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Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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	<u>A</u> _	For the	2011 cale		9/30	, 20 12			
	В	Check If	applicable:	C Name of organization PROFESSIONAL & EDUCATIONAL SERVICES INTERNATIONAL I	D Emplo	yer identification number			
		Address	change	Doing Business As	Ī	95-4209483			
		Name ch	ange	Number and street (or P.O. box if mail is not delivered to street address) Room/suite	E Telephone number				
		Initial retu	raun .	555 Clyde Avenue Suite 120	1	650-988-6818			
		Terminat	ed	City or town, state or country, and ZIP + 4					
	$\overline{\Box}$	Amended		Mountain View, CA 94043	G Gross	receipts \$ 596,558			
	Ħ.		on pending			tor attilizates? Yes 4 No			
	_	, фриоци	on pending			included? Yes No			
	_	Toy ovor	npt status:			a list. (see instructions)			
	一	Website				,			
	K					n number >			
		art I	Summ		M Stati	e of legal domicile: CA			
		_		escribe the organization's mission or most significant activities: International Edu		the Euchann and			
		'			cauon, Cu	iturai Exchange and			
	8		Profession	onal Services in China and Central Asia.	· • • • • • • • • • • • • • • • • • • •				

	ě		Obsel: 45	is han b \(\sum \text{ \ \text{ \ \text{ \	- 0504				
	é			his box I if the organization discontinued its operations or disposed of more that		its net assets.			
	æ			of voting members of the governing body (Part VI, line 1a)	<u> </u>	4			
	Fee Hees	E .		of independent voting members of the governing body (Part VI, line 1b)	. 4	4			
	Activities & Governance	L		mber of individuals employed in calendar year 2011 (Part V, line 2a)	5	3			
3	Ac	1		mber of volunteers (estimate if necessary)	6	30			
2013				related business revenue from Part VIII, column (C), line 12	. <u>7a</u>	0			
		Ь	Net unre	lated business taxable income from Form 990-T, line 34	. 7b	0			
		_		/ear	Current Year				
e	9	h		tions and grants (Part VIII, line 1h)	709,438	577,731			
JUN	Revenue	r .	_	service revenue (Part VIII, line 2g)	0	0			
	<u>£</u>			ent income (Part VIII, column (A), lines 3, 4, and 7d)	44,390	18,827			
10	_	11	Other rev	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0			
SCANNED				enue-add lines 8 through 1 (rpust equal Part VIII, column (A), line 12)	753,828	596,558			
考				nd similar amounts pald (Part-IX, column (A), lines 1-3)	98,983	117,969			
1		14	Benefits	paid to or for members (Part IX, column(A), line 4)	0	0			
3	8	15	Salaries,	other compensation, employee benefits (Part IX) column (A), lines 5-10)	182,275	192,341			
S	Expenses			onal fundraising fees (Part IX, column (A), line 11e)	0	0			
	×			draising expenses (Part.IX, cqlumin (D), line 25) ▶ 0					
	ш			penses (Part IX, column (A), lines 11a-110, 11f-24e)	334,212	282,840			
				penses. Add lines 13=17 (must equal Part IX, column (A), line 25) .	615,470	593,150			
		,	Revenue	less expenses. Subtract line 18 from line 12	138,358				
	5 g			Beginning of C	zurrent Year	End of Year			
	Assets of Balance	20		sets (Part X, line 16)	4,072,499	4,075,886			
	독를			pliities (Part X, line 26)	62				
	캺			ts or fund balances. Subtract line 21 from line 20	4,072,437	4,075,845			
		art II		ture Block					
	Un	der penal	ties of perju	iry, I declare that I have examined this return, including accompanying schedules and statements, and to lete. Declaration of preparer (other than officer) is based on all information of which preparer has any knor	the best of	my knowledge and belief, it is			
			, and comp	ted. Documental preparer (other trial officer) is based on an unior fraction of which preparer has any who	wieuge.				
	e:								
	Sig		1 .	$^{\circ}$ \cup $^{\circ}$	eate 🗲	(V/13			
	He	re		nneth Chin, President	<u> </u>	3 [13			
				e or print name and title					
	Pa	id	Piulpiy	rpe preparer's name Preparer's signature Date	Check				
	Pr	epare	r		self-en	ployed			
		e Onl	y Firm's r		m's EIN 🕨	 -			
		<u> </u>	Ftrm's 8		one no.				
	_			s this return with the preparer shown above? (see instructions)	<u> </u>	· · · 🗌 Yes 🗌 No			
	For	Paperw	rork Redu	ction Act Notice, see the separate instructions. Cat. No. 11282Y	\cap i	Form 990 (2011)			
					ا ئے)	1			
					υ,				

Form 99	0 (2011)					Page 2
Part		tement of Program Servic				
1	Che	ck if Schedule O contains a	response to any	y question in this Pa	art III	🔲
1	Briefly de	scribe the organization's mis	sion:			· · ·
	Internatio	nal Education, Cultural Excha	nge & Professional	l Service in China & C	entral Asia.	

