

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



**Return of Organization Exempt From Income Tax** 

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

OMB No 1545-0047

Department of the Treasury

benefit trust or private foundation)

**Open to Public** 

Interr	nal Reveni	ue Service	The organization may have	re to use a c	opy or this return to s	alisty state	, ich	orting re	quirements	<u> </u>	mspecuo	Ш.
Α_	For the	e 2012 ca	lendar year, or tax year beginni	ng	7/1/2012	, and	d en	ding	6/3	0/2013		
В	Check if a	applicable	C Name of organization Interna	ational Scho	ol of Kenya Found	ation, Inc			) Employe	r identificatio	n number	
	Address (	change	Doing Business As		<del></del>			5	2-174630	7		
$\square$	Name ch	ange	Number and street (or PO box if ma	all is not deliver	ed to street address)	Room/suite	,	1	Telephon	e number		
一 同	nitial retu	ntu	PO Box 5910					0	609) 452-0	ngan		
=	Terminate		City, town or post office, state, and 2	'IP code		<u> </u>			303) 432-0	3330		
$\equiv$			Princeton	0000	NJ	0854	2		Gross rec	eints \$	9.0	087,435
=	Amended				140	0004	- 1			<del></del>		
<b>□</b> ′	Application	on pending	F Name and address of principal office							urn for affiliates	=	× №
			John Roberts, c/o ISS 15 Rosz	zel Road, Pr	rinceton, NJ 08540			H(b) Are a	ill affiliates in	cluded?	Yes	No No
1 7	ax-exem	pt status	X 501(c)(3) 501(c) (	) ◀ (insei	rt no ) 4947(a)(1)	or 52	27	If "N	o," attach a li	st (see instruc	tions)	
J V	Vebsite	e: ► Nor						H(c) Grou	p exemption	number >		
				[		Π.						
		rganization		Association	Other >		Year	of formati	<sup>on</sup> 1992	M State o	f legal domicile	NJ
Р	art l		mmary									
	1	Briefly d	lescribe the organization's miss	on or most	significant activities	5 <u>T</u> ř	ne p	rimary p	urpose of	the organiz	zation	
		is to pro	vide financial and other assista	nce to educ	ational institutions i	n the Uni	ted					
၁င		States and abroad										
Activities & Governance												
Ş.	2	Check th	his box ▶ ☐ if the organizati	on discontir	nued its operations	or dispos	ed c	of more	than 25%	of its net as	ssets	
ŏ	3		of voting members of the gove							3		4
S.	4		of independent voting member		•	/L line 1h	١			4		3
V Iţ	5		mber of individuals employed in	_			,			5		71
cti	6		mber of volunteers (estimate if		cai 2012 (i ait v, iii	ic za,				6		<del></del>
•	7a		related business revenue from				7a					
	b		elated business taxable income	· ·			7b					
	5	INEL UITE	elated business taxable income	nom Form			Ç		Prior Year	1 / 10	Current Yea	
		Contribu	itions and grants (Bart VIII, line	1b)	The same	THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COL	8	'		1 755	Current rea	
e	8		utions and grants (Part VIII, line		RO 20 - 129	5013	4 ~~·	<u> </u>		1,755		5,935
Revenue	9	-	n service revenue (Part VIII, line	<b>.</b>		601-	100	R U	10,57			68,842
å	10		ent income (Part VIII, column (A			4	265			5,658	<u> </u>	12,658
	11		evenue (Part VIII, column (A), lir				-	₫		- 0		0
	12		enue—add lines 8 through 11 (mu			e=(Z)			10,64			87,435
	13		and similar amounts paid (Part I				F		1,47	4,477	5,8	346,664
	14		•	I to or for members (Part IX, column (A), line 4)						0		0
S	15		other compensation, employee b	•		5–10)	-		6,05	0,964	6,5	<u>521,035</u>
Sus	16a		ional fundraising fees (Part IX, d				L	to 4 Ni		0		0
Expenses	b		ndraising expenses (Part IX, col				ᆜ	多分出		HAN ON	<b>*</b>	. *, =
ш	17		kpenses (Part IX, column (A), lii				L			2,939		55,217
	18	Total ex	penses Add lines 13-17 (must	equal Part I	X, column (A), line	25)	L		7,57	8,380	12,4	22,916
	19	Revenu	e less expenses Subtract line 1	8 from line	12		$\perp$		3,06	9,384	-3,3	<u>35,481</u>
Net Assets or Fund Balances							L	Beginnin	g of Current	t Year	End of Year	<u> </u>
sets	20	Total as:	sets (Part X, line 16)				L		6,18	8,877	2,8	352,146
t As	21	Total lial	bilities (Part X, line 26)				L		1.	5,103		13,853
ž.	22	Net asse	ets or fund balances Subtract li	ne 21 from	line 20				6,17	3,774	2,8	38,293
Pa	rt II	Sig	nature Block									
Unde	er penaltı		y, I declare that I have examined this retu	ım, including ad	ccompanying schedules	and stateme	nts, a	and to the	best of my ki	nowledge	•	
and	belief, it i	s true, corre	ect, and complete. Declaration of prepare	Other than of	ficer) is based on all info	mation of w	hich	preparer h	as any know	ledge		
Sig	ın		Denar U.	\uma	<del>ገ</del>					0/8/13		
			Signature of officer						Date	/ /		
∍He⊩ –			Deirdre A Simon, Treasurer									
5			Type or print name and title									
1		Prin	t/Type preparer's name	Prepa	rer's signature			Date			PTIN	
( <u>P</u> ai	id								ì	heck i	f	
Pre	parer	r						<del></del> _		self-employed		
			n's name					F	irm's EIN 🕨			
Co	e Only	Firm	n's address ▶					F	hone no			
	3		s this return with the preparer s	hown above	e? (see instructions	3)					Yes	No,
- 9	~ · · · · · ·				,	,						

For Paperwork Reduction Act Notice, see the separate instructions.

