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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Department of the Treasury

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

2011
 Open to Public Inspection

	tevenue Ser						mapection
	ck if applic	calendar year, or tax year beginning C Name of organization Friends of S	hanahai American Sebasi	, and er		yer identification	on number
_	ress chang	1 Horido or o	hanghai American School	i oundatio	· ·	-	
=	-	Number and street (or P O box if mail is no	at delivered to street address)	om/suite	52-1957	233 one number	·
=	ne change	` ·	or delivered to street address)	on/suite	,		
╡	al return	PO BOX 5910			609-452	-0990	
╡	minated	City or town, state or country, and ZIP + 4					
Ame	ended retu		NJ	08543-5	910 G Gross	receipts \$	41,0
App	lication per	- 1			H(a) Is this a group		es? Yes X
		Deirdre A Simon 15 Roszel Road,	PO Box 5910, Princeton, N	<u>IJ 08540</u>	H(b) Are all affiliates	s included?	Yes
Tax-	exempt sta	us X 501(c)(3) 501(c) () <	【 (insert no) 4947(a)(1) or	527	If "No," attach	a list (see instru	ictions)
Wel	bsite: >	none			H(c) Group exempti	on number >	
	n of organia		ation Other ►				of legal domicile r
			audit other >	12 160	r of formation 199	95 In State	of legal domicile [
Par		Summary		0			
		fly describe the organization's mission o			nized & operate	d for chanta	ble and
		cational purposes, and its primary purpo					
Activities & Governance		stance to educational institutions located					
erii		port American Education overseas, by p					
હું		ck this box 🕨 if the organization discont		of more tha	n 25% of its net ass	1 1	
<u>«</u> ق		nber of voting members of the governing			•	3	
ties		nber of independent voting members of t				4	
<u> </u>		al number of individuals employed in cale	- · · · · · · · · · · · · · · · · · · ·	ne 2a)		5	
۲		al number of volunteers (estimate if nece				6	<u> </u>
		al unrelated business revenue from Part	· · ·		•	7a	
_	b Ne	unrelated business taxable income from	Form 990-T, line 34.			7b	
					Prior Year		Current Year
<u>م</u> ا		tributions and grants (Part VIII, line 1h)				192,642	22,4
Φ		gram service revenue (Part VIII, line 2g)				9,750	11,
<u>ۇ</u> 1		estment income (Part VIII, column (A), lir	•			33,269	29,
1		er revenue (Part VIII, column (A), lines 5	The state of the s			26,336	-22,
		ıl revenue—add lines 8 through 11 (must equ		12)		261,997	41,
		nts and similar amounts paid (Part IX, co			•	182,689	33,
- 1		efits paid to or for members (Part IX, col		·		0	
္က 1		ries, other compensation, employee benefits		-10)		0	
ž 1		fessional fundraising fees (Part IX, colun				0	
Expenses 1	b Tot	al fundraising expenses (Part IX, column	(D), line 25).	0	`		
1	1 7 Oth	er expenses (Part IX, column (A), lines 1	14-11d, 13年24年、17.00			33,879	34,
	8 Tot	al expenses Add lines 13–17 (must equa	al Pant IX, column (A), line	25) ;;		216,568	68,
	1 9 Re	enue less expenses Subtract line 18 fro	m ကြုံ 12 _{မြေ} ဂ ာ ၁ <u>၇</u> ၂၇	1011		45,429	-27,
s or			ALK P 0 5015	RS	Beginning of Curr		End of Year
انشق		al assets (Part X, line 16)			1,	109,463	1,082,4
2014	21 Tot	al liabilities (Part X, line 26)	OGDEN, U			8,333	8,5
[2		assets or fund balances Subtract line 2	1 from-line-20 .		1,	101,130	1,073,8
Part		Signature Block	····				
nder p	enalties of	perjury, I declare that I have examined this return, not correct, and complete. Declaration of pregarer (other	cluding accompanying schedules ar	nd statemen	ts, and to the best of	my knowledge	
	ei, it is ti ti	O LA O A A	Mon	nation of Will	on preparer rias any		1/2
Sign		Signature of officer			Dat		012
lere		. •			Dat	· /	
		Deirdre A Simon - Treasure					
	!	Type or print name and title Print/Type preparer's name	Preparer's signature		Date		PTIN
aid		гний туре ріерагег з патпе	Frehalei 2 signature		Date	Check	if PIIN
	2505					self-employed	3
repa		Firm's name			Firm's EIN	>	<u>.</u>
Jse (Only					-	······································
	.=	Firm's address			Phone no		
/lay th	ne IRS d	scuss this return with the preparer show	n above? (see instructions)) .	•		Yes
or Pa	perwork	Reduction Act Notice, see the separate ins	structions.				Form 990 (2

Form 9	90 (2011)	Friends of Shanghai American School Foundation	52-1957233	Page 2
Pa	rt III	Statement of Program Service Accomplishments		
		`Check if Schedule O contains a response to any question in this Part III.		
1	Briefly c	lescribe the organization's mission:		
·	To furni	sh financial and administrative aid and support educational programs to ations located in the U.S. and abroad.		
2	the prio	organization undertake any significant program services during the year which were not listed on r Form 990 or 990-EZ? .	Yes	X No
	If "Yes,	describe these new services on Schedule O		
3	services		Yes	X No
4	Describ expense	describe these changes on Schedule O. e the organization's program service accomplishments for each of its three largest program services. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to received allocations to others, the total expenses, and revenue, if any, for each program service report	port the amount o	-
4a	the USA) (Expenses \$ 33,792 including grants of \$ 33,792) (Revenu financial and other assistance to educational institutions located within and without of Support American Education overseas, by providing textbooks, school supplies and other I support		
4b	(Code) (Expenses \$ 0 including grants of \$ 0) (Revenue		
			-	
		,		
4c	(Code) (Expenses \$ 0 including grants of \$ 0) (Revenue	ue \$	0)
		,		
4d		rogram services (Describe in Schedule O)	0.	
40	(Expens		0)	
4e	i otai p	rogram service expenses 33,792		

Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A S. the organization engage in direct or indirect political campagin activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	Part	V Checklist of Required Schedules			
2 Is the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidate for public office? If "Yes," complete Schedule P. Part I				Yes	No
2 Is the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidate for public office? If "Yes," complete Schedule P. Part I	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 3 Did the organization engage in direct or indicite political camping nativities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II 5 setion 501(c)(3) organizations. Dut the organization engage in losbying activities, or have a section 501(c)(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 5 is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 88-192 If "Yes," complete Schedule C, Part III 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 9 Did the organization report an amount of a state organization, and care the environment, between the complete Schedule D, Part IV. 10 Did the organization's sinesty to through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quase-endowments? If "Yes," complete Schedule D, Part V. 11 Lift be organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V. 12 Did the organization report an amount for mestments—other securities in Part X, line 10 If "Yes," complete Schedule D, Part VIII 13 Did the organization report an amount for mestments—other securities in Part X, line 10 If "Yes," complete Schedule D, Part VIII 14 Did the organiza			1	ĺχ	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If Yes," complete Schedule C, Part II 5 Section 501(c)(3) organizations. Did the organization angage in lobbying activities, or have a section 501(h) effection in effect during the tax year? If Yes," complete Schedule C, Part II 6 Did the organization amounts as defined in Revenue Procedure 98-19? If Yes," complete Schedule C, Part III 7 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If Yes," complete Schedule D, Part II. 8 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If Yes," complete Schedule D, Part II. 9 Did the organization and accounts of works of art, historical treasures, or other similar assets? If Yes," complete Schedule D, Part III 10 Did the organization organization and amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If Yes," complete Schedule D, Part IV 10 Did the organization organization developed in a complete Schedule D, Part V. 11 If the organization in decelly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endownents? If Yes," complete Schedule D, Part V. 11 If the organization organization report an amount for investments—other securities in Part X, line 10 If Yes," complete Schedule D, Part V. 12 Did the organization organization report an amount for investments—other securities in Part X, line 10 It II Yes," complete Schedule D, Part X. 12 Did the organization organization police in Part X, line 16 If Ir Yes," complete Sched	2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		
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7 Dut 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 8 Dut the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II 9 Dut the organization organization amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 12 If the organization is manually for following questions is "Yes," complete Schedule D, Part V 13 If the organization report an amount for line visit in the complete Schedule D, Part V 14 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 V 14 Did the organization report an amount for other liabilities 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 X 15 Did the organization organization or sospilors under Fla (8, ESC April X) 16 Did the organization organization sospilors under Fla (8, ESC April X) 17 Did the organization organization association for the lax organization schedule Schedule D, Part X 18 Did the organization organization association for line 12a, then completing Schedule D, Part X, II and XIII 28 Did the organization organization association for line 12a, th			_		,
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	20a	·		1	
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Par	t IV Checklist of Required Schedules (continued)		-	
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization 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		х
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
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25	24a	ļ	X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		X
ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
	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
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			,,
••	990-EZ? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		x
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
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? <i>If "Yes," complete Schedule M</i>	30	ļ	х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		x
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? <i>If "Yes," complete Schedule R, Part I</i>	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1.	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		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	x	

Form 9	90 (2011) Friends of Shanghai American School Foundation 52-195	7233	F	Page
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a		ō	
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
C	gaming (gambling) winnings to prize winners?	10		
20		1c		┼
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			İ
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0		ļ	-
b	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 (see instructions)		ļ	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		₩
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			ì
	account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.			<u> </u>
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			T
•	organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	- 		 ^
•	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	00		+-
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
а	and services provided to the payor?	7-	l	X
L		7a		├^
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		₩
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			1
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year		14. 1	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		↓
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		↓
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	`	.*	
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring]]		.
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter			:
а	Initiation fees and capital contributions included on Part VIII, line 12 . 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders . 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)	ł /		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? .	12a		1
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			t
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		+
a	Note. See the instructions for additional information the organization must report on Schedule O.	1.54	\vdash	\vdash
L	Enter the amount of reserves the organization is required to maintain by the states in which			
b	the organization is licensed to issue qualified health plans			
_		1		
C	Enter the amount of reserves on hand	44-	<u> </u>	-
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	I	1

