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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

Department of the Treasury

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

Open to Public Inspection

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				Same	a As C	Above					H(b) Are all If 'No,'	affiliates inc	luded? (see ins	structions)	Yes	No
ī	Tax-	-exempt s	status			X 501(c) (4) <	(insert no)	4947(a)(1) c	or 527			(000	, , , , , , , , , , , , , , , , , ,		
J	We	bsite:	- N/	A							H(c) Group	exemption n	umber 🕨	•		
ĸ	Forn	n of organ			rporation	Trust	Association	Other >	L	Year of Forma	ation 199	1 M	State of	legal domicile	CA	
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	1	Briefly	descri	be the	organiza	tion's miss	sion or mos	t significant	activities 5	SUPPORT	METHOD	IST CH	URCH	PROGR	AMS.	
a.		_							_							
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Activities & Governance	2		this bo						rations or dis	posed of m	ore than 2	5% of its		sets.		
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ne	9			-		art VIII, lin										
Revenue	10						(A), lines 3,	4 and 7d)			-	-472,	157		98	437.
æ	11							8c, 9c, 10c,	and 11e)		-	1,2,.				<u></u>
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	13							(A), lines 1		· · · · · · · · · · · · · · · · · · ·		80,4			166,	
	14 Benefits paid to or for members (Part IX, column (A), line 4)											<u> </u>				
	15					-	ee benefits	es 5-10).		8.0	017.		2.	795.		
es	163				•		column (A)	•								
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2	18	Total	expens	es Ad	d hes A	ilg (must	equal Parti	column	(A), line 25)			91,			<u>171,</u>	
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		Net as	ssets o	r fund	balances	Subtract	line 21 from	1 line 20			8	3,155,	900.	8,	082,	<u>683.</u>
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UN	er pena	alties of pe	erjury, I de	eclare th	at have exa	amined this re	turn, including	accompanying s	schedules and sta irer has any know	tements, and to	the best of m	ny knowledge	and bel	ief, it is true,	correct, a	and
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	990 (2012) Y. S. Mae Foundation	95-43	309736	Pa	age 2
Par					
	Check if Schedule O contains a response to any question in this Part III				
1	Briefly describe the organization's mission				
	SUPPORT METHODIST CHURCH PROGRAMS.	_ .			
		·			
		 .			
2	Did the organization undertake any significant program services during the year which were not listed on the price	or			
	Form 990 or 990-EZ?		Yes	5 X	No
	If 'Yes,' describe these new services on Schedule O				
3	Did the organization cease conducting, or make significant changes in how it conducts, any program ser	rvices?	Ye	s X	No
	If 'Yes,' describe these changes on Schedule O			_	
4	Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of others, the total expenses, and revenue, if any, for each program service reported	ices, as m grants and	leasured by d allocations	y expens s to	es
4.5	(Code) (Expenses \$ 166,700. including grants of \$ 166,700.) (R		ć		
4 8					—′
	FINANCIAL SUPPORT FOR CHURCHES, EVANGLISTIC AND PHILANTHROPIC ORC	3ANANTZ	ATTONS		
		. – – – – .			
		. .			
4 b	(Code) (Expenses \$ including grants of \$) (R	evenue	\$)
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4 c	: (Code) (Expenses \$ including grants of \$) (R	evenue	\$)
		. .			
		. .			
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			 .		-
		 _	_ .	 -	
4 c	Other program services (Describe in Schedule O)				
	(Expenses \$ including grants of \$) (Revenue \$)	
4 e	Total program service expenses ► 166,700.				
BAA			Fo	rm 990 (2	2012)

Page 3

Form 990 (2012) Y. S. Mae Foundation

Part IV | Checklist of Required Schedules

	,		res	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	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		X
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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, 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		Х
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		Х
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	11 a		X
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	11 b		Х
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	11 c		Х
	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	11 d	Х	
е	e Did the organization report an amount for other liabilities in Part X, line 25° If 'Yes,' complete Schedule D, Part X	11 e		X
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	11 f		Х
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		Х
	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 and XII is optional	12 b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		Х
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		Х
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		Х
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		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
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		Х
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20	 	X
t	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b	<u> </u>	<u> </u>

Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II Х 21 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part Х IX. column (A), line 27 If 'Yes,' complete Schedule I, Parts I and III 22 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 Х 23 Schedule J **24 a** Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25 Х 24a 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c 24d d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a 25a Х disqualified person during the year? If 'Yes,' complete Schedule L, Part I **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 Х 25b Schedule L. Part I Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II Х 26 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 Х 27 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) X a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a **b** A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete 28b Х Schedule L, Part IV c 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 Х 28c X Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation Х contributions? If 'Yes,' complete Schedule M 30 X Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete 32 Х Schedule N, Part II 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 Х 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, Х and V, line i 34 35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X **b** If 'Yes' to line 35a, 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 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 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 37 Х Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O 38 Х

Check if Schedule O contains a response to any question in this Part V			
		Ye	s No
1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	0		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	-	_	_
(gambling) winnings to prize winners?	1	С	
2 a 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 2 a	1		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2	ь 2	ζ .
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3	а	Х
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3	b	
4 a 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)?	4	а	Х
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			
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5	С	
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organiz solicit any contributions that were not tax deductible as charitable contributions?	zation 6	a	Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6	b	
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods an services provided to the payor?	d 7		
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7	b	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7	С	
d If 'Yes,' indicate the number of Forms 8282 filed during the year 7 d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7	е	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7	f	
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7	g	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	a 7	h	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess busine holdings at any time during the year?	Did the ess 8	-	
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9	a	
b Did the organization make a distribution to a donor, donor advisor, or related person?	9	ь	
10 Section 501(c)(7) organizations. Enter		1	
a Initiation fees and capital contributions included on Part VIII, line 12			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b			
11 Section 501(c)(12) organizations. Enter			
a Gross income from members or shareholders			ļ
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11 b			
12a Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12	а	
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state?	13	а	
Note. See the instructions for additional information the organization must report on Schedule O			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
		1	
c Enter the amount of reserves on hand 13c		+	$\frac{1}{x}$
14a Did the organization receive any payments for indoor tanning services during the tax year?	14		- ^
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14	D	- 1

95-4309736 Form 990 (2012) Y. S. Mae Foundation Page 6 Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions. X Check if Schedule O contains a response to any question in this Part VI. Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 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 b Enter the number of voting members included in line 1a, above, who are independent 1 b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 X officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision X of officers, directors or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Х X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 X 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more Х members of the governing body? 7 a b Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or other persons other than the governing body? 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 a Х a The governing body? $\overline{\mathsf{X}}$ b Each committee with authority to act on behalf of the governing body? 8 b Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O 9 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. No Yes Х 10 a Did the organization have local chapters, branches, or affiliates? 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes 10 b X 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule O X 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12 a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12 c X 13 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? X 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X a The organization's CEO, Executive Director, or top management official 15 a X **b** Other officers of key employees of the organization 15_b If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16 a 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 taken steps to safeguard the organization's exempt status with respect to such arrangements? 16_b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Another's website Other (explain in Schedule O) Upon request Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year See Schedule O State the name, physical address, and telephone number of the person who possesses the books and records of the organization

LOS ANGELES CA 90049 310-

3052 EVANSTON ST

Form 990 (2012) Y. S. Mae Foundation	95-4309736	Page 7									
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, Independent Contractors											
Check if Schedule O contains a response to any question in this Part VII											
Section A Officers Directors Trustees Key Employees and Highest C	ompensated Employees										

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the 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 n	or any rela	ited org	ganız	zatio	n co	mpens	sated	d any current officer, d	rector, or trustee		
			(C)								
(A) Name and Title	(B) Average hours per week (list	one bo	ox. ùn	less of	perso	k more t in is bott or/trusted	n an e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation	
	any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations	
(1) GRACE CHANG	11										
Vice President	0	X		<u>X</u>				0.	0.	0	
(2) HAESUN KOO	1	ļ ,,		τ,				_		0	
Secretary/Treas (3) WARREN CHANG	0 2	X	\vdash	Х	_			0.	0.	0.	
President	2-	Х		х				0.	0.	0.	
(4) JINWOO CHANG	1	_^		^				0.	0.	0.	
Director		Х						0.	0.	0.	
(5) HEEKYUNG CHANG	2										
Director	0	X						2,795.	0.	0.	
(6)											
(7)											
(10)						-					
(11)											
(12)											
(13)											
(14)											

