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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

2009

Department of the Treasury

Open to Public Inspection

Interr	nal Reveni	ne Sátvice	l	- The org	ganizauoi	i may nave to u	se a copy	of this return t	<u>_</u>			inents				
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May	the IR	S discuss this r	eturn v	with the pi	reparer	shown abov	/e? (see	e instructions	s) _					X	Yes	No

Page 3 42-0982442 FRIENDS OF SEOUL FOREIGN SCHOOL INC Checklist of Required Schedules Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete 1 Schedule A Is the organization required to complete Schedule B, Schedule of Contributors? 2 Х 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 Х Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete 4 Х Schedule C, Part II 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 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D. 6 X Part I 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 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes.' 8 Х complete Schedule D, Part III 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 9 Х Schedule D. Part IV 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 Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or 11 Х X as applicable • 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 '1 the organization's liability for uncertain tax positions under FIN 48? If Yes,' complete Schedule D, Part X Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII 12 Х 12AWas the organization included in consolidated, independent audited financial statement for the tax Yes No 12 A Х year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional 13 Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E Х 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a **b** 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 Х 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 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III. 16 Х 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 Х column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 18 Х

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III

Х

Х

19

20

20

lines 1c and 8a? If 'Yes,' complete Schedule G, Part II

Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H

Form 990 (2009) FRIENDS OF SEOUL FOREIGN SCHOOL INC

			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		_x_
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		_ <u>X</u> _
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		Х
24 a	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, and 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		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(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		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
ŧ	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		<u> </u>
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 comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
ā	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c	х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		<u>X</u>
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		х
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		X
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	
ΑΔ		Form	990 (2009

Page 5

Tark to Journal Hogarum General Hogarum Genera		Yes	No
1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns Enter -0- if not applicable	0	162	140
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable 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			
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			,
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		х
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3Ь		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, financial account in a foreign country (such as a bank account, securities account, or other financial account)?	a 4a		Х
b If 'Yes,' enter the name of the foreign country.			,
See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
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		Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	d 5c		
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?	6a		х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were deductible?	e not 6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and serv provided to the payor?	rices 7a		X
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 fi Form 8282?	le . 7c		х
d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d			
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 g	<u> </u>	<u> </u>
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 organizations. Did th supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business	e 8		Х
holdings at any time during the year?	-	 	<u> </u>
9 Sponsoring organizations maintaining donor advised funds.		╁	
a Did the organization make any taxable distributions under section 4966?	. 9a	 	X
b Did the organization make any distribution to a donor, donor advisor, or related person?	9 b	 	X
10 Section 501(c)(7) organizations. Enter:			
a 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			
11 Section 501(c)(12) organizations. Enter:			
a Gross income from other 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.)		ļ	ļ
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	1	<u> </u>
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			

Form **990** (2009)

Form 990 (2009) FRIENDS OF SEOUL FOREIGN SCHOOL INC Page 6 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. Section A. **Governing Body and Management** Yes No 1a Enter the number of voting members of the governing body. 1a 6 1b|5 **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 2 Х officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its organizational documents 4 Х since the prior Form 990 was filed? 5 5 Did the organization become aware during the year of a material diversion of the organization's assets? Х 6 6 Does the organization have members or stockholders? 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the 7 a Х governing body? 7b b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a Х a The governing body? 8Ь Х b Each committee with authority to act on behalf of the governing body? Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the 9 organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O X (This Section B requests information about policies not required by the Internal Section B. Policies

Rever	nue Code)								
			Yes	No					
10 a	Does the organization have local chapters, branches, or affiliates?	10 a		Х					
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?	10Ь							
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Х						
	Describe in Schedule O the process, if any, used by the organization to review this Form 990		•						
12a	Does the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	Х						
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	.12b	_X_						
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done	12c	Х						
13	Does the organization have a written whistleblower policy?	13_	Х						
14	Does the organization have a written document retention and destruction policy?	14	Х						
15									
	a The organization's CEO, Executive Director, or top management official .								
	b Other officers of key employees of the organization								
	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)								
16 a	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		Х					
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 the organization's exempt status with respect to such arrangements?	16b	-						
	tion C. Disclosures	1		<u>' </u>					
	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 check all that apply Own website Another's website X Upon request	alable	for pu	ıblıc					
	- contract		,						
	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policistatements available to the public.			cial					
	State the name, physical address, and telephone number of the person who possesses the books and records of the organ								
•	GAIL MEYER 15096 EVERGREEN AVE, CLEAR LAKE, IA 50428 (6	41)_3	<u> 57-</u>	3744					

