

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



SCANNED APR 1 8 2011

Form **990-PF**

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

2009

Department of the Treasury Internal Revenue Service

Note The foundation may be able to use a copy of this return to satisfy state reporting requirements

For cal	endar year	r 2009, or ta	ax year beginni		12/01 ,2		and ending		/30		
G Ch	eck all that	apply.	Initial return	Init	ial Return of a form	er pu	ublic charity			Fin	al return
		ſ	Amended ret	urn	Addre	SS ¢	hange y	Nan	ne c	hange	
Use t	he	<u>_</u>					V ()	<u></u> 1	Α	Employer identification nu	mber
IRS lal	bel. JJSI		Y FOUNDATI	ON	LJ		1	in l		20-3966466	
Otherw		O HOLLY			APR	1 2	2011	ÖI	В	Telephone number (see the	instructions)
prin or typ		ALTOS,	CA 94024		APK	1 4	, 2011	RS-O		(650) 254-076	68
See Spe	cific				· · · · ·			뜨	С	If exemption application is	
Instruct	ions				. OGD	EN	I, UT	1 1	-	1 Foreign organizations, che	· •
H C	heck type	of organiza	tion X Sec	tion 50	1(c)(3) exempt priva			1		2 Foreign organizations mee	
Γ	Section 4	4947(a)(1)			trust Other taxa			lation		here and attach computation	on ►
1 Fa			s at end of year			X Ca		crual	Ε	If private foundation status	s was terminated
(1	from Part II, co	olumn (c), lıne	16)		Other (specify)		ш		F	under section 507(b)(1)(A) If the foundation is in a 60	• —
► \$	<u> </u>	398	,609.	(Part I	, column (d) must b	e on	cash basis	51	Г	under section 507(b)(1)(B)	
Part I	Analy	sis of Re	venue and		1						
	Expen	ises (The	total of amount	s ın	(a) Revenue and expenses per boo		(b) Net inco		IL	(c) Adjusted net income	(d) Disbursements for charitable
	column:	5 (b), (c), a	and (d) may not mounts in colum	neces							purposes
	(see the	quai trie ar. e instructio	ns))	iii (a)		- 1					(cash basis only)
			grants, etc, received	(att sch)		一	*	•			
	2 Ck ►	X if the fo	oundn is not req to at	t Sch B	1 x x x	* _					
		rest on sav	ings and tempo								
	1	ınvestmer			11,60	11.	-	L1,60	<u>1.</u>	11,601.	
	5a Gros		rest from securities								
	b Net re	ental income			* 5 , , , , ,	. ()	. ,	3			
R	or (los	ss)	sale of assets not or	10	-90						
Ë	b Gross	sales price for		218.		3.	· ` · · · · · · · · · · · · · · · · · ·			·	
Ā	assets	s on line 6a	ome (from Part IV, In		San a	~~			0.		
E N		_	capital gain	ie 2)		-`- -{	' \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Į į	٠.		
U	I -	me modific			\$7:	Z.,		- *			· · · · · · · · · · · · · · · · · · ·
E	10a Gross return					×2 .	746.33	: 64	, 5,	. / 3/ / 2° 8	/
	allowa	ances							Ŕ	* 1 × 1 × 1 × 1	a Šk
	b Less goods		<u> </u>		7, S. 11. §		* >			·	` **.
	c Gross	profit/(loss)	(att sch)				1 1/2/19/2				
	11 Othe	er income (attach schedule)		T					
											* / \
	_		s 1 through 11		10,69		·	L1,60	1.	11,601.	* `
			icers, directors, truste	ees, etc		0.					
	l .	. ,	aries and wages								
	1	sion pians, fees (attach s	employee bene	TITS							
A	, ,	nees (attach s Inting fees (at	,	ST 1	1,25	<u>_ </u>			-	1,250.	1,250.
M	I	prof fees (at	,	21 I	1,23				\dashv	1,250.	1,230.
0 N	17 Inter		acii scii)		<u> </u>				-		
O P E R A		attach schedule ((s	ee instr.) SEE S	TM 2	44	1			-	444.	444.
RR		attach schedule) (a reciation (a		IM Z	44	4.				444.	444.
ÎÎ	sch)	and deple	tion								
N V G E	20 Occi	ирапсу					-				
			nces, and meet	ıngs	1,23	9.				1,239.	1,239.
A E N X D P	22 Print	ting and pu	iblications								
D P	23 Othe		s (attach schedu SEE STATEME			ا ء			9.	76.	76.
N S	24 Take					6.			۶.	70.	70.
Ĕ	24 Tota expe	n operating enses. Add	and administration and administration and administration and and administration administration and administration administ	auv e h 23	3,00	ا و			9.	3,009.	3,009.
J			grants paid PAR		13,13		·		-		13,130.
	26 Tota	l expenses	and disbursen				 				
	Add	lines 24 ar	nd 25		16,13	9.			9.	3,009.	16,139.
			from line 12:		20 - 1 - 4 - 4 - 4						
	a Exce	ess ot reve disbursem	nue over expen ents	ses	-5,44	1		`	ı		,
			o me (if negative, ente	r 0)	3,44	_	1	1,59	2.		
			e (if negative, enter	,	17.			, -,		8,592.	
			,								·

