b 17a	33 1/3% support test—2008. If the organiza box and stop here. The organization qualific 10%-facts-and-circumstances test—2009.	tion did not che es as a publicly	eck a box on li	ne 13 or 16a, a ganization			check this
b	or more, and if the organization meets the "facts-and-circum 10%-facts-and-circumstances test-2008. or more, and if the organization meets the "facts-and-circum the organization the organiz	facts-and-circu nstances" test If the organiza facts-and-circu nstances" test	mstances" tesi The organizat tion did not chi mstances" tesi The organizat	t, check this bo ion qualifies as eck a box on lii t, check this bo ion qualifies as	ex and stop heres a publicly sup ne 13, 16a, 16b ex and stop heres s a publicly sup	re. Explain in Pa ported organiza o, or 17a, and lii re. Explain in P ported organiza	art IV how ation. ► ne 15 is 10% art IV how
18	Private foundation. If the organization did not ch	ieck a box on line	e 13, 16a, 16b, 1	7a ,or 17b, chec	k this box and se	e instructions	▶

Par	<del></del>			ion 509(a)(2	)		
Coo	(Complete only if you checked t	he box on line	9 of Part I.)				
	tion A. Public Support	( ) 0005	41.0000		4 11 0000		
Cale	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not					ĺ	
	ınclude any "unusual grants.")	0	0				
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished						
	in any activity that is related to the						
	organization's tax-exempt purpose.	0	0				C
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						C
4	Tax revenues levied for the organization's						
	benefit and either paid to or expended on		_				
_	its behalf	0	0				
5							
	furnished by a governmental unit to the organization without charge	0	0				
6	Total. Add lines 1 through 5	0	0	0	0	0	
	Amounts included on lines 1, 2, and 3					9	
	received from disqualified persons						(
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the					]	
	amount on line 13 for the year						
C	Add lines 7a and 7b .	0	0	0	0	0	
8	Public support (Subtract line 7c from	;	A NEW Y			<b>第</b> 55年的	_
Sec	line 6)	<u></u>	- (		1, 22, 1, 2, 1	· ' '	
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
Ouit		(a) 2003	(b) 2000	(6) 2007	(u) 2008	(e) 2009	(I) Total
9	Amounts from line 6	0	0	0	0	0	
10a						İ	
	payments received on securities loans,						
	rents, royalties and income from similar						_
b	sources						
D	section 511 taxes) from businesses					}	
	acquired after June 30, 1975						ſ
С	Add lines 10a and 10b	0	0	0	0	0	
11	Net income from unrelated business					<u> </u>	
	activities not included in line 10b,				1		
	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)	0	0				
13	Total support. (Add lines 9, 10c, 11,		_				
	and 12)	0	. 0	0	0	<u> </u>	
14	First five years. If the Form 990 is for the organization of the second	ganization's firs	st, second, third	d, fourth, or fiftl	h tax year as a	section 501(c)(	3)
	organization, check this box and stop here			· · · · · · · · · · · · · · · · · · ·			. ▶
Sec	tion C. Computation of Public Support						
15	Public support percentage for 2009 (line 8, co			olumn (f))		15	0 00%
16	Public support percentage from 2008 Schedu	ıle A, Part III, lı	ne 15			16	0.00%
Sec	tion D. Computation of Investment Inc						
17	Investment income percentage for 2009 (line			e 13, column (	<b>f</b> ))	17	0 00%
18	Investment income percentage from 2008 Sc					18	0 00%
19a	33 1/3% support tests-2009. If the organization	ition did not chi	eck the box on	line 14, and lir	ne 15 is more t	han 33 1/3% an	d line 17 is
	not more than 33 1/3%, check this box and s						. ▶
b							
	line 18 is not more than 33 1/3%, check this box at						▶ _
20	Private foundation. If the organization did no	ot check a box	on line 14, 19a	a, or 19b, chec	k this box and	see instructions	. ▶ □

	n 990 or 990-EZ) 2009	Friends of Shanghai American School Fou	ndation	52-1957233	Page 4
Part IV	Supplemental	Information. Complete this part to provi	de the explanations required	by Part II, line 10	);
	Part II. line 17a	or 17b; and Part III, line 12. Provide any	other additional information	See instructions	•
					<b></b>
<del></del>					
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<b></b>					
	**************				

### **SCHEDULE D** (Form 990)

### **Supplemental Financial Statements**

Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions. OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