2					year which were not listed or	the
	•					· Yes • No
		describe these new services				
3			ing, or make sig	inificant changes in	how it conducts, any prog	ıram
	services?	, , , ,		· · · · · · ·		· Yes 4 No
		describe these changes on S				
4					its three largest program sen	
					7(a)(1) trusts are required to	
	grants an	d allocations to others, the to	otal expenses, and	d revenue, if any, for	each program service reporte	ed.
4a	(Code:) (Expenses \$	50,414 includi	ng grants of \$) (Revenue \$	43,914)
	Student L	eadership Program with 10 da	ys cultural exchan	ge, 10 days rural com	munity service and 10 days Ho	ng Kong study tour.

	•					
4b	(Code:) (Expenses \$	46,869 includi	ing grants of \$) (Revenue \$	56,687)
		ıcation Program-Summer Engl	ish camp for rural	Chinese teachers and	students by Vision Team volu	
		· · · · · · · · · · · · · · · · · · ·			for needy students and library	
			und the training of	16 Chinese students	in counseling through the prog	rams of Palo Altos
	Universit	y in Beljing China.		•••••		

					*	

				***************************************	*	

	 :					
4c	(Code:) (Expenses \$) (Revenue \$	220,527)
					young faculty in China to study	
	mentors	in their field; Publications-two	semi-annual journ	als with People's Univ	versity of China and Fudan Univ	ersity; Translation of
	significar	nt works in the Humanities; Co	nferences and sen	ninars for Sino-Americ	can academic and professional	exchange.
		***************************************		*********************		
		***************************************		******		***************************************
			***************************************	*****		

			*****************	*****	•••••	
			***************************************			***************************************
4d		ogram services (Describe in S				
	(Expense		grants of \$	o) (Reven	ue\$ 0)	
مه	Total pro	gram service expenses	354	600		

Part IV

Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	4	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see Instructions)?	2	4	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		4
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		4
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 98-19? If "Yes," complete Schedule C, Part III	5		4
6	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 I	6		4
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		4
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		4
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		4
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	10		4
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	4	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		4
C	Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		4
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		4
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	4	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	111		4
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		4
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		4
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		4
14 a		14a		4
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		4
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV.	15	4	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
.	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		4
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		4
18	Did the organization report more than \$15,000 total of fundralsing event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		4
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		4
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		4
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		

Part	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	4	
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		4
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		4
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	23 24a		4
	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		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		4
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		4
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		4
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? If "Yes," complete Schedule L, Part III	27		4
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		4
С	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		4
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		4
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		4
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		4
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		4
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		4
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		4
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		4
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		4
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		4
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	4	
		Eon	<u>oor</u>	/2011

Part				_
	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 7		163	HU
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			1
	reportable gaming (gambling) winnings to prize winners?	1c		4
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	'-		-
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 3			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	4	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		4
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			
	account)?	4a		4_
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.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		4
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		4
Ç	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			
_	organization solicit any contributions that were not tax deductible?	6a		4
Þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or	_		l
_	gifts were not tax deductible?	6b		<u> </u>
7 a	Organizations that may receive deductible contributions under section 170(c).		-	1
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			
	•	7a		├
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
•	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	76		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		_
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
ň	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.			
a	Did the organization make any taxable distributions under section 4966?	9a		i
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12]		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b]		
11	Section 501(c)(12) organizations. Enter:]
а	Gross income from members or shareholders	4 !		1
þ	Gross income from other sources (Do not net amounts due or paid to other sources			l
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	ļ	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	4 !		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	100	<u> </u>	-
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		-
ь	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which	1 1		
U	Also appendication to December 4s is a construction to take above			
С		4	1	
14a	Enter the amount of reserves on hand	140	 	4
	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14a 14b	 	
~	ree, nee a new a rent lee to topot disso cathering in TV. Diving distangiandidi il Sciedur V .			

Part	, , , , , , , , , , , , , , , , , , , ,										
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S										
Cash	Check if Schedule O contains a response to any question in this Part VI		•	<u>. (1</u>							
Secu	on A. Governing Body and Management			1							
4.0	Enter the asymptom of voting mambers of the asymptom bads of the and of the torsion		Yes	No							
18	Enter the number of voting members of the governing body at the end of the tax year. If there are material differences is voting rights among members of the governing body.										
	If there are material differences in voting rights among members of the governing body, or If the governing body delegated broad authority to an executive committee or similar										
	committee, explain in Schedule O.										
ь	Enter the number of voting members included in line 1a, above, who are independent 1b 4										
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1									
	any other officer, director, trustee, or key employee?	2		4							
3	Did the organization delegate control over management duties customarily performed by or under the direct										
	supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		4							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		4							
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		4							
6	Did the organization have members or stockholders?	6		4							
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint										
	one or more members of the governing body?	7a		4							
Ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			4							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	7b		ļ							
Ū	the year by the following:										
а	The governing body?	8a	4	ļ							
b	Each committee with authority to act on behalf of the governing body?	8b	4	 							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			<u> </u>							
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		4							
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.	<u> </u>							
			Yes	No							
10a	Did the organization have local chapters, branches, or affiliates?	10a		4							
b	, and the second										
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b									
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	4	ļ.,							
b 40-	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			ļ							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	4	ļ <u></u>							
b	• • • • • • • • • • • • • • • • • • • •	12b	<u> </u>	4							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		4							
13	Did the organization have a written whistleblower policy?	13	-	4							
14	Did the organization have a written document retention and destruction policy?	14	\vdash	4							
15	Did the process for determining compensation of the following persons include a review and approval by	H		<u> </u>							
	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?										
а	The organization's CEO, Executive Director, or top management official	15a	 	4							
b	Other officers or key employees of the organization	15b		4							
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).										
16a	The second secon		L								
	with a taxable entity during the year?	16a		4							
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its										
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			ļ							
Carr	organization's exempt status with respect to such arrangements?	16b		<u> </u>							
				_							
17 18	List the states with which a copy of this Form 990 is required to be filed ► CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	501	C/(3/-	Onka							
10	available for public inspection. Indicate how you made these available. Check all that apply.	. 301	U/JUE	only)							
	☐ Own website ☐ Another's website										
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of	f inte	rest r	oolicy							
	and financial statements available to the public during the tax year.		1	. ,							
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the	•								
	organization: ▶ Peggy Kwan, (650)988-6818										