Form 9	90 (2012)	International School of Kenya Foundation, Inc	52-1746307	Page <b>2</b>
Pa	rt III	Statement of Program Service Accomplishments		
		Check if Schedule O contains a response to any question in this Part III		
1 '	Briefly	describe the organization's mission		
	The prii	mary purpose of the organization is to provide financial and other assistance to onal institutions in the United States and abroad		
2	Did the	organization undertake any significant program services during the year which were not listed on		
	the prio	or Form 990 or 990-EZ?	Yes	X No
		describe these new services on Schedule O		
3	Did the service:	organization cease conducting, or make significant changes in how it conducts, any program	Yes	X No
		' describe these changes on Schedule O	res	<u> </u>
4		be the organization's program service accomplishments for each of its three largest program services	s, as measured by	
	expens	es Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and all expenses, and revenue, if any, for each program service reported	·	
4a	(Code	) (Expenses \$ 12,370,932 including grants of \$ 1,600,000 ) (Revenue	ue \$ 9.068	3.842.)
	Provide School	s staff and other financial assistance for the furtherance of education at the International of Kenya, in Nairobi, Kenya a school for children Approximately 851 students served		·
4b	(Codo	) (Expenses \$ including grants of \$ ) (Revenue		
40	(Code	) (Liperises \$\phi) (Neverteen the first of \$\phi		
			**	·
4c	(Code	) (Expenses \$ including grants of \$ ) (Revenue	 .ie \$	
	• • • • • • • • • • • • • • • • • • • •			· ′
4d	Other p	rogram services (Describe in Schedule O )		<del></del>
	(Expen		0)	
4e	Total n	rogram service expenses ► 12 370 932		

candidates for public office? If "Yes," complete Schedule C, Part I

Yes No

#### Part IV \_\_Checklist of Required Schedules

1.	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to

- 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
- 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
- 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
- 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*
- 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III
- 9 Did the organization report an amount 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
- 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V
- 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable
  - a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI
  - **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
  - 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
  - **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
  - e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part 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
- 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII
  - 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
- 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 14a Did the organization maintain an office, employees, or agents outside of the United States?
- **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*
- 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
- 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
- 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)
- 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
- 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
- 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H
   b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

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	11e 11f 12a 12b 13 14a	X	X X X
	11e 11f 12a 12b 13 14a 14b	X	X X
	11e 11f 12a 12b 13 14a	X	x x x x
	11e 11f 12a 12b 13 14a 14b	X	X X
	11e 11f 12a 12b 13 14a 14b 15	X	X
	11e 11f 12a 12b 13 14a 14b	X	X X
	11e 11f 12a 12b 13 14a 14b 15	X	X
	11e 11f 12a 12b 13 14a 14b 15 16	X	x x x
	11e 11f 12a 12b 13 14a 14b 15	X	X
	11e 11f 12a 12b 13 14a 14b 15 16 17	X	x x x
	11e 11f 12a 12b 13 14a 14b 15 16 17	X	x x x
	11e 11f 12a 12b 13 14a 14b 15 16 17 18	X	x x x
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	11e 11f 12a 12b 13 14a 14b 15 16 17 18 19 20a 20b	X	x x x x x

## Part IV Checklist of Required Schedules (continued)

			Yes	No
21 `	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	H	t	
	organization's current and former officers, directors, trustees, key employees, and highest compensated	1		
	employees? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines		ŀ	
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Х
С	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		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	05-		v
_	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
D	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		Χ
26	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	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled		l	
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Χ
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	182	<u></u>	3, 4
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	4	<b>Š</b> .	7
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Χ
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			v
24	conservation contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32		31	<del> </del>	<u> </u>
JŁ	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?  If "Yes," complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			<del>~</del>
-	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,			
	III, or IV, and Part V, line 1	34	_	Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Χ
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		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		X
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		l	
	VI	37	_	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	x	
		Form	990 (	2012)

Form **990** (2012)