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations'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 employees'
- 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	t compens	ate ar	пу с	urre	nt o	fficer,	dıre	ctor, or trustee		
(A) Name and Title	(B) Average hours		ition i		c) k all l	hat app	ly)	(D) Reportable	(E) Reportable	(F) Estimated amount of other
	per week	andividual frustee or director	institutional frust ae	Officer	Key employee	High est coincerisated employee	FORTHER	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
RUTH RICHTER DIRECTOR	1.00	х						0.	0.	0.
RICHARD UNDERWOOD DIRECTOR	1.00							0.	0.	0.
JOHN ENGSTROM DIRECTOR	1.00							0.	0.	0.
GAIL MEYER PRESIDENT	1.00			x				0.	0.	0.
DR HARLAN LYSOTREASURER	— 1 -00			-x-				0.	0.	
RON RICHTER SECRETARY	1.00			x				0.	0.	0.

(A)	(B)			-	c)			(D)	(E)	(F)
, Name and Title	Average hours				_			Reportable compensation from	Reportable compensation from	Estimated amount of other
•	nours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organization (W-2/1099-MISC)	s compensation from the organization and related organizations
		_		_						
1 b Total					<u>.</u>		>	0.		0. 0
2 Total number of individuals (including but not limited from the organization ►	to thos	e lıs	ted	abo	ve)	who	rec	eived more than \$	100,000 in report	table compensation
				_						Yes No
 3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in 4 For any individual listed on line 1a, is the sum of ret the organization and related organizations greater the individual 	<i>dıvıdual</i> oortable	con	nper	nsatı	on a	and :	othe	r compensation fr	om	3 X
5 Did any person listed on line 1a receive or accrue correndered to the organization? If 'Yes,' complete Sch	ompensa edule J	ation for s	fro such	m a	ny u rson	ınrel	ated	l organization for	services	5 X
Section B. Independent Contractors	_							-		
 Complete this table for your five highest compensate compensation from the organization 	ed indep	end	ent	cont	ract	ors	that	received more tha	an \$100,000 of	
(A) Name and business addres	s						_	Description) of Services	(C) Compensation
2 Total number of independent contractors (including \$100,000 in compensation from the organization ▶	but not I	ımıte	ed to	o the	ose	liste	d at	pove) who receive	d more than	м -

Part VIII Statement of Revenue (C) Unrelated (D) (A) Related or Total revenue Revenue exempt business excluded from tax function under sections revenue revenue 512, 513, or 514 1 a 1a Federated campaigns CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS 1ь **b** Membership dues c Fundraising events 1 c d Related organizations 1 d 1 e e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 1f 18,526 q Noncash contribns included in lns 1a-1f \$ h Total. Add lines 1a-1f 18,526 PROGRAM SERVICE REVENUE **Business Code** f All other program service revenue . g Total. Add lines 2a-2f Investment income (including dividends, interest and other similar amounts) 128,746 0 0. 128,746. Income from investment of tax-exempt bond proceeds Royalties (i) Real (II) Personal 6a Gross Rents **b** Less rental expenses c Rental income or (loss) d Net rental income or (loss) (ii) Other (i) Securities 7a Gross amount from sales of assets other than inventory 893,570 b Less: cost or other basis and sales expenses 2,079,636. c Gain or (loss) -186,066 -186,066 -186,066 0. 0 d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 **b** Less direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 480000 0 11a EXPENSE REIMBURSEMENT 6,514 6,514 0. b UNREALIZED LOSS ON INVESTMENTS 523000 382,323 0 382,323. d All other revenue e Total. Add lines 11a-11d 388,837 Total revenue. See instructions 6,514. 12 350,043 0. 325,003.