Part	11	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	of year
		Dalatice Sticets	(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest	·bearing	10.		
	2	Savings and tempor	ary cash investments	5,860.	13,799.	13,799.
	3	Accounts receivable	▶			
		Less: allowance for	doubtful accounts			
	4	Pledges receivable	-			
		Less allowance for	doubtful accounts	-	•	
	5	Grants receivable				
	6	Receivables due from offic	cers, directors, trustees, and other			
		disqualified persons (atta	ch schedule) (see the instructions).			
_	7	Other notes and loans rec	eivable (attach sch)			
Ŝ		Less allowance for	doubtful accounts 🟲			
Ş	8	Inventories for sale	or use			
A S E T	9	Prepaid expenses a	nd deferred charges			
S	10	Investments – U.S obligations (attach s	and state government chedule)			
	۱ ۱	b Investments — corporate	· · · · · · · · · · · · · · · · · · ·	401,034.	387,511.	384,810.
	ļ	c Investments - corporate	` ' '		00.,022.	001/0201
	i	Investments - land,	` '		· · · · · · · · · · · · · · · · · · ·	
	''	equipment basis			-	
		Less accumulated deprec (attach schedule)	►		***************************************	
		Investments – mort	,		.	
	13	Investments – other				
	14	Land, buildings, and e			* * *	
		Less accumulated deprec (attach schedule)	iation •			
		Other assets (descri				
	16	Total assets (to be a see instructions. Als	completed by all filers — o, see page 1, item I)	406,904.	401,310.	398,609.
Ļ	17	Accounts payable ar	nd accrued expenses	5,316.	5,163.	
À	18	Grants payable]
B	19	Deferred revenue				
Ĺ	20		tors, trustees, & other disqualified persons			
! T	21		s payable (attach schedule)			
- 1	22	Other liabilities (descr	ibe)			
E S	23	Total liabilities (add	lines 17 through 22)	5,316.	5,163.	
		Foundations that fo	llow SFAS 117, check here 24 through 26 and lines 30 and 31.	3,310.	3,103.	
NF	24	Unrestricted	24 through 26 and lines 30 and 31.			
ΕU	25	Temporarily restricte	od.			-
D		Permanently restrict				1
A S B		Foundations that do	not follow SFAS 117. check here 🕒 💢			
A B S A L T A	27	Capital stock trust r	orincipal, or current funds	406,316.	406,316.	
T A S N	28	•	or land, building, and equipment fund	400,310.	400,310.	
С	29		ulated income, endowment, or other funds	-4,728.	-10,169.	1
O E R S	30	• ,	fund balances (see the instructions)	401,588.	396,147.	4
	31		net assets/fund balances		330,147.	
		(see the instructions)	406,904.	401,310.	
Part	Ш	Analysis of Chan	ges in Net Assets or Fund Balance	es		
1	Tota	I net assets or fund ba	alances at beginning of year – Part II, colu	mn (a), line 30 (must ac	ree with	
	end-	of-year figure reported	d on prior year's return)	,	11	401,588.
		r amount from Part I,			2	-5,441.
		increases not included in li	ne 2 (Itemize)			
		lines 1, 2, and 3			4_	396,147.
		ases not included in line 2 (5	
6_	Tota	net assets or fund ba	alances at end of year (line 4 minus line 5)	- Part II, column (b), II	ne 30 6	396,147.