Part Va

Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			
•			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  1a 7	ŀ		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  [1b]  [Contact the number of Forms W-2G included in line 1a Enter -0- if not applicable in lin	, ··	, A.	® 1″≈
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X	-
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	16	<del>  ^-</del>	<del> </del>
Za	Statements, filed for the calendar year ending with or within the year covered by this return  2a 71		, î	21 -
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	12.5
~	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			<b></b> -
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	4	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		х
b	If "Yes," enter the name of the foreign country			t.c.
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	; <u>;</u> ; , , , , ,	<u> X.T</u>	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	ĺ		
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		4	3.6
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	\$ \$\frac{1}{2} \cdot \frac{1}{2} \cdot \frac{1}{	- 1	7(32/3
_	and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	<b>-</b> .		,
a	required to file Form 8282?  If "Yes." indicate the number of Forms 8282 filed during the year	7с		X .
d	If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		×
e f	Did the organization receive any littles, directly or indirectly, to pay premiums on a personal benefit contract?  Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		x
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<del>  ^</del>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	<del></del>	*	
•	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.	,	y (	) 1.c
а	Did the organization make any taxable distributions under section 4966?.	9a		
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 .		, i	
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		:	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		-	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	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  Enter the amount of respices on head			
с 14а	Enter the amount of reserves on hand  Did the organization receive any payments for indeer tanging societies during the tay year?	140		-
	Did the organization receive any payments for indoor tanning services during the tax year?  If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b		X
<u> </u>	n 100, has a nea a rotti 120 to report these payments in 140, provide an explanation in schedule O	עריין	ı	L

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI

	and the second s			• !	<u> </u>			
Sect	ion A. Governing Body and Management							
			2/84/2/88	Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year	4						
	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				i.			
	committee, explain in Schedule O			ð.				
b	<u> </u>							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relations	hip with		Anti-	Tink!			
	any other officer, director, trustee, or key employee?		2	Х				
3	Did the organization delegate control over management duties customarily performed by or under							
	supervision of officers, directors, or trustees, or key employees to a management company or other	r person?	3		X			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was	as filed?	4		Χ			
5								
6	Did the organization have members or stockholders?		6		Χ			
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		Х			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members							
-	stockholders, or persons other than the governing body?	1	7b		Х			
.8	Did the organization contemporaneously document the meetings held or written actions undertaken	n durina	100	9.00				
,0	the year by the following	· uaiiiig		1				
а	The governing body?		8a	Х	76672			
b	Each committee with authority to act on behalf of the governing body?		8b	$\frac{\hat{x}}{x}$				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	aachad	<del> </del>	$\stackrel{\sim}{-}$				
3	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	sacried	9		Х			
Soot	ion B. Policies (This Section B requests information about policies not required by the	Internal Payanya (	ـــــ	,	_^_			
Seci	ion b. Policies (11118 Section b requests illiornation about policies not required by the	internal Neverrue (	Jude.	Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?		10a	163	X			
b	If "Yes," did the organization have written policies and procedures governing the activities of such	chantore	IVa		_^_			
D	affiliates, and branches to ensure their operations are consistent with the organization's exempt pu	•	10b					
44-				$\overline{}$				
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	re ming the form?	11a	X	. :			
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990				ئىنىد			
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	oive miss to see Alisto	12a	X				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could g		12b	Х				
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	X	_			
13	Did the organization have a written whistleblower policy?		13	X	_			
14	Did the organization have a written document retention and destruction policy?		14	X				
15	Did the process for determining compensation of the following persons include a review and appro	-						
	independent persons, comparability data, and contemporaneous substantiation of the deliberation	and decision?		F.T.				
а	The organization's CEO, Executive Director, or top management official		15a		Х			
b	Other officers or key employees of the organization		15b	Х				
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)				<b>5</b> 300			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrang	ement			فتنظنا			
	with a taxable entity during the year?		16a		X			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate		•					
	participation in joint venture arrangements under applicable federal tax law, and take steps to safe	guard						
	the organization's exempt status with respect to such arrangements?		16b					
Sect	ion C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed ▶							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 99	0-T (Section 501(c)(3	s only	')				
	available for public inspection. Indicate how you made these available. Check all that apply		•					
		plaın ın Schedule O)						
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents,							
	policy, and financial statements available to the public during the tax year							
20	State the name, physical address, and telephone number of the person who possesses the books	and records of the						
	organization International Schools Services, Inc	(609) 452-09	990					
	15 Roszel Road, Princeton, NJ 08540							