Form 990 (2009)

Part IX | Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not includè amounts reported on lines 7b; 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21			4.5	
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				, .e.,
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	1,625,617.	1,625,617.		-
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
	Legal				
c	Accounting	1,050.	0.	1,050.	0.
d	Lobbying				
е	Prof fundraising svcs See Part IV, In 17		Art family		
f	Investment management fees	39,681.	0.	39,681.	0.
	Other	··· -			
_	Advertising and promotion				
13	Office expenses		·- · · · · · · · · · · · · · · · · · ·		
14	Information technology .		· · · · · · · · · · · · · · · · · · ·		
15	Royalties				
16	Occupancy				
	Travel Payments of travel or entertainment expenses for any federal, state, or local public officials	2,913.	0.	2,913.	0.
10	Conferences, conventions, and meetings				
20	Interest .				
	Payments to affiliates		· . · ·	· · · · · · · · · · · · · · · · · · ·	
22	Depreciation, depletion, and amortization				
23	Insurance				
	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.)			Mary to the second seco	
а	BANK FEES	313.	0.	313.	0.
b	·				
d					
е					
f	All other expenses				
	Total functional expenses. Add lines 1 through 24f	1,669,574.	1,625,617.	43,957.	0.
	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	2, 303, 3, 11	_,,	23,733	

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Pa	<u>rt X</u>	Balance Sheet				
		· · · · · · · · · · · · · · · · · · ·		(A) Beginning of year		(B) End of year
	7.	Cash – non-interest-bearing .	,	5,510.	1	26,274.
	2	Savings and temporary cash investments		81,163.	2	72,362.
1	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net .			4	
	5	Receivables from current and former officers, directors and highest compensated employees. Complete Part	s, trustees, key employees, Il of Schedule L		5	
1	6	Receivables from other disqualified persons (as define	ed under section 4958(f)(1))			
		and persons described in section 4958(c)(3)(B) Comp	olete Part II of Schedule L		6	
ŝ	7	Notes and loans receivable, net		630,022.	7	0.
S S E T	8	Inventories for sale or use			8	
S	9	Prepaid expenses and deferred charges			9	
Ì	10 a	Land, buildings, and equipment: cost or other basis	10a			
		Complete Part VI of Schedule D		-, •		
	b	Less: accumulated depreciation	10Ь		10 c	
	11	Investments - publicly-traded securities		2,980,197.	11	2,274,320.
	12	Investments – other securities. See Part IV, line 11			12	
- }	13	Investments - program-related See Part IV, line 11			13	
	14	Intangible assets .			14	
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line	34)	3,696,892.	16	2,372,956.
	17	Accounts payable and accrued expenses			17	
	18	Grants payable			18	
1	19	Deferred revenue			19	
ᅡ	20	Tax-exempt bond liabilities			20	
Å	21	Escrow or custodial account liability Complete Part I	V of Schedule D		21	
L	22	Payables to current and former officers, directors, trus highest compensated employees, and disqualified per	stees, key employees, sons Complete Part II			
I		of Schedule L			22	
E S	23	Secured mortgages and notes payable to unrelated th	ird parties		23	
	24	Unsecured notes and loans payable to unrelated third	parties .	4,405.	24	0.
	25	Other liabilities. Complete Part X of Schedule D	•		25	
	_26	Total liabilities. Add lines 17 through 25		4,405.	26	0.
N E T		Organizations that follow SFAS 117, check here ▶	and complete lines			
Ŧ		27 through 29 and lines 33 and 34.	_			
A S	27	Unrestricted net assets .			27	
Ē	28	Temporarily restricted net assets .			28	
	29	· · · · ·			29	
R		Organizations that do not follow SFAS 117, check he	re ► X and complete			
DZC		lines 30 through 34.	_			····
	30	Capital stock or trust principal, or current funds	• •		30	
B	31	Paid-in or capital surplus, or land, building, and equip			31	
Ă	32	Retained earnings, endowment, accumulated income,	or other funds .	3,692,487.	32	2,372,956.
BALANCES	33	Total net assets or fund balances	•	3,692,487.	33	2,372,956.
5	34	Total liabilities and net assets/fund balances .		3,696,892.	34	2,372,956.

Form **990** (2009)

Form 990 (2009)	FRIENDS (OF	SEOUL	FOREIGN	SCHOOL	INC		42-09824	42
Part XI Fina	ncial Staten	nen	ts and F	Reporting					

rate At 1 manda otatements and reporting			
		Yes	No
1 Accounting method used to prepare the Form 990. X Cash Accrual Other	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		.,
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
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		
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	1		, h. 24 24
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both.			3
Separate basis Consolidated basis Both consolidated and separate basis	188	Á	
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		

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Form **990** (2009)

