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Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Open to Public

Department of the Treasury

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

▶ Do not enter Social Security numbers on this form as it may be made public.

_		nue Service			orm 990 and its in:					inspec	IIOH
<u>A</u> _	For the	2013 caler	idar year, or tax year	beginning	10/01	, 2013,	and ending	09	/30	, 20 14	
В	Check if	applicable:	C Name of organization F	PROFESSIO	NAL & EDUCATION	NAL SERVICE	S INTERNA	TIONAL I	D Employe	er identification n	umber
	Address	change	Doing Business As	 						95-4209483	
	Name ch	hange	Number and street (or F	P.O. box if mail	is not delivered to stre	eet address)	Room/suite	·	E Telephor	ne number	
	Initial ret	turn	555 Clyde Avenue				1:	20		650-988-6818	
	Terminat	ted	City or town, state or pr	rovince, countr	y, and ZIP or foreign p	ostal code		1			
	Amende	ed return	Mountain View, CA	94043					G Gross re	ceipts \$	836,403
	Applicat	tion pending	F Name and address of p	rincipal officer:	Kenneth Chin			H(a) is this a gr	oup return for s	subordinates? Ves	✓ No
			555 Clyde Avenue S	Suite 120, M	ountain View CA 9	4043		H(b) Are all :	subordinates	included? 🗌 Yes	. □ No
ī	Tax-exe	mpt status.	✓ 501(c)(3)	501(c) () ◀ (insert no.)	4947(a)(1) or	527	If "N	o," attach a	list. (see instruction	ns)
J	Website	e: NWW	v.pesintl.com					H(c) Group	exemption	number 🕨	
ĸ	Form of	organization [Corporation Trust	Association	on Other ►	L Ye	ar of formatio	n: 1988	M State	of legal domicile:	CA
P	art I	Summa	ary								
	1	Bnefly de	scribe the organizat	ion's missic	on or most signific	cant activities	::				
æ		-	nal Services in China		=		*********				
ā	}										
E.	2	Check thi	is box ▶ 🗌 if the org	anization d	iscontinued its or	erations or d	Isposed of	more than	25% of i	its net assets.	
Š	3		of voting members of						3		4
Activities & Governance	4		of independent votin	_					<u> </u>		4
	5		nber of individuals e	-			•		5		12
Ξ	6		nber of volunteers (e		-				6		20
ठू	7a		elated business reve						7a		0
_	b		ated business taxab		•	•			7b		0
	+ -	THOI GITTON	atou buomboo taxab	10 111001110 1	101111 01111 000 1,			Prior Ye		Current Y	
Revenue	8	Contribut	ions and grants (Pa	rt VIII. line 1	h)				614,632		792,805
	9		service revenue (Pa		014,032		0 000				
Ver	10	_	nt income (Part VIII,			 d)	` ` ` ⊢		30,836		43,598
æ	111								30,836	 -	43,338
	12	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)									926 402
_	13							 -	645,468		836,403
	14	Grants and similar amounts paid (Part IX, column (A), lines 1–3)							158,337		102,029
	45		other compensation,	-		•	5.10				200.005
368	15								231,274		308,895
Expenses	16a		onal fundraising fees	-				4. (4. 2. 18. 2.1	O Billed State State Bod		<u>0</u>
Š	b		draising expenses (F				0 2	344156 AV 124 12		2020 11-40 1897, 103-49 of	
_	["]		penses (Part IX, colu				; 		218,090		250,146
	18	•	enses. Add lines 13	. 1	· · · · · · · · · · · · · · · · · · ·	الأساء معدا	;o) · -		607,701		661,070
_	19	Revenue	less expenses. Sub			- 		nalanina of Co	37,767	End of Ye	175,333
SQ		-	. (5 +)(" - +0)	3016	MAY 26.2	015 8	100	eginning of Cu		ENG OF TE	
sset	20		ets (Part X, line 16)		2.0.2	(i).	· · ·		1,113,612	<u></u>	<u>4,288,945</u>
Net Assets or	21		ulities (Part X, line 26		6.000000		· · · }-		0		0
			ts or fund balances.	Subtract III	ne 21/3rom, line 20		<u> </u>		1,113,612		4,288,945
_	art II		ture Block								
U	nder pen	alties of perju	iry, I declare that I have en lete. Declaration of prepar	xamined this re	etum, including accom	panying scheduk	es and statem	ents, and to t	the best of r	ny knowledge and	d belief, it is
_u	ue, conec	Ct, and Comp	ete Devaration in prepar		onicer) is based on all		iicii proparei i	las ally kilow			
C:			Jein MA	<i>/</i> /							
	gn	Sign	atule of officer	A1 -	President				** 4 71 1		
Н	ere		Kenneth	Chm,	1 yesinene	, 			TIMI	15	
_			or print name and title	·			- 12			To	
P	aid	Print/Ty	pe preparer's name	i	Preparer's signature		Dat	е	Check		
	repare	er							self-em	ployed	
	se On		name ►					Firr	n's EN ▶		
		Firm's a	address ►				 	Pho	one no.	·	
M	ay the I	RS discus	s this return with the	preparer s	hown above? (se	e instructions	<u>)</u>	<u></u>	<u> </u>		s 🗌 No
Fo	r Paper	work Redu	ction Act Notice, see	the separat	e instructions.		Cat. No	. 11282Y		Form	990 (2013)

374,645

40

Total program service expenses

5,898)

Part	IV Checklist of Required Schedules			rayo
_			Yes	No
1 `	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
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		1
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		1
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		1
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	:	1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		1
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
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 .	11f		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
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	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14 a		14a		1
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	1	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	1	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16	İ	1
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		1
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	-	1
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	-	1
20 a	The state of the s	20a	├	1
_	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	 	

Part	V Checklist of Required Schedules (continued)			
			Yes	No
21`	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	1	
22	Did the organization report more than \$5,000 of grants or 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		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		√
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part !!	26		<u>·</u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1
_	•	28b		✓
	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		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
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		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
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		Ť
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
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 .