(a) List and describe 2-story brick warehous	the kind(s) of property sold (e g , e, or common stock, 200 shares M	real estate	(b) How ac P — Puro D — Dona	hase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a PER FIDELITY STATEM	ENT		P		VARIOUS	VARIOUS
b						
с						
d			_			
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal			(h) Gain or (e) plus (f) m	
a 24,218.		2.	5,121.			-903.
b						
С		- ""				
d						
e						
Complete only for assets shown	ng gain in column (h) and owned b	v the foundation on 12/31/69)	-	(I) Gains (Coli	ımn (h)
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a	· (ı)	g th	ain minus column (k an -0-) or Losses (fr), but not less
a						-903.
b						
c						
d						
е						
2 Capital gain net income or (net	capital loss) If gain, also	o enter in Part I, line 7 iter -0- in Part I, line 7		2		-903.
3 Net short-term capital gain or (I	oss) as defined in sections 1222(5)					- 303 .
If gain, also enter in Part I, line in Part I, line 8	8, column (c) (see the instructions) If (loss), enter -0-		3		0 .
Part V Qualification Under	Section 4940(a) for Boduce	d Tay on Not Investme	ant Inco			
Was the foundation liable for the sect If 'Yes,' the foundation does not quali	fy under section 4940(e) Do not co	omplete this part			Yes	☐ No
1 Enter the appropriate amount in	n each column for each year, see th	ne instructions before makin	g any entr	ies		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	sets	(coli	(d) Distribution umn (b) divided	
2008						
2007						
2006						
2005			_			
2004					•	
		• • • • • • • • • • • • • • • • • • • •				
2 Total of line 1, column (d)				2		
•	e 5-year base period - divide the to	otal on line 2 by E as by #-				
number of years the foundation	has been in existence if less than	5 years		3		
4 Enter the net value of noncharit	able-use assets for 2009 from Part	X, line 5		4		
5 Multiply line 4 by line 3				5		
6 Enter 1% of net investment inco	ome (1% of Part I, line 27b)			6		
7 Add lines 5 and 6				7		
8 Enter qualifying distributions fro	m Part XII, line 4			8		
If line 8 is equal to or greater th Part VI instructions	an line 7, check the box in Part VI,	line 1b, and complete that	part using	a 1%	tax rate See th	ne

Form 990-PF (2009) JJSH FAMILY FOUNDATION 20-396			Р	age 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see the	instructi	ons)		
1 a Exempt operating foundations described in section 4940(d)(2), check here				
Date of ruling or determination letter (attach copy of letter if necessary - see instr.)			_	
b Domestic foundations that meet the section 4940(e) requirements in Part V,				32.
check here and enter 1% of Part I, line 27b				
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b).				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2	,			0.
3 Add lines 1 and 2				32.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0.
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			2	32.
6 Credits/Payments	<u> </u>			
a 2009 estimated tax pmts and 2008 overpayment credited to 2009				
b Exempt foreign organizations — tax withheld at source 6b				
c Tax paid with application for extension of time to file (Form 8868).				
d Backup withholding erroneously withheld 6d	İ			
7 Total credits and payments Add lines 6a through 6d 7	,			0.
8 Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached 8				
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			2	232.
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.				
11 Enter the amount of line 10 to be Credited to 2010 estimated tax				
Part VII-A Statements Regarding Activities				
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	L		Yes	No
participate or intervene in any political campaign?	Ļ	1 a		<u>X</u>
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		1ь		Х
If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials publis	hed			
or distributed by the foundation in connection with the activities	''eu			
c Did the foundation file Form 1120-POL for this year?		1 c		Χ
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	آ ۾			
(1) On the foundation	0.	١ ١	^	,
foundation managers > \$ 0.		į		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	ĺ	2		Х
If 'Yes,' attach a detailed description of the activities	Ī			
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles				
of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	L	3		Χ
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	L	4b	N.	/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	_	5		X
If 'Yes,' attach the statement required by General Instruction T				
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
● By language in the governing instrument, or				
 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict 	ıct			
with the state law remain in the governing instrument?	-	6		<u> X</u>
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	-	7	Х	
8a Enter the states to which the foundation reports or with which it is registered (see the instructions). CA	_			
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G? If 'No,' attach explanation</i>	-	8b	Х	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 494 for calendar year 2009 or the tayable year heavening in 2000 (see particulates for Red VIVA) (1)(4) (3)	12(1)(5)			v
for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete Pa		9		X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their name and addresses	es	10		х
BAA)-PF (2009)