Form	COL	(201	11

Dane	7

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization no	r any relate	d org	aniz	atio	n c	ompe	nsa	ited any currer	t officer, directo	r, or trustee.
(A) Name and Title	(B) Average hours per week	box, office	unles er and	Pos leck is pe	rson	e than o Is both or/trust	an lee)	(D) Reportable compensation from	(E) Reportable compensation from related	
	(describe hours for related organizations in Schedule O)	Indiv dual trustee or director	Inst tutional trustee	Officer	Key employee	Fighest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
Kenneth Chin										
President	40			4				66,189	<u> </u>	
Richard Yook										
Secretary	1.5		<u> </u>	4	L		L	0	0	
Boin Lin	1					l				
Treasurer	1.5		L_	4			<u> </u>	0	0	
Rosalie Wu	4									
Chairman	0.5		<u> </u>	4				0	0	(

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
			İ		(6	C)							
(A)		(B)	/do.			ltion			(D)	(E)		(F	9
	Name and title		Average (do not check more than box, unless person is bot						Reportable	Reportable	,	Estimated	
			hours per officer and a director/true						compensation	compensation t		amou	
		week (describe	오코	=	Q	X Q	3.7	7	from the	related organization	_	ott	
		hours for	목을	3	Officer	3	호물	Form	organization	(W-2/1099-MI		compe	
		related	3 2	ᅙ	1	퓛	ye c	2	(W-2/1099-MISC)		, i	organi	zation
		organizations in Schedule	` ?	9		empioyee) M					and re organia	
		0)	Ind vidual trustee or director	Institutional trustee		~	<u>ĕ</u>					Organia	LEURIN
				8			ghest compensated rployee						
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		<u></u>	<u> </u>		<u> </u>	<u>L</u>		<u> </u>					
1b	Sub-total			•	•				66,189		0		0
С	Total from continuation sheets to Part			•	•								
<u>d</u>	Total (add lines 1b and 1c)							▶	66,189		0		0
2	Total number of individuals (including but	t not limited	to th	1056	list	ted	above	e) w	no received m	ore than \$10	0,000 (of	
	reportable compensation from the organi	ization 🕨 o	1					•					
												1	Yes No
3	Did the organization list any former of	fficer, direc	tor, c	or tr	ust	ee,	key e	emp	oloyee, or high	est compen	sated		
	employee on line 1a? If "Yes," complete											3	4
4	For any individual listed on line 1a, is the	sum of re	porta	ble (con	npei	nsatio	on a	and other comp	ensation fro	m the		
	organization and related organizations												
	Individual											4	4
5	Did any person listed on line 1a receive of									ration or indi	vidual	1	
•	for services rendered to the organization											5	4
Sacti	on B. Independent Contractors										<u> </u>	1 3 1	
1	Complete this table for your five highest	component	ad in	don	and	ont	contr	201	ore that receive	d more than	6100	000 -1	
•	compensation from the organization. Rep												nio tov
	year.	on compe	SISQUE	JII II	Ji u	I U U	alenc	iai y	year ending wit	I O WILLING	ie Grya	JIZAUU	is lax
								1		т			
	(A) Name and business add	tross							(B) Description of s	ondroe	^	(C) ompensa	tion
	Trains and submission and							⊢	Description of a	er vices			
								├	···-		· · · · · ·		
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	Total number of independent	G1:- "				11 1-		<u>L</u>					
2	Total number of independent contractor							o th	nose listed abo	ove) who			-
	received more than \$100,000 of compens	sation from	the o	rgar	ııza	tion			a				