Form **990** (2013)

Part				
	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>	• •	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 4			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		✓
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 12	t 1		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	✓	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			ŀ
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a	L	✓
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
C	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		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		1	1
	and services provided to the payor?	7a		
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	İ	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
ĥ	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		ĺ
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a	1	1
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	1		1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	1	l	İ
11	Section 501(c)(12) organizations. Enter:	1	l	
а	Gross income from members or shareholders	1	<u> </u>	l
b	Gross income from other sources (Do not net amounts due or paid to other sources	1	1	
	against amounts due or received from them.)		l	1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	ĺ	[
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.	1	l	
a	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.		t	t
b	Enter the amount of reserves the organization is required to maintain by the states in which	1	1	
_	the organization is licensed to issue qualified health plans]	
С	Enter the amount of reserves on hand	1	1	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	 	1
ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	 	┼ <u>▼</u>

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response or note to any line in this Part VI	ee ins	tructi						
Section	on A. Governing Body and Management		V	Na					
.			Yes	No					
1a	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.								
_	•								
þ	Enter the number of voting members included in line 1a, above, who are independent . Did any officer director, trustee, or key ampleyes have a family melationship or a hyginess relationship with								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		1					
3	Did the organization delegate control over management duties customarily performed by or under the direct								
_	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		√					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?								
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1					
6	Did the organization have members or stockholders?	6		✓					
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		✓					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			1					
	stockholders, or persons other than the governing body?	7b							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
а	The governing body?	8a	✓	L					
b	Each committee with authority to act on behalf of the governing body?	8b	\						
9	Is there any officer, director, 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		✓					
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)						
			Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓					
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?	10b							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	1						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	✓	1					
ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		1					
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		1					
13	Did the organization have a written whistleblower policy?	13	 	7					
14	Did the organization have a written document retention and destruction policy?	14	 	7					
15	Did the process for determining compensation of the following persons include a review and approval by	'		<u> </u>					
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
a	The organization's CEO, Executive Director, or top management official	15a	L	/					
þ	Other officers or key employees of the organization	15b	L	1					
, -	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	1							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		1					
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			· ·					
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the								
	organization's exempt status with respect to such arrangements?	16b							
Secti	on C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ▶ CA								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	501	(c)(3)s	only)					
	available for public inspection. Indicate how you made these available. Check all that apply.		. , . , -	,,					
	Own website Another's website Upon request Other (explain in Schedule O)	orec*	nel!-						
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int financial statements available to the public during the tax year.	erest	holic	y, amd					
^^		of aL							
20	State the name, physical address, and telephone number of the person who possesses the books and records	OI (DE	3						
	organization: ▶ Peggy Kwan, (650)988-6818								

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

☐ Check this box if neither the organization no	r any relate	d orga	aniz	atio	n c	ompe	nsa	ted any curren	t officer, director	, or trustee.	
(A) Name and Title	(B) Average hours per week (list any hours for	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				is both or/trust	an (ee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other compensation	
	related organizations below dotted line)	Individual trustee or director	Officer Institutional trustee		Highest compensated employee Key employee		Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations	_
Kenneth Chin	40										
President	1	1		1				70,088	o		0
Richard Yook	1.0										_
Secretary	I			1		L	L	0	0		0
Bolin Lin	1.0		Γ			[_
Treasurer				✓				0	0		0
Rosalie Wu	0.50								-		_
Chairman	<u> </u>		L	1	_			0	0		0
											_
											_
					<u> </u>		-				_
							-				_
			_				_				_
							 				_
				-							
				-							_
							-				_

•	(A) Name and title	(B) Average hours per week (list any	Position (do not check more than obox, unless person is both officer and a director/trust					an tee)	(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estimated m amount of other		
		hours for related organizations below dotted line)	ndividua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizatic (W-2/1099-N	ons	composition from comparts or compared to the compared to the compared to the compared to the composition from composition fro	ensation the nization related izations	1
							1							
												· · · · ·		
							· · · · · · · · · · · · · · · · · · ·							
													······	
														· · · · · · · · · · · · · · · · · · ·
			-				 						 -	·- <u>-</u>
							\ - -					· · · · ·		
												·····		
			-											
				T										
1b	Sub-total	VII Socia		٠.	•		· .		70,088		0			0
c 	Total (add lines 1b and 1c)	<u> </u>	· ·					<u>></u>	70,088	^	0			0
2	Total number of individuals (including bu reportable compensation from the organ			nose	e list	ted	above	e) w	rho received m	ore than \$1	00,000	of		
3	Did the organization list any former of	fficer, direc	etor, c	or tr	ust	ee,	key (emp	oloyee, or high	nest compe	ensated		Yes	No
4	employee on line 1a? If "Yes," complete For any individual listed on line 1a, is the											3		✓
	organization and related organizations individual	greater th	an \$	150,	,000)? #	f "Ye	s,"	complete Sch					1
5	Did any person listed on line 1a receive of for services rendered to the organization													,
Section	on B. Independent Contractors													
1	Complete this table for your five highest compensation from the organization. Reyear.													ах
	(A) Name and business add	dress				-			(B) Description of s	services		(C) Compens	ation	,
													·	
													 -	
								$oxed{\Box}$						
2	Total number of independent contractor received more than \$100,000 of compen							o th	nose listed ab	ove) who		<u>-</u>		

Par	VIII	Statement of Revenue	 e					rayou
	سييد	Check if Schedule O co		oonse or note to	any line in this	Part VIII		п
•		Onesk II concade c c	Traditio a 100,	Sones or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b	Federated campaigns . Membership dues		0		Tovariue		512-514
A, C	C	Fundraising events		0			ĺ	
S is	đ	Related organizations .		0		1		
8, <u>F</u>	θ	Government grants (contribu		0				
활동	f	All other contributions, gifts,						
된 N		and similar amounts not include		792,805		i		
ont Pd (g	Noncash contributions included in	· · · · · · · · · · · · · · · · · · ·	19,782		ł	}	
	h	Total. Add lines 1a-1f.	· · · ·	Business Code	792,805			
2	•			Business Code				
€	2a	***************************************					·· - ····	
8	Ь							
Ž	C							
Š	d							
gran	e f	All other program service	revenue					
Program Service Revenue	g	Total. Add lines 2a-2f.			0			
	3	Investment income (incl				 -		——————————————————————————————————————
	_	and other similar amount		_ 1	43,598	43,598	o	o
	4	Income from investment of	tax-exempt bo	ond proceeds ▶	0	0	0	0
	5	Royalties	="		0	0	0	0
			(i) Real	(ii) Personal				<u>-</u>
	6a	Gross rents						
	ь	Less: rental expenses						
	С	Rental income or (loss)	0	0				
	d	Net rental income or (loss	s)	>	l			
	7a	Gross amount from sales of	(i) Securities	(ii) Other				
	ļ	assets other than inventory						
	b	Less: cost or other basis and sales expenses .						
	d	Gain or (loss)		▶				
enue	8a	Gross income from fundrevents (not including \$	•					
Other Revenue		of contributions reported of See Part IV, line 18						
훒	_	Less: direct expenses .						
0		Net income or (loss) from		events . ►	ĺ			
		Gross income from gamin See Part IV, line 19	g activities.					
	ь	Less: direct expenses .	-					
		Net income or (loss) from		vities ▶				
	•	Gross sales of inven						·
		returns and allowances				1		
	ь	Less: cost of goods sold	b					
	c	Net income or (loss) from			1			
		Miscellaneous Rever		Business Code				
	11a							
	b							
	С	***************************************						
	d	All other revenue						
	е	Total. Add lines 11a-11d			0			· · · · · · · · · · · · · · · · · · ·
	12	Total revenue. See instru	uctions	>	836 403	43 50B	0	