Part VII Section A. Officers, Directors, Trus	tees, l	Кеу	Em	ıple	oye	es,	and	d Highest Com	pensated Emp	Employees (cont)			
(B)				((C)								
(A) Average		(do	not c	Pos	sition	e than	one	(D)	(E)		(F)		
Name and title	hours	box	, unie	ess pe	erson	is bot	h an	Reportable	Reportable	Es	imated		
	week (list any		_					compensation from the organization	compensation from related organizations	comp	nt of oth censation om the		
	hours	함	stuta	Officer	Q	흫힐	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	orga	nızatıor related	ņ	
	related organiza	ecto ecto	μon	Q	<u>ğ</u>	yee	역				nization		
	- tions below	ر ق	al tr	ŀ	Key employee	ă							
	dotted line)	Individual trustee or director	nstitutional trustee		"	employee							
	"""		e			8	-						
(15)		┢		├	├	╁╌	├						
(15)		1			ľ								
(16)	<u> </u>	├		-	<u> </u>	┢							
	1	1											
(17)				 	 	\vdash	┢┈						
	 	1		l									
(18)	 	 		-	\vdash		-						
	∤ −	1						Ì	'				
(19)				-	 		\vdash						
	1	1			İ								
(20)	 		\vdash		t	1							
	† -	1						1					
(21)	 		 	 		1							
	† -	1											
(22)	 		<u> </u>			-							
	1	1											
(23)	<u> </u>												
	1	1											
(24)		1											
	1	1			1	1							
(25)													
							L						
1 b Sub-total							>	2,795.	0.		0.		
c Total from continuation sheets to Part VII, Section	пА							0.	0.			0.	
d Total (add lines 1b and 1c)								2,795.	0.			0.	
2 Total number of individuals (including but not limited to	o those I	ısted	abo	ve)	who	rece	ived	more than \$100,00	0 of reportable comp	ensation	1		
from the organization 0								_					
											Yes	No	
3 Did the organization list any former officer, director	or or trus	stee,	key	em	ploy	ee,	or h	ighest compensat	ed employee	3	 -	37	
on line 1a? If 'Yes,' complete Schedule J for such	individu	ıal								3		X	
4 For any individual listed on line 1a, is the sum of r	eportab	le co	mpe	ensa	ation	and	oth	ner compensation	from	1		ĺ	
the organization and related organizations greater such individual	tnan \$	50,0	00?	IT	res	corr	ipiei	te Scriedule J for		4		X	
5 Did any person listed on line 1a receive or accrue	comper	satio	n fr	rom	anv	unre	elate	ed organization or	ındıvıdual				
for services rendered to the organization? If 'Yes,	comple'	te S	che	dule	Jf	or su	ch p	person	THOIVIGUE!	5		Х	
Section B. Independent Contractors													
Complete this table for your five highest compensation from the organization. Report compens.	ated ind	epen	den	it co	ntra	ctors	tha	at received more t	han \$100,000 of gangation's tax year				
		uie c	aici	luai	yea	Cilu	ii ig '	(B)		((*1		
Name and business addre	(A) Name and business address								of services	Compe	nsatıo	n	
								 					
		_					-	 		-	_		
2 Total number of independent contractors (including bu	it not lim	ıted t	o th	ose	liste	d abo	ove)	who received more	than				
\$100,000 in compensation from the organization							•		1				
T		TEEA								Form	000 /	(2012)	