	990-PF (2009) JJSH FAMILY FOUNDATION	20-39664	66	P	age 5
Par	t VII-A Statements Regarding Activities Continued				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)		11		х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?		12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exempt Website address N/A	otion application?	13	Х	
14		one no ► (650)	254	-076	-
	Located at ► 1490 HOLLY AVE LOS ALTOS CA ZIP + A				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check he	ere	$\overline{N/A}$		
	and enter the amount of tax-exempt interest received or accrued during the year	▶ 15			N/A
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	•			
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.			Yes	No
1 a	During the year did the foundation (either directly or indirectly).				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	Yes X No			
b	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the instru	ın uctions)?	1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here	▶ 🗍	Z . S		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted at that were not corrected before the first day of the tax year beginning in 2009?	cts,	1 c		х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section $4942(j)(3)$ or $4942(j)(5)$)		,		
a	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?	Yes X No			
	If 'Yes,' list the years > 20 , 20 , 20 , 20				
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 49 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 49	942(a)(2) 42(a)(2) to	,		
_	all years listed, answer 'No' and attach statement — see the instructions)		2b	N	/ A
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the year $^{\triangleright}$ 20 , 20_ , 20_ , 20	irs here			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X No			
b	If 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the foundat or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approby the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009)	oon oved or	 3b	N	 /A
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		Х
_					
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?		46		Х
BAA			orm 99)-PF (
				\	

Form 990-PF (2009) JJSH FAMILY FOU	UNDATION		20-396	6466	Page 6
Part VII-B Statements Regarding Ac	tivities for Which Forn	n 4720 May Be Req	uired (continued)		
5a During the year did the foundation pay or	r incur any amount to	 -			
(1) Carry on propaganda, or otherwise a	ttempt to influence legislation	on (section 4945(e))?	Yes X	No	
(2) Influence the outcome of any specific on, directly or indirectly, any voter re	c public election (see section gistration drive?	n 4955), or to carry	Yes X	No	
(3) Provide a grant to an individual for tr	avel, study, or other similar	purposes?	Yes X	No	
(4) Provide a grant to an organization of in section 509(a)(1), (2), or (3), or section 509(a)(1).	her than a charitable, etc, o ection 4940(d)(2)? (see instr	rganization described uctions)	Yes X	No	
(5) Provide for any purpose other than re educational purposes, or for the prev	eligious, charitable, scientific ention of cruelty to children	c, literary, or or animals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did ar described in Regulations section 53.4945 (see instructions)?	y of the transactions fail to or in a current notice regar	qualify under the excep ding disaster assistance	tions	5b	N/A
Organizations relying on a current notice	regarding disaster assistan	ce check here	▶ []		
c If the answer is 'Yes' to question 5a(4), of tax because it maintained expenditure re If 'Yes,' attach the statement required by	sponsibility for the grant?		N/A Yes	No	
6a Did the foundation, during the year, rece on a personal benefit contract?	ive any funds, directly or inc	firectly, to pay premium	S Yes X	No	
b Did the foundation, during the year, pay If 'Yes' to 6b, file Form 8870	premiums, directly or indirec	ctly, on a personal bene	fit contract?	6b	X
7a At any time during the tax year, was the	foundation a party to a prof	nibited tax shelter transa	ction? Yes X	No	
b If yes, did the foundation receive any pro					N/A
Part VIII Information About Officer					
and Contractors					
1 List all officers, directors, trustees, foun	dation managers and their	compensation (see inst	ructions).		
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense a other allowa	
SHAIN Y. HO	CEO	0.	0.		0.
1490 HOLLY AVE	5.00				
LOS ALTOS, CA 94024					
HSUEN C. HO	SEC./CFO	0.	0.		0
1490 HOLLY AVE	5.00				
LOS ALTOS, CA 94024					
JOYCE K. HO	DIRECTOR	0.	0.	· · · · · · · · · · · · · · · · · · ·	0
1490 HOLLY AVE	5.00	1	•		
LOS ALTOS, CA 94024	3.00				
JOSHUA K HO	DIRECTOR	0			0
1490 HOLLY AVE	DIRECTOR	0.	0.		0.
	5.00				
LOS ALTOS, CA 94024	Investigation of the second			-ter INONE !	
2 Compensation of five highest-paid emp					
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense a other allowa	
NONE					
					