Part	VIII	Statement of Revenue				
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue exctuded from tax under sections 512, 513, or 514
おお	1a	Federated campaigns 1a 0			-	
ira Per Pe	b	Membership dues 1b 0				
Contributions, Gifts, Grants and Other Similar Amounts	С	Fundraising events 1c 0				
a #	đ	Related organizations 1d 0				
8, E	е	Government grants (contributions) 1e 0	Ī			,
E S	1	All other contributions, gifts, grants,]			
₹ <u>₹</u>		and similar amounts not included above 1f 577,731				
	g	Noncash contributions included in lines 1a-1f: \$ 29,148				,
	h	Total. Add lines 1a–1f	577,731			
Program Service Revenue	_	Business Code				
94	2a					
Œ	b					
ξ	C					
8	đ					
TBT	e	All other programme and in a second				
Ē	f g	All other program service revenue . Total. Add lines 2a–2f	0		<u> </u>	
	3	Investment income (including dividends, interest,	- 0			
	•	and other similar amounts)	18,827	18,827	0	0
i	4	Income from investment of tax-exempt bond proceeds ▶	0	0	0	<u> </u>
	5	Royalties	0	0	0	
		(i) Real (ii) Personal	<u> </u>			
	6a	Gross rents	1			
	b	Less: rental expenses	1			{
	С	Rental income or (loss) 0 0	·1			
	d	Net rental income or (loss) ▶				
	7a	Gross amount from sales of (1) Securities (1) Other		-	_	
	ь	assets other than inventory Less; cost or other basis	1			
		and sales expenses .				ţ
	C	Gain or (loss) 0 0				
	d	Net gain or (loss)				
9	8a	Gross income from fundraising				}
Venue	0a	events (not including \$ 0				į
		of contributions reported on line 1c).				,
<u> </u>		See Part IV, line 18 a				1
Other Re	ь	Less: direct expenses b	†			,
0		Net income or (loss) from fundraising events . ▶		ĺ		
		Gross income from gaming activities.				1
		See Part IV, line 19 a	}			
	Ь	Less: direct expenses b	1		l	
	С	Net income or (loss) from gaming activities				
	10a	Gross sales of inventory, less				1
		returns and allowances a				
	ł	Less: cost of goods sold b				
	<u> </u>	Net income or (loss) from sales of inventory	<u></u>		<u> </u>	
	40	Miscellaneous Revenue Business Code				
	11a		-	ļ		
	b			 	 	
	C d	All other revenue	 	 	 	
	_	Total. Add lines 11a-11d	0			
	12	Total revenue. See instructions.	596,558		0	0
						L V

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).	

	Charle if Cahadula O acataina a rasman	4	in thin Dank IV		
	Check if Schedule O contains a respon				
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundralsing expenses
1	Grants and other assistance to governments and				•
	organizations in the United States. See Part IV, line 21	79,772	79,772	1	
2	Grants and other assistance to individuals in	1,5,1.1.			
_	the United States. See Part IV, line 22	ما	ا	ŧ	
3		<u>V</u>	0		
3	Grants and other assistance to governments,	İ	j		i
	organizations, and individuals outside the				1
	United States. See Part IV, lines 15 and 16	38,197	38,197		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors,				
	trustees, and key employees	66,189		66,189	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	اه	;	o	
7	Other salaries and wages	97,644	25,100	72,544	
8	Pension plan accruais and contributions (include	31,044	29,100	12,344	
_	section 401(k) and 403(b) employer contributions)	أ	_	_1	
9		0	0	0	
	Other employee benefits	15,418	0	15,418	
10	Payroll taxes	13,090	0	13,090	
11	Fees for services (non-employees):		1		
a	Management	79,953	66,090	13,863	
Ь	Legal				
C	Accounting				
d	Lobbying				
0	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other			" "	
12	Advertising and promotion	266	0	266	
13	Office expenses	20,020	6,125	13,895	· · · · · · · · · · · · · · · · · · ·
14	Information technology	2,785	55	2,730	· · - · · · · · · · · · · · · · · · · ·
15	Royalties				
16	Occupancy	13,859	0	13,859	
17	Travel	83,209	80,664	2.545	
18	Payments of travel or entertainment expenses	00,203	80,004	2,540	
	for any federal, state, or local public officials				
19					
	Conferences, conventions, and meetings .	38,135	35,731	2,404	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	11,612	0	11,612	
23	Insurance	31,389	22,719	8,670	
24	Other expenses, Itemize expenses not covered]			1
	above. (List miscellaneous expenses in line 24e. If			1	; }
	line 24e amount exceeds 10% of line 25, column				I
	(A) amount, list line 24e expenses on Schedule O.)				
а	Bank and Service Charges	1,487	227	1,260	0
b	Filing fee & dues	125	0	125	0
C		,			
ď					
8	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	593,150	354,680	238,470	0
26	Joint costs. Complete this line only if the	393,130	334,060	230,410	<u> </u>
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)				
		1		1	