	Check if	Schedule O	contains a resp	onse to any quest	ion in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
N SI	1 a Federated	campaigns	1 a					
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	b Membershi	•	1 b]			
	c Fundraising	-	1 c		<u> </u>			
	d Related org	•	1 d					
	e Government g	rants (contribut	ions) 1 e					
	f All other contr similar amour	ibutions, gifts, its not included	grants, and above 1 f					
N N	g Noncash conti		ed in Ins 1a-1f \$					
	h Total. Add	lines la-lt		D C-d-				
PROGRAM SERVICE REVENUE	2.0			Business Code				
8	2a b							
꽁	<u> </u>				-			
Ä	d						· · · · · · · · · · · · · · · · · · ·	
₩	e							
8	f All other p	ogram servi	ce revenue		:			
8	g Total. Add			•				·
		•	cluding dividend	s, interest and				
	other simila	ar amounts).		•	95,768.			95,768.
	4 Income fro	m investmer	nt of tax-exempt	t bond proceeds. 🟲				
	5 Royalties							
			(ı) Real	(II) Personal]			
	6 a Gross rents							
	b Less renta	-		<u> </u>	-			
	c Rental income	• •	L		ļ			
	d Net rental	,			 			
	7 a Gross amount	from sales of	(i) Securities	(II) Other	-			
	assets other t	ian inventory	100,000	+	4			
	b Less cost or and sales exp		07 221					
	c Gain or (lo		97,331 2,669		-			
	d Net gain or		2,009	·1	2 660	2,669.		
	_				2,669.	2,009.		
믤	(not includ	me trom tun ina .\$	draising events					
9	of contribu	tions reporte	ed on line 1c)					
2	See Part I	/, line 18		а				
OTHER REVENUE	b Less direc	t expenses		ь	1			
0	c Net income	or (loss) fro	om fundraising	events.				
	9 a Gross inco See Part IV	me from gar /, line 19	ming activities	a				
	b Less direc	t expenses		b	1	İ		
	c Net income	or (loss) fro	om gaming acti	vities •				
	10a Gross sale and allowa	s of inventor	ry, less returns	a				
	b Less cost	of goods sol	ld	b				
	c Net income	or (loss) fre	om sales of inve	entory >				
	Misc	ellaneous Rever	nue	Business Code				
	11a							
	b	_						
	c		. .					
	d All other re							
	e Total. Add			•				
	12 Total rever	iue. See ins	tructions	•	98,437.	2,669.	0	95,768.

Part IX Statement of Functional Expenses

Sec	ion 501(c)(3) and 501(c)(4) organizations must con Check if Schedule O contains a i			omplete column (A)	
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII		expenses	general expenses	expenses
1	and organizations in the United States See Part IV, line 21	166,700.	166,700.		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				· · · · · · · · · · · · · · · · · · ·
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	2,795.	0.	2,795.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	2,793.	0.	0.	0.
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)			-	
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
a	Management				
t	Legal				
•	: Accounting				
•	Lobbying				
•	Professional fundraising services See Part IV, line 17				
f	Investment management fees			-	
_	Other (If line 11g amt exceeds 10% of line 25, col- umn (A) amt, list line 11g expenses on Sch 0) Advertising and promotion				
13					
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
	Insurance Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10%				
	of line 25, column (A) amount, list line 24e expenses on Schedule O).				
	· ·	1 250		1 250	···· ·· · · · · · · · · · · · · · ·
	ACCOUNTING FEES	1,350.		1,350.	
	EDD	631.		631.	
	UBS FEE	150. 18.		150. 18.	
	I IRS All other expenses				
	Total functional expenses Add lines 1 through 24e	171 654	166,700.	10. 4,954.	0.
	, , , , , , , , , , , , , , , , , , ,	171,654.	100,700.	4,954.	0.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here in following				
	SOP 98-2 (ASC 958-720)		<u> </u>	<u> </u>	

Balance Sheet

Part X

Check if Schedule O contains a response to any question in this Part X (B) End of year (A) Beginning of year Cash - non-interest-bearing 1 2 1,576,161 Savings and temporary cash investments 3,268,985 3 Pledges and grants receivable, net 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 5 Loans and other 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) Complète Part II of Schedule L 6 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a **b** Less accumulated depreciation 10b 10 c 11 11 Investments - publicly traded securities 4,018,154 5,675,932 12 Investments - other securities See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 14 14 Intangible assets Other assets See Part IV, line 11 15 868,761 830,590. 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 8,155,900. 16 8,082,683. 17 17 Accounts payable and accrued expenses 18 18 Grants pavable 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 26 Total liabilities. Add lines 17 through 25 0. 0. X and complete Organizations that follow SFAS 117 (ASC 958), check here ▶ lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 8,155,900 8,082,683. 27 Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 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 33 Total net assets or fund balances 8,155,900 33 8,082,683. 34 34 Total liabilities and net assets/fund balances 8,155,900 8,082,683.