_ ·			50 405 TOO
	ds of Shanghai American School Foundation		52-1957233
Part		or Advised Funds or Other Similar	Funds or Accounts. Complete if
	the organization answered "Yes" to		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year .		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year) .		
4	Aggregate value at end of year		
5	Did the organization inform all donors and d	onor advisors in writing that the assets h	neld in donor advised
	funds are the organization's property, subject	<del>=</del>	
6	Did the organization inform all grantees, doi	_ <del>_</del>	
	used only for charitable purposes and not for	<del>-</del>	
	purpose conferring impermissible private be		Yes No
Part		elete if the organization answered "Ye	
Fail			
1	Purpose(s) of conservation easements held	· - · · -	<i>(</i> )
	Preservation of land for public use (e g	, recreation or pleasure) Preservati	on of an historically important land area
	Protection of natural habitat	Preservati	ion of a certified historic structure
	Preservation of open space		<del></del>
2	Complete lines 2a through 2d if the organization	etion held a qualified conceniation contri	hution in the form of a concentration
_	easement on the last day of the tax year.	anon nelo a qualineo conservation conti	button in the joint of a conservation
	casement on the last day of the tax year.		
	Total combined to an analysis and a second		Held at the End of the Tax Year
a	Total number of conservation easements .	•	. <u>2a</u>
b	Total acreage restricted by conservation ea		2b
C	Number of conservation easements on a ce		2c
d	Number of conservation easements include		. 2d
3	Number of conservation easements modifie	d, transferred, released, extinguished, o	r terminated by the organization
	during the tax year		
4	Number of states where property subject to		·
5	Does the organization have a written policy		ction, handling of
	violations, and enforcement of the conserva		Yes No
6	Staff and volunteer hours devoted to monitor	ring, inspecting, and enforcing conserva	ition easements during the year
	<b>•</b>		
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation	easements during the year
	▶ \$		
8	Does each conservation easement reported	on line 2(d) above satisfy the requirement	ents of section
	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?		Yes No
9	In Part XIV, describe how the organization r	eports conservation easements in its rev	venue and expense statement, and
	balance sheet, and include, if applicable, th	e text of the footnote to the organization	s financial statements that describes
	the organization's accounting for conservati	on easements	
Part	III Organizations Maintaining Collection	ons of Art, Historical Treasures, or Ot	her Similar Assets.
	Complete if the organization answere	d "Yes" to Form 990, Part IV, line 8	
1a	If the organization elected, as permitted und	der SFAS 116, not to report in its revenue	e statement and balance sheet works of
	art, historical treasures, or other similar ass		
	service, provide, in Part XIV, the text of the		
b	If the organization elected, as permitted und		
	historical treasures, or other similar assets		
	service, provide the following amounts relat		·
	(i) Revenues included in Form 990, Part VI	II, line 1	▶ \$
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works of	art, historical treasures, or other similar	assets for financial gain, provide the
_	following amounts required to be reported u		accete for interioral gain, provide the
а	Revenues included in Form 990, Part VIII, li		▶ €
_		ing i	Ψ
b	Assets included in Form 990, Part X	•	· · · • • • · · · · · · · · · · · · · ·