Part VII	International School of Kenya Four		00 K	· · · ·					lighest Comp	52-17463	307 Page <b>7</b>
Part VII	Compensation of Officers, Dire Employees, and Independent O	-	es, r	rey		ipic	oyee	S, I	rignest Comp	ensated	
•	Check if Schedule O contains a r		y qu	estı	on i	n tl	hıs P	art	VII		
Section A.	Officers, Directors, Trustees, Key E	mployees, and	High	est	Con	npe	nsate	ed E	Employees		<del></del> _
	this table for all persons required to be	listed Report co	mper	ısat	on i	for t	he ca	len	dar year ending v	with or within the	;
organization's	•										
List all     List the     who received organization a	of the organization's current officers, dillion. Enter -0- in columns (D), (E), and (of the organization's current key employ organization's five current highest con reportable compensation (Box 5 of Forward any related organizations.)	F) if no compens byees, if any Sec npensated emplor m W-2 and/or Bo	sation e insti oyees ox 7 d	wa ructi s (ot of Fo	s pa ons her orm	for thai 109	defin n an d 99-Mi	itior offic SC)	n of "key employe er, director, trusto of more than \$1	ee " ee, or key emplo 00,000 from the	yee)
	of the organization's <b>former</b> officers, ke eportable compensation from the organ							ed e	employees who r	eceived more th	an
	of the organization's <b>former directors</b> of more than \$10,000 of reportable compe							•			the
	n the following order individual trustees employees, and former such persons	or directors, ins	stitutio	onal	trus	tee	s, offi	cer	s, key employees	s, highest	
Check the	s box if neither the organization nor any	related organiz	ation	cor	npe	nsa	ted a	ny c	urrent officer, dir	ector, or trustee	
(A) Name and Title		(B) Average hours per week (list any	box, unless person is both an officer and a director/trustee) compe						(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Kevin [	Doyle	4 00									
President	<del></del>	0 00		_	X	_	-	_			
(2) John R Vice Presiden		40 00 0 00	1		×		×		167,278		
(3) Deirdre	· · · · ·	4 00	+	-	Ĥ		<del>  ^</del>		101,210		
Secretary/Tre		0 00	1		x						
(4) Roger I	Hove	4 00									
Director	<del>-</del> · <del>-</del> · · · · · · · · · · · · · · · · · · ·	0 00	_		ļ	<u> </u>	ļ	<u> </u>			<u> </u>
	ateman	40 00							442.006		
Employee	ke	0 00 40 00	_	-			X		_ 113,926		
Employee		0 00	1	l			x		108,999		
(8)											
(9)											
(10)											
(11)											
(12)						-					

(13)

more than \$100,000 of compensation from the organization

P	Section A. Officers, Directors, Tru	ıstees, Key Em	ploye	es,	and	iH t	ghes	t C	ompensated Em	ployees (contin	ued)
	(A) Name and title	(B) Average hours per	untes	Pos eck s pe	rson	than o	an ee)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of	
		week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(15)											
(16)											
(17)											
(18)											
(19)											
(20)											
(21)											
(22)											
(23)											
(24)											-
(25)											
1b	Sub-total							<b>•</b>	390,203	0	C
С	Total from continuation sheets to Part VII, S	ection A						•	0	0	0
<u>d</u>	Total (add lines 1b and 1c)							<b>&gt;</b>	390,203	0	C
2	Total number of individuals (including but not lii		ted a			vho	recei	ved	more than \$100	,000 of	
	reportable compensation from the organization				3						Yes No
3	Did the organization list any <b>former</b> officer, dire employee on line 1a? <i>If</i> "Yes," complete Sched		•		oye	e, o	r higi	nesi	t compensated		3 X
4	For any individual listed on line 1a, is the sum of the organization and related organizations great individual									7	4 X
5	Did any person listed on line 1a receive or accifor services rendered to the organization? If "Y									idual	5 X
Sec	tion B. Independent Contractors	,									
1	Complete this table for your five highest compe compensation from the organization Report co year										ax
	(A) Name and business add	ress							(B) Description of serv	nces C	(C) Compensation
		<u> </u>						<u> </u>			0
		<del></del>						<del> </del>			
		<del> </del>						$\vdash$			<u>C</u>
2	Total number of independent contractors (inclu	ding but not limit	ed to	tho	se l	ste	d abo	ve)	who received	<del></del>	<u>*</u>

# Part VIII Statement of Revenue

		Check if Schedule O contains	a response	to a	iny question in th	nis Part VIII			
			77 <b>%</b> %:	1 11		(A)	(B)	(C)	(D)
				. 7578		Total revenue	Related or exempt	Unrelated business	Revenue excluded from
*							function	revenue	tax under sections
1	3.2		<u> </u>	•	· · · · · · · · · · · · · · · · · · ·		revenue		512, 513, or 514
ts ts	1a	Federated campaigns		<u>1a</u>	0				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues		1b	0	100	1 4 2 2	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	9E / 1
	С	Fundraising events		1c	0	E to be the second			
Grft lar,	d	Related organizations		<u>1d</u>	0				
ns,	е	Government grants (contributions		<u>1e</u>	0				
utio er §	f	All other contributions, gifts, gran						1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
trib Oth		similar amounts not included abo	L L	1f	5,935				
Son	g	Noncash contributions included in li	nes 1a-1f	\$	0				
	h	Total. Add lines 1a-1f			<u> </u>	5,935			1.4 42 12 12
ne					Business Code	22.20	3/1/2 45 32	100 mg 144	
Program Service Revenue	2a	Int'l School of Kenya - Educ fees			611710	9,068,842			
Re	b		<b></b>			0			
VICE	С					0			
Ser	d					0			
ä	е	***************************************				0			
rogr	f	All other program service revenu	e			0			
ā	g	Total. Add lines 2a-2f			<b>•</b>	9,068,842	-78 A 18 B		
	3	Investment income (including div	idends, inter	est,	and				
1		other similar amounts)			•	12,658			12,658
	4	Income from investment of tax-ex	oroc	eeds <b>&gt;</b>	0				
	5	Royalties			<b>&gt;</b>	0		XM000C 1 - Y " Y W	
	_	_	(ı) Real		(II) Personal			7 6 3 1 2 2	4 -63 H
	6a	Gross rents							
	b	Less rental expenses							
	C	Rental income or (loss)		0	0				
	d	Net rental income or (loss)	·		<u> </u>	0			
	7a	Gross amount from sales of	(i) Securities		(II) Other				
	_	assets other than inventory		_0	0		4, 17	, <u>.</u>	
	b	Less cost or other basis		_	_				
		and sales expenses		_0	0	A ME SAN			
	C	Gain or (loss)		0	0				
	d	Net gain or (loss)			<u> </u>	0	X.7.	E.5" /	
a	0-	C				,	Ş.		
II.	8a	Gross income from fundraising	0				`*	5, er 1	,
Š		events (not including \$	0				<b>*</b> ~	g r	gi a
ğ		of contributions reported on line 3 See Part IV, line 18	10)		0		, ,, ,,	: ; ,,k	
Other Revenue	<b>.</b>	Less direct expenses		a b	0		` ′		
ŏ	b	Net income or (loss) from fundrai	cina cuenta	וט		<u>_</u>			3,4,
Į	c 9a	Gross income from gaming activi	-	1		<u> </u>			
	Ja	See Part IV, line 19	ues	а	0				
	b	Less direct expenses		b	0			•	
	C	Net income or (loss) from gaming	activities	D		0			
		Gross sales of inventory, less	activities				, į	¥	v ta
		returns and allowances		а	0			×.	
	b	Less cost of goods sold		b	0				
		Net income or (loss) from sales of	f inventory	(		0	· · · · · · · · · · · · · · · · · · ·		
ŀ		Miscellaneous Revenue	. inventory		Business Code			<u></u>	
ŀ	11a					. 0			
	b					0			
	c					0			
	d	All other revenue	• • • • • • • • • • • • • • • • • • • •			0			
	e	Total. Add lines 11a–11d		'	<b>•</b>	0		2	
	12	Total revenue. See instructions			<b>&gt;</b>	9,087,435	0	0	12,658