Page 12

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

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

Open to Public Inspection

Employer identification number

FRI	ENI	os (OF SEOUL	FOREIGN SCHOOL	INC					42-09	982442	<u> </u>		
Par	t <u>l</u>	Re	ason for Pu	ıblic Charity Statı	ıs (All organizations	must d	comple	te this	part.)	See i	nstruct	ions		
The o	orga	nızat	ion is not a pri	vate foundation becau	se it is: (For lines 1 through	gh 11, c	heck on	y one b	ox.)					
1		A ch	urch, convent	ion of churches or ass	ociation of churches descr	ribed in s	section	170(b)(1)(A)(i).					
2		A so	hool described	d in section 170(b)(1)(/	A)(ii). (Attach Schedule E)								
3		A ho	spital or coop	erative hospital service	e organization described i	n sectio	n 170(b)	(1)(A)(iii	i).					
4		A m	edical researc	h organization operate	d in conjunction with a ho	spital de	escribed	ın secti	on 170(Ь Х1ХА)	(iii). Ente	r the hospi	al's	
			ie, city, and st											
5		An d 170 (organızatıon op (b)(1)(A)(iv). (perated for the benefit Complete Part II.)	of a college or university	owned o	or operat	ed by a	govern	mental i	ınıt desci	ribed in sec	tion	
6 7	\exists	An o	organization th	-	governmental unit describ substantial part of its sup art II.)					or from t	the gene	ral public d	escrib	ed
8					1 70(b)(1)(A)(vi). (Complete	e Part II.	.)							
9	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 o	organization or	ganized and operated	exclusively to test for pub	olic safet	ty. See s	ection 5	09(a)(4).				
An organization organizate and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the describes the type of supporting organization and complete lines 11e through 11h										f one box t	or hat			
	a X Type I b ☐ Type II c ☐ Type III — Functionally integrated d ☐ Type III— Other													
е	e 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 509(a)(2)													
f		If th		received a written det	ermination from the IRS to	hat is a	Type I,	Type II o	r Type	III suppo	orting org	ganızatıon,		
g		Sinc	e August 17, 2	2006, has the organiza	tion accepted any gift or	contribu	ition froi	m any of	the fol	lowing p	ersons?	r		
		(i)	a person wh	o directly or indirectly	controls, either alone or to	ogether '	with per	sons des	scribed	ın (ıı) ar	nd (III)	11 - (2)	Yes	No
		(::)	_	- ·	upported organization?							11 g (i)		
		(ii)		mber of a person desc								11 g (ii)		<u> </u>
		(iii)		•	described in (i) or (ii) ab		• •					11 g (iii)		
h				T	he supported organizatior T			T		1	· 1			
	()) Nam Or	e of Supported ganization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organizat	Is the tion in col d in your erning ment?	(v) Did y the organ col (your st	ızatıon in (i) of	organizat (i) organi	is the ion in col zed in the S ?	(vii) Amoun	t of Sup	port
						Yes	No	Yes	No	Yes	No			
s	EOU	L FO	REIGN SCHOOL	LN/A	LINE 2: A SCHOOL	х		х			Х	1,6	30,0	022.
											 			
						ĺ								
							-					· · · · -		
Fotal												1,6	30,0	022.

Sche	edule A (Form 990 or 990-EZ) 2009	FRIENDS	OF SEOUL FO	REIGN SCHOO	OL INC	42-0982442	Page 2
Par	t II Support Schedule for	•			b)(1)(A)(iv) an	d 170(b)(1)(A)((vi)
Sec	(Complete only if you checke tion A. Rublic Support	d the box on line	5, 7, or 8 of Part	1.)			
Cale	ndar year (or fiscal year	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	nning in)	(a) 2003	(0) 2000	(0) 2007	(0) 2000	(e) 2003	(1) 10(a)
'	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants')						
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf				`		
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						
4	Total. Add lines 1-through 3						
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)			,	· · · · · ·		
6	Public support. Subtract line 5 from line 4				,		
Sec	tion B. Total Support		·	,			
Calendar year (or fiscal year beginning in) ▶		(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 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 activ	ities, etc (see ins	tructions)			12	
13	First five years. If the Form 990 organization, check this box and		ation's first, secon	d, third, fourth, oi	r fifth tax year as	a section 501(c)(3)) ▶ □
Sec	tion C. Computation of Pu	blic Support F	Percentage	- 			
14	Public support percentage for 20	• .	• •	e 11, column (f)		14	<u>%</u>
15	Public support percentage from 2	2008 Schedule A,	Part II, line 14			. 15	<u>%</u>
16 a	a 33-1/3 support test — 2009. If the and stop here. The organization	organization did qualifies as a pub	not check the box licly supported or	on line 13, and ganization.	the line 14 is 33-1 · · ·	/3 % or more, che	ck this box
t	33-1/3 support test — 2008. If the and stop here. The organization				and line 15 is 33	-1/3% or more, ch	eck this box ►
17 a	10%-facts-and-circumstances te or more, and if the organization i the organization meets the 'facts	meets the 'facts-a	nd-circumstances	test, check this b	oox and stop here.	. Explain in Part IV	how
t	o 10%-facts-and-circumstances te or more, and if the organization in organization meets the 'facts-and	meets the 'facts-a	nd-circumstances	' test, check this b	oox and stop here.	. Explain in Part IV	15 is 10% / how the ►