Par	Organizations Maintainin	g Collections of	Art, Hist	<u>orical T</u>	reasures,	or Oth	<u>er Similar As</u>	sets (Co	ontinu	ed)
3	Using the organization's acquisition use of its collection items (check al		ther recor		·			gnıficant		
а	Public exhibition		d 📙	Loan	or exchange	progra	ms			
þ	Scholarly research		e 📙	Other		. <b></b>				
С	Preservation for future gener	ations								
4	Provide a description of the organiz	cation's collections	and expla	ın how ti	hey further t	he orga	nization's exer	npt purp	ose in	
5	During the year, did the organization assets to be sold to raise funds rational transfer or the solution of th							r NY	s 🗌	No
Pari				<u> </u>						
	IV, line 9, or reported an a	•	•		•					
1a	Is the organization an agent, truste					ns or oth	ner assets not			
	included on Form 990, Part X?					-	•	Ye	es []	No
b	If "Yes," explain the arrangement in	Part XIV and com	piete the	rollowing	table		T	Amount		
•	Beginning balance					1c	<i>'</i>	Amount		0
c d	Additions during the year					1d				
e	Distributions during the year .				•	. 1e	<del></del>			
f	Ending balance .		•	•		. 1f				0
2a	Did the organization include an am	ount on Form 990	Part Y lur	no 212			<u> </u>	TV	s X	No
za b	If "Yes," explain the arrangement in		ran A, III	16 211.			•	··	, <b>3</b> [八]	110
Part			ization a	nswered	d "Yes" to f	orm 9	90. Part IV. III	ne 10		
		(a) Current year	(b) Prio		(c) Two years		(d) Three years bac		ur years	back
1a	Beginning of year balance .	0		_	15 57	77.5	14.00	700	,118 <b></b>	7 3
b	Contributions .					J 1 3 2	3.1 · 33.24.	V. C.	130	<u> </u>
c	Net investment earnings, gains,				\$ 10 m	& . ·				
	and losses									
d	Grants or scholarships .				Sec.	14				1
е	Other expenditures for facilities					**				
	and programs .		_			<u> </u>	99	ias.	, % (	3× 1
f	Administrative expenses .				news 1				,	
g	End of year balance	0			1000			t 7%		
2	Provide the estimated percentage	•	ance held	as						
а	Board designated or quasi-endowr	nent •	%							
b	Permanent endowment	·····								
С	Term endowment	<u>%</u>								
3a	Are there endowment funds not in	the possession of t	ne organi	zation th	iat are held	and adn	ninistered for t	ne i	V	- Na
	organization by.							20(1)	Yes	No
	(i) unrelated organizations .	•	•		•	•		3a(i)		<del>                                     </del>
<b>.</b>	(ii) related organizations If "Yes" to 3a(ii), are the related organizations	 ranizatione lietad ar	e reguuree	Lon Sah	odulo P2	• •		3a(ii) 3b		<u> </u>
b A	Describe in Part XIV the intended	•	•				•	<u> </u>		<u> </u>
Par	VI Investments—Land, Bu					rt X lin	e 10			
ı uı	Description of investment	(a) Cost or ot			st or other		ccumulated	(d) Bo	ook valu	
	Description of investment	(a) cost of ou			s (other)		preciation	(4) 00	J., 70.0	_
1a	Land		0		0					0
b	Buildings		0		_ 0		O			0
C	Leasehold improvements .		0		0		0			0
d	Equipment		0		0		0			0
е	Other		0		0		0			0
Tota	II. Add lines 1a through 1e (Column	(d) must equal For	m 990, Pa	art X, col	lumn (B), lin	e 10(c)	) -	·		0

organization's liability for uncertain tax positions under FIN 48

Part VII Investments—Other Securities	s. See Form 990, Part X,	line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year ma	
Financial derivatives	0		
Closely-held equity interests	0		·
Other	0		
	0		·····
	0		
	0		
	0		
••••••	0		· · · · · · · · · · · · · · · · · · ·
	0		
•••••••••••••••••••••••••••••••••••••••	0		
	0		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	0	the state of the s	e • • » "«,• . ••
Part VIII Investments—Program Relate	d. See Form 990, Part X,		·-····································
(a) Description of investment type	(b) Book value	(c) Method of valu Cost or end-of-year ma	
		COSt of End-of-year file	arket value
	0		
· · · · · · · · · · · · · · · · · · ·	0		
	0		<del></del>
<u></u>	0		
	0		
	0		<u> </u>
	0		
	0		
	0		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	0		* *
Part IX Other Assets. See Form 990, F	Part X, line 15.		
(	a) Description		(b) Book value
			0
			0
			0
			0
<del></del>	<del></del>		0
			0
			0
			Ö
			. 0
Total. (Column (b) must equal Form 990, Part X,	col (B) line 15)		0
Part X Other Liabilities. See Form 990	), Part X, line 25		
1. (a) Description of liability	(b) Amount		
Federal income taxes		<u> </u>	
		0	
		<u> </u>	
		<u>0</u>	
<del></del>		0	
		_0	
		0	
		<u>0</u>	
		0	
		0	
Total (Column (b) must equal Form 990, Part X, col (B) line 25)		0	
	i		

	Friends of Shanghal American School Foundation	32-1937233	
Schedule D (Form	990) 2009		Page <b>5</b>
Part XIV	Supplemental Information (continued)	· · · · · · · · · · · · · · · · · · ·	
	(continue)		
<b></b>			
	•••••••••••••••••••••••••••••••••••••••		
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#### Schedule F (Form 990)

### Statement of Activities Outside the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

► See separate instructions. ► Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

**Employer identification number** 

Friends of Shanghai American School Foundation 52-1957233 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes 2 For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States. 3 Activities per Region (Use Schedule F-1 (Form 990) if additional space is needed )

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e, fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
East Asia and the Pacific	0	_	program conucos		454.076
<del></del> -	0	0	program services		454,076
	0	0			(
	0	0			
	0	o			(
	0				(
	0	0			(
	0	0			
	0	0			(
	0	0			(
	0	0			
	0				(
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	0	0			
	0	0			
	0	0			(
	0				
	0				(
Totals •	.	_			454.076