Page 10 Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX Do not include amounts reported on lines 6b. 7b. (B) Program service expenses (A) Total expenses (C) Management and general expenses (D) Fundraising 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 50,267 50,267 2 Grants and other assistance to individuals in the United States. See Part IV, line 22 . . . 0 3 Grants and other assistance to governments. organizations, and individuals outside the United States. See Part IV, lines 15 and 16 . . . 51,762 51,762 Benefits paid to or for members . . . Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 0 7 Other salaries and wages 247.038 95,973 151,065 0 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 0 Other employee benefits 9 35,465 O 35,465 0 10 Payroll taxes 26,392 9,937 16,455 0 11 Fees for services (non-employees): 40,546 51,246 10.700 0 b 0 0 12,682 0 12,682 0 Lobbying 0 0 0 Professional fundraising services. See Part IV, line 17 0 0 Investment management fees 0 f 0 0 0 Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . 0 0 0 12 Advertising and promotion 0 0 0 0 13 Office expenses 11,118 690 10,428 0 14 Information technology 2.378 117 2.261 0 15 Royalties 0 0 Occupancy 16 12.588 0 12,588 0 Travel 17 66,386 62,922 3,464 0 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0 19 Conferences, conventions, and meetings . 8,620 64,786 56,166 0 20 Interest 0 0 21 0 0 0 22 Depreciation, depletion, and amortization . 11.491 11,491 0 23 Insurance 15,221 6,257 8,964 0 24 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.) Foreign Tax 699 0 699 0 Bank Charges 1,408 8 1,400 0 Sales Tax 103 0 103 0 Filing Fee 0 40 40 0 All other expenses Total functional expenses. Add lines 1 through 24e 25 661,070 374,645 286,425 0 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 if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	ırt X		
	•		(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	76,483	1	41,341
	2	Savings and temporary cash investments	3,482,780	2	3,688,533
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L		5	
	6	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			
ets	_	organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net	. · · · · · · · · · · · · · · · · · · ·	7	
•	8	Inventories for sale or use		8	
	9 10a	Prepaid expenses and deferred charges		9	
	1 Uai	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 583 402			
	ь	100,102	t I	40-	
	11	Less: accumulated depreciation	554,349	111	542,858
	12	Investments—publicly traded securities		12	
	13	Investments—program-related. See Part IV, line 11		13	· · · · · · · · · · · · · · · · · · ·
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	16,213
	16	Total assets. Add lines 1 through 15 (must equal line 34)	4,113,612		4,288,945
	17	Accounts payable and accrued expenses		17	1,000,010
	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	
99	22	Loans and other payables to current and former officers, directors,		1	1
¥		trustees, key employees, highest compensated employees, and			
Liabilities		disqualified persons. Complete Part II of Schedule L		22	
-	23 24	Secured mortgages and notes payable to unrelated third parties		23	
	25	Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third		24	
	25	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
_		Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and			
993		complete lines 27 through 29, and lines 33 and 34.			
Ē	27	Unrestricted net assets	1,585,202	27	1,654,663
Bal	28	Temporarily restricted net assets	2,528,410		2,634,282
Ę	29	Permanently restricted net assets	0	29	0
F		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and			
6	_	complete lines 30 through 34.	ļ		
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
188	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
9t A	32	Retained earnings, endowment, accumulated income, or other funds .		32	
ž	33 34	Total lightilities and not except that belonge	4,113,612		4,288,945
	34	Total liabilities and net assets/fund balances	4,113,612	34	4,288,945

om	990	(2013)	

Page 12

Part	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			
1`	Total revenue (must equal Part VIII, column (A), line 12)		83	6,403
2	Total expenses (must equal Part IX, column (A), line 25)		66	1,070
3	Revenue less expenses. Subtract line 2 from line 1		17	5,333
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4		4,11	3,612
5	Net unrealized gains (losses) on investments			0
6	Donated services and use of facilities			0
7	Investment expenses			0
8	Prior period adjustments			0
9	Other changes in net assets or fund balances (explain in Schedule O)			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))		4,28	8,945
Part	XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			
			Yes	No
1	Accounting method used to prepare the Form 990: 🗸 Cash 🔲 Accrual 🔲 Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a		2a		1
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or	28		
	reviewed on a separate basis, consolidated basis, or both:	- -		•
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			,
h	Were the organization's financial statements audited by an independent accountant?	2b		1
_	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a	20		
	separate basis, consolidated basis, or both:			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			1
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	1		
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	За		1
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.	3ь		
		Form	990	(2013)
		-	_	,

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

2013

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.
► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