Part X	Balance Sheet	· · · · · · · · · · · · · · · · · · ·		
		(A) Beginning of year		(B) End of year
1	Cash non-interest-bearing	82,334	1	59,53
2	Savings and temporary cash investments [3,411,841	2	3,449,87
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Receivables from current and former officers, directors, trustees, key			
	employees, and highest compensated employees. Complete Part II of Schedule L		5	
6	Receivables from other disqualified persons (as defined under section			
ŀ	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
ŀ	employers and sponsoring organizations of section 501(c)(9) voluntary			
?	employees' beneficiary organizations (see instructions)		6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges		9	
10a	Land, buildings, and equipment: cost or			
	other basis. Complete Part VI of Schedule D 10a 587,191		1	
b	Less: accumulated depreciation 10b 21,230	577,574	10c	565,96
11	Investments – publicly traded securities	· ·	11	
12	Investments – other securities. See Part IV, line 11		12	
13	Investments – program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11	750	15	51
16	Total assets. Add lines 1 through 15 (must equal line 34)	4,072,499	16	4,075,88
17	Accounts payable and accrued expenses		17	
18	Grants payable		18	
19	Deferred revenue [19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
3 22	Payables to current and former officers, directors, trustees, key			
22	employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third	V		
	parties, and other liabilities not included on lines 17-24). Complete Part X	62		4
	of Schedule D		25	
26	Total liabilities. Add lines 17 through 25	62	26	4
3	Organizations that follow SFAS 117, check here ▶ ₄ and complete lines 27 through 29, and lines 33 and 34.			<u>-</u>
27	Unrestricted net assets	1,350,984	27	1,328,59
28	Temporarily restricted net assets	2,721,453		2,747,25
29	Permanently restricted net assets	0	29	
27 28 29 30 31 32 33	Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
20				
30	Capital stock or trust principal, or current funds	. "	30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds .		32	
33	Total net assets or fund balances	4,072,437		4,075,84
34	Total liabilities and net assets/fund balances	4,072,499	34	4,075,88 Form 990 (20)

Form 99	0 (2011)			Pa	ige 12
Part					
	Check if Schedule O contains a response to any question in this Part XI		<u> </u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		59	6,558
2	Total expenses (must equal Part IX, column (A), line 25)	2		59	3,150
3	Revenue less expenses. Subtract line 2 from line 1	3			3,408
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		4,07	2,437
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0
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		4,07	5,845
Part					
	Check if Schedule O contains a response to any question in this Part XII	• •	<u> </u>		
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," exp Schedule O.	lain in			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .		2a		4
b	Were the organization's financial statements audited by an independent accountant?		2b		4
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	ersight			
	of the audit, review, or compilation of its financial statements and selection of an independent account	tant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, exp Schedule O.	iain in			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year issued on a separate basis, consolidated basis, or both:	r were		-	
	☐ 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 for	orth in			·
	the Single Audit Act and OMB Circular A-133?		3a		4
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	go the			\vdash
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au		3b		
			For	m 99 0	(2011)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

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.

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

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization **Employer identification number** PROFESSIONAL & EDUCATIONAL SERVICES INTERNATIONAL INC 95-4209483 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(I). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a 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 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)(lv). (Complete Part II.) 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.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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. c Type III-Functionally integrated **b** Type II e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes No 11g(I) (ii) 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(四) Provide the following information about the supported organization(s). (I) Name of supported (II) EIN (III) Type of organization (iv) is the organization (v) Did you notify (VI) is the (vii) Amount of in col. (i) listed in your the organization in organization (described on lines 1-9 organization in col. support above or IRC section governing document? COL (I) of your (I) organized in the support? (see instructions)) U.S.? Yes No Yes Yes No (A) **(B)** (C) (D) (E)

Schedu	de A (Form 990 or 990-EZ) 2011						Page 2
Part	Support Schedule for Organiza (Complete only if you checked the Part III. If the organization fails to	ne box on line	5, 7, or 8 of	Part I or if the	organization	n failed to qua	
Secti	on A. Public Support	quality unde	ir trie tests lis	ted below, pr	ease comple	te Part III.)	
	idar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	986,304	863,621	666,245	709,438	577,731	3,803,339
2	Tax revenues levled for the organization's benefit and either paid to or expended on its behalf				,,		<u> </u>
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	986,304	863,621	666,245	709,438	577,731	3,803,339
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)			-			
6	Public support. Subtract line 5 from line 4.						3,803,339
	on B. Total Support						
Calen	idar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	986,304	863,621	666,245	709,438	577,731	3,803,339
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	181,891	119,516	84,872	44,390	18,827	449,496
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						4,252,835
12	Gross receipts from related activities, etc					12	
13	First five years. If the Form 990 is for the organization, check this box and stop he	ne organization	n's first, secon	d, third, fourth,	or fifth tax yo	ear as a section	n 501(c)(3)
Secti	on C. Computation of Public Suppor	t Percentage				• • • • •	· · • []
14	Public support percentage for 2011 (line			1 column (fl)		14	89.43 %
15	Public support percentage from 2010 Sci					15	87.6 %
16a	331/a% support test - 2011. If the organi						
	box and stop here. The organization qua						
þ	331/3% support test—2010. If the organ check this box and stop here. The organ					15 is 33½%	or more,
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part IV how the organization meets the "forganization	011. If the orga ets the "facts- acts-and-circu	inization did no and-circumsta imstances" tes	ot check a box nces" test, che it. The organiza	on line 13, 16 ock this box ar ation qualifies	id stop here. E as a publicly st	xplain in ipported
b	10%-facts-and-circumstances test – 20 15 is 10% or more, and if the organization m Explain in Part IV how the organization m supported organization	010. If the orga tion meets the leets the "facts	anization did no facts-and-ci s-and-circums	ot check a box rcumstances" tances" test. Ti	on line 13, 16 test, check the he organizatio	ia, 16b, or 17a, is box and sto n qualifies as a	and line op here. publicly

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

Part III 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.)