		_	-
Рa	rt	VI	

<u>Sect</u>	ion A. Governing Body and Management				
4-	Enter the number of voting members of the government had at the and of the towns	40		Yes	No
та	Enter the number of voting members of the governing body at the end of the tax year .	1a 4	1		1
	If there are material differences in voting rights among members of the governing body, or			100 M	***
	if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		_ ^	 ``	
_	·	4h '		(t()	4
b	Enter the number of voting members included in line 1a, above, who are independent	1b 2	1	* *	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationary other officer, director, trustee, or key employee?	onsnip with			
_	·		2	X	\vdash
3	Did the organization delegate control over management duties customarily performed by or und			1	
	supervision of officers, directors, or trustees, or key employees to a management company or o	•	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 w		4		X
5	Did the organization become aware during the year of a significant diversion of the organization	's assets'?	5		X
6	Did the organization have members or stockholders?		6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect	or appoint	l _		,
	one or more members of the governing body?	•	7a		<u> </u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) memb	ers,	l		١.,
_	stockholders, or persons other than the governing body?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions underta	iken during			
	the year by the following.			<u></u>	لتنا
а	The governing body?		8a	X	├─
b	Each committee with authority to act on behalf of the governing body?		8b	X	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be				
0 4	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule (9	ŀ	<u> </u>
Sect	ion B. Policies (This Section B requests information about policies not required by the li	nternai Revenue C	oae.)	Yes	No
100	Did the organization have local chapters, branches, or affiliates?		10a	162	X
_	If "Yes," did the organization have written policies and procedures governing the activities of such	ch chantors	IUa	<u> </u>	 ^-
b	affiliates, and branches to ensure their operations are consistent with the organization's exempt		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of the copy		11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	ore ming the form.			****
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>		12a	X	7793A
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could	awe rise to conflicts?	12b		\vdash
C	Did the organization regularly and consistently monitor and enforce compliance with the policy?		120	 ^-	
Ŭ	describe in Schedule O how this was done	11 100,	12c	x	
13	Did the organization have a written whistleblower policy?		13	X	\vdash
14	Did the organization have a written document retention and destruction policy?		14	X	
15	Did the process for determining compensation of the following persons include a review and app	oroval by	 		.,
	independent persons, comparability data, and contemporaneous substantiation of the deliberati				
а	The organization's CEO, Executive Director, or top management official .		15a		X
b	Other officers or key employees of the organization .		15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arra	angement			
	with a taxable entity during the year?		16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to ev	aluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to sa		1		
	the organization's exempt status with respect to such arrangements?		16b		
Sect	ion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ▶				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and	990-T (Section 501(c)(3)s	only))
	available for public inspection. Indicate how you made these available. Check all that apply				
	Own website Another's website X Upon request				
19	Describe in Schedule O whether (and if so, how), the organization made its governing document	ts, conflict of interes	t		
	policy, and financial statements available to the public.				
20	State the name, physical address, and telephone number of the person who possesses the boo				
	organization ► International Schools Services, Inc	609-452-09	90		
	15 Roszel Road, Princeton, NJ 08540				

Form 990 (2011) Friends of Shanghai American Sc	hoo! Foundation								52-19572	33 Dags 7
Part VII Compensation of Officers, Direction			ev	Em	plo	vees	s. H	lighest Comp		33 Page /
Employees, and Independent C		, , , ,	,		P	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	gp		
Check if Schedule O contains a re		/ que	stic	n II	า th	is Pa	ırt \	/II .		. 🔲
Section A. Officers, Directors, Trustees, Key E	Employees, and	d Hig	hes	t C	om	pens	ateo	Employees		
1a Complete this table for all persons required to be organization's tax year	e listed Report	comp	ens	atıo	n fo	r the	cal	endar year endı	ng with or within	the
 List all of the organization's current officers, of compensation. Enter -0- in columns (D), (E), and List all of the organization's current key empl List the organization's five current highest co who received reportable compensation (Box 5 of Foorganization and any related organizations 	(F) if no compe loyees, if any. S impensated emp	nsati ee in oloye	on v stru es (vas ctio othe	pai ns f er th	d or de nan a	finit n of	ion of "key emp ficer, director, tr	loyee." rustee, or key en	nployee)
 List all of the organization's former officers, k \$100,000 of reportable compensation from the organization is former directors organization, more than \$10,000 of reportable compensated employees, and former such persons 	onization and an or trustees that bensation from t es or directors, in	y rela at rec he or	ited eive gan	org ed, i nizat	ania n th aion	zation e cap and a	is aci any	ty as a former d related organiza	irector or trustee ations.	
X Check this box if neither the organization nor as	ny related organ	ızatıc	on c	omp	en	sated	an	y current officer,	, director, or trus	tee
(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	box.	untes er an	Pos neck ss pe	rson	than the book Highest compensated employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) David Liu President	5 00	x		x				0	0	0
(2) Roger G. Hove Secretary	5.00	х		х				0	0	0
(3) Deirdre A Simon Treasurer	5.00	х		x				0	0	
(4) Kerry Jacobson Director	5 00	х						0	0	0
(5)										
(6)										
.(7)										
1								1		