52-1746307

Statement of Functional Expense	Part IX	Statement of Function	onal Expenses
---------------------------------	---------	-----------------------	---------------

Secti	on 501(c)(3) and 501(c)(4) organizations must complete all Check if Schedule O contains a response to any			complete column (A	)
		<del>- j</del>		(C)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21	0		figural, the	
2	Grants and other assistance to individuals in the				
	United States See Part IV, line 22	0			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the			1 - 30	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	United States See Part IV, lines 15 and 16	5,846,664	5,846,664	15 min 1 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
4	Benefits paid to or for members			t-1865 Profesionse	
5	Compensation of current officers, directors,				
	trustees, and key employees	167,278	167,278		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	5,635,418	5,635,418		_
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	467,214	467,214		
9	Other employee benefits	0			
10	Payroll taxes	251,125	251,125		
11	Fees for services (non-employees)				
а	Management	39,848		39,848	
b	Legal	0			
С	Accounting	7,184		7,184	
d	Lobbying	0	Sh. C " Programmer	1	
е	Professional fundraising services See Part IV, line 17				_
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column				
40	(A) amount, list line 11g expenses on Schedule O)	0			
12	Advertising and promotion	0 747	<del></del>	0.747	
13	Office expenses	2,717		2,717	
14	Information technology	0			
15	Royalties	0			
16	Occupancy	0			
17	Travel	0			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
10	Conferences, conventions, and meetings	0			-
19 20	Interest	0		<del></del>	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0	0	0	
23	Insurance	2,235		2,235	
24	Other expenses Itemize expenses not covered	2.24.20.24	W. 1980 - 11 17 18 19 17 1	18.	. \$10 \$140
	above (List miscellaneous expenses in line 24e If			- "	
	line 24e amount exceeds 10% of line 25, column				وُ دَمُ هُو مِنْ اللهِ
	(A) amount, list line 24e expenses on Schedule O)			- ,	
а	Miscellaneous	3,233	3,233		
b		0			
С		0			
d		0			
е	All other expenses	0			
25	Total functional expenses. Add lines 1 through 24e	12,422,916	12,370,932	51,984	C
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 III if				
	following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response to any question in this Part X			
			(A)		(B)
			Beginning of year		End of year
	1	Cash—non-interest-bearing		1_	
	2	Savings and temporary cash investments	5,057,287	2	1,676,545
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees		M77-	
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section	, 39. t		
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and		1.5	
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
ets		organizations (see instructions) Complete Part II of Schedule L		6_	
Assets	7	Notes and loans receivable, net	0	7_	0
⋖	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	1,063	9	2,977
	10a	Land, buildings, and equipment cost or			
		other basis Complete Part VI of Schedule D 10a 0	<u> </u>		323
	b	Less accumulated depreciation 0	0	10c	0
	11	Investments—publicly traded securities	1,130,527	11	1,172,624
	12	Investments—other securities See Part IV, line 11	0	12	0
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	6,188,877	16	2,852,146
	17	Accounts payable and accrued expenses	15,103	17	13,853
	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	
Liabilities	22	Loans and other payables to current and former officers, directors,	ř		
ilit		trustees, key employees, highest compensated employees, and	L'q	. ^	,
iak		disqualified persons Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete		0.5	
	00	Part X of Schedule D	0	25 26	12.052
	26	Total liabilities. Add lines 17 through 25	15,103	20	13,853
Ś		Organizations that follow SFAS 117 (ASC 958), check here ► X and		-	
JCe		complete lines 27 through 29, and lines 33 and 34.	· · · · · · · · · · · · · · · · · · ·		
Balances	27	Unrestricted net assets	6,173,774	27	2,838,293
Bâ	28	Temporarily restricted net assets		_28_	
nd	29	Permanently restricted net assets		29	
or Fund		Organizations that do not follow SFAS 117 (ASC958), check here			
		complete lines 30 through 34.	* `		•
ets	30	Capital stock or trust principal, or current funds	· · · · · · · · · · · · · · · · · · ·	30	······································
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
∍t ⊅	32	Retained earnings, endowment, accumulated income, or other funds		32	
ž	33	Total net assets or fund balances	6,173,774		2,838,293
	34	Total liabilities and net assets/fund balances	6,188,877	34	2,852,146