	ir the organization rails to quality	under the te	SIS IISIEO DEI	ow, please co	ompiete Part	11.)	
	on A. Public Support		·	,			
_	idar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees				ł		
_	received. (Do not include any "unusual grants.")		<u></u>				
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						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						L
5	The value of services or facilities		Ì			:	
	furnished by a governmental unit to the						
_	organization without charge						
6	Total. Add lines 1 through 5						
7a	• • • • • • • • • • • • • • • • • • • •				<u> </u>		
	received from disqualified persons		ļ				
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						
_	•		 	<u> </u>			
8	Add lines 7a and 7b Public support (Subtract line 7c from	-	 	-			
Ū	line 6.)		1				Ì
Secti	on B. Total Support		<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
	idar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	(a) 2001	(0) 2008	(6) 2009	(u) 2010	(6) 2011	(I) TOLAL
_	Gross income from interest, dividends,		 				
	payments received on securities loans, rents,]			
	royalties and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses		}				
	acquired after June 30, 1975		İ				
C	Add lines 10a and 10b						
11	Net income from unrelated business			<u> </u>			
	activities not included in line 10b, whether		Į.	ļ	ļ		
	or not the business is regularly carried on	•	İ				
12	Other Income. Do not include gain or		1				
	loss from the sale of capital assets				1		
	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)			l			
14	First five years. If the Form 990 is for the	ne organizatio	n's first, secon	d, third, fourth	n, or fifth tax y	ear as a section	on 501(c)(3)
	organization, check this box and stop he		<u> </u>				▶ 🗀
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2011 (line 8						%
16	Public support percentage from 2010 Sch	nedule A, Part	III, line 15 .	<u> </u>	<u></u>	16	<u>%</u>
	on D. Computation of Investment In						
17	Investment income percentage for 2011 (<u>%</u>
18	Investment income percentage from 2010					18	% and line
19a	331/3% support tests - 2011. If the organ 17 is not more than 331/3%, check this box			-			•
_	_		•	•		•	
þ	331/3% support tests - 2010. If the organize line 18 is not more than 331/3%, check this line 18 is not more than 331/3%, check this line 18 is not more than 331/3%.						
20	Private foundation. If the creanization di						_

Schedule A (Form 990 or 990-EZ) 2011 Page 4						
Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).					
•••••						
•••••						

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

Open to Public Inspection

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. ➤ Attach to Form 990. ➤ See separate instructions. **Employer Identification number**

PROF	ESSIONAL & EDUCATIONAL SERVICES INTERNATIONAL INC			95-4209483
Par		ds or	Acc	ounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.			
	(a) Donor advised funds		(b) Fur	ds 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 donor advisors in writing that the assets he	eld in	dono	advised
	funds are the organization's property, subject to the organization's exclusive legal contro	17		· · · 🔲 Yes 🗌 No
6	Did the organization inform all grantees, donors, and donor advisors in writing that gran	t fund	s can	be used
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for	r any	other	purpose
	conferring impermissible private benefit?			· · · 🔲 Yes 🗎 No
Par	Conservation Easements. Complete if the organization answered "Yes" t	o For	m 99	0, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).			
	Preservation of land for public use (e.g., recreation or education) Preservation of	an his	torica	illy important land area
	· · · · · · · · · · · · · · · · · · ·			nistoric structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified conservation contributio	n in th	e forr	n of a conservation
	easement on the last day of the tax year.			
			-	Held at the End of the Tax Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
C	Number of conservation easements on a certified historic structure included in (a)		2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not (
_	historic structure listed in the National Register		2d	
3	Number of conservation easements modified, transferred, released, extinguished, or term	ninated		ne organization during the
	tax year ▶		,	
4	Number of states where property subject to conservation easement is located ▶			
5	Does the organization have a written policy regarding the periodic monitoring, ins	pection	 n. ha	ndling of
	violations, and enforcement of the conservation easements it holds?			
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation			
•	b			g 2.0 ,0
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation ease	ments	durir	o the vear
•	▶\$			9 1.0 ,01
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of	f secti	on 17	'()(h)(4)(B)
_	(i) and section 170(h)(4)(B)(ii)?			· · · · · Yes · No
9	In Part XIV, describe how the organization reports conservation easements in its revenue	and a	Ynon:	— —
J	balance sheet, and include, if applicable, the text of the footnote to the organization's final			
	organization's accounting for conservation easements.	2 10.0.	0.0.0	
Par		Othe	r Sim	ilar Assets
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.			
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its	ravan	ue st	stement and balance shee
	works of art, historical treasures, or other similar assets held for public exhibition, ed			
	public service, provide, in Part XIV, the text of the footnote to its financial statements that			
ь	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its	revenu	e sta	tement and balance shee
_	works of art, historical treasures, or other similar assets held for public exhibition, ed			
	public service, provide the following amounts relating to these items:		,	
	(I) Revenues included in Form 990, Part VIII, line 1			▶ \$
	(ii) Assets included in Form 990, Part X	• •	•	\$ \$
2	If the organization received or held works of art, historical treasures, or other similar			· · · · · · · · · · · · · · · · · · ·
_	following amounts required to be reported under SFAS 116 (ASC 958) relating to these it		J 101	menom Smil bioarde ne
	Revenues included in Form 990, Part VIII, line 1			
a	Assets included in Form 990. Part Y		•	> \$