P	art VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee	s, a	nd	High	est	Compensated	Employees (co	ntinue	d)	
	(C) Position												
	(A) Name and title	(A) (B) (do not check more than one (D) (E)							(E) Reportable	F	(F) timated	1	
	hours per officer and a director/trustee) compensation compensation							compensation from related	an	nount o			
		(describe	Individual to	Institutional trustee	Officer	Key e	Highe	Former	the	organizations	com	pensat	on
		hours for related	ector	utiona	er	mplc	st co	¤	organization (W-2/1099-MISC)	(W-2/1099-MISC)	org	om the	
		organizations in Schedule	truste	trug		уее	mper					relate inizatio	
		O)	ď	itee			Highest compensated employee						
<u>(15)</u>		II											
<u>(16)</u>													
(17)													
<u>(18)</u>													
<u>(19)</u>					-								
(20)													
(21)												-	
(22)			-										
(23)													
(24)													
(25)													
1b							•	▶	0	 	_		0
G	Total from continuation sheets to Part VII, 5 Total (add lines 1b and 1c)			•	٠			. >	0	0	_		<u>0</u> 0
	Total number of individuals (including but not	limited to those) wl	ho re		ed more than \$	<u></u>	L		
	reportable compensation from the organizatio				0								
3	Did the organization list any former officer, di	rector or truster	a ka	v en	nnlo	WAA	ork	nah	act companeate	ad.			No
J	employee on line 1a? If "Yes," complete Sche						, UI I	ngii	est compensate		3		X
4	For any individual listed on line 1a, is the sum												,
	the organization and related organizations gre	eater than \$150,	,000?	If "	Yes	, " C	ompl	ete	Schedule J for	such			X
5	Did any person listed on line 1a receive or acc	crue compensal	tion fi	mor	anı	un	relate	ed o	organization or ii	ndividual	4	\dashv	^
J	for services rendered to the organization? If "									·	5	·	Х
	tion B. Independent Contractors												
1	Complete this table for your five highest comp compensation from the organization Report of year										n's tax	¢	
	(A) Name and business add	ress							(B) Description of ser	rvices ((C) Compen		
													0
													0
								\vdash					<u>0</u> 0
													0
2	Total number of independent contractors (incl	-	nited	to t	hos	e lis	sted a	abo	ve) who receive	d			
	more than \$100,000 of compensation from the	e organization								1	Form	990 (. : 2011)

Form 990 (2011) Friends of Shanghai American School Foundation 52-1957233 Part VIII **Statement of Revenue** (B) (A) (C) (D) Total revenue Unrelated Related or Revenue exempt business excluded from function revenue tax under sections revenue 512, 513, or 514 Contributions, Gifts, Grants and Other Similar Amounts 1a Federated campaigns 1a 0 **b** Membership dues 1b 0 c Fundraising events 1c 1d 0 d Related organizations. e Government grants (contributions) . . 1e f All other contributions, gifts, grants, and similar amounts not included above 1f Noncash contributions included in lines 1a-1f h Total. Add lines 1a-1f 22,451 **Business Code** Program Service Revenue 2a Educational Services 611710 11,552 0 0 f All other program service revenue 11,552 Total. Add lines 2a-2f \triangleright Investment income (including dividends, interest, and 3 other similar amounts) . . 29,529 29,529 Income from investment of tax-exempt bond proceeds . 0 5 Royalties . (ı) Real (II) Personal 6a Gross rents b Less rental expenses 0 Rental income or (loss) d Net rental income or (loss). (i) Securities (II) Other 7a Gross amount from sales of assets other than inventory 0 0 b Less: cost or other basis and sales expenses 0 **c** Gain or (loss) 0 Net gain or (loss). Other Revenue 8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 **b** Less direct expenses 0 ▶ c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19. 0 **b** Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances 0 b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11a Unrealized LOSS -22,498 -22,498 ol d All other revenue . . . -22,498 Total. Add lines 11a-11d

Total revenue. See instructions .

41,034

7.031

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).	

	Check if Schedule O contains a response to any	question in this Pa	rt IX .		
	not include amounts reported on lines 6b, 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 United States See Part IV, line 21	0			
2	Grants and other assistance to individuals in the				
	United States See Part IV, line 22	0			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	33,792	33,792		The same of
4	Benefits paid to or for members				1 12
5	Compensation of current officers, directors,				
	trustees, and key employees	0			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and		1		
	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages .	0			
8	Pension plan accruals and contributions (include		1		
	section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	0			
10	Payroll taxes	0			
11	Fees for services (non-employees)				
а	Management	12,698		12,698	
b	Legal	309		309	
С	Accounting	7,700		7,700	
d	Lobbying	0			
е	Professional fundraising services See Part IV, line 17.		«· ^ *		
f	Investment management fees	11,699		11,699	
g	Other	0			
12	Advertising and promotion .	0			
13	Office expenses	1,178		1,178	
14	Information technology	0		······································	
15	Royalties	0			
16	Occupancy	0			
17	Travel	0			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0	0	<u></u>	
22 23	Depreciation, depletion, and amortization insurance	908		908	0
23 24	Other expenses Itemize expenses not covered	300		300	
24	above (List miscellaneous expenses in line 24e If	.5			
	line 24e amount exceeds 10% of line 25, column				•
	(A) amount, list line 24e expenses on Schedule O)	<u>.</u>	`		ъ.
а		Ô			
b		0			
C		0			
d		0			
e	All other expenses	0			
25	Total functional expenses. Add lines 1 through 24e	68,284	33,792	34,492	0
26	Joint costs. Complete this line only if the	33,201	33,.02		<u> </u>
-•	organization reported in column (B) joint costs		1		
	from a combined educational campaign and				
	fundraising solicitation Check here If		ļ		
	following SOP 98-2 (ASC 958-720)				