ronn	990 (2012) International School of Kenya Foundation, Inc	5	2-1/4630/	Page	: 12
Par	XI ? Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI			Ε	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		9,087,	<del></del> 435
2	Total expenses (must equal Part IX, column (A), line 25)	2	12	2,422,	916
3	Revenue less expenses Subtract line 2 from line 1	3	-:	3,335,	481
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	- (	5,173,	774
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			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	2	2,838,	293
Part	·			_	
	Check if Schedule O contains a response to any question in this Part XII			L	_]
				Yes	No
1	Accounting method used to prepare the Form 990		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O			7 V.	
2a	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		[* ]		
	reviewed on a separate basis, consolidated basis, or both				
	X Separate basis			Ĭ,	
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		<b>,</b> , ,		
	separate basis, consolidated basis, or both				
	X Separate basis Consolidated basis Both consolidated and separate basis			-,	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			3.75	
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	ا .مدد سافط <b>ت</b>	X
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				ŗ.
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				<u> </u>
	the Single Audit Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	_	
			Form	990 (2	012)

### SCHEDUL'E A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

# **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
2012

Open to Public Inspection

Name of the organization Employer identification number International School of Kenya Foundation, Inc. 52-1746307 Reason for Public Charity Status (All organizations must complete this part ) See instructions Part I The organization is not a private foundation because it is (For lines 1 through 11, check only one box) 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). 4 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 5 in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II ) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4), 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a | Type I c | Type III-Functionally integrated d | Type III-Non-functionally integrated Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified

509(a)(1) or section 509(a)(2)

If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

persons other than foundation managers and other than one or more publicly supported organizations described in section

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii) A family member of a person described in (i) above?

(iii) A 35% controlled entity of a person described in (i) or (ii) above?

11g(ı) 11g(ıı) 11g(ııi)

Yes

No

(iii) A 359	% controlled entity	y of a person described	d in (i) or (	(II) above?					11g(ni)	
h Provide the	following informa	tion about the support	ed organi:	zation(s)						
(i) Name of supported organization	(iı) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	d on lines 1–9 in col. (i) listed in your the organization in organization in col. IRC section governing document? col. (i) of your (i) organized in the				tion in col zed in the	(vii) Amount of moi support	netary	
			Yes	No	Yes	No	Yes	No	1	
(A)										
(B)										
(C)										
(D)										
(E)										
Total				A Contract of						

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III) Section A. Public Support (f) Total Calendar year (or fiscal year beginning in) (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 0 3 The value of services or facilities furnished by a governmental unit to the organization without charge 0 4 Total. Add lines 1 through 3 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) 0 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total 7 Amounts from line 4 0 0 0 0 0 0 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 0 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 Gross receipts from related activities, etc. (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 0 00% 15 0 00% Public support percentage from 2011 Schedule A, Part II, line 14 15 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test-2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 17a is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