Paga	2

Schedule	D	(Form	990	2011
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Part	Organizations Maintaining	Collections of	Art, His	torical T	reasures	or Ot	her Similar A	ssets (c		ied)
3	Using the organization's acquisition, a collection items (check all that apply):									
a	☐ Public exhibition				or exchang					
þ	☐ Scholarly research		е	Other	,					
C	☐ Preservation for future generations									
4	Provide a description of the organizati	on's collections	and expla	ain how th	hey further	the org	anization's ex	empt purp	iose in	Part
	XIV.									
5	During the year, did the organization	solicit or receive	donation	s of art,	historical tr	easures	s, or other sim	ilar		
	assets to be sold to raise funds rather									
Part					anization a	answei	red "Yes" to	Form 990	, Part	i IV,
-40	line 9, or reported an amount is the organization an agent, trustee,					J				
1a	included on Form 990, Part X?									1
h	If "Yes," explain the arrangement in Pa							· 🗀 🔻	es 🗌	NO
Þ	ii res, explain the arrangement in Pa	in Aiv and compi	ete nie ic	illowing a	able:		T	Amount		
С	Beginning balance					10		runount		
ď	Additions during the year					10				
e	Distributions during the year					1e	 			
ť	Ending balance					11			-	
2a	Did the organization include an amoun							. T Y	es 🗆	No
þ	If "Yes," explain the arrangement in Pa									
	V Endowment Funds. Comple		zation ar	swered	"Yes" to F	orm 9	90, Part IV, lii	ne 10.		
		(a) Current year	(b) Pri	or year	(c) Two year	s back	(d) Three years ba	ck (e) Fou	r years	back
1a	Beginning of year balance					1				
þ	Contributions									
C	Net investment earnings, gains, and					l				
	losses	<u> </u>								
d	Grants or scholarships		ļ							
0	Other expenditures for facilities and									j
_	programs									
T _	Administrative expenses									
9 2	End of year balance	10 011200t 11001 01	d bolone	o (lino 1 o	column (o	<u> </u>		<u> </u>		
a	Board designated or quasi-endowmen	-	OZ	e (iiie ig	, column (a)) Heiu a	15.			
b	Permanent endowment ▶	%	⁄							
	Temporarily restricted endowment ▶	··· ′′ %								
_	The percentages in lines 2a, 2b, and 2		00%.							
3a	Are there endowment funds not in the	•		zation tha	at are held	and ad	ministered for	the		
	organization by:		_						Yes	No
	(i) unrelated organizations							. 3a(i)		
	(II) related organizations							. 3a(ii		
	If "Yes" to 3a(ii), are the related organized							. 3b		
4	Describe in Part XIV the intended uses									
Part										
	Description of property	(a) Cost or o			r other basis ther)		Accumulated preciation	(d) Bo	ok value	•
1a	Land		131,389		0				13	1,389
ь	Buildings		328,354		0		12,282		31	6,072
C	Leasehold improvements		119,886		0		4,485			5,401
d	Equipment		3,789		0		3,789			0
e Total	Other		3,773	<u> </u>	0	Y-1 1	674			3,099
iotal.	Add lines 1a through 1e. (Column (d) m	usi equal romi 9	sυ, raπ λ	t, column	ו (ש), ווחפ 10,	/{С).) .	<i>.</i> ▶		56	5,961

Part VII Investments - Other Securities	. See Form 990, Part X,	line 12.	, og. c
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of val Cost or end-of-year n	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)	<u></u>		
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(1)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	1 Can Farm 000 Flast V	han 48	
Part VIII Investments – Program Related			
(a) Description of investment type	(b) Book value	(c) Method of va Cost or end-of-year n	
(1)			
(2)			
(3)			
(4)		<u> </u>	
(5)			
(6)			· · · · · · · · · · · · · · · · · · ·
(7)			
(8)			
(9)			
(10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶			· · - · · · · · · · · · · · · · · · · ·
Part IX Other Assets. See Form 990, Part IX	art X line 15	.1	
	a) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, c		<u> ▶</u>	
Part X Other Liabilities. See Form 990			
1. (a) Description of liability	(b) Book value		
(1) Federal income taxes		<u> </u>	
(2) Credit Card payment	41	빜	
(3)		4	
(4)		4	
(5)		4	
(6)		4	
(7)		4	
(8)		4	
(9)		4	
(10)		4	
(11)		-1	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►	the text of the feetmets to	<u> </u>	monte that remarks the

Schedu	e D (Form 990) 2011		Page 4
Part	XI Reconciliation of Change in Net Assets from Form 990 to A	udited Financial Statem	ents
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1
2	Total expenses (Form 990, Part IX, column (A), line 25)		2
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3
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.)	i i i i i i i i i i i i i i i i i i i	8
9	Total adjustments (net). Add lines 4 through 8		9
10	Excess or (deficit) for the year per audited financial statements. Combine		10
Part	XII Reconciliation of Revenue per Audited Financial Statement		
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	7 1
C	Recoveries of prior year grants	2c	- 1
ď	Other (Describe in Part XIV.)		
8	Add lines 2a through 2d		20
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	i	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)		- - -
c	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5
Part			
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		-
_ a	Donated services and use of facilities	2a	
b	Pnor year adjustments	2b	╡
C	Other losses		
đ	Other (Describe in Part XIV.)		╡
9	Add lines 2a through 2d		20
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	i	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
C	Add lines 4a and 4b	1	4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	ne 18)	5
Part			1.5.1.
Comp Part V	lete this part to provide the descriptions required for Part II, lines 3, 5, and , line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII iditional information.		