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Forn		4309736		Pá	ge 12	
Par	t XI Reconciliation of Net Assets	-				
	Check if Schedule O contains a response to any question in this Part XI				\Box	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		98,4	<u> 137.</u>	
2	Total expenses (must equal Part IX, column (A), line 25)	2	_ 1	71,6	654.	
3	Revenue less expenses Subtract line 2 from line 1	3	_	73,2	217.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8,1	55,9	900.	
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O).	9	0.			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	8,0	82,6	583.	
Par	t XII Financial Statements and Reporting	 				
	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 X Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O					
2 a	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewe separate basis, consolidated basis, or both	ed on a				
	Separate basis Consolidated basis Both consolidated and separate basis					
t	Were the organization's financial statements audited by an independent accountant?		2ь		Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separa basis, consolidated basis, or both	ite				
	Separate basis Consolidated basis Both consolidated and separate basis					
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?		2 c			
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O					
3 a	a 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?		3 a		Х	
ŀ	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why in Schedule O and describe any steps taken to undergo such audits	ıt	3 b			
BAA			Form	990	(2012)	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection
Employer identification number

Υ.	S. Mae Foundation		95-4309736
Pai	セト Organizations Maintaining Dong	or Advised Funds or Other Similar Fu	
	the organization answered 'Yes'	to 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 dor are the organization's property, subject to the	nor advisors in writing that the assets held in do organization's exclusive legal control?	onor advised funds Yes No
6	Did the organization inform all grantees, dono for charitable purposes and not for the benefit impermissible private benefit?	rs, and donor advisors in writing that grant funition of the donor or donor advisor, or for any other	ds can be used only r purpose conferring Yes No
Pai	t II Conservation Easements. Comp	lete if the organization answered 'Yes	' to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by	y the organization (check all that apply)	
	Preservation of land for public use (e.g., r	ecreation or education) Preservation	of an historically important land area
	Protection of natural habitat	Preservation of	of a certified historic structure
	Preservation of open space	_	
2	Complete lines 2a through 2d if the organization hast day of the tax year	neld a qualified conservation contribution in the for	
			Held at the End of the Tax Year
	a Total number of conservation easements		2 a
	b Total acreage restricted by conservation ease		2 b
•	Number of conservation easements on a certi-	fied historic structure included in (a)	2 c
•	Number of conservation easements included i structure listed in the National Register	n (c) acquired after 8/17/06, and not on a histo	ric 2 d
3	Number of conservation easements modified, trar tax year ►	sferred, released, extinguished, or terminated by t	he organization during the
4	Number of states where property subject to conse	rvation easement is located >	
5	Does the organization have a written policy re and enforcement of the conservation easemer	garding the periodic monitoring, inspection, haints it holds?	ndling of violations,
6	Staff and volunteer hours devoted to monitoring, i	nspecting, and enforcing conservation easements	during the year
7	Amount of expenses incurred in monitoring, insper ▶\$	ecting, and enforcing conservation easements during	ng the year
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of se	ection 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote conservation easements	conservation easements in its revenue and expend to the organization's financial statements that o	nse statement, and balance sheet, and describes the organization's accounting for
Pai	Complete if the organization ans	ctions of Art, Historical Treasures, or wered 'Yes' to Form 990, Part IV, Ime	Other Similar Assets. 8.
1 :	all the organization elected, as permitted under art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its finar	eld for public exhibition, education, or research in fi	nue statement and balance sheet works of urtherance of public service, provide,
١	b If the organization elected, as permitted under historical treasures, or other similar assets held for following amounts relating to these items	r SFAS 116 (ASC 958), to report in its revenue or public exhibition, education, or research in further	statement and balance sheet works of art, erance of public service, provide the
	(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, hamounts required to be reported under SFAS		ncial gain, provide the following
	a Revenues included in Form 990, Part VIII, line	: 1	► \$
	b Assets included in Form 990. Part X		►\$