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Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990,	Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000	Lise Schedule F-1 (Form 990) if additional space is needed
Gran	Part	0 00

(i) Method of valuation (book, FMV, appraisal, other)																
(h) Description of non-cash assistance																
(g) Amount of non-cash assistance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
(f) Manner of cash disbursement	Wire															
(e) Amount of cash grant	454,076 Wire	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
(d) Purpose of grant	Education of Children															
(c) Region	South Asia															
(b) IRS code section and EIN (if applicable)																
(a) Name of organization												•				

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities က ~

Schedule F (Form 990) 2009

Friends of Shanghai American School Foundation

Schedule F (Form 990) 2009

Part III

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1(Form 990) if additional space is needed

Schedule F (Form 990) 2009 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance ᅙ (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance

#### SCHEDULE L (Form 990 or 990-EZ)

### **Transactions With Interested Persons**

OMB No 1545-0047

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open To Public Inspection

Employer identification number

Friends of Shanghai American School For	undation						52	-19572	233				
Part   Excess Benefit Transaction													
Complete if the organization and	swered "Ye	es" on Fo	rm 990, Pa	rt IV, line	25a or 25b, or	Form 9	90-EZ,	Part V	, line 40	Ob.			
1 (a) Name of disqualified person			(b) Description	n of trans	action				(c) Correct				
(L) Marine of Elegatimos person											Yes	No	
					<del></del>								
			ļ										
	-												
<del></del>						-							
<ul><li>2 Enter the amount of tax imposed of under section 4958</li><li>3 Enter the amount of tax, if any, on</li></ul>						ons du	ring th	e year	• •	\$ \$			
Part II Loans to and/or From Ir	ntereste	d Perso	ons.										
Complete if the organization				990, Part	IV, line 26, c	or Form	n 990-l	EZ, Pa	ırt V, lu	ne 38a			
(a) Name of interested person and purpose	(b) Loan	to or from (c) Onginal (d) Balance due (e) In default? (f) Appinization? principal amount by bo			(d) Balance due (e		Onginal (d) Balance due (e) In def		due (e) In default? (f) App by boo		oroved ard or	(g) W agreei	
	То	From	1				Yes	No	Yes	No	Yes	No	
				0		0							
				0		0							
				0		0							
				0		0							
				0		0							
		<u> </u>	<u> </u>	0		0							
Total	6141			▶ \$		0		35,480	8850.			F. 15	
Part III Grants or Assistance Be Complete if the organization	-	-			IV, line 27								
(a) Name of interested person	(b) F	Relationship	p between in organiza		son and the		(c) Amo	ount of g	rant or ty	pe of as	sistance		
	ŀ												
<del></del>			_										
	<del></del>			<del></del>		<b></b>							
	<u> </u>					<del>                                     </del>							
Part IV Business Transactions Complete if the organization					IV, line 28a,	28b, o	r 28c						
(a) Name of interested person	(b) Re	elationship sted persoi organizati	between n and the	(c) A	amount of esaction	T		ption of	transacti	on	(e) Sha organiz rever		
						ļ					Yes	No	
International Schools Services	Ralph	Jahr & R	oger Hov		11,860	1	al Acce	ounting	Fee t	o man		X	
					0	<del>†                                      </del>							
					0								

0 0

# SCHEDULE O (Form 990)

## **Supplemental Information to Form 990**

OMB No 1545-0047
2009

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

Open to Public Inspection

Employer identification number

Form 990 Part VI Section A Line 2 Ralph Jahr and Roger Hove are both employed by Internation	onal
Schools Services, Inc. ISS provides financial and accounting services to the Foundation for a se	et
service fee. These invoices are paid directly by the Foundation to ISS.	
Form 990 Part VI Section B Line 11A Copies of the completed Form 990 are sent to ALL board	members
for review, prior to submission to the IRS.	
Form 990 Part VI Section C Line 19 Upon request, copies of tax forms and documents are mad	le
available to the public in a timely manner	
Form 990 Part VI Section B Line 12c The Board reviews the conflict of interest policy annually	
Reviewing all relationships and business dealings	
Schedule L Part V Section d Roger Hove and Ralph Jahr work for ISS. ISS is the accounting ma	anagement
firm that has a service agreement with Friends of Shanghai American School Foundation to har	ndle the
daily accounting work for the Foundation	
	•••••
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	••••