18 Private foundation. If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Page 3

Schedule A (Form 990 or 990-EZ) 2009 FRIENDS OF SEOUL FOREIGN SCHOOL INC Part III Support Schedule for Organizations Described in Section 509(a)(2)

Sec	tion A. Rublic Support	Red the box on in	ic 5 of 1 dic 17				
	ndar year (or fiscal yr beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants')	<u> </u>	.,				
	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 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						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, 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						
c	: Add lines 7a and 7b						
8	Public support (Subtract line						
	7c from line 6)	•					
Sec	tion B. Total Support						
Cale	ndar year (or fiscal yr beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form						
b	similar sources Unrelated business taxable						
	income (less section 511 taxes) from businesses acquired after June 30, 1975						
11	Add lines 10a and 10b Net income from unrelated business activities not included inline 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 14	Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and	s for the organiza	ation's first, secon	d, third, fourth, o	or fifth tax year as	a section 501(c)	(3)
Sec	tion C. Computation of Pul		Percentage				
	Public support percentage for 200			e 13, column (f))		15	%
16	Public support percentage from 2	•	•			16	%_
	tion D. Computation of Inv	-		e			
17	Investment income percentage for				nn (f))	17	%
18	Investment income percentage from	•	• • •	•		18	%
19 a	33-1/3 support tests – 2009. If the more than 33-1/3%, check this bo	ie organization die ox and stop here.	d not check the bo The organization	ox on line 14, and qualifies as a pul	blicly supported or	ganızatıon	▶ [_]
t	33-1/3 support tests – 2008. If the is not more than 33-1/3%, check	e organization die	d not check a box	on line 14 or 19a	a, and line 16 is m	ore than 33-1/3%	6, and line 18 ► □
20	Private foundation. If the organiz	•	_	*			▶

Schedule A	עבב ווווס זי	שיטפע זט כ	Z) 2009	LKTEM	JO OF S	POOP L	OKETGM	PCUOOT	TINC	42-03	02442	raye 🕶
Partiv	Suppler Part II,	mental I line 17a	nformat or 17b;	ion. Con and Par	nplete th t III, line	is part to 12. Pro	provide vide any	the exp	lanations r Iditional in	equired by formation.	Part II, lin See instru	e 10; ctions.
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Schedule F (Form 990)

Statement of Activities Outside the United States

2009

► Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b, 15, or 16.
► Attach to Form 990. ► See separate instructions.

Open to Public

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

FRIENDS	OF SEOUL FOR	EIGN SCHOOL	INC		42-098244					
Part I (General Informat o Form 990, Part	ion on Activiti	es Outside the	e United States. Complet						
1 For gr grante	rantmakers. Does the	organization mail grants or assistant	ntain records to si ce, and the select	ubstantiate the amount of the gi	rants or assistance, the rants or assistance?	Yes No				
2 For gr	 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.) 									
3 Activit	ies per Region. (Use	Schedule F-1 (For	rm 990) if addition	nal 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 in region				
	*									
	· · · · · · · · · · · · · · · · · · ·									
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	· · · · · · · · · · · · · · · · · · ·									
Totals				5 , 1 Ta						

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) (2009)

Page 2

FRIENDS OF SEOUL FOREIGN SCHOOL INC

Part II 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
Use Schedule F-1 (Form 990) if additional space is needed. 42-0982442 Schedule F (Form 990) 2009

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other
		East Asia and Pacifi	Asia and Pacifi SUPPORT SCHOOL	1,000,000.	1,000,000. WIRE TRANSFER	0.	N/A	FMV
		East Asia and Pacifi SUPPORT SCHOOL	SUPPORT SCHOOL	630,022.	630, 022. LOAN FORGIVENESS	0.	0. N/A	FMV
		-						
-								
2 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	ations listed above thi	at are recognized as ency letter	s charities by the	foreign country, re	cognized as tax-ey	cempt by the IRS, c	or for which the	•
	ins or entities						A	
BAA							Schedule F	Schedule F (Form 990) 200

Schedule F (Form 990) 2009

Page 3

FRIENDS OF SEOUL FOREIGN SCHOOL INC

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.