Part X **Balance Sheet** (B) (A) End of year Beginning of year 1 Cash---non-interest-bearing 1.109.009 2 1.082.009 2 Savings and temporary cash investments . . . 3 Pledges and grants receivable, net 0 3 0 4 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) . . . 6 0 7 7 Notes and loans receivable, net . . . 8 8 Inventories for sale or use . Prepaid expenses and deferred charges 454 9 454 9 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10c Less accumulated depreciation . 10b ol 0 11 Investments—publicly traded securities 11 ol 12 0 12 Investments—other securities See Part IV, line 11 ol 13 0 13 Investments—program-related See Part IV, line 11 ol 0 14 14 Intangible assets ol 15 0 15 Other assets See Part IV, line 11. Total assets. Add lines 1 through 15 (must equal line 34) 1,109,463 16 1,082,463 16 8.333l 17 17 Accounts payable and accrued expenses 8,583 Grants payable . . . 18 18 19 Deferred revenue. 19 20 Tax-exempt bond liabilities. 20 Escrow or custodial account liability. Complete Part IV of Schedule D . . . 21 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 persons. Complete Part II of Schedule L . 23 Secured mortgages and notes payable to unrelated third parties 0 23 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete 25 Part X of Schedule D . . . 8.333 8.583 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ► X and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 172,569 27 123,436 Unrestricted net assets . . 228,561 28 250,444 28 Temporarily restricted net assets 700,000 29 700,000 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 1,101,130 33 1,073,880 Total net assets or fund balances 33 1,109,463 Total liabilities and net assets/fund balances 1,082,463

Form 9	90 (2011) Friends of Shanghai American School Foundation	52-19	957233	Pag	ge 12
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI.			[<u></u>
	1				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			,034
2	Total expenses (must equal Part IX, column (A), line 25)	2			,284
3	Revenue less expenses. Subtract line 2 from line 1	3		<u>-27</u>	,250
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		<u>1,101</u>	,130
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,				
	column (B))	6		1,073	3,880
Part	XII Financial Statements and Reporting			ſ	_
	Check if Schedule O contains a response to any question in this Part XII			[
				Yes	No
1	Accounting method used to prepare the Form 990:			,]	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		- [٠ ا	
	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		X
	If the organization changed either its oversight process or selection process during the tax year, explain in			1	- 1
	Schedule O				
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 separate basis, consolidated basis, or both				
	X Separate basis Consolidated basis Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2011)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► See separate instructions.

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. Name of the organization Employer identification number Friends of Shanghai American School Foundation 52-1957233 Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is. (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 4 hospital's name, city, and state. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross q 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a | Type I b | Type II c | Type III–Functionally integrated Type III-Other 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). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11g(i) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) (ii) EIN (iii) Type of organization (iv) Is the organization (i) Name of supported (v) Did you notify (vi) Is the (vii) Amount of (described on lines 1-9) in col. (i) listed in your organization in col organization the organization in support above or IRC section governing document? col (i) of your (i) organized in the (see instructions)) support? Yes Yes Yes (A) 0 (B) 0 (C) 0 (D) (E) 0

instructions

Par	Support Schedule for Organizat (Complete only if you checked the	box o	n line 5	, 7, or 8	of Pa	ort I or if the	organization fa	alled to qualify	
	Part III If the organization fails to	qualify	under	the test	s liste	d below, ple	ease complete	Part III.)	
	ion A. Public Support							, ,	
Cale	ndar year (or fiscal year beginning in)	(a)	2007	(b) 20	308	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")		17,770		0	164,0	96 192,642	22,451	396,959
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						i		0
3	The value of services or facilities furnished by a governmental unit to the organization without charge								0
4	Total. Add lines 1 through 3.		17,770		0	164,09	96 192,642	22,451	396,959
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization)	٤2			, , , , , , , , , , , , , , , , , , , ,	· 🐞	`		СОСДОС
	of the amount shown on line 11, column (f)	1/100 m			2.21 1	> / 授養	(A)		
6	Public support. Subtract line 5 from line 4		Ĭ.	+347	4980r 4988	, , , , , , , , , , , , , , , , , , ,	/ %		396,959
Sect	ion B. Total Support								
Cale	ndar year (or fiscal year beginning in)	(a)	2007	(b) 20	800	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4 .		17,770		0	164,09	96 192,642	22,451	396,959
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar								
9	sources Net income from unrelated business		52,975	-2	6,425	79,43	33,269	29,529	168,785
	activities, whether or not the business is								0
10	regularly carried on								0
11	Total support. Add lines 7 through 10		3	41	14%	****			0 565,744
12	Gross receipts from related activities, etc. (s	see ins	tructions	3	ı			12	303,144
13	First five years. If the Form 990 is for the o organization, check this box and stop here			•	nd, thi		fifth tax year as	a section 501(c)(3)
Sect	ion C. Computation of Public Support	Perce	entage						
14 15	Public support percentage for 2011 (line 6, or Public support percentage from 2010 Sched	dule A,	Part II, I	ine 14 .				14 15	70.17% 67 93%
16a b	33 1/3% support test—2011. If the organization qualifies at 33 1/3% support test—2010. If the organization qualifies at 33 1/3% support test—2010.	s a put	olicly sup	ported o	organız	ation .			. ▶ 🛚
	box and stop here. The organization qualifie						.,		▶□
17a	10%-facts-and-circumstances test—2011 is 10% or more, and if the organization mee Part IV how the organization meets the "factorganization	ets the ' ts-and-	"facts-ar circums	id-circun tances" (nstanc test Ti	es" test, che ne organizat	ck this box and some ion qualifies as a	stop here. Expl a publicly suppo	ain in rted ▶
b	10%-facts-and-circumstances test—2010 15 is 10% or more, and if the organization in Part IV how the organization meets the "fact supported organization"	neets tl	he "facts	-and-cir	cumsta	ances" test, (check this box ai	nd stop here . E	
18	Private foundation. If the organization did	not che	ck a box	c on line	13, 16	a. 16b. 17a.	or 17b, check th	ns box and see	

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II)