	1				
Total number of other employees paid over \$5	0,000		•		0
RAA	TEE AD3061	07/06/09		Form 990-P	F (2009)

Part VIII Information About Officers, Directors, Trustees, Foundation Ma and Contractors (continued)	nagers, Highly Paid E	
3 Five highest-paid independent contractors for professional services – (see instruction enter 'NONE.'	s). If none,	
	Type of service	(c) Compensation
NONE (C	Type of service	(c) compensation
Table a water of others are started and for any first any first and for any first and for any first and for any first any first and for any first and for any first and for any first any first and for any first and for any first and for any first	•	0
Total number of others receiving over \$50,000 for professional services		0
Part IX*A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information s organizations and other beneficiaries served, conferences convened, research papers produced, etc.	uch as the number of	Expenses
1 <u>N/A</u>		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax	year on lines 1 and 2	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
Total. Add lines 1 through 3		0.
BAA		Form 990-PF (2009)

Part X Minimum Investment Return (All domestic foundations must complete this part. see instructions.)	Foreign for	undations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes a Average monthly fair market value of securities	1a	384,958.
b Average of monthly cash balances	1 b	3,498.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	388,456.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c	!	
	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	388,456.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	5,827.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	382,629.
6 Minimum investment return. Enter 5% of line 5.	6	19,131.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private op	erating fou	ndations
and certain foreign organizations check here ▶ and do not complete this	part.)	
1 Minimum investment return from Part X, line 6	1	19,131.
2a Tax on investment income for 2009 from Part VI, line 5	2.	
b Income tax for 2009 (This does not include the tax from Part VI).		
c Add lines 2a and 2b	2c	232.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	18,899.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	18,899.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	18,899.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	16,139.
b Program-related investments — total from Part IX-B.	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
 Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required) 	3a	
b Cash distribution test (attach the required schedule).	3b	
4 Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	16,139.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions).	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	16,139.
Note: The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating w	hothor the fee	

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

BAA

Form **990-PF** (2009)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				18,899.
2 Undistributed income, if any, as of the end of 2009-	,			
a Enter amount for 2008 only			1,369.	
b Total for prior years 20 , 20 , 20	* **	0.		
3 Excess distributions carryover, if any, to 2009				
a From 2004				
b From 2005	1 .			
c From 2006	٧			
d From 2007				
e From 2008	1			
f Total of lines 3a through e.	1 ° ° °.			
4 Qualifying distributions for 2009 from Part				
XII, line 4 \S \S 16, 139 .			1	
a Applied to 2008, but not more than line 2a	,		1,369.	
b Applied to undistributed income of prior years (Election required – see instructions)		0.		
c Treated as distributions out of corpus		0.		
(Election required – see instructions)	0.			
d Applied to 2009 distributable amount				14,770.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the	0.			0.
same amount must be shown in column (a))	*			
• • • • • • • • • • • • • • • • • • • •				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract line 4b from line 2b	•	0.		
c Enter the amount of prior years' undistribut- ed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line So from line Sh. Taughte	· · · · · · · · · · · · · · · · · · ·			· ··· · · · · · · · · · · · · · · · ·
d Subtract line 6c from line 6b Taxable amount — see instructions		0.		·····
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010	, ,			4,129.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9	J.			· · · · · · · · · · · · · · · · · · ·
a Excess from 2005		Ī		
b Excess from 2006				
c Excess from 2007				
d Excess from 2008.	· •	j	ŀ	
e Excess from 2009	e			
BAA	<u> </u>			Form 990-PF (2009)