			ICES INTERNATIONAL		· -				95-420			
Par			rity Status (All orga						nstructio	ns.		
The 6 1 2 3 4	A church, contact A school description A hospital or a A medical reservations.	vention of church ribed in section cooperative hos	ntion because it is: (Fo hes, or association of 170(b)(1)(A)(ii). (Attac spital service organiza on operated in conjunc e:	churches ch Scheda ation desc	s describe ule E.) cribed in s	ed in sec section 1	tion 170(170(b)(1)((b)(1)(A)(i (A)(ili).	•	(iii). Ent	er the	
5	section 170(b)(1)(A)(iv). (Com	•	_	-		-		vernment	al unit	descri	bed in
6 7	☐ An organizatio	n that normally	nment or governmenta receives a substantia (A)(vi). (Complete Par	l part of					nit or from	n the ge	neral	public
8	A community t	rust described i	n section 170(b)(1)(A))(vi). (Cor	nplete Pa	ırt II.)						
9	receipts from support from	activities related gross investme	receives: (1) more that to its exempt function of income and unrelater June 30, 1975. Se	ions-sul lated bus	bject to d siness tax	ertain ex xable ind	xceptions come (les	s, and (2) ss sectio	no more	than 3	331/3%	of its
10 11	☐ An organization purposes of one 509(a)(3). Che a ☐ Type I☐ By checking the first term of the first	on organized an one or more publick the box that one box. Type his box, I certify ndation manage	operated exclusively of operated exclusive objects of supported organization of the type of type of the type of ty	ely for th nizations supportin I-Functio is not co	ne benefit described ng organiz nally inter ntrolled d	t of, to post of the control of the	perform to the perform to the performance of the pe	the funct a)(1) or so te lines 1 Type III—N y by one	tions of, onection 50% to the through the	9(a)(2). 3 jh 11h. ionally i disquali	See so ntegra fied po	ection ited ersons
f g	organization, o	check this box .	a written determination							e III su 	pporti 	ing · 🔲
	following person v		ndirectly controls, eitl	her alone	or toget	her with	persons	describe	d in (ii) an	nd	Yes	No
			ody of the supported o							11g(n l	—
	(ii) A family m	ember of a perso	on described in (i) abo	ve?						11g(ii)	
			a person described in							11g(i	ii)	
<u>h</u>	Provide the fo	llowing informati	on about the support	ed organi	ization(s).							
(1)	Name of supported organization	(A) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	in col. (1) lis	organization sted in your document?	the organ col. (i)	rou notify nization in of your port?	organizat (I) organi	Is the tion in col. ized in the S.?	(vii) Amo	unt of m support	onetary
	·			Yes	No	Yes	No	Yes	No			
(A)												
(B)												
(C)												
(D)												
(E)	<u> =u =</u>	., ., ., ., ., ., ., ., ., ., ., ., ., .				· · · · · · · · · · · · · · · · · · ·						
Tata	-							[

Part	Support Schedule for Organiza	tions Descri	ibed in Secti	ons 170(b)(1)(A)(iv) and 1	70(b)(1)(A)(vi	
	(Complete only if you checked the		• •		•		lify under
	Part III. If the organization fails to	qualify unde	r the tests lis	ted below, p	lease comple	te Part III.)	
	on A. Public Support					· · · · · · · · · · · · · · · · · · ·	
Calen	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	666,245	709,438	577,731	614,632	792,805	3,360,851
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	000,243	703,430	377,731	014,032	732,003	3,360,631
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	666,245	709,438	577,731	614,632	792,805	3,360,851
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.						3,360,851
	on B. Total Support			4 3 0044	(= 22.2		
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	666,245	709,438	577,731	614,632	792,805	3,360,851
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	84,872	44,390	18,827	30,837	43,599	222,525
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						3,583,376
12	Gross receipts from related activities, etc	•	•			12	
13	First five years. If the Form 990 is for the		n's first, secon	d, third, fourth	, or fifth tax yo	ear as a section	1 501(c)(3)
	organization, check this box and stop he			<u> </u>	<u> </u>	· · · · ·	· · > 🖸
	ion C. Computation of Public Suppor	 			······································		
14	Public support percentage for 2013 (line		~			14	93.79 %
15 16a	Public support percentage from 2012 Sci 331/a% support test—2013. If the organi					15	92 %
	box and stop here. The organization qua	lifies as a publ	icly supported	organization			. ▶ 🗸
b	331/3% support test—2012. If the organ check this box and stop here. The organ					15 is 33½% (or more, . ► □
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization me Part IV how the organization meets the "I organization	ets the "facts- facts-and-circu	and-circumsta	nces" test, che st. The organiz	eck this box ar	nd stop here. E	xplain in
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organizate Explain in Part IV how the organization m	tion meets the neets the "facts	facts-and-ci s-and-circums	rcumstances" tances" test. T	test, check th	nis box and sto	and line op here.
18	supported organization		box on line 13		a, or 17b, chec	k this box and	

Schedul	e A (Form 990 or 990-EZ) 2013						Page 3
Part	Support Schedule for Organiza	tions Descr	ibed in Secti	ion 509(a)(2)		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
•	(Complete only if you checked th	e box on line	9 of Part I o	r if the organ	zation failed	to qualify und	ler Part II.
•	If the organization fails to qualify	under the te	sts listed belo	ow, please co	mplete Part	II.)	
	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the		!	1			
_	organization's tax-exempt purpose			·			
3	Gross receipts from activities that are not an			}			
_	unrelated trade or business under section 513		<u> </u>				
4	Tax revenues levied for the			1]		*
	organization's benefit and either paid to or expended on its behalf			ļ		j	:
_	· •		<u> </u>	<u> </u>			
5	The value of services or facilities furnished by a governmental unit to the						
	organization without charge		ŀ				
	_			<u> </u>			
6	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3				 	 	
<i>,</i> a	received from disqualified persons .					l	
	Amounts included on lines 2 and 3						
Ь	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year			1			
c	Add lines 7a and 7b	•					. .
8	Public support (Subtract line 7c from				 		
	line 6.)		İ				
Secti	on B. Total Support					*····	
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,					1	
	royalties and income from similar sources .			ļ			
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975		<u> </u>				
	Add lines 10a and 10b			 			<u> </u>
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly carried on						
40	• •			 	 		
12	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part IV.)					1	
13	Total support. (Add lines 9, 10c, 11,	-				 	
10	and 12.)						:
14	First five years. If the Form 990 is for the	l ne organizatio	n's first secon	d third fourth	or fifth tax v	ear as a sectio	n 501(c)(3)
• •	organization, check this box and stop he	_			•		1 1 1
Secti	on C. Computation of Public Support						
15	Public support percentage for 2013 (line to			13. column (fl)		15	%
16	Public support percentage from 2012 Sch		-				%
	on D. Computation of Investment In						
17	Investment income percentage for 2013 (ov line 13. colu	mn (f))	17	%
18	Investment income percentage from 2012						%
19a	331/3% support tests-2013. If the organ						
	17 is not more than 331/23%, check this box			-			•
	221m9/ cumport tests-2012 If the organia	ation did ant	shook a hay an	lina 4.4 a. lina	40	C in	

line 18 is not more than 331/2%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Fo	orm 990 or 990-EZ) 2013 P.	age 4
	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; a Part III, line 12. Also complete this part for any additional information. (See instructions).	
,		

	•••••••••••••••••••••••••••••••••••••••	

	•••••••••••••••••••••••••••••••••••••••	

SCHEDULE D (Form 990)

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. ▶ Attach to Form 990.