Sec	tion A. Public Support	······································					
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
		(0)	(1)		(3.7 = 3.1.2		(-)
1	Gifts, grants, contributions, and membership fees						•
	received (Do not include any "unusual grants ")						0
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished						
	in any activity that is related to the						•
_	organization's tax-exempt purpose						0
3	Gross receipts from activities that are not an unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
	its behalf			_			0
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						0
6	Total. Add lines 1 through 5	0	0	0	0	0	0
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						0
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						0
С	Add lines 7a and 7b	0	0	0		0	0
8	Public support (Subtract line 7c from				alikanyai	10 0 Can 5 5	_
	line 6)	- 1 7 A A A (188)	The state of the s	· · · · · · · · · · · · · · · · · · ·		Read of the second	0
	tion B. Total Support				1	, ,	
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	l o	o	l o	l o	l ol	0
10a	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar sources						0
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						0
С	Add lines 10a and 10b .	0	0	0	0	0	0
11	Net income from unrelated business						
	activities not included in line 10b, whether	Ì					
	or not the business is regularly carried on	1					0
12	Other income Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV)						0
13	Total support. (Add lines 9, 10c, 11,						
	and 12)	0	0	0	0	0	0
14	First five years. If the Form 990 is for the organization	ation's first, seco	nd, third, fourth,	or fifth tax year a	is a section 501(c)(3)	
	organization, check this box and stop here						▶∟
Sec	tion C. Computation of Public Support	Percentage					
15	Public support percentage for 2011 (line 8, column	(f) divided by lin	e 13, column (f)))		15	0.00%
16	Public support percentage from 2010 Schedule A,	Part III, line 15		<u></u>		16	0.00%
Sec	tion D. Computation of Investment Inco	ome Percenta	age				
17	Investment income percentage for 2011 (line 10c,	column (f) divide	d by line 13, colu	umn (f))		17	0.00%
18	Investment income percentage from 2010 Schedu					18	0 00%
19a	33 1/3% support tests—2011. If the organization			and line 15 is me	ore than 33 1/3%	, and line 17 is	
	not more than 33 1/3%, check this box and stop h						▶ [
b	33 1/3% support tests—2010. If the organization	did not check a t	oox on line 14 or	line 19a, and line	e 16 is more thai	n 33 1/3%, and	
	line 18 is not more than 33 1/3%, check this box a						▶ 🔙
20	Private foundation of the organization did not che		44 40 405	-1			

	990 or 990-EZ) 2011	Friends of Sha	anghai Americar	School Foundation	on	52-1957233	Page 4
Part IV	· Supplemental				e explanations required	d by Part II, line 1	
•	Part II, line 17a instructions)	or 17b; and Pa	art III, line 12. A	Also complete this	s part for any additiona	al information. (Se	эе
	matractions)		·				
					-		
			·		•		

SCHEDULE D (Form 990)·

Supplemental Financial Statements

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Employer identification number

	ds of Shanghai American School Foundation		52-1957233				
Par	Organizations Maintaining Done	or Advised Funds or Other Similar Fu	unds or Accounts. Complete if				
	the organization answered "Yes" to	o Form 990, Part IV, line 6					
		(a) Donor advised funds	(b) Funds and other accounts				
1	Total number at end of year						
2	Aggregate contributions to (during year)						
3	Aggregate grants from (during year)						
4	Aggregate value at end of year .						
5	Did the organization inform all donors and d	onor advisors in writing that the assets held	d in donor advised				
	funds are the organization's property, subject	ct to the organization's exclusive legal conti	rol? L Yes No				
6	Did the organization inform all grantees, do						
	used only for charitable purposes and not for	or the benefit of the donor or donor advisor,	or for any other				
	purpose conferring impermissible private be	nefit?	Yes Mo				
Par	Conservation Easements. Comp	olete if the organization answered "Yes"	to Form 990, Part IV, line 7.				
1	Purpose(s) of conservation easements held						
•	Preservation of land for public use (e.g., recr	·	of an historically important land area				
			· ·				
	Protection of natural habitat	Preservation	of a certified historic structure				
	Preservation of open space						
2	Complete lines 2a through 2d if the organiza	ation held a qualified conservation contribut	tion in the form of a conservation				
	easement on the last day of the tax year		***X. ***/				
			Held at the End of the Tax Year				
a	Total number of conservation easements	•	2a				
b	Total acreage restricted by conservation ear		2b				
C	Number of conservation easements on a ce	· · ·	. 2c				
d							
_							
3							
	during the tax year						
4 5	' ' ' ' '						
5	violations, and enforcement of the conserva		Yes No				
6	Staff and volunteer hours devoted to monitor						
•	b	mily, mapeding, and emorang conservation	in casements during the year				
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation eas	sements during the year				
•	▶ \$	moposing, and omersing concernation out	Joine Lanning was your				
8	Does each conservation easement reported	on line 2(d) above satisfy the requirements	s of section				
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?		. Yes No				
9	In Part XIV, describe how the organization r	eports conservation easements in its reven	ue and expense statement, and				
	balance sheet, and include, if applicable, the						
	the organization's accounting for conservation	on easements					
Part		ons of Art, Historical Treasures, or Other	r Similar Assets.				
	Complete if the organization answere	d "Yes" to Form 990, Part IV, line 8					
1a	If the organization elected, as permitted und	ler SFAS 116 (ASC 958), not to report in its	revenue statement and balance sheet				
	works of art, historical treasures, or other sil	, , , , , , , , , , , , , , , , , , , ,					
	of public service, provide, in Part XIV, the te	xt of the footnote to its financial statements	that describes these items				
b	If the organization elected, as permitted und						
	works of art, historical treasures, or other sil						
	of public service, provide the following amou						
	(i) Revenues included in Form 990, Part VII	-	. • \$				
	(ii) Assets included in Form 990, Part X		. \$				
2	If the organization received or held works of	art, historical treasures, or other similar as	sets for financial gain, provide the				
	following amounts required to be reported u	nder SFAS 116 (ASC 958) relating to these	e items.				
а	Revenues included in Form 990, Part VIII, li	ne 1	. ▶ \$				
h	Assets included in Form 990, Part X		▶ \$				