#### 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)

Sec	tion A. Public Support			-			
	endar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received (Do not include any "unusual grants")	6,575,722	6,744,466	9,569,364	10,572,106	9,068,842	42,530,500
2	Gross receipts from admissions, merchandise	•					
	sold or services performed, or facilities furnished					j	
	in any activity that is related to the						
	organization's tax-exempt purpose						0
3	Gross receipts from activities that are not an						•
	unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's benefit and either paid to or expended on						
	its behalf						0
5	The value of services or facilities						
•	furnished by a governmental unit to the						
	organization without charge						0
6	Total. Add lines 1 through 5	6,575,722	6,744,466	9,569,364	10,572,106	9,068,842	42,530,500
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						0
b	Amounts included on lines 2 and 3 received			`			
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the	4 570 000	4 004 405	4 407 404	4 500 000	4 440 004	7.050.470
_	amount on line 13 for the year  Add lines 7a and 7b	1,573,980 1,573,980	1,001,425 1,001,425	1,437,484 1,437,484	1,589,003 1,589,003	1,448,281 1,448,281	7,050,173 7,050,173
с 8	Public support (Subtract line 7c from	1,373,960 21 22 3 3 3 3	1,001,425	1,437,404	1,569,003	1,440,201	7,050,173
Ü	line 6)				**,		35,480,327
Sec	tion B. Total Support	7,000	A STATE OF THE STA				
	ndar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	6,575,722	6,744,466	9,569,364	10,572,106	9,068,842	42,530,500
10a	Gross income from interest, dividends,	0,373,722	0,744,400	9,309,304	10,372,100	9,000,042	42,000,000
IVa	payments received on securities loans,						
	rents, royalties and income from similar sources	-40,457	76,297	102,788	75,658	12,658	226,944
b	Unrelated business taxable income (less	·	·	·			· · · · · · · · · · · · · · · · · · ·
	section 511 taxes) from businesses						
	acquired after June 30, 1975						0
С	Add lines 10a and 10b	-40,457	76,297	102,788	75,658	12,658	226,944
11	Net income from unrelated business						
	activities not included in line 10b, whether						•
40	or not the business is regularly carried on						0
12	Other income Do not include gain or loss from the sale of capital assets						
	(Explain in Part IV)						0
13	Total support. (Add lines 9, 10c, 11,						
	and 12)	6,535,265	6,820,763	9,672,152	10,647,764	9,081,500	42,757,444
14	First five years. If the Form 990 is for the organization						
	organization, check this box and stop here						▶ 🛄
Sec	tion C. Computation of Public Support	Percentage					
15	Public support percentage for 2012 (line 8, column	(f) divided by line	e 13, column (f))			15	82 98%
16	Public support percentage from 2011 Schedule A, F	Part III, line 15				16	80 59%
Sec	tion D. Computation of Investment Inco	me Percenta	ige				
17	Investment income percentage for 2012 (line 10c, o		•	mn (f))	ļ	17	0 53%
18	Investment income percentage from 2011 Schedule				[	18	0 78%
19a	33 1/3% support tests—2012. If the organization is						<b>⊾</b> 🐯
h	not more than 33 1/3%, check this box and stop he	-	•		•		<b>▶</b> X
b	33 1/3% support tests—2011. If the organization of line 18 is not more than 33 1/3%, check this box an			· ·		·	▶ □
20	Private foundation. If the organization did not che					=	

	990 or 990-EZ) 2012	International 3	School of Kenya	a Foundation, I	nc		52-1746307	Page 4
Part IV	Supplemental Part II, line 17a	Information.	Complete this	s part to prov	ide the explan		by Part II, lin	e 10,
	instructions).	<u> </u>	<del></del>				<del></del>	<u> </u>
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Schedule A (Form 990 or 990-EZ) 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, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

OMB No 1545-0047
2012

Open to Public Inspection

Employer identification number

International School of Kenya Foundation, Inc. 52-1746307 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete If Part I 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) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Part II Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of an historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 easement on the last day of the tax year Held at the End of the Tax Year 2a Total number of conservation easements а 2b Total acreage restricted by conservation easements b 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 on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization 3 during the tax year Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? Yes In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8 If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of 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 \$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

	ule D (Form 990) 2012 International School of Ke						52-1746			Page <b>2</b>
Par	III Organizations Maintaining Colle							ts (cor	ntınued	1)
3	Using the organization's acquisition, accession		ecords,	check any	of the follow	ing that a	ire a significant			
	use of its collection items (check all that apply	у)	~ [	Loon	or exchange	nroarom	_			
а			d		or exchange	program	•			
b	Scholarly research		e	Other					· <b></b>	
С	Preservation for future generations									
4	Provide a description of the organization's co Part XIII	llections and e	explain h	ow they fu	irther the org	anızatıon	's exempt purpo	ose in		
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to							Y	es 🔲	No
ar	IV Escrow and Custodial Arranger	nents. Com	olete if t	he orgar	nization ans	wered "	Yes" to Form	990, Pa	art	
	IV, line 9, or reported an amount of									
1a	Is the organization an agent, trustee, custodia				ributions or of	ther asse	ets not			
	included on Form 990, Part X?							Y	es 🔙	No
b	If "Yes," explain the arrangement in Part XIII	and complete	the follow	wing table						
							,	Amount		
С	Beginning balance					1c	ļ			0
d	Additions during the year					1d	ļ			
е	Distributions during the year					1e			-	
f	Ending balance					1f				0
2a	Did the organization include an amount on Fe	orm 990, Part	X, line 2	17				Y	es X	No
b	If "Yes," explain the arrangement in Part XIII	Check here if	the expl	anation ha	as been provi	ded in Pa	art XIII			
art	V Endowment Funds. Complete if	the organiza	tion ans	swered "	Yes" to Forr	n 990, F	Part IV, line 10	)		
		Current year		or year	(c) Two years		d) Three years back		our years	back
1a	Beginning of year balance	0		0		0		0		
b	Contributions	-								
С	Net investment earnings, gains,									
	and losses							<u> </u>		
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs				ļ					
f	Administrative expenses							_		
g	End of year balance	0		0		0		0]		0
2	Provide the estimated percentage of the curr	ent year end t	palance (	line 1g, co	olumn (a)) nei	id as				
a	Board designated or quasi-endowment	0/								
b	Permanent endowment	<u>%</u> %								
С	Temporarily restricted endowment  The percentages in lines 2a, 2b, and 2c should be a shou		<u>,</u>							
3a	Are there endowment funds not in the posses	•		n that are	held and ad	ministere	ed for the			
Ja	organization by	331011 01 1110 01	garnzan	or that are	, ricia aria aa	iiiiiiiotei e	a for the		Yes	No
	(i) unrelated organizations							3a(i)	100	
	(ii) related organizations							3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations	s listed as regi	uired on	Schedule	R۶			3b		
4	Describe in Part XIII the intended uses of the									
ar							<del>-</del>			
	Description of property	(a) Cost or oth			ost or other	(c) A	ccumulated	(d) B	Book valu	<del></del> е
		(investme			ıs (other)		preciation			
1a	Land		0		0	,	· £			0
b	Buildings		0		0		0			0