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

▶ Information about Schedule D (Form 990) and its Instructions is at www.irs.gov/form990.

Inspection Name of the organization Employer identification number PROFESSIONAL & EDUCATIONAL SERVICES INTERNATIONAL INC 95-4209483 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if 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 Aggregate contributions to (during year) . 2 3 Aggregate grants from (during year) . . Aggregate value at end of year 5 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? ☐ Yes ☐ No 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 ☐ Yes ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area ☐ Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements . . . 2a 2b Number of conservation easements on a certified historic structure included in (a) . . . 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 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 ☐ Yes ☐ No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) ☐ Yes ☐ No 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. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets, 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: 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:

Assets included in Form 990, Part X .

Part	III Organizations Maintaining	Collections of Art, His	torical Treasures	, or Ot	her Similar A	ssets (co	ntinued)
3	Using the organization's acquisition, a collection items (check all that apply):	accession, and other reco	ords, check any of th	e follow	ving that are a	significant	use of its
а	☐ Public exhibition	d	☐ Loan or exchange				
	☐ Scholarly research	е	Other				
_	Preservation for future generations						
4	Provide a description of the organizati XIII.	ion's collections and expl	ain how they further	the org	anization's exe	empt purpo	ose in Part
5	During the year, did the organization assets to be sold to raise funds rather						s 🗌 No
Part		_					
	Complete if the organization	answered "Yes" to For	m 990, Part IV, line	9, or r	eported an a	mount on	Form
	990, Part X, line 21.		17 6 174	•			
1a	Is the organization an agent, trustee, included on Form 990, Part X?						
_	If "Yes," explain the arrangement in Pa			• • •		· Y	98 ∐ No
b	in res, explain the arrangement in Pa	an Alli and complete the R	bilowing table:		T	Amount	
C	Beginning balance			10			
ď	Additions during the year			1d			· · · · · · · · · · · · · · · · · · ·
e	Distributions during the year			1e		···· - · · · · · · · · · · · · · · · ·	
f	Ending balance			1f			
2a	Did the organization include an amour					. 🔲 Ye	s 🗌 No
b	If "Yes," explain the arrangement in Pa	art XIII. Check here if the e	explanation has been	provide	ed in Part XIII		
Par							
	Complete if the organization	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				····	
		(a) Current year (b) Pi	ior year (c) Two yea	rs back	(d) Three years ba	ack (e) Four	years back
1a	Beginning of year balance						
Þ	Contributions						
С	Net investment earnings, gains, and losses						
d	Grants or scholarships						
Ө	Other expenditures for facilities and programs						
f	Administrative expenses						
g	End of year balance						
2	Provide the estimated percentage of the		ce (line 1g, column (a	a)) held a	as:		
8	Board designated or quasi-endowmer	^/					
D	Permanent endowment	%					
C	Temporarily restricted endowment ▶ The percentages in lines 2a, 2b, and 2	%					
3a	Are there endowment funds not in the		ization that are held	and ad	ministered for	the	
-	organization by:	possonom on une organ		 uo			Yes No
	(i) unrelated organizations					. 3a(i)	100 110
	(ii) related organizations					. 3a(ii)	
b	If "Yes" to 3a(ii), are the related organi					. 3b	
4	Describe in Part XIII the intended uses	of the organization's end	owment funds.				
Part					_		
	Complete if the organization	answered "Yes" to For		9 11a. S	See Form 990), Part X, I	ine 10.
	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)		Accumulated epreciation	(d) Boo	k value
1a	Land	. 131,38	9 0				131,389
b	Buildings	. 328,354			29,116		299,238
C	Leasehold improvements	. 119,88	 	 	10,633		109,253
đ	Equipment		0		0		0
-	Other	3,77		1	795		2,978
rotal.	Add lines 1a through 1e. (Column (d) n	nust equal i-orm 990, Part	x, coiumn (B), line 10	U(C).)	▶		542,858

Part VII	Investments — Other Securities. Complete if the organization answ	ered "Yes" to For	m 990. Part IV.	line 11b. See Form	990. Part X. line 12.
•	(a) Description of security or category (including name of security)	<u> </u>	(b) Book value	(c) Met	thod of valuation: of-year market value
(1) Financial	derivatives				······································
(2) Closely-h	neld equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)	.,				
(E)					
(F) (G)					
(H)					
	b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII	Investments—Program Related.	 -		-	•
	Complete if the organization answ		m 990. Part IV.	line 11c. See Form	990. Part X. line 13.
	(a) Description of investment		(b) Book value	(c) Me	thod of valuation:
(1)					
(2)					
(3)					
(4)					
(5)	 				· · · · · · · · · · · · · · · · · · ·
(6)			· · · · · · · · · · · · · · · · · · ·		······································
(8)					
(9)	b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX	Other Assets.			<u>. L </u>	
	Complete if the organization answ	ered "Yes" to For	m 990, Part IV,	line 11d. See Form	
	(a)	Description		 	(b) Book value
(1)			· · · · · · · · · · · · · · · · · · ·	 	
(2)		······			
(3)		 			<u> </u>
(4)					
<u>(5)</u>					
<u>(6)</u> (7)	· · · · · · · · · · · · · · · · · · ·				<u> </u>
(8)					
(9)					
Total. (Colu	mn (b) must equal Form 990, Part X, co	I. (B) line 15.)			
Part X	Other Liabilities.	1 (1) (1)			
	Complete if the organization answ line 25.	vered "Yes" to For	m 990, Part IV,	line 11e or 11f. See	Form 990, Part X,
1.	(a) Description of liability	(b) Book value			
(1) Federal is	ncome taxes				
(2)					
(3)					
(4)					
(5)					
(6)					
(7)			——		
(9)					
	(b) must equal Form 990, Part X, col. (B) line 25.)				
	r uncertain tax positions. In Part XIII. provid	le the text of the foots	ote to the organiz	ation's financial statem	ante 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