Schedule D (Form 990) 2012 Y. S. Part III. Organizations Maintain	Mae Foundat	ion s of Art. Histor	ical Treasures.	95-43 or Other Similar As		Page 2
3 Using the organization's acquisition,						
items (check all that apply)	accession, and once			J	Concettori	
a Public exhibition		Н "	r exchange program	1S		
b Scholarly research	h	e Other				
c Preservation for future genera 4 Provide a description of the organiza		d evalua how they t	further the organization	on's exempt purpose in		
Part XIII						
5 During the year, did the organizati to be sold to raise funds rather that	an to be maintained	d as part of the org	ganızatıon's collecti	on?	Yes	No
Part IV Escrow and Custodial Arra reported an amount on	ngements. Comple Form 990, Par	te if the organiza t X, line 21.	tion answered 'Yes	' to Form 990, Part IV, li	ne 9, or	
1 a Is the organization an agent, trust on Form 990, Part X?	ee, custodian, or o	ther intermediary t	for contributions or	other assets not included		
b If 'Yes,' explain the arrangement i	n Part XIII and con	nplete the followin	a table		Yes	No
,p			5		Amount	
c Beginning balance				1 c		
d Additions during the year				1 d		
e Distributions during the year				1 e		
f Ending balance				1 f		
2a Did the organization include an an		•			Yes	No
b If 'Yes,' explain the arrangement i	n Part XIII Check I	nere if the explant	ion has been provid	led in Part XIII	L	_
Part:V Endowment Funds. Co	mplete if the or	rganization ans	wered 'Yes' to F	orm 990 Part IV. II	ne 10	
	(a) Current	(b) Prior year	(c) Two years	(d) Three years	(e) Four year	'S
1 a Beginning of year balance						
b Contributions						
c Net investment earnings, gains,						
and losses d Grants or scholarships						
e Other expenditures for facilities	<u> </u>					
and programs						
f Administrative expenses						
g End of year balance 2 Provide the estimated percentage	of the current year	and halance (line	1g column (a)) ha	ld ac:		
a Board designated or quasi-endowme	-	end balance (iiiie	ry, column (a)) ne	iu as		
b Permanent endowment ►		°				
c Temporarily restricted endowment	· •	%				
The percentages in lines 2a, 2b, a		100%				
3 a Are there endowment funds not in the	e possession of the	organization that ar	e held and administer	red for the	Yes	No
organization by (i) unrelated organizations.					3a(i)	
(ii) related organizations					3a(ii)	
b If 'Yes' to 3a(II), are the related or	ganizations listed a	as required on Sch	edule R?		3b	
4 Describe in Part XIII the intended	uses of the organiz	ation's endowmer	nt funds		<u> </u>	
Part VI Land, Buildings, and E	quipment. See	Form 990, Par	t X, line 10.			
Description of property	(a) Co	st or other basis nvestment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book va	lue
1 a Land				The Control of the		
b Buildings			_			
c Leasehold improvements						
d Equipment					<u> </u>	
e Other					<u> </u>	
Total. Add lines 1a through 1e (Column	n (d) must equal Fo	rm 990, Part X, co	olumn (B), line 10(c)		 dule D (Form 990)	0.
BAA				Schei	(290 Poim) ن عامد	12012

	(Form 990) 2012 Y. S. Mae Foundat:			95-430	9736	Page 3
Part VII	Investments - Other Securities. See		line 12.	N/A		
	(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valuation end-of-year market v	Cost or value	
(1) Financi	ial derivatives					
	r-held equity interests					
(3) Other						
(A)						
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
(l)						
Total (Colun	nn (b) must equal Form 990, Part X, column (B) line 12)				<u>-</u>	
Part VIII	Investments - Program Related. See	Form 990, Part X,	line 13.	N/A		
	(a) Description of investment type	(b) Book value		(c) Method of valuation:	Cost or	
				end-of-year market v	/alue	
(1)						
(2)				-		
(3)					-	
(4)					_ 	
(5)						
(6)						
(7)						
(8)						
(9)				. <u></u>		
(10)						
	nn (b) must equal Form 990, Part X, column (B) line 13)					
Part IX	Other Assets. See Form 990, Part X, 1			· · · · · · · · · · · · · · · · · · ·	455	
(1) T.O.		scription			(b) Book v	
	MEDIA LP PARTNERSHIP	· · · · · · · · · · · · · · · · · · ·			830	<u>,590.</u>
(2)						
(3)	.					
(4)						
(5)						
(6)					··· · · · · · · · · · · · · · · · ·	
(7)						
(8)						
(9) (10)						
	lumn (b) must equal Form 990, Part X, column (l	2) /mo 15)		•	020	\ F00
		· · · · · · · · · · · · · · · · · · ·			830),590.
Part X	Other Liabilities. See Form 990, Part 2	X, line 25. (b) Book value				
(1) Fodo	ral income taxes	(b) Book value				
 	Tal IIICOITIE taxes					
(2)						
(3)						
(4)						
(5) (6)						
(7)						
(8)		+				
(9)						
(10)	· · · · · · · · · · · · · · · · · · ·					
						