Par	Organizations Maintaining	Collections of Ar	t Histor	ical Trea	asures or (Other S	Similar Assets	(contin	ued)	raye A
3	Using the organization's acquisition, a							•	uou	
•	use of its collection items (check all the		1 1000103	, criccit a	ing of the lone	Jwing ti	iat are a signific	J1110		
а	Public exhibition	iat apply)	dП	Loan	or exchange	orogran	ms			
b	Scholarly research		e H	Other	-	p. 03. c.				
c	Preservation for future generation	ons	٠ ـــ	0						
4	Provide a description of the organizat		d evolain	how they	further the o	rnaniza	ation's everant n	ITDOSE II	n	
•	Part XIV.					_		iipose ii	'	
5	During the year, did the organization assets to be sold to raise funds rathe							Y	es 🗌	No
Part	Escrow and Custodial Arra IV, line 9, or reported an am	_	•	_	ization ansv	vered "	'Yes" to Form 9	90, Pa	ırt	
	Is the organization an agent, trustee,				ntributions oi	r other a	assets not			
	included on Form 990, Part X?			•				Y	es	No
b	If "Yes," explain the arrangement in F	art XIV and comple	te the fol	lowing tal	ble					•
								Mount		
С	Beginning balance			•		1c	:			(
d	Additions during the year					1d	ı			
е	Distributions during the year					1e				
f	Ending balance .	•				1f	·			
2a	Did the organization include an amou	nt on Form 990, Pa	rt X, line	21?				Y	es X	No
b	If "Yes," explain the arrangement in P									
Part	V Endowment Funds. Compl		tion ans	wered "\						
		(a) Current year	(b) Prid		(c) Two years		(d) Three years back	(e) Fo	our years	back
1a	Beginning of year balance	0		0		이	· · · · · · · · · · · · · · · · · · ·	****	1. 4.6.48	Jan Ari
b	Contributions							100		
С	Net investment earnings, gains,									
	and losses							17.00		
d	Grants or scholarships							/ ADV 33		
е	Other expenditures for facilities									
	and programs									
'	End of year balance	0		0		0		U 23.00	W Comme	200 M
g 2	Provide the estimated percentage of	the current year end	t balance		column (a)) l			0 3 *3	62. 64. 6# A.	willows er the f
a	Board designated or quasi-endowme		% Salario	(iiiio ig,	001011111 (0)) 1	noid do				
b	Permanent endowment	%								
c	Temporarily restricted endowment	> %								
	The percentages in lines 2a, 2b, and		0%							
3a	Are there endowment funds not in the			ion that a	are held and a	adminis	stered for the			
	organization by		_						Yes	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations .							3a(ii)		
b	If "Yes" to 3a(II), are the related organ							3b		
4	Describe in Part XIV the intended use									
Part	VI Land, Buildings, and Equi	pment. See Form	990, Pa	rt X, line	10					
	Description of property	(a) Cost or oth (investm			ost or other is (other)	٠,	Accumulated epreciation	(d) B	ook valu	ie
1a	Land		0		0					(
b	Buildings		0		0		0			(
С	Leasehold improvements		0		0		0			(
d	Equipment .		0		0		0			(
<u>e</u>	Other .		0	· -	0		0			(
Tota	I. Add lines 1a through 1e. (Column (d.) must equal Form 9	990. Part	X. columi	n (B), line 10	(c))	▶			(

Part VII Investments—Other Securities	es. See Form 990, Part X,	line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives	0	
(2) Closely-held equity interests .	0	
(3) Other	0	
<u>(Α)</u>	0	
(B)	0	
(C)	0	
(D)	0	
(Ε)	0	
(F)	0	
(G)	0	
(H)	0	
(1)	0	
Total (Column (b) must equal Form 990, Part X, col (B) line 12)	0	() i (i)
Part VIII Investments—Program Relat	ed. See Form 990, Part X	, line 13
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)	0	
(2)	0	<u></u>
(3)	0	
(4)	0	
(5)	0	
(6)	0	
(7)	0	
(8)	0	
(9)	0	
(10)	0	A COUNTY CONTRACTOR
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	0	にい 分類対象機能
Part IX Other Assets. See Form 990,		
	a) Description	(b) Book value
(1)		0
(2)		0
(3)		0
(4)		0
(5)		0
(6)		0
(7)		0
(8)		0
(10)		0
Total. (Column (b) must equal Form 990, Part X, o	col. (B) line 15.)	▶ 0
Part X Other Liabilities. See Form 99		
(a) Description of liability	(b) Book value	
(1) Federal income taxes	0	~
(2)	0	
(3)	0	
(4)	0	
(5)	0	
(6)	0	
(7)	0	
(8)	0	, N. 19.
(9)	0	
(10)	0	
(11)	0	
Total (Column (b) must equal Form 990, Part X, col (B) line 25)	0	3 4 3 4