Schedule D (Form 990) 2013

Part	ΧI	Reconciliation of Revenue per Audited Financial Stateme			Retu	m.
		Complete if the organization answered "Yes" to Form 990, P				
1 `	Total r	revenue, gains, and other support per audited financial statements			1	
2	Amou	nts included on line 1 but not on Form 990, Part VIII, line 12:				
8	Net ur	realized gains on investments	2a			
b	Donat	ed services and use of facilities	2b		1 1	
C	Recov	reries of prior year grants	2c		1	
d	Other	(Describe in Part XIII.)	2d		1	
е	Add lii	nes 2a through 2d			2e	
3	Subtra	act line 2e from line 1			3	7
4		nts included on Form 990, Part VIII, line 12, but not on line 1:				· · · · · · · · · · · · · · · · · · ·
a		ment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other	(Describe in Part XIII.)	4b	··········	1	
C		nes 4a and 4b			4c	
5	Total r	revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)		5	
Part		Reconciliation of Expenses per Audited Financial Statem			er Re	turn.
		Complete if the organization answered "Yes" to Form 990, P				
1	Total e	expenses and losses per audited financial statements			1	
2		nts included on line 1 but not on Form 990, Part IX, line 25:				
а		ed services and use of facilities	2a			
b		rear adjustments	2b		1 1	
C	-	losses	2c		1 1	
d		(Describe in Part XIII.)			1	
е		nes 2a through 2d			 2e	
3		act line 2e from line 1			3	
4		nts included on Form 990, Part IX, line 25, but not on line 1:	Ĭ Ì			
а		ment expenses not included on Form 990, Part VIII, line 7b	4a			
_		(Describe in Part XIII.)			1 1	
D				9		
b		· ·		· · · · · · · · · · · · · · · · · · ·	40	
	Add lii	nes 4a and 4b		· · · · · · · ·	4c	
5	Add lin	· ·		· · · · · · · ·		
c 5 Parit	Add lii Total e XIII	nes 4a and 4b	e 18.)		5	V, line 4; Part X, line
5 Part Provide	Add lin Total e XIII e the d	nes 4a and 4b	<i>е 18.)</i> d 4; Ра	art IV, lines 1b and 2b	5 o; Part	
5 Part Provide	Add lin Total of XIII e the d XI, line	nes 4a and 4b	e 18.)	art IV, lines 1b and 2b	5 o; Part nforma	tion.
5 Part Provide 2; Part	Add lii Total (XIII e the d XI, line	nes 4a and 4b	e 18.) d 4; Pa to pro	art IV, lines 1b and 2to and and and and and and and and and and	5 p; Part nforma	tion.
5 Part Provide 2; Part	Add lii Total (XIII e the d XI, line	nes 4a and 4b	e 18.)	art IV, lines 1b and 2to and 2to and 2to any additional ir	5 o; Part nforma	tion.
c 5 Part Provide 2; Part	Add lin Total (XIII e the d XI, line	nes 4a and 4b expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e 18.) d 4; Pa to pro	art IV, lines 1b and 2to and 2to and 2to any additional ir	5 c; Part nforma	tion.
c 5 Part Provide 2; Part	Add lin Total (XIII e the d XI, line	nes 4a and 4b	e 18.) d 4; Pa to pro	art IV, lines 1b and 2to and 2to and 2to any additional ir	5 c; Part nforma	tion.
c 5 Part Provide 2; Part	Add lin Total (XIII e the d XI, line	nes 4a and 4b expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e 18.) d 4; Pa to pro	art IV, lines 1b and 2to and 2to and 2to any additional ir	5 c; Part nforma	tion.
c 5 Part Provide 2; Part	Add lin Total (XIII e the d XI, line	nes 4a and 4b expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e 18.) d 4; Pa to pro	art IV, lines 1b and 2to and 2to and 2to any additional ir	5 c; Part nforma	tion.
c 5 Part Provide 2; Part	Add lin Total (XIII e the d XI, line	nes 4a and 4b expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e 18.) d 4; Pa to pro	art IV, lines 1b and 2to and 2to and 2to any additional ir	5 c; Part nforma	tion.
c 5 Part Provide 2; Part	Add lin Total (XIII e the d XI, line	nes 4a and 4b expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e 18.) d 4; Pa to pro	art IV, lines 1b and 2to and 2to and 2to any additional ir	5 c; Part nforma	tion.
c 5 Part Provide 2; Part	Add lin Total (XIII e the d XI, line	nes 4a and 4b expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e 18.) d 4; Pa to pro	art IV, lines 1b and 2to and 2to and 2to any additional ir	5 c; Part nforma	tion.
c 5 Part Provide 2; Part	Add lin Total (XIII e the d XI, line	nes 4a and 4b expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e 18.) d 4; Pa to pro	art IV, lines 1b and 2to and 2to and 2to any additional ir	5 c; Part nforma	tion.
c 5 Part Provide 2; Part	Add lin Total (XIII e the d XI, line	nes 4a and 4b expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e 18.) d 4; Pa to pro	art IV, lines 1b and 2to and 2to and 2to any additional ir	5 c; Part nforma	tion.
c 5 Part Provide 2; Part	Add lin Total (XIII e the d XI, line	nes 4a and 4b expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e 18.) d 4; Pa to pro	art IV, lines 1b and 2to and 2to and 2to any additional ir	5 c; Part nforma	tion.
c 5 Part Provide 2; Part	Add lin Total (XIII e the d XI, line	nes 4a and 4b expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e 18.) d 4; Pa to pro	art IV, lines 1b and 2to and 2to and 2to any additional ir	5 c; Part nforma	tion.
c 5 Part Provide 2; Part	Add lin Total (XIII e the d XI, line	nes 4a and 4b expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e 18.) d 4; Pa to pro	art IV, lines 1b and 2to and 2to and 2to any additional ir	5 c; Part nforma	tion.
c 5 Part Provide 2; Part	Add lin Total (XIII e the d XI, line	nes 4a and 4b expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e 18.) d 4; Pa to pro	art IV, lines 1b and 2to and 2to and 2to any additional ir	5 c; Part nforma	tion.
c 5 Part Provide 2; Part	Add lin Total (XIII e the d XI, line	nes 4a and 4b expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e 18.) d 4; Pa to pro	art IV, lines 1b and 2to and 2to and 2to any additional ir	5 c; Part nforma	tion.
c 5 Part Provide 2; Part	Add lin Total (XIII e the d XI, line	nes 4a and 4b expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e 18.) d 4; Pa to pro	art IV, lines 1b and 2to and 2to and 2to any additional ir	5 c; Part nforma	tion.
c 5 Part Provide 2; Part	Add lin Total (XIII e the d XI, line	nes 4a and 4b expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e 18.) d 4; Pa to pro	art IV, lines 1b and 2to and 2to and 2to any additional ir	5 c; Part nforma	tion.
c 5 Part Provide 2; Part	Add lin Total (XIII e the d XI, line	nes 4a and 4b expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e 18.) d 4; Pa to pro	art IV, lines 1b and 2to and 2to and 2to any additional ir	5 c; Part nforma	tion.
c 5 Part Provide 2; Part	Add lin Total (XIII e the d XI, line	nes 4a and 4b expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e 18.) d 4; Pa to pro	art IV, lines 1b and 2to and 2to and 2to any additional ir	5 c; Part nforma	tion.
c 5 Part Provide 2; Part	Add lin Total (XIII e the d XI, line	nes 4a and 4b expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e 18.) d 4; Pa to pro	art IV, lines 1b and 2to and 2to and 2to any additional ir	5 c; Part nforma	tion.
c 5 Part Provide 2; Part	Add lin Total (XIII e the d XI, line	nes 4a and 4b expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e 18.) d 4; Pa to pro	art IV, lines 1b and 2to and 2to and 2to any additional ir	5 c; Part nforma	tion.
c 5 Part Provide 2; Part	Add lin Total (XIII e the d XI, line	nes 4a and 4b expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e 18.) d 4; Pa to pro	art IV, lines 1b and 2to and 2to and 2to any additional ir	5 c; Part nforma	tion.
c 5 Part Provide 2; Part	Add lin Total (XIII e the d XI, line	nes 4a and 4b expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e 18.) d 4; Pa to pro	art IV, lines 1b and 2to and 2to and 2to any additional ir	5 c; Part nforma	tion.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No. 1545-0047