Leasehold improvements 0 0 Equipment 0 0 0 Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c) ) 0

Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

▶

(10)

Scried	international School of Renya Foundation, Inc			<u> 52-17463</u>	307 Page 4
Par	Reconciliation of Revenue per Audited Financial Statemer	nts W	ith Revenue per	Return	
1	Total revenue, gains, and other support per audited financial statements			1	9,087,435
2٠	Amounts included on line 1 but not on Form 990, Part VIII, line 12			23	
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII )	2d			
е	Add lines 2a through 2d			2e	0
3	Subtract line 2e from line 1			3	9,087,435
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
þ	Other (Describe in Part XIII )	4b		23. 22.	
С	Add lines 4a and 4b			4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	9,087,435
Par	Reconciliation of Expenses per Audited Financial Stateme	ents V	Vith Expenses p	er Retur	'n
1	Total expenses and losses per audited financial statements			1	12,422,916
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			(255	
а	Donated services and use of facilities	2a		· .;	
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII )	2d			
е	Add lines 2a through 2d			2e	0
3	Subtract line 2e from line 1			3	12,422,916
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			, * S *	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
С	Add lines 4a and 4b			4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	12,422,916
Par	XIII Supplemental Information				
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part	t III, line	es 1a and 4, Part IV	/, lines 1b	and 2b,
	V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also				
	onal information		, .	•	
	•				
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Schedule D (Form		International	School of Keny	a Foundation,	Inc		 52-1746307	Page 5
Part XIII	Suppl	emental Info	rmation (cont	tınued)				
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# 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.

OMB No 1545-0047
2012

Open to Public Inspection

Name of the organization

Department of the Treasury

Name of the organization Employer identification number 52-1746307 International School of Kenya Foundation, Inc. General Information on Activities Outside the United States. Complete if the organization answered "Yes" to 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' eliqibility for the grants or assistance, and the selection criteria used to award Yes the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States 3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (c) Number of (b) Number of (d) Activities conducted in (e) If activity listed in (d) is (f) Total (a) Region expenditures for a program service, offices in the employees, region (by type) (e g, and investments describe specific type of region agents, and fundraising, program in region independent services, investments, service(s) in region grants to recipients contractors in region located in the region) Sub-Saharan Africa Teachers salaries & benefits (1) 71 Educational Services 6,521,035 Sub-Saharan Africa **Educational Support** Materials for School 4,246,664 (2) (3) (4) (5) (6) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17) 10,767,699 0 3a Sub-total **b** Total from continuation

0

0

10,767,699

sheets to Part I

C Totals (add lines 3a and 3b)

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000 Part II can be duplicated if additional space is needed Part II

(i) Method of valuation (book, FMV, appraisal, other)															
(h) Description of non-cash assistance															
(g) Amount of non-cash assistance							-								
(f) Manner of cash disbursement	WIRE														
(e) Amount of cash grant	1,600,000 WIRE									,					
(d) Purpose of grant	Education K-12														
(c) Region	Sub-Saharan Africa														
(b) IRS code section and EIN (if applicable)		, subje		* 5.5.	-	,									
1 (a) Name of organization	(1)	(2)	(3)	(5)	(9)	(2)	(8)	(6)	(10)	(11)	(12)	(13)	(14)	(15)	(16)

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

Enter total number of other organizations or entitles က

Schedule F (Form 990) 2012

International School of Kenya Foundation, Inc.

Schedule F (Form 990) 2012

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16 Schedule F (Form 990) 2012 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients Part III can be duplicated if additional space is needed (a) Type of grant or assistance Part III £ (2) 9 9 8 **E** (3) **®** 9 10 (12) (13) (14) (15) (17) (18) (4) (16)

		•	
Schedule F	(Form	9901	2012

Schedu	le F (Form 990) 2012 International School of Kenya Foundation, Inc	52-174	16307	Page 4
Part	V `Foreign Forms			
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No	
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No	
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No	
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No	
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No	
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No	

#### SCHEDULE O (Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization 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.

International School of Kenya Foundation, Inc. 52-1746307 Form 990 Part VI Section B Line 11a The form 990 is reviewd by all Board Members prior to being submitted to the IRS Form 990 Part VI Section B Line 12a Int'l School of Kenya Foundation has a written goverance and conflict of interest policy that is reviewed and signed annually by all board members Form 990 Part VI Section B Line 12c The policy is reviewed annually by all board members Form 990 Part VI Section B Line 15b Compensation is reviewed annually and compared to other international schools in the region Form 990 Part VI Section C Line 19 The Form 990 and all corporate documents reside in Princeton, New Jersey and are made available to the public upon request

Schedule O (Form 990 or 990-EZ) (2012)	Page <b>2</b>
Name of the organization	Employer identification number
International School of Kenya Foundation, Inc	52-1746307
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