(h) Method of valuation (book, FMV, appraisal, other) Schedule F (Form 990) 2009 (g) Description of non-cash assistance (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 BAA

Schedule F	(Form 990) 2009	FRIENDS OF	SEOUL FOREIG	N SCHOOL I	NC	42-0982442	Page 4
Part IV	Supplemental	Information	•				
		t to provide the infoi	rmation required in I	Part Lline 2 an	d any additional info	ormation	
		to provide the lines	madon required in i	urt 1, 11110 2, uri	a diff additional little		
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Schedule **F** (Form 990) 2009

SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

or 990-EZ.

Transactions with Interested Persons

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization Employer identification number FRIENDS OF SEOUL FOREIGN SCHOOL INC 42-0982442 Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Complete if the organization answered 'Yes' on Form 990. Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (c) Corrected? 1 (a) Name of disqualified person (b) Description of transaction Yes No 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under \$ Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. Complete if the organization answered 'Yes' on Form 990, Part IV, line 26 or Form 990-EZ, Part V, line 38a. (f) Approved by board or committee? (g) Written agreement? (a) Name of interested person and purpose (b) Loan to or from the organization? (c) Original principal amount (d) Balance due (e) In default No No Tο From Yes Yes Nο Yes **Total** Part III **Grants or Assistance Benefitting Interested Persons.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and (c) Amount and type of assistance the organization Part IV Business Transactions Involving Interested Persons. Complete if the organization answered'Yes' on Form 990, Part IV, line 28a, 28b, or 28c. (e) Sharing of organization's revenues? (b) Relationship between interested person and the organization (a) Name of interested person (c) Amount of transaction \$ (d) Description of transaction Yes No SPOUSE OF RUTH RICHTER Х RON RICHTER OFFICER 0. 0. SPOUSE OF RON RICHTER Х DIRECTOR RUTH RICHTER Х DIRECTOR EMPLOYEE OF SUPPORTED ORGANIZATION JOHN ENGSTROM BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 Schedule L (Form 990 or 990-EZ) 2009

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

Name of the organization	Employer identification number
FRIENDS OF SEOUL FOREIGN SCHOOL INC	42-0982442
Pt VI-A, Line 2 RON RICHTER AND RUTH RICHTER ARE HUSBAND & WIFE	
Pt VI-A, Line 6 MEMBERS ARE THE SCHOOL BOARD OF SEOUL FOREIGN SC	HOOF CONNCIF
Pt_VI-A, Line 7a MEMBERS ELECT DIRECTORS AT ANNUAL MEETING	
Pt_VI-B, Line_11A FORM 990 IS REVIEWED AT THE BOARD MEETING PRIOR	TO_FILING
Pt VI-B, Line 12c THROUGH ANNUAL DISCLOSURE AND NON-PARTICPATION O	N ISSUE, PER BY-LAWS
Pt VI-B, Line 15 ARTICLES OF INCORP. NO COMPENSATION ALLOWED. REIMBURSMENT OF	VOUCHERED MILEAGE AT IRS RATES
Pt VI-C, Line 19 AVAILABLE ON REQUEST TO VIEW OR BY MAIL.	
PT IV LINE 14a JOHN ENGSTROM IS A DIRECTOR AND RESIDES IN SEOUL	,_KOREA
	

Schedule O (Form 990) Supplemental Information to Form 990 Form 990, Page 6, Line 9 (continued)

Name	Address	City	St	ZIP
RUTH RICHTER	PO BOX 677	GARDEN VALLEY	ID	83622
RICHARD UNDERWOOD	2401 POND ST	URBANA	IL	61801
JOHN ENGSTROM	55 YONHI DONG	SEOUL, KOREA	<u>. </u>	12011-3
HARLAN LYSO	855 N CORRIEDALE RD	YAKIMA	WA	98909-1
RON RICHTER	PO BOX 677	GARDEN VALLEY	ID	83622