2013

Open to Public

Department of the Treasury Internal Revenue Service ► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990

Inspection

nternal Re	venue Service	OIT about cont					nspection
	the organization				•	1 ' '	lentification number
	SSIONAL & EDUCATIONAL S						5-4209483
Part I	Form 990, Part IV, line		es Outside 1	the United States. Comp	lete if the organ	ization ansv	wered "Yes" on
á		igibility for the		rds to substantiate the amo sistance, and the selection 			
	For grantmakers. Describ assistance outside the Unit		he organization	on's procedures for monito	oring the use o	of its grant	s and other
3 /	Activities per Region. (The fo	ollowing Part I	, line 3 table c	an be duplicated if addition	al space is need	ied.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity lists a program s describe specif service(s) in	ervice, ic type of	(f) Total expenditures for and investments in region
(1) S	ch F, Stmt 1		· <u></u>				
(2)							
(3)							
(4)							
(5)							
(6)			· · · · · · · · · · · · · · · · · · ·				
(7)		ļ					
(8)						 	
(9)					.,	 	
(10)	v	ļ	:				
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
	Sub-total						
	Total from continuation sheets to Part I						

47,468

Page 2

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on 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. Schedule F (Form 990) 2013
Part | Grants ar

-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of Valuation (book, FMV, appraisal, other)
Ξ			East Asia and the Pa	East Asia and the PaHKPES-the grant of U	27,689 Wire	Wire	0	0 N/A	FMV
2			East Asia and the Pa	East Asia and the Pa Fudan University-Cent	5,100 Wire	Wire	0	O N/A	FMV
ව			Russia and the newl	Russia and the new Wengiao Language &	14,328 Cash	Cash	0	O N/A	FMV
€									
<u>බ</u>									
9									
Ε			,						
<u> </u>									
6									
<u>5</u>									
Ē									
(12									
(13)									
(14)									
(15)									
.									
81	Enter total nur by the IRS, or	mber of recipie for which the	Enter total number of recipient organizations listed above that by the IRS, or for which the grantee or counsel has provided a	ed above that are recc as provided a section	are recognized as charities by the section 501(c)(3) equivalency letter	are recognized as charities by the foreign country, recognized as tax-exempt section 501(c)(3) equivalency letter	ntry, recognized as t		က
6	Enter total nur	mber of other o	Enter total number of other organizations or entities	ies				A	3
		i							

Schedule F (Form 990) 2013

Page 6

Schedule F (Form 990) 2013

Partill Grants and Other As Part III can be duplica	Grants and Other Assistance to Individuals Outside Part III can be duplicated if additional space is needed.	is Outside is needed.	the United State	S. Complete if the	organization answ	Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.	, ran iv, line io.
(a) Type of grant or assistance	(b) Region	(c) Number of reciplents	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appralsal, other)
(1)							
(2)							
(3)							
(4)							
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						Sche	Schedule F (Form 990) 2013

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	☑ 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	☑ 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	☑ 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	☑ 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	☑ 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	☑ No

Part V

Supplemental Information

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

Schedule F, Part I, Line 2 - Hong Kong Professional & Educational Services Ltd. (HKPES is a HK-registered non-profit education service
organization, since 1991) sends quarterly accounting statements with details on all expense items for the grants that they receive from
PESi. PESi keeps these documents in our files. Accounting statements from HKPES are regularly reviewed by the PESi president and
accountant. The organization also has on file grant applications filled out by Renmin University and Fudan University staff documenting
itemized budget, significance of the publications PESi supports, etc. Each grant application is reviewed and approved by a committee
made up of a PESi officer and 3 volunteers, all with doctoral degrees, who understand China's higher education. Grant applications from
other domestic or overseas organizations are likewise reviewed and approved by PESi officers before funds are sent. We keep these
records on file.