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 separate instructions.

2011 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Inspection Employer Identification number

PROFESSIONAL & EDUCATIONAL SERVICES INTERNATIONAL INC 95-4209483 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the ☐Yes ☐No For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) 3 (b) Number of offices in the (e) if activity listed in (d) is a program service, describe specific type of service(s) in region (a) Region (d) Activities conducted in (c) Number of (f) Total expenditures for employees, agents, and independent region (by type) (e.g., fundraising, program services, investments, and investments in region region contractors in region grants to recipients located in the region) (1) (2)(3) (4) (5) (6) (7) (8) (9) (10)(11) (12)(13)(14)(15) (16)(17)Sub-total . . . За Total from continuation

 (a) Name of

organization

(b) iRS code section and EIN (if applicable)

(c) Region

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organizate Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more Part II can be duplicated if additional space is needed.

(e) Amount of

cash grant

(d) Purpose of

grænt

(f) Manner of

disbursement

(g) Amount of

non-cash

assistance

o

	1				
2)	East Asia and the	Remin University-P	23,690	Wire	
3)					
1)					
5)					
6)					
n				·	
8)	****				
9)					
10)					
11)			· · · · · · · · · · · · · · · · · · ·		
12)					
13)					
14)					
15)					
16)	1				

Schedule F (Form 990) 2011

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	of n
(1)						
(2)						
(3)						ļ
(4)						
(5)						
(6)			- · · · -			
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)						
(18)						

Schedule F	(Form	990	2011

Page 4

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

Schedule F (Form 990) 2011

Part V	Supplemental Information				
·	Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).				
•••••					
•••••					

	······································				
••••••					
••••••	······································				
••••••					

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and individuals in the United States

Department of the Treasury Internal Hevenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

Cat. No. 50055P

Name of the organization

PROFESSIONAL & EDUCATIONAL SERVICES INTERNATIONAL INC

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

Part General Information						
Does the organization maintaintenance the selection criteria used to						r the grants o
2 Describe in Part IV the organ	_					
Part II Grants and Other Atto Form 990, Part IV, Part II can be duplica	ssistance to Go line 21, for any	vernments and recipient that re-	l Organizations ceived more than	in the United S	tates. Complete i	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section If applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description
(1) Sch I, Stmt 1						
(2)						· · · · · · · · · · · · · · · · · · ·
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
2 Enter total number of section3 Enter total number of other of						

Schedule i	Œam	$\alpha \alpha m$	<i>(</i> 2011)

	Part III can be duplicated if addit	IUII ai suace is illemier			
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of vatuation (book FMV, appraisal, other)
1					
2					
3					
4					
5					
6					
7					
Part IV	Supplemental Information. Cor	nplete this part to pro	vide the informati	on required in Part I,	line 2, and any other a
Schedule	I, Part I, Line 2 - 1. CCSA-we receive copi	es of books that we send	subsidies for their p	ublication. We receive n	eports on conferences that
we send s	taff and friends of our organization to pa	rticipate in these events.	2. The funding went t	o Palo Alto University v	no provides scholarship g
	***************************************				***************************************

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Schedule I, Part IV, Statement 1

PROFESSIONAL & EDUCATIONAL SERVICES INTERNATIONAL INC 95-4209483

53,772

21,199

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Form Schedule I

Page 1

Line Number: Part II

Description of Grants and Other Assistance to Governments and Organizations in the United States

Amount of cash grant Amount of non-cash assistance

93 Emerson Gardens Road

Lexington, MA 02420

EIN 04-3544376

IRC code section

Method of valuation Cash

Description of noncash assistance

Purpose of grant Sponsored retreats, conferences and seminars that

bought North American professionals and academics to meet their Chinese counterparts in mutually

beneficial exchange.

Name and address Palo Alto University

1791 Arastradero Road

Palo Alto, CA 94304

EIN 94-2340692

IRC code section

Method of valuation Cash **Description of non-** 0

cash assistance

Purpose of grant Grant Scholarships for PAU China Program Students

for Spring & Fall quarters 2012

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2011

Department of the Treasury Internal Revenue Service 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

Name of the organization **Employer identification number** PROFESSIONAL & EDUCATIONAL SERVICES INTERNATIONAL INC 95-4209483 Form 990, Part I, Line 1 - International Education, Cultural Exchange and Professional Services in China and Central Asia. Form 990, Part VI, Section B, Line 11b - The return preparer emails a copy of the final version of form 990 to all voting members of the board of directors and asks them to review the return and provide feedbacks within 3 business days. The return will be filed if no change need to be made received from reviewers by the due date. Form 990, Part VI, Section C, Line 19 - The Company makes its government documents such as articles of incorporation, bylaws, conflict of interest policy, and financial statements available to the general public upon request.