Form 990-PF (2009) JJSH FAMILY FOUN		15.11	/// A	20-3966466	
Part XIV Private Operating Foundation					N/A
ha If the foundation has received a ruling or one is effective for 2009, enter the date of the	ruling		-	^	1040()(5)
b Check box to indicate whether the foundat		rating foundation d		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year (a) 2009	(h) 2000	Prior 3 years	(4) 2006	(a) Tatal
investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities.					<u>-</u> -
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
(1) Value of all assets	\			ļ	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter'					
 Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) 					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income			<u> </u>		
Part XV Supplementary Information assets at any time during the	(Complete this e vear - see in	part only if the structions.)	organization ha	ad \$5,000 or mo	e in
Information Regarding Foundation Managa List any managers of the foundation who close of any tax year (but only if they have NONE	gers:	ore than 2% of the	total contributions r section 507(d)(2))	received by the found	dation before the
b List any managers of the foundation who a partnership or other entity) of which the NONE				ally large portion of	the ownership of
2 Information Regarding Contribution, Gran Check here X if the foundation only r requests for funds If the foundation make	nakes contributions	to preselected cha	ritable organization	s and does not acce	pt unsolicited er conditions,
complete items 2a, b, c, and d					
a The name, address, and telephone number	er of the person to v	vnom applications :	snould be addresse	d	
b The form in which applications should be	submitted and infor	mation and materia	als they should inclu	ude	
c Any submission deadlines	·				
d Any restrictions or limitations on awards,	such as by geograp	hıcal areas, charıta	ble fields, kinds of	institutions, or other	factors

TEEA0310L 07/06/09

Form 990-PF (2009)

BAA

Page 11

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient	Contribution	
a Paid during the year SEE STATEMENT 4	substantial contributor	recipient		
1				
Total	<u> </u>	Ţ	► 3a	13,130.
b Approved for future payment Total			► 3a ► 3b	

Part XVI-A Analysis of Income-Producing Activities

⊏nter gros	s amounts unless otherwise indicated	Unrelate	d business income	Excluded	by section <u>512,</u> 513, or 514	
		(a) Business code	(b) Amount	(c) Exclu sion	(d) Amount	(e) Related or exempt function income
_	ram service revenue			code		(see the instructions)
		 	_ 	 		
		+-+		+		
		 				
		+		+		
ř		 		+		
a Fees	and contracts from government agencies			1		
	bership dues and assessments					
	st on savings and temporary cash investments			1		11,601
	ends and interest from securities			1		21,001
	ental income or (loss) from real estate		· · · · · · · · · · · · · · · · · · ·			
	-financed property			1	··········	
	debt-financed property					
	ntal income or (loss) from personal property					
	r investment income					
8 Gain o	r (loss) from sales of assets other than inventory					-903
	ncome or (loss) from special events					
	s profit or (loss) from sales of inventory			1		
	r revenue	7	>	1		
а						
_						
e						
10 0 11	otal Add columns (b), (d), and (e)	٠,				10,698.
ı∠ Subt	otal Add coldinis (b), (d), and (e)	1				
13 Tota	I. Add line 12, columns (b), (d), and (e)	L		. .	13	10,698.
13 Tota		calculations)			13	
13 Tota (See works	I. Add line 12, columns (b), (d), and (e)		shment of Exem	pt Purp		
13 Tota (See works	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify certain Relationship of Activities to the	e Accompli			oses	10,698.
13 Total (See work: Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify c	e Accompli			oses	10,698.
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify certain Relationship of Activities to the	e Accompli			oses	10,698
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify certain Relationship of Activities to the	e Accompli			oses	10,698
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify certain Relationship of Activities to the	e Accompli			oses	10,698
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify certain Relationship of Activities to the	e Accompli			oses	10,698
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify certain Relationship of Activities to the	e Accompli			oses	10,698
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify certain Relationship of Activities to the	e Accompli			oses	10,698
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify certain Relationship of Activities to the	e Accompli			oses	10,698
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify certain Relationship of Activities to the	e Accompli			oses	10,698
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify certain Relationship of Activities to the	e Accompli			oses	10,698
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify certain Relationship of Activities to the	e Accompli			oses	10,698
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify certain Relationship of Activities to the	e Accompli			oses	10,698
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify certain Relationship of Activities to the	e Accompli			oses	10,698
13 Total See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify certain Relationship of Activities to the	e Accompli			oses	10,698
13 Total See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify certain Relationship of Activities to the	e Accompli			oses	10,698
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify certain Relationship of Activities to the	e Accompli			oses	10,698
13 Total See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify certain Relationship of Activities to the	e Accompli			oses	10,698
13 Total See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify certain Relationship of Activities to the	e Accompli			oses	10,698
13 Total (See work: Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify certain Relationship of Activities to the	e Accompli			oses	10,698.
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify certain Relationship of Activities to the	e Accompli			oses	10,698
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify certain Relationship of Activities to the	e Accompli			oses	10,698
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify certain Relationship of Activities to the	e Accompli			oses	10,698.