SCHEDULE (Form 990)

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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service	Toful ▲	nation about Sched	Lile I (Form 990) and	ronn seo. d its instructions k	✓ Attach to Form sec. Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.	m890.	Isul	Inspection
Name of the organization							Employer identification number	umber
PROFESSIONAL & EDUCATIONAL SERVICES INTERNATIONAL INC	ERVICES INTERNAT	TONAL INC					95-4209483	
Part I General Information on Grants and Assistance	n on Grants and	Assistance						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantses' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	ain records to subs	stantiate the amou or assistance?	nt of the grants or	assistance, the g	rantees' eligibility f	or the grants or assi	istance, and	2
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ization's procedur	es for monitoring t	he use of grant fu	nds in the United	States.			
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	ssistance to Gorny recipient that r		Organizations i an \$5,000. Part	n the United St Il can be duplica	ates. Complete i	and Organizations in the United States. Complete if the organization answered re than \$5,000. Part II can be duplicated if additional space is needed.		"Yes" to Form 990,
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	of grant lance
(1) Sch I, Stmt 1								
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Ø								
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(12)								
 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table 	n 501(c)(3) and gov organizations listed	emment organizat in the line 1 table	ions listed in the li	ne 1 table			A A	
For Paperwork Reduction Act Notice, see the instructions for Form 990.	see the Instruction	s for Form 990.		S	Cat. No. 50055P		Schedule I (F	Schedule I (Form 880) (2013)

Schedule 1 (Fc	
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.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
-					
2					
n					
7					
S					
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7 Part IV Supplemental Information, Provide the informati	the information i	equired in Part I. lin	e 2. Part III. column	on required in Part I. line 2. Part III. column (b), and any other additional information.	ional information.
_ = e	the CCSA (Chinese d progress of CCSA	Christian Scholars As: and performance of the	sociation of North Ame e CCSA president. For	rica) board and participates each CCSA project funded b	in CCSA board decisions. The PESi y PESi, we have on file a grant
application filled out by CCSA staff documenting an itemized budget, significance of the project, name of the Chinese faculty responsible for executing the project, target date, etc. Each grant application is reviewed and approved by a committee made up of a PESi officer and 3 volunteers, all with cloctoral degrees, who understand China's higher education. We receive	mized budget, signif ttee made up of a Pi	icance of the project, n Si officer and 3 volunt	ame of the Chinese fac eers, all with cloctoral o	ulty responsible for executir legrees, who understand Ch	ignificance of the project, name of the Chinese faculty responsible for executing the project, target date, etc. Each is a PESi officer and 3 volunteers, all with cloctoral degrees, who understand China's higher education. We receive
copies of books that we send subsidies for their publication. We receive reports on conferences that we support. We also send staff and friends of our organization to participate in these events as observers.	ation. We receive rej	e reports on conferences that we support. We also send staff and frien	nat we support. We also	send staff and friends of ou	ir organization to participate in these
	, ,				

SCHEDULE 0 (Form 990-or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

➤ Attach to Form 990 or 990-EZ.
➤ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization	Employer identification number
PROFESSIONAL & EDUCATIONAL SERVICES INTERNATIONAL INC	95-4209483
Form 990, Part VI, Section B, Line 11b - The return preparer emails a copy of the final version of form 9	990 to all voting members of the
board of directors and asks them to review the return and provide feedback within 3 business days. The	
if no changes need to be made.	

Form 990, Part VI, Section C, Line 19 - The organization makes its government documents such as arti	cles of Incorporation, bylaws
conflict of interest policy, and financial statements available to the general public upon request.	
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Schedule F, Part V, Statement 1

Form: Schedule F

Page: 1

Line Number: Part I Line 3

PROFESSIONAL & EDUCATIONAL SERVICES INTERNATIONAL INC 95-4209483

Accounts and Activities Outside the United States

		Offices	Employees	Total
Region	East Asia and the Pacific			27,689
Activities	Program Services			
Services	HKPES provided administrative			
	assistance for PESI programs that	take		
	place in Hong Kong: annual retrea	t for		
	teachers and other professionals v	vho		
	serve in China; summer study prog	gram for		
	Mainland Chinese students who vi	sit		
	Hong Kong to learn about civil soc	iety.		
Region	East Asia and the Pacific			5,100
Activities Services	Program Services			
	Shanghai's Fudan University Cent	er for		
	American Studies for publishing th	e semi-		
	annual journal Christian Scholarsh	ip.		
Region	Russia and the newly independent	States		14,679
Activities	Program Services			
Services	Wenqiao Language and Culture C	enter in		
	Bishkek, Kyrgyzstan: Financial sur	port for		
	their education programs (staff sal	arles		
	and operational costs) that offer d	asses		
	in English and Chinese to Kyrgyz			
	students from junior high to college	э.		
	Total:	0	0	47.468

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Schedule I, Part IV, Statement 1

PROFESSIONAL & EDUCATIONAL SERVICES INTERNATIONAL INC 95-4209483

Form: Schedule I

Page: 1

Line Number: Part II

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

		Recipient EIN	Amt. of cash grant	
Name and address	Chinese Christian Scholars Association of North America	04-3544376	46,267	(
	93 Emerson Gardens Road			
	Lexington, MA 02420			
IRC code section				
Method of valuation	Check			
Desc. of Non-Cash Asst.				
Purpose of grant	PESI supports the salary of the CCSA president at USD 7500 per year.			
	The CCSA president regularly advises PESi on China's higher education			
	policies and trends. The grants to CCSA were also for the sponsorship of	f		
	conferences and seminars that brought North American academics to			
	meet their Chinese counterparts in mutually beneficial exchange, Chines	е		
	faculty retreats for their academic and personal enrichment, translation o	f		
	books from English into Chinese, and also publication of original			

academic writings by Chinese scholars.

Schedule O, Statement 1	PROFESSIONAL & EDUCATIONAL SERVICES INTERNATIONAL INC
Form: 990	95-4209483
Page: 1	
Line Number:	
Reas	onable Cause Explanations
Explanation	

Danni 1

Need more time to compile all records.

Schedule O, Statement 2

PROFESSIONAL & EDUCATIONAL SERVICES INTERNATIONAL INC 95-4209483

Form: 990

Page: 2

Line Number: Part III Line 4d

Other Program Services Accomplishments

Activity Code	Description	Expense	Grants	Revenue
	Central Asia Education Project: Engaged Wenqiao Language & Culture Center in Bishkek, Kyrgyzstan to conduct education market research to understand the needs of young people there. Contact with local businesses and NGOs with meetings at Wenqiao for focus research groups to conduct interviews for data collection. Translator service and administrative support by Wenqiao staff. Multiple trips by PESi staff to oversee the research process.	27,804		5,898
Total:		27,804	0	5,898