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Form 990

## Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ► Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0047 2014

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Department of the Treasury Internal Revenue Service

► Information about Form 990 and its instructions is at www.irs.gov/form990. 2014, and ending For the 2014 calendar year, or tax year beginning D Employer identification number Check if applicable C Name of organization TSAI HSING SCHOOL FOUNDATION 27-1825871 Address change Doing business as Number and street (or P O box if mail is not delivered to street address) Room/suite Telephone number Name change 250 FIRST AVE 1201 (213) 568-1515 initial return City or town, state or province, country, and ZIP or foreign postal code Final return/terminated G Gross receipts \$ 753,697 Amended return LOS ANGELES CA 90012 H(a) Is this a group return for subordinates? Yes Application pending F Name and address of principal officer H(b) Are all subordinates included? Yes DOMINIC CHANG 250 FIRST AVE, SUITE 1201 LOS ANGELES CA 90012 Tax-exempt status ) ◀ (insert no ) 4947(a)(1) or 501(c) ( Website: ► H(c) Group exemption number M State of legal domicile Form of organization X Corporation Trust Other > L Year of formation 2010 Association Part 133 Summary Briefly describe the organization's mission or most significant activities TO OFFER EXCELLENT ACADEMIC PROGRAMS AND COMMUNITY SERVICES AND INCREASE INTERNATIONAL ACADEMIC AND CULTURAL EXCHANGE TO CONTINUE TO SEE IMPROVEMENTS IN PROVIDING SCHOLARSHIPS AND PROVIDE THE EXPANSION IF INTERNATIONAL ACADEMIC AND CULTURAL EXCHANGE Check this box ► I fithe organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a). ~ Number of independent voting members of the governing body (Part VI 4 Total number of individuals employed in calendar year 2014 (Part ) 5 0 Total number of volunteers (estimate if necessary) . . . . 6 7a Total unrelated business revenue from Part VIII, column (C) line 12 7a 1,210. b Net unrelated business taxable income from Form 990-T, lage 34 7h 1,210. **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . . 752,487. Revenue Program service revenue (Part VIII, line 2g) . . . . . . Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . 10 1,210. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e 0. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 753,697. Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . . . . . . 108,856. Benefits paid to or for members (Part IX, column (A), line 4) . . . . 15 Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10) . 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . . . . b Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e). . . . . . . . . . . . . 12,881. 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) . 121,737. Revenue less expenses Subtract line 18 from line 12 . . . . . . . . . . . . 631,960. End of Year **Beginning of Current Year** Total assets (Part X, line 16) . . 194 672,010. Total liabilities (Part X, line 26) . . . . . . . . . . . . . 63,038 33,236. Net assets or fund balances Subtract line 21 from line 20 . . . . . . . . -62,844 638,774. Part IN Signature Block Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 11/02/15 Sign Here DOMINIC CHANG PRESIDENT Type or print name and title Print/Type preparer's name Preparer's signatu ZHUANG MU LIU ZHUANG MU LIU 11/02/15 self-employed P01271250 Paid Preparer ZHUANG-MU **Use Only** Firm's EIN Firm's address 136-81 ROOSEVELT #4/FL 32-0038372 (718) FLUSHING NY 11354 321-2051 Yes

	1 <b>990</b> (2014)	TSAI HSING	SCHOO	L FOUNDATIO	ON			27-1	825871	Page 2,
Par	till State	ment of Progra	am Ser	vice Accomp	lishments					
	Check i	f Schedule O conta	ains a res	ponse or note to	any line in this Part	III <u> </u>				<u> </u>
1	Briefly describe	the organization's	mission			_				
	TO OFFER	EXCELLENT A	ACADEM	IC PROGRAM	IS				·	
	AND COMMU	JNITY SERVI	CES AN	D INCREASE	INTERNATION	IAL ACADI	EMIC AND	CULTURA	L EXCHAN	GE.
	_~	, Page 2, Part III, L								
					<del>-</del>	<del>-</del>				
	Did the organiz	zation undertake ar	ny signific	ant program serv	rices during the year	which were r	not listed on t	he prior		
	_		-	_					Yes	X No
	If 'Yes,' describ	e these new service	es on Sc	hedule O						
3	Did the organiz	zation cease condu	cting, or	make significant	changes in how it co	nducts, any p	orogram servi	ces?	T Yes	X No
		e these changes o			•		•			التا
4	Describe the or	rganization's progra	am servic	e accomplishme	nts for each of its thr	ee largest pro	ogram service	es, as measu	red by expens	es
	Section 501(c)	(3) and 501(c)(4) o f any, for each prog	rganizatio	ons are required t	to report the amount	of grants and	d allocations	to others, the	total expenses	s,
	and revenue, ii	any, for each prog	ıram serv	ice reported						
			<del></del> .		<del></del>					<del></del>
4 a	(Code	) (Expenses	\$	<u> 108,856.</u>	including grants of	\$	0.	) (Revenue	\$	0.)
	SCHOLARSI	HIPS			<b></b>					
					<b></b>	_ <b></b> _				~ <b>-</b>
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4 t	(Code	) (Expenses	\$		including grants of	\$		) (Revenue	\$	)
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		\/F						\		
4 0	(Code	) (Expenses	\$		including grants of	\$	······	) (Revenue	\$	,
				<del>-</del>						
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									. <b></b>	
		· ·								
4 0	Other program	services (Describ	e in Sche	dule O )						
	(Expenses	\$		including grants	of \$		) (Revenue	\$		)
4 e	Total program	service expenses	<b>&gt;</b>	108,	856.					

Pa	rt IV_	Checklist of Required Schedules			
				Yes	No
1		organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete fulle A	1	х	
2	Is the	organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the	e organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates blic office? If 'Yes,' complete Schedule C, Part I	3		х
4	Section of the sectio	on 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election ct during the tax year? If 'Yes,' complete Schedule C, Part II	4		х
5	Is the	organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, sments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		х
6	to prov	e organization maintain any donor advised funds or any similar funds or accounts for which donors have the right vide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D,	6		х
7		e organization receive or hold a conservation easement, including easements to preserve open space, the inment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		х
8		e organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' ete Schedule D, Part III	8		х
9	for am	e organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian nounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation es? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the perma	e organization, directly or through a related organization, hold assets in temporarily restricted endowments, anent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		х
11		organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, VIII, IX, s applicable			
;	a Did the D, Pai	e organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule at VI	11 a		х
!	b Did the assets	e organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total s reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b	Х	
•	Did the assets	e organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total s reported in Part X, line 16? If Yes,' complete Schedule D, Part VIII	11 c		х
1	d Did the in Par	e organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported t X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		х
	e Did the	e organization report an amount for other liabilities in Part X, line 25? If Yes, complete Schedule D, Part X	11 e		Х
1	f Did the	e organization's separate or consolidated financial statements for the tax year include a footnote that addresses ganization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		х
12		e organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete dule D, Parts XI, and XII	12a		х
ı	b Was tl	the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		х
13	Is the	organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14	a Did th	e organization maintain an office, employees, or agents outside of the United States?	14a		Х
١	busine	e organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, ess, investment, and program service activities outside the United States, or aggregate foreign investments valued 10,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		х
15	Did th	e organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any n organization? If 'Yes,' complete Schedule F, Parts II and IV	15		х
16	Did th	e organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		х
	Did th	e organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, in (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		х
18	Did the	e organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, Ic and 8a? If 'Yes,' complete Schedule G, Part II	18		х
19	Did the	e organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' lete Schedule G, Part III.	19		х
20	a Did th	e organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
	b If Yes	to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

HSING SCHOOL FOUNDATION 2

<u> </u>	Terre Chieckinst 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 domestic government 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 or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22	х	
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J.	23		х
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, 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		Х
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L. Part I	25b		х
20	2	235		
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 'Yes', complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L. Part III	27		х
28				
	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		х
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 conservation contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? 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
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	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	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		_x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O	38		х

Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			Х
		Yes	No
1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1 a	0		
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		
2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	0		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	,	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	-	†	
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O		+	
•		1	
4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
b If Yes,' enter the name of the foreign country			
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAF	·	l	<del> </del> _
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		+	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		<del> </del>	Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	<u>5</u> c		
6 a 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 chantable contributions?	6a		х
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).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	. 7 a		<u> </u>
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	e 7 c		х
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?	7е		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7.0		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7 g		-
Form 1098-C?	7h	<u> </u>	
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsor		<u> </u>	
organization have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.		·	-
a Did the sponsoring organization make any taxable distributions under section 4966?		+	<b> </b>
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<u>96</u>	<u> </u>	<u> </u>
10 Section 501(c)(7) organizations. Enter			
a Initiation fees and capital contributions included on Part VIII, line 12			ļ
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b		1	l
11 Section 501(c)(12) organizations. Enter.			
a 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   12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state?	13a		
Note. See the instructions for additional information the organization must report on Schedule O.	<u> </u>	T	
b Enter the amount of reserves the organization is required to maintain by the states in			
which the organization is licensed to issue qualified health plans		1	
c Enter the amount of reserves on hand		<u> </u>	l
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a	<u> </u>	Х
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b	·	

Form 990 (2014) TSAI HSING SCHOOL FOUNDATION Page 6 27-1825871 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. Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year . . . . . . . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 798 **b** Enter the number of voting members included in line 1a, above, who are independent . . . . . 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х 4 Did the organization make any significant changes to its governing documents 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . . . . . . . . 5 x 6 X 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7 a Х b Are any governance decisions of the organization reserved to (or subject to approval by) members, 7 b X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Х Яa 8 b Х 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code Yes No 10 a Х b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10 b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . . . . . . . . . . . . . . 11 a X b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12 a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12 b Х c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in 12 c Х 13 Х X 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15 a Х 15b X If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16 a Х b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? . . . . . . . . . Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > 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 Other (explain in Schedule O) Another's website Upon request Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records TSAI HSING SCHOOL FOUNDATION 250 FIRST AVENUE STE 1201 LOS ANGELES 90012-3828 (213) 568-1515 RAA TEEA0106 11/13/14 Form 990 (2014)

Form 990 (2014) TSAI HSING SCHOOL FOUN Part VIII Compensation of Officers, Director			es.	Kev	v Ei	mpl	ove	es. Highest C	27-18258 ompensated Er	
Independent Contractors							_	_	-	
Check if Schedule O contains a response or										<u> </u>
Section A. Officers, Directors, Trustees, Ko								<u>-</u>		
1 a Complete this table for all persons required to be listed organization's tax year		•						, ,		
<ul> <li>List all of the organization's current officers, directo compensation Enter -0- in columns (D), (E), and (F) if no</li> </ul>						duals	or	organizations), reg	ardless of amount of	,
<ul> <li>List all of the organization's current key employees</li> </ul>								• • •		
<ul> <li>List the organization's five current highest compens who received reportable compensation (Box 5 of Form Worganization and any related organizations.</li> </ul>										
<ul> <li>List all of the organization's former officers, key em of reportable compensation from the organization and any</li> </ul>					omp	ensa	ted	employees who re	ceived more than \$1	00,000
List all of the organization's former directors or tru		-			the	capa	city	as a former director	or or trustee of the	
organization, more than \$10,000 of reportable compensat										
List persons in the following order individual trustees or d employees, and former such persons	irectors, ir	nstitu	tion	al tru	ıstee	es, of	fice	rs, key employees;	highest compensate	ed
X Check this box if neither the organization nor any rela	ted organi	zatio	n co	mpe	ensa	ted a	ny (	current officer, dire	ctor, or trustee.	
				(C)						
(A) Name and Title	(B) Average	than	n one	box. ι	unless	ck mor		(D) Reportable	(E) Reportable	(F) Estimated
rand and ride	hours	L'	dır	ector/	truste	stee) compensation fro			compensation from related organizations	amount of other compensation
	week	or of	堊	Officer	Key employee	Highest co	3	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	hours for related	director	듛	Œ	<u>a</u>	est c	व्ह			and related organizations
	organiza- tions below	ndividuai trustee or director	흑		oyo	)" an				
	dotted line)	8	nstitutional trusted			l sag	Former			
(4) 2017177 2 211717	<u> </u>	┝	<u> </u>	_	<u> </u>	<u>8</u>	_		_	
(1) DOMINIC CHANG		-	1							
PRESIDENT AND SECRETARY (2) JIMMY HSU		-	<del>                                     </del>	-					. =	-
VICE PRESIDENT										
(3) CHARLES CHIEN										
CFO			<u> </u>							
_(4)										•
_(5)										:
			ļ -	_	$\vdash$		T			
(7)		$\vdash$	├-		_	-	├	-		

<u>(12)</u>

<u>(13)</u>

(14)

Part VII   Section A. Officers, Directors, Tru		Key	En			es,	and	d Highest Con	pensated Em	oloyees	(conti	nuea)
	(B)			•	C) ibon			<b></b>	<b></b> .		<b>(E)</b>	
(A) Name and title	Average hours per	box	, unle	heck ss pe	more noon	than o is both or/trust	an ee)	(D)  Reportable compensation from	(E)  Reportable compensation from	amou	(F) timated nt of oth	er
	week (list any hours for related organiza - tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensate employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	fro orga and	pensation om the inization frelated inization	<b>)</b>
(15)		-			_	- A				<del> </del>		
		↓_				ļ				ļ		
(16)												
(17)											_	
(18)												
(19)												
<u>(20)</u>												
(21)												
(22)					-					<u> </u>		
(23)										1		
(24)		<del>                                     </del>										
(25)								· · · · · ·	I			
1 b Sub-total	on A						<b>&gt; &gt; &gt;</b>					
d Total (add lines 1b and 1c)							eive	l d more than \$100,	l 000 of reportable co	mpensal	ion	
from the organization >								···			Yes	No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	, or truste	e, key	em	ploy	ee,	or hig	ghes	st compensated en	nployee	3		x
4 For any individual listed on line 1a, is the sum of rej	portable c	ompe	nsa	tion	and	othe	r co	mpensation from				
the organization and related organizations greater to such individual					٠.	• •				4		X
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If Yes, 6										5		Х
Section B. Independent Contractors  1 Complete this table for your five highest compensal	ed indepe	nden	t co	ntra	ctors	that	rec	eived more than \$	100.000 of			
compensation from the organization Report compe	nsation fo	r the	cale	nda	r ye	ar en	dıng	with or within the	organization's tax y		<b>-</b> `	
(A) Name and business addr	ess 							Description o		Compe	C) ensatio	П
	-											
				_								
Total number of independent contractors (including \$100,000 of compensation from the organization.)	but not lir	nıted	to th	nose	liste	ed ab	ove	e) who received mo	re than			
BAA		TEEA	0108	03/0	9/15					Form	990 (	2014

<u>. aı</u>	t VIII   Statement of Revenue  Check if Schedule O contains a response or note to any lii	ne ın this Part VIII	<u> </u>	<u></u>	<u>.</u>
,		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts	1 a Federated campaigns 1 a				
ran	b Membership dues 1 b	]			
ξ'n	c Fundraising events 1 c	1			
ar /	d Related organizations 1 d				
s, C	e Government grants (contributions) 1 e				
Contributions, Gifts, Grants and Other Similar Amounts	f All other contributions, gifts, grants, and similar amounts not included above 1f 752,487.				
草豆	g Noncash contributions included in lines 1a-1f \$	1			
Sor	h Total. Add lines 1a-1f	752,487.			
<u> </u>	Business Code				
Program Service Revenue	2 a				
æ	b		-		
ဒ္ဌ	c				
Š	d				
Ë	e				
ğ	f All other program service revenue				
P	g Total. Add lines 2a-2f				
	3 Investment income (including dividends, interest and other similar amounts)		0.	1,210.	0.
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties	<del></del>			
	(i) Real (ii) Personal			<del></del>	
	6 a Gross rents				
	b Less rental expenses				-
	c Rental income or (loss)				
	d Net rental income or (loss)				
	7 a Gross amount from sales of (i) Secunties (ii) Other				
	assets other than inventory	]			
	b Less, cost or other basis and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss) - · · · · · · · · · · · · · · · · · ·	•			
evenue	8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c)				
	· · · · · · · · · · · · · · · · · · ·				
Other R	See Part IV, line 18 a  b Less direct expenses b	<del> </del>			
Ě	c Net income or (loss) from fundraising events				
0	9 a Gross income from gaming activities				
	See Part IV, line 19 a	4			
	b Less direct expenses b		·		
	c Net income or (loss) from gaming activities	1			
	10 a Gross sales of inventory, less returns and allowances a	]			
	b Less cost of goods sold b				
	c Net income or (loss) from sales of inventory ▶	·			
	Miscellaneous Revenue Business Code				<u> </u>
	11a				1
	b				ļ
	c				
	d All other revenue	0.	0.	_0	0.
	e Total. Add lines 11a-11d	0.			ļ
	12 Total revenue See instructions	1 752 607	•	1 210	1

27-1825871

Part IX | Statement of Functional Expenses

Check if Schedule Q contains a response or note to any line in this Part IX.  Do not influide semular sponder an files of 100 pt 100 p	Sec	tion 501(c)(3) and 501(c)(4) organizations must co				
Total expenses Program serves Management and Fundamental Represes Program serves expenses expenses despenses (expenses) and programs serves (expenses) and programs serves (expenses) and programs serves (expenses) and programs (expenses) and expenses (expenses) and expen		Check if Schedule O contains a re-	sponse or note to any lin	e in this Part IX		
origanizations and domestic povernments See Part V, line 21.  Grants and other assistance to domestic involvables See Part V, line 22.  Grants and other assistance to foreign and the control of the co	Do 1 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service	Management and	Fundraising
108,856   108	1	organizations and domestic governments				
organizations, foreign governments, and foreign middless see fart IV, lines 10 and 16  4 Benefits paid to of for members. Compensation of current officers, directors, trustees, and key employees (benefits paid to expense see the control of the control o	2		108,856.	108,856.		
5 Compensation of current officers, directors, trustees, and key employees. 6 Compensation not included above, to discussified persons (as defined under section 4958(f)(1)) and persons described in section 4958(f)(1)) and persons described in section 4958(f)(1)) and persons described in section 491(f) and 403(f) and 4	3	organizations, foreign governments, and for-				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(f)(1)) and persons described in section 4958(f)(3)) and persons described in section 491(f) and 403(b) employer contributions (include section 491(f) and 403(b) employer contributions.  9 Other employee benefits  10 Payroll taxes  11 Fees for services (non-employees)  a Management  b Legal  10,681  0. 10,681  0. 10,681  0. 10,681  0. 10,681  0. 10,681  0. 25  0	-	Compensation of current officers, directors,				
8   Penson plan accruats and contributions (include section 401(k) and 403(k) employer contributions).	6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described				
Conclude section 401(k) and 403(b) employer contributions).	7	Other salaries and wages	<u>-</u>			
10 Payroll taxes	8	(include section 401(k) and 403(b)			_	
11 Fees for services (non-employees): a Management . b Legal	9	Other employee benefits				
11 Fees for services (non-employees): a Management . b Legal	10	Payroli taxes				
a Management .	11	Fees for services (non-employees)			·	
b Legal						
c Accounting d Lobbyring Professional fundraising services. See Part IV, line 17 f Investment management fees Q 5. 0. 25. g Other (if line 11g and exceeds 10% of line 25, column (A) amount, list line 11g separess on Schedule 0). Advertising and promotion Q ffice expenses Q for great in the column (A) amount, list line 12g separess on Schedule O). Great in the column (A) amount, list line 24e expenses on Complete this line only if the organization reported in column (B) joint costs. Complete this line only if the organization reported in column (B) joint costs. Complete this line only if following and and fundraising solicitation. Check here b I following		-	10 681	0	10 681	0.
d Lobbying e Professonal fundrasing services, See Part IV, line 17 f Investment management fees g Other (If line 11g ant exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).  25.		•	10,001.	0.	10,001.	<u>.</u>
e Professional fundraising services. See Part IV, line 17  f Investment management fees		-		<del></del>		
Investment management fees		· · · · ·				
Other (if line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule ()		Ť	3.5	^		0.
(A) amount, Ist line 11g expenses on Schedule O).  12 Advertising and promotion  13 Office expenses  14 Information technology  15 Royalities  16 Occupancy  17 Travel  18 Payments of travel or entertainment expenses for any federal, state, or local public officials  19 Conferences, conventions, and meetings  10 Interest  20 Interest  21 Payments to affiliates  22 Depreciation, depletion, and amortization  23 Insurance  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)  2 BANK CHARGE  2 All other expenses.  2 Total functional expenses. Add lines 1 through 24e.  2 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fund/arising solicitation. Check there b	c	•		<u>U.</u>	25.	<u>.                                    </u>
13 Office expenses		(A) amount, list line 11g expenses on Schedule O)				
Information technology   15   Royalties		• .				
15 Royaltes		•				
16 Occupancy						
17 Travel  Payments of travel or entertainment expenses for any federal, state, or local public officials  19 Conferences, conventions, and meetings  20 Interest  Payments to affiliates  21 Payments to affiliates  22 Depreciation, depletion, and amortization  23 Insurance  24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount, list line 24e expenses on Schedule O)  a BANK CHARGE  b CONTRIBUTION  c d  e All other expenses  Total functional expenses. Add lines 1 through 24e  25 Total functional expenses. Add lines 1 through 24e  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 b if following		-				
Payments of travel or entertainment expenses for any federal, state, or local public officials		•				
expenses for any federal, state, or local public officials	17					
20 Interest	18	expenses for any federal, state, or local				
21 Payments to affiliates	19	Conferences, conventions, and meetings				
Depreciation, depletion, and amortization	20					
23   Insurance	21	Payments to affiliates				
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)	22	Depreciation, depletion, and amortization				
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)			······································			
b CONTRIBUTION 2,000. 0. 2,000.  c d	24	covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e				
b CONTRIBUTION 2,000. 0. 2,000.  c d e All other expenses	;	BANK_CHARGE	175.	0.	175.	O.
c d e All other expenses			2.000.	0.	2,000.	0.
e All other expenses						
Total functional expenses. Add lines 1 through 24e 121, 737. 108, 856. 12, 881.  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 ▶ ☐ if following		d				
Total functional expenses. Add lines 1 through 24e 121, 737. 108, 856. 12, 881.  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 ▶ ☐ if following		e All other expenses				
the organization réported in column (B)  joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following		·	121,737.	108,856.	12,881.	0.
SOP 98-2 (ASC 958-720)	26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Part X Balance Sheet

2 Savings and temporary cash investments	ar , 206 .
1 Cash — non-interest-bearing	,206.
3 Pledges and grants receivable, net	
4 Accounts receivable, net	
5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	
trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	
trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	
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	
section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing	
employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6	
7 Notes and loans receivable, net	
7 Notes and loans receivable, net	
9 Prepaid expenses and deferred charges	
10 a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	
b Less accumulated depreciation 10b	
11 Investments – publicly traded securities	
	004
13 Investments – program-related See Part IV, line 11 · · · · · · · · · · · · · · · · · ·	<u>,804.</u>
14 Intangible assets	
<del></del>	,010 <u>.</u>
17 Accounts payable and accrued expenses	<u>,236.</u>
19 Deferred revenue	
20 Tax-exempt bond liabilities	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
21 Escrow or custodial account liability Complete Part IV of Schedule D	
key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	
23 Secured mortgages and notes payable to unrelated third parties	
24 Unsecured notes and loans payable to unrelated third parties	
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25	
	,236.
Organizations that follow SFAS 117 (ASC 958), check here and complete	
lines 27 through 29, and lines 33 and 34.  Unrestricted net assets	
27 Unrestricted net assets	
28 Temporanily restricted net assets	
29 Permanently restricted net assets	
Permanently restricted net assets	
30 Capital stock or trust principal, or current funds	
31 Paid-in or capital surplus, or land, building, or equipment fund	
32 Retained earnings, endowment, accumulated income, or other funds	,774 .
33 Total net assets or fund balances	,774.
34 Total liabilities and net assets/fund balances	

BAA

Form 990 (2014)

Form	990 (2014) TSAI HSING SCHOOL FOUNDATION	27-1	825871	<u> </u>	Pa	ige 12
Par	t XI Reconciliation of Net Assets					_
	Check if Schedule O contains a response or note to any line in this Part XI		<u>.</u> .	<u> </u>	<u>.                                    </u>	. X
1	Total revenue (must equal Part VIII, column (A), line 12)	L	1	7	53,€	<u> 597.</u>
2	Total expenses (must equal Part IX, column (A), line 25)		2	1	<u>21,7</u>	<u>737.</u>
3	Revenue less expenses Subtract line 2 from line 1	L	3	6	<u>31,9</u>	960.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	[	4		52,ε	344.
5	Net unrealized gains (losses) on investments	[	5			
6	Donated services and use of facilities	[	6			
7	Investment expenses		7			
8	Prior period adjustments	$\cdot \cdot \mid$	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	٠. [	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	5	59,1	116.
Par	t XII   Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					. X
	Chook is Concodic C Contains a recepting of these to any line in this trace.				Yes	
1	Accounting method used to prepare the Form 990 Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			-		
<b>2</b> a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2 a		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both	on a				
	Separate basis Consolidated basis Both consolidated and separate basis					
t	were the organization's financial statements audited by an independent accountant?			2 ь		х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis			<u> </u>		
ď	c If Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	audit	, 	2 c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O					
3 a	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si Audit Act and OMB Circular A-133?	ngle • •		3 a		х
ŀ	olf 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the requir	ed au	dit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3 b		<u> </u>
BAA				Form	990 (	2014)

#### **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.

► 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.

OMB No 1545-0047

2014

Open to Public Inspection

Departm Internal	nent of the Treasury Revenue Service	► Inf		dule A (Form 990 or 99 at <i>www.irs.gov/form99</i>		nd its in:	structions is	Inspection		
Name o	f the organization	L					Employer identifica	ation number		
TSA	HSING SCH	OOL FOUNDA	ATION				27-182587	1		
Part	I Reason fo	r Public Cha	arity Status (All or	ganizations must co	omplet	e this p	art.) See instruction	is.		
The o	rganization is not a	a private foundat	tion because it is (For	lines 1 through 11, chec	k only or	ie box )				
1	A church, con	vention of churc	hes, or association of o	churches described in se	ction 17	<b>'</b> 0(b)(1)(.	A)(i).			
2	<b>—</b>		170(b)(1)(A)(ii). (Atta	·						
3	<b>—</b>	·		tion described in section						
4	name, city, an	•	on operated in conjunc	tion with a hospital desc	nbed in :	section	170(b)(1)(A)(iii) Enter ti	he hospital's		
5	An organization			or university owned or o	perated	by a gov	ernmental unit described	In section		
6										
7	X   An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)									
8	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II )									
9	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	<b>—</b>	-	•	to test for public safety.						
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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g									
а	a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B.									
b	☐ management	porting organization of the supporting te Part IV, Section 19	g organization vested ii	trolled in connection with the same persons that	its supp control o	oorted or or manag	ganization(s), by having ge the supported organiz	control or ation(s) <b>You</b>		
С	Type III funct	ionally integrat	ted. A supporting organ	nization operated in connecte Part IV, Sections A,	ection w <b>D, and f</b>	uth, and E.	functionally integrated w	ith, its supported		
d	functionally int	tegrated. The or-	ganization generally m	organization operated in ust satisfy a distribution in A and D, and Part V.	connect requirem	on with ent and	its supported organization attentiveness require	on(s) that is not iment (see		
е	Check this bo	x if the organizat	tion received a written ctionally integrated sur	determination from the IF		s a Туре	I, Type II, Type III functi	onally		
					• • • •					
g			about the supported or	1	т			<del></del>		
	(i) Name of organ	supported ization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is organizati in your go docur	on listed overning	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
					Yes	No				
(A)										
<u> </u>										
<u>(B)</u>					ļ					
(C)										
<u>(D)</u>					ļ					
<u>(E)</u>	<u></u>									
<b>-</b> 4-1										

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

Schedule A (Form 990 or 990-EZ) 2014

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(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.)

<u>Sec</u>	tion A. Public Support						
begiı	ndar year (or fiscal year nning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any unusual grants )		56,619.	33,700.	0.	752,487.	842,806.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3		56,619.	33,700.	0.	752,487.	842,806.
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)		<b>:</b> ·				
6	Public support. Subtract line 5 from line 4						842,806.
Sec	tion B. Total Support						
	ndar year (or fiscal year nning in) ►	(a) 2010	( <b>b</b> ) 2011	(c) 2012	( <b>d)</b> 2013	(e) 2014	(f) Total
7	Amounts from line 4		56,619.	33,700.	0.	752,487.	842,806.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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 VI)						
11	through 10						842,806.
12	Gross receipts from related activit	es, etc (see instruc	ctions)			12	
13	First five years. If the Form 990 a organization, check this box and s	s for the organization here	on's first, second, t	hird, fourth, or fifth	tax year as a secti	on 501(c)(3)	<b>x</b>
Sec	tion C. Computation of Pu			•			
14		•	-				<u>%</u>
15	Public support percentage from 20	013 Schedule A, Pa	art II, line 14 · · ·	• • • • • • • • •	• • • • • • • • • •	15	%
16 a	33-1/3% support test — 2014. If and stop here. The organization of						
t	33-1/3% support test – 2013. If t and stop here. The organization						
17 a	a 10%-facts-and-circumstances to or more, and if the organization m the organization meets the facts-a	eets the 'facts-and-	-circumstances' tes	st, check this box a	nd stop here. Exp	lain in Part VI how	
t	o 10%-facts-and-circumstances to or more, and if the organization m organization meets the 'facts-and-	eets the 'facts-and-	-circumstances' tes	st, check this box a	nd stop here. Exp	lain in Part VI how	the
18	Private foundation. If the organiz	ation did not check	k a box on line 13,	16a, 16b, 17a, or 1	7b, check this box	and see instruction	ns ▶
	<del></del>					11 4 /5 000	

27-1825871

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.)

	tion A. Public Support						
Calen	dar year (or fiscal yr beginning in) 🕨	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include						
	any 'unusual grants')						
2	Gross receipts from admis-						
	sions, merchandise sold or						
	services performed, or facilities furnished in any activity that is						
	related to the organization's				!		
_	tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on						
	its behalf			}			<u> </u>
5	The value of services or						
	facilities furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1,	·			•		
	2, and 3 received from disqualified persons						İ
b	Amounts included on lines 2		<del></del>				
	and 3 received from other than						
	disqualified persons that exceed the greater of \$5,000 or			ŀ			
	1% of the amount on line 13						
	for the year						<u>.                                    </u>
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)		. 1	,			
Sec	tion B. Total Support						
	dar year (or fiscal yr beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 6						
10 a	Gross income from interest, dividends,			-			
	payments received on secunities loans,						
	rents, royalties and income from similar sources						
b	Unrelated business taxable						
	income (less section 511 taxes) from businesses	,		1	:		
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is			1			
	regularly carried on						
12	Other income Do not include				[		
	gain or loss from the sale of capital assets (Explain in				† I		
	Part VI )				ļ		
13	Total support. (Add lines 9, 10c, 11 and 12)	1					
14	First five years. If the Form 990 is	s for the organization	on's first, second,	third, fourth, or fifth	n tax year as a sect	on 501(c)(3)	
	organization, check this box and s				· · · · · · · · · · ·		
	tion C. Computation of Pu			0		145	1
15		• • •	•			<del></del>	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
16	Public support percentage from 20				· · · · · · · · · · ·	16	<u></u>
	tion D. Computation of Inv					147	T
17	Investment income percentage for	•	, .				\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
18	Investment income percentage fro						
19 a	33-1/3% support tests — 2014. If is not more than 33-1/3%, check to	une organization d	ia not check the bi	ox on line 14, and tion qualifies as a	nne 15 is more that publicly supported (	ı 33- 1/3%, and lir organization	▶ □
b	33-1/3% support tests - 2013. If	f the organization d	id not check a box	on line 14 or line	19a, and line 16 is i	more than 33-1/3	%, and
	line 18 is not more than 33-1/3%,	check this box and	stop here. The o	rganization qualifie	es as a publicly sup	ported organization	on ▶ [
20	Private foundation. If the organiz	ation did not check	a box on line 14,	19a, or 19b, check	k this box and see i	nstructions	▶

Part IV: Supporting Organizations
(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Sec	tion A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents?	7		
•	If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	1		J
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2		
		5 2 4	,	$\vdash$
3 :	a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If Yes, answer (b) and (c) below	3a	i	<sup>}</sup>
		1	<u>,                                    </u>	
ı	b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization	3b	<del>1</del> - :	
	made the determination	30	├	╂
	c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use	7 3c		
	purposes in the s, explaint in Part VI What controls the organization put in place to ensure such use	36	<del> </del>	<del> </del>
4 :	a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
ı	b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled	,		
	or supervised by or in connection with its supported organizations	4b	<del> </del>	<del>                                     </del>
,	Did the organization support any foreign supported organization that does not have an IRS determination under		A	
	sections 501(c)(3) and 509(a)(1) or (2)? If Yes, explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			$\vdash$
5 8	a Did the organization add, substitute, or remove any supported organizations during the tax year? If Yes, answer (b)		'	
	and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the	1	'	,
	organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by		<u> </u>	ļ
	amendment to the organizing document)	5a	<del> </del>	ļ
	b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the			.
	organization's organizing document?	5b	<del> </del>	<b>├</b>
	c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	<u> </u>	<u> </u>
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the chantable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in Part VI	6		
	and ming digametation of summation of the summation of th	; 5-	<del>                                     </del>	
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with	331		
	regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990)	7	<u> </u>	ļ
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,'			ļ
	complete Part I of Schedule L (Form 990)	8	├─	┼
9 :	a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))?  If 'Yes,' provide detail in <b>Part VI</b>	 9a		
1	b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the	3 9b		
	supporting organization had an interest? If 'Yes,' provide detail in Part VI	7 64	<del> </del>	┼
	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from,	٠٠٠.	<del> </del>	
	assets in which the supporting organization also had an interest? If Yes, provide detail in Part VI	9c		<del>                                     </del>
10	a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,'	49 90		
	answer (b) below	10a	<u> </u>	<u> </u>
ı	b Did the organization, have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)	_ 10b		

Sche	edule A (Form 990 or 990-EZ) 2014 TSAI HSING SCHOOL FOUNDATION	27-1825871	F	Page 5
Par	rt IV Supporting Organizations (continued)			, -
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
	a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) be	low, the	-	ļ
	governing body of a supported organization?		+	
	b A family member of a person described in (a) above?		<del>                                     </del>	┢
	c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part	<i>VI</i>   11c	1	
Sec	tion B. Type I Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regular or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's If the organization had more than one supported organization, describe how the powers to appoint and/or redirectors or trustees were allocated among the supported organizations and what conditions or restrictions, applied to such powers during the tax year	describe in activities emove if any,	163	NO
2	Did the organization operate for the benefit of any supported organization other than the supported organization other than the supported organization of the supported organization? If 'Yes,' explain in Part VI how providing benefit carned out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	ng such e		
Sec	tion C. Type II Supporting Organizations			
		,	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or managem supporting organization was vested in the same persons that controlled or managed the supported organization.	nent of the	<u> </u>	
Sec	supporting diganization was vested in the same persons that controlled of managed the supported diganiza-	mon(s) · · · · · · · · · · · · ·	J	
	The state of the s		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the p year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of organization's governing documents in effect on the date of notification, to the extent not previously provided	the		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI the organization maintained a close and continuous working relationship with the supported organization(s)	now		
3	By reason of the relationship described in (2), did the organization's supported organizations have a signific voice in the organization's investment policies and in directing the use of the organization's income or asset all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations in this regard	s at s played	-	
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year	r (see instructions):		
		(00000 00).		
b				
		nt entity (see instructions)		
		, ,		
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those organizations and explain how these activities directly furthered their exempt purposes, how the organizations responsive to those supported organizations, and how the organization determined that these activities con substantially all of its activities.	supported tion was stituted		
_	•		1	$\vdash$
t	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the rethe organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	asons for the		
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trust each of the supported organizations? <i>Provide details in Part VI</i>			
b	b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard	each of its		

Scne	dule A (Form 990 or 990-EZ) 2014 TSAI HSING SCHOOL FOUNDATION		27-18	25871 Page 6
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	niza	tions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on N other Type III non-functionally integrated supporting organizations must complete Sect	lovemi	ber 20, 1970 <b>See instru</b> through E	uctions. All
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
_ 1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sec	tion B — Minimum Asset Amount		(A) Pnor Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)			
а	Average monthly value of securities	1 a		
b	Average monthly cash balances	1 b		
С	Fair market value of other non-exempt-use assets	1 c		
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1 d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
_ 5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		<u> </u>
Sec	tion C Distributable Amount			Current Year
_1	Adjusted net income for pnor year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	·	
4	Enter greater of line 2 or line 3	4		
_ 5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-integrated (see instructions)	d Type	e III supporting organizat	ion

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Schedule A (Form 990 or 990-EZ) 2014

	edule A (Form 990 or 990-EZ) 2014			Page 7
Par		pporting Organization	ations (continued)	-·
Sec	tion D — Distributions			Current Year
_1	Amounts paid to supported organizations to accomplish exempt purpose	es		
2	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of suppor	rted organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organization Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Sec	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(ıii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required — see instructions)			
3	Excess distributions carryover, if any, to 2014			
a	1			
b				
c				
d				
е	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			-
	Carryover from 2009 not applied (see instructions)			
i	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2014 from Section D, line 7 \$			
а	Applied to underdistributions of prior years	-		
	Applied to 2014 distributable amount	<del> </del>		
	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6	Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7				
8				
a		<del> </del>		
b	- Marine			
c	· · · · · · · · · · · · · · · · · · ·			
	Excess from 2013	*		
	Excess from 2014			

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Schedule A (Form 990 or 990-EZ) 2014

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

#### **SCHEDULE D** (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

OMB No 1545-0047

2014

	TSAI HSING SCHOOL FOUNDATION				27-1025071	
D'a	i 集 Organizations Maintaining Donor Advis	ed Funds or Of	her Similar Fur	ids or Acc	27-1825871_ 	
Par	Complete if the organization answered 'Ye	es' to Form 990.	Part IV. line 6.	ius vi ACC	Syullis.	
	- Complete it and digatilization allowed it	(a) Donor advised		/b) 5	unds and other acco	
4	Total number at and of year	(a) Donor advised	iulius	(0) [	unds and other acco	ourits
1	Total number at end of year					
2	Aggregate value of contributions to (during year)		<del></del>			<del>-</del>
3	Aggregate value of grants from (during year)					<u> </u>
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors are the organization's property, subject to the organization	in writing that the ass 's exclusive legal cor	sets held in donor ad atrol?	dvised funds	Yes	No
6	Did the organization inform all grantees, donors, and dono for charitable purposes and not for the benefit of the donor impermissible private benefit?	or donor advisor, or	for any other purpo	se conferring		No
Păï	Conservation Easements. Complete if the organization answered 'Ye	es' to Form 990, I	Part IV, line 7.			
1	Purpose(s) of conservation easements held by the organiz	<del></del>				
	Preservation of land for public use (e.g., recreation or	education)	Preservation of	f a historically	/ important land area	l
	Protection of natural habitat		Preservation of	f a certified hi	stonc structure	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qu	alified conservation of	contribution in the fo	rm of a conse	ervation easement of	n the
	last day of the tax year			(inclination)		
					Held at the End of the	he Tax Year
	Total number of conservation easements			<del></del>		
١	Total acreage restricted by conservation easements	• • • • • • • • •				
•	Number of conservation easements on a certified historic	structure included in	(a)	· 2c		
•	Number of conservation easements included in (c) acquire structure listed in the National Register			. 2d		
3	Number of conservation easements modified, transferred, tax year ►	released, extinguish	ed, or terminated by	the organiza	ation during the	
4	Number of states where property subject to conservation	easement is located	·	_		
5	Does the organization have a written policy regarding the and enforcement of the conservation easements it holds?					No
6	Staff and volunteer hours devoted to monitoring, inspectin	g, and enforcing con-	servation easement	s during the y	/ear	
7	Amount of expenses incurred in monitoring, inspecting, ar ►\$	d enforcing conserva	ition easements dur	ing the year		
8	Does each conservation easement reported on line 2(d) a and section 170(h)(4)(B)(ii)?	bove satisfy the requ	irements of section	170(h)(4)(B)(	(i) ∐Yes	No
9	In Part XIII, describe how the organization reports conservinclude, if applicable, the text of the footnote to the organization easements.	zation's financial state	ements that describe	es the organi	zation's accounting f	et, and or
Pā	Organizations Maintaining Collections Complete if the organization answered 'Ye	of Art, Historica es' to Form 990,	I Treasures, or Part IV, line 8.	Other Sir	nilar Assets.	··
1 :	all f the organization elected, as permitted under SFAS 116 art, historical treasures, or other similar assets held for pu in Part XIII, the text of the footnote to its financial statemen	blic exhibition, educa	tion, or research in t	atement and furtherance o	balance sheet works f public service, prov	s of vide,
ا	o if the organization elected, as permitted under SFAS 116 historical treasures, or other similar assets held for public following amounts relating to these items:	exhibition, education	or research in furth	erance of pu	blic service, provide	art, the
	(i) Revenue included in Form 990, Part VIII, line 1				▶\$	
	(ii) Assets included in Form 990, Part X					
2	if the organization received or held works of art, historical amounts required to be reported under SFAS 116 (ASC 9	treasures, or other si 58) relating to these i	mılar assets for fina tems.	ncial gain, pr	ovide the following	
	Revenue included in Form 990, Part VIII, line 1				▶\$	
	Assets included in Form 990, Part X				▶ \$	

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Schedule D (Form 990) 2014

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27-1825871

Schedule D (Form 990) 2014

TSAI HSING SCHOOL FOUNDATION

Schedule **D** (Form 990) 2014

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3

4 Amounts included on Form 990, Part VIII, line 12, but not on line 1.

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.	
1 Total revenue, gains, and other support per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12.	
a Net unrealized gains (losses) on investments	
b Donated services and use of facilities	
c Recoveries of prior year grants	

a Investment expenses not included on Form 990, Part VIII, line 7b. . . . . . . . . . 4