			AMILY FOUND						-396 <u>64</u>			ge 13
Pa	art XVII	Information Re Exempt Organ	egarding Tran	sfers To and Tr	ansaction	s an	d Relations	ips With	Noncha	ritable	•	
							- -	_			Yes	No
	1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527.								"			
	relatı	ng to political organizai	tions?				y or ar section	,				
	a Trans	sfers from the reporting	foundation to a	noncharitable exem	ot organizati	on of						
(1) Cash								<u> </u>	1a (1)		X	
		Other assets							<u> </u>	1a (2)		Х
		transactions							-			٠,,
	(1) Sales of assets to a noncharitable exempt organization.									1b(1)		X
	(2) Purchases of assets from a noncharitable exempt organization									1b (2)		X
	(3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements								<u> </u>	1b (3)		X
		•							-	1b (4) 1b (5)		X
	(5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations							-	1b (5)		X	
		ng of facilities, equipm	•	•		c				1c		$\frac{\lambda}{X}$
	0 07.01.	ing or recontros, equipm	one, maning lists	, other assets, or pa	ia ciripioyee	3				10		
	the q	answer to any of the a oods, other assets, or s ransaction or sharing a	services aiven by	the reporting found	ation If the	found	ation received	ess than faii	r market v	rket vali value in	ue of	
(a) Line no	(b) Amount involved		oncharitable exempt organ	· · · · · · · · · · · · · · · · · · ·	~	Description of train			ring arran	ngement	s
N,	N/A						·	•				
_												
_												
								 				
_		· · · · · · · · · · · · · · · · · · ·	 									
_	.											
	· · · · · · · ·											
												
_	_											
_												
-	descr	foundation directly or ibed in section 501(c) of s,' complete the following	of the Code (othe	ed with, or related to er than section 501(c	, one or mor)(3)) or in se	e tax- ection	exempt organı 527?	zations		Yes	X	No
_		(a) Name of organizati	on	(b) Type of or	ganization		(0) Description	n of relation	onship		
<u>N</u> ,	/A											
												
	_											
\neg	Under see											
	complete (alties of perjury. I declare that I Declaration of preparer (offer t	have examined this re han taxpayer or fiducia	eturn, including accompany ary) is based on all informa	ing schedules ar tion of which pre	nd state parer h	ments, and to the be as any knowledge	st of my knowle	dge and belie	ef, it is true	e, correc	et, and
S	>	100	Huan C	C		4	2-9-11	· C1	F0			
GN	Sign	Signature of officer or trustee Date Title						Title				
	Paid	Preparer's signature				Date	,	Check if self	(See Sig	r's Identifyi jnature in		
H E R E	Pre- parer's		V T CUEN O	A CCOCTAMEC	TNC	_i		employed P	N/A			
	Use	yours if self	RINGWOOD A	ASSOCIATES,	INC.			EIN - N	/A			
	Only	employed), address, and SAN					•••		(400)	425	000	0