Sched	ule D (Form 990) 2011				Page 4
Par	Reconciliation of Change in Net Assets from Form 990 to A	Audit	ed Financial S	Stateme	nts
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	41,034
2	Total expenses (Form 990, Part IX, column (A), line 25) .			2	68,284
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	-27,250
4	Net unrealized gains (losses) on investments			4	
5	Donated services and use of facilities			5	
6	Investment expenses			6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV)			8	
9	Total adjustments (net) Add lines 4 through 8			9	0
10	Excess or (deficit) for the year per audited financial statements Combine lines		19	10	-27,250
Par				er Retu	
1	Total revenue, gains, and other support per audited financial statements .			1	41,034
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a	l		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV.)	2d			
e	Add lines 2a through 2d			2e	- o
3	Subtract line 2e from line 1			3	41,034
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	i	1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
С	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	41,034
Par	Reconciliation of Expenses per Audited Financial Stateme		Vith Expenses	per Re	
1	Total expenses and losses per audited financial statements			1	68,284
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIV.)	2d			
е	Add lines 2a through 2d			2e	- O
3	Subtract line 2e from line 1			3	68,284
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b			
С	Add lines 4a and 4b			4c	- O
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	68,284
Par	XIV Supplemental Information				
and :	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b; and Part art to provide any additional information	t XIII,	lines 2d and 4b	Also co	mplete
. 					

Friends of Shanghai American School Foundation 52-1957233 Schedule D (Form 990) 2011 Page 5 Supplemental Information (continued)

Schedule F (Form 990)

Statement of Activities Outside the United States

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

► Attach to Form 990. ► See separa

► See separate instructions.

2011
Open to Public Inspection

OMB No 1545-0047

Name of the organization

Department of the Treasury

Employer identification number

Friends of Shanghai Americ	an School Found	dation			52-1957233
	ormation on A		ide the United States. Co	omplete if the organization	n answered
1 For grantmakers. Do	es the organizat	ion maintain red the grants or as	cords to substantiate the am		er X Yes No
assistance outside the	United States		s procedures for monitoring		other
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	can be duplicated if addition (d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
East Asia and the (1) Pacific	0	0	program services	Educational Support	33,792
(2)	0	0			
(3)	0	0			
(4)	0	0			
(5)	0	0			
(6)	0	0			
(7)	0	0			C
(8)	0	0			C
(9)	0	0			
(10)	0	0			
(11)	0	0			C
(12)	0	0			
(13)	0	0			
(14)	0	0			
(15)	0	0			
(16)	0	0			
(17) 3a Sub-total	0	0	, "(₄ 8 m)		33,792
b Total from continuation sheets to Part I.	0	0		-	(

c Totals (add lines 3a and 3b)

Page 2

Friends of Shanghai American School Foundation Schedule F (Form 990) 2011

Part II Grant Part I' Part I	ts and Other As V, line 15, for an I can be duplicat	Grants and Other Assistance to Organizations or I Part IV, line 15, for any recipient who received more the Part II can be duplicated if additional space is needed	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 ► □ Part II can be duplicated if additional space is needed	Outside the Unit O Check this boy	ed States. Complete c if no one recipient i	e if the organizati received more th	on answered "Yes" to an \$5,000	5 Form 990, • ▼
1 (a) Name of organization	(f 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	(i) Method of valuation (book, FMV, appraisal, other)
(1)		East Asia and the Pacific	K-12 Education / American Education	33,792 wire	wire	0		
(2)				0		0		
(3)				0		0		
(4)				0		0		
(5)	, * · · · · · · · · · · · · · · · · · ·			0		0		
(9)				0		0		
× .(2): *	, '*;	-		0		0		
(8) *****				0		0		
(e)				0		0		
(10)	***************************************			0		0		
(11)				0		0		
(12)				0		0		
(13)				0		0		
(14)				0		0		
(15)				0		0		
(16)				0		0		

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

Enter total number of other organizations or entities.

Schedule F (Form 990) 2011

Friends of Shanghaı American School Foundation Schedule F (Form 990) 2011

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, kne 16. Part III can be duplicated if additional space is needed. Part III

(a) Type of grant or assistance	grant or assistance (b) Region (c) Nureco	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)		0	0		0		
(2)		0	0		0		
(3)		0	0		0		:
(4)		0	0		0		
(5)		0	0		0		
(9)		0	0		0		
(2)		0	0		0		
(8)		0	0		0		
(6)		0	0		0		
(10)		0	0		0		
(11)		0	0		0		
(12)		0	0		0		
(13)		0	0		0		
(14)		0	0		0		
(15)		0	0		0		
(16)		0	0		0		
(17)		0	0		0		
(18)		0	0		0		
						Sched	Schedule F (Form 990) 2011

Schedule F (Form 990) 2011

Part	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926).	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No

Schedule F (Form 990) 2011

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service Name of the organization

Supplemental Information to Form 990 or 990-EZ

Employer identification number

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

Attach to Form 990 or 990-EZ.

Open to Public Inspection

OMB No 1545-0047

Friends of Shanghai American School Foundation	52-1957233
Form 990 Part VI Section B Line 11a Copies of the Form 990 are sent to all board	members for
review before the Form 990 is submitted to the IRS	
Form 990 Part VI Section B Line 12c The corporate conflict of interest policy is rev	lewed
annually and signed annually by all board members	
Form 990 Part VI Section C Line 19 Corporate documents and tax forms are kept	at 15 Roszel
Road, Princeton, NJ 08540 and are avilable to the public upon request	
	··