(11)	(b) and and Form 000 Daily 1 (D) 1 (C)					
1 Otal. (Colun	nn (b) must equal Form 990, Part X, column (B) line 25)	to the experience form 1	atate	hat rangets the assessment to be to	for weets 1	and to
∠. rin 48 (A	SC 740) Footnote In Part XIII, provide the text of the footnote	o me organization's financial	statements t	nat reports the organization's liability	ior uncertain tax	positions

Schedule D (Form 990) 2012 Y. S. Mae Foundation		<u>95-43097</u> 36	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statemer	nts With Revenue per	Return N/A	
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	2 a		
b Donated services and use of facilities	2 b	-	
c Recoveries of prior year grants	2 c	7	
d Other (Describe in Part XIII)	2 d	7	
e Add lines 2a through 2d		2 e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:]]		
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
b Other (Describe in Part XIII)	4 b	\dashv	
c Add lines 4a and 4b.			
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	
Part XII Reconciliation of Expenses per Audited Financial Stateme	nte With Evnences no	<u></u>	
1 Total expenses and losses per audited financial statements	into With Expenses pe	1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25			
a Donated services and use of facilities	2 a		
b Prior year adjustments	2 b	\dashv \vdash	
c Other losses	2c	\dashv \mid	
d Other (Describe in Part XIII)	2 d	\dashv \downarrow	
e Add lines 2a through 2d	20	2 e	
<u> </u>		3	
3 Subtract line 2e from line 1	1 1	3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
b Other (Describe in Part XIII)	4 b		
c Add lines 4a and 4b.		4 c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18))	5	
Part XIII Supplemental Information	<u> </u>		
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, F line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also cor	art III, lines 1a and 4, Part nplete this part to provide a	IV, lines 1b and 2b, Pany additional informat	art V, ion.
			
			00. 00.5
BAA		Schedule D (Form 9	90) 2012

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

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

2012

OMB No 1545-0047

Open to Public Inspection

Employer identification number

95-4309736

Y. S. Mae Foundation
Part | General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

ջ □

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

XYes

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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 of non cash assistance	(h) Purpose of grant or assistance
(1) FALLEN SEED MISSION 2129 HOLISTER TERRACE CLENDALE, CA 91206	61-1436189		10,000.	0			Mission outreach program
(2) UMC	99-0354966		124,200.	0.			GENERAL EVANGELISM
(3) UNITED METHODIST FOUNDATION	95-1644636		30,000.	0			GENERAL EVANGELISM
(4)							
(5)							
<u>\(\alpha\) \\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>							
(8)							
2 Enter total number of section 501(c)(3) and government organizations 3 Enter total number of other organizations listed in the line 1 table	3) and government or lone line	suoi	listed in the line 1 table			A A	3

Schedule 1 (Form 990) (2012)

TEEA3901L 11/30/12

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

Page 2 Part III: Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed 95-4309736 S. Mae Foundation

×.

Schedule I (Form 990) (2012)

(f) Description of non-cash assistance Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients additional information. (a) Type of grant or assistance ~ ო 4 Ŋ 9

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Schedule I (Form 990) (2012)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545 0047 2012

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service	► Attach to F	Form 990 or 990-EZ.		Open to Public Inspection
Name of the organization			Employer identifica	
Y. S. Mae Foundation			95-430973)
Form 990, Part VI, Line	11b - Form 990 Review Pro	cess		
No review was or w	vill be conducted			
Form 990, Part VI, Line	19 - Other Organization Do	cuments Publicly Available		
No documents avail	able to the public.			
				
				
				
				