BAA

Firm's name (or yours if self employed), address, and ZIP code

Phone no ► (408) 435-8828

2146 RINGWOOD AVE SAN JOSE, CA 95131

2009	FEDERAL STA	S	PAGE 1	
·	JJSH FAMILY FO		20-3966466	
STATEMENT 1 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES		<u>.</u> .		
TAX PREP FEES	(A) EXPENSE PER BOOK TOTAL \$ 1,2	INCO	MENT ADJUSTED	(D) CHARITABLE PURPOSES \$ 1,250. \$ 1,250.
STATEMENT 2 FORM 990-PF, PART I, LINE 18 TAXES				
FEDERAL INCOME TAX	(A) EXPENSE PER BOOK \$ 4 TOTAL \$ 4		MENT ADJUSTED	(D) CHARITABLE PURPOSES \$ 444. \$ 444.
STATEMENT 3 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES				
BANK SERVICE CHARGE FILING FEE POSTAGE SUPPLIES EXPENSE		S INVEST	MENT ADJUSTED NET INCOME 9. \$ 9. 10. 8. 49.	(D) CHARITABLE PURPOSES \$ 9. 10. 8. 49. \$ 76.
STATEMENT 4 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YE	AR			
NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
OHIO STATE UNIVERSITY (ACCAD) 1224 KINNEAR ROAD COLUMBUS, OH 43212	N/A	EXEMPT	R & D FUND	\$ 6,000
MOUNTAIN VIEW HIGH SCHOOL 3535 TRUMAN AVE MOUNTAIN VIEW, CA 94040	N/A	EXEMPT	SUPPORT STUDENT ACTIVITIES	100

FEDERAL STATEMENTS

PAGE 2

JJSH FAMILY FOUNDATION

20-3966466

STATEMENT 4 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
AMERICAN CANCER SOCIETY PO BOX 22538 OKLAHOMA CITY, OK 73123	N/A	EXEMPT	R & D FUND	\$ 100.
LEUKEMIA & LYMPHOMA SOC. PO BOX 4072 PITTSFIELD, MA 01202	N/A	EXEMPT	R & D FUND	100.
M.V.C. CHURCH 175 EAST DANA STREET MOUNTAIN VIEW, CA 94041	N/A	EXEMPT	SUPPORT YOUTH ACTIVITIES	500.
S.D.A CHURCH 1425 S. SPRINGER RD MOUNTAIN VIEW, CA 94040	N/A	EXEMPT	INTERNATIONAL DISASTER RELIEF	1,490.
S.Y. LEARNING CENTER 1425 S. SPRINGER RD MOUNTAIN VIEW, CA 94040	N/A	EXEMPT	SUPPORT YOUTH EDUCATION	1,000.
LIOU QUEI ORPHANAGE (CMCH) , LIOU KUEI KAOHSIUNG TAIWAN	N/A	PUBLIC	EDUCATION FUND	1,000.
OTTO HUANG FOUNDATION 139 PORT ROYAL AVE SAN MATEO, CA 94404	N/A	EXEMPT	PROMOTE YOUTH EDUCATION	90.
ZHAOYU CULTURAL FOUNDATION 4600 EL CAMINO REAL, #205 LOS ALTOS, CA 94022	N/A	EXEMPT	PROMOTE YOUTH LIBARY	50.
ST. JUDE CHILDREN'S HOSPITAL P. O. BOX 50 MEMPHIS, TN 38101	N/A	EXEMPT	MEDICAL R&D	100.
GATHERING TOGETHER 476 COUNTY RD #516 HUNTSVILLE, AR 72740	N/A	EXEMPT	JOB TRAINING FOR DISABLED IN CHINA	500.
UCLA CHILDREN'S HOSPITAL 757 WESTWOOD PLAZA LOS ANGELES, CA 90095	N/A	EXEMPT	MEDICAL R&D	400.
STANFORD UNIVERSITY P. O. BOX 20466 STANFORD, CA 94305	N/A	EXEMPT	SUPPORT GLOBAL HEALTH	800.
USC CHILDREN'S HOSPITAL 4650 SUNSET BLVD. LOS ANGELES, CA 90027	N/A	EXEMPT	MEDICAL R&D	400.

2009	FEDERAL ST	ATEMENT	S	PAGE 3
<u>. </u>	JJSH FAMILY	FOUNDATION		20-3966466
STATEMENT 4 (CONTINUED) FORM 990-PF, PART XV, LINE 3 RECIPIENT PAID DURING THE	BA YEAR			
NAME AND ADDRESS	DONEE RELATIONSHIF	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
TAMALE TEACHING HOSPITAL , P. O. BOX 16 TAMALE GHA	N/A ANA	PUBLIC	BLIND PREVENTION IN GHANA	\$ 500.
			TOTAL	\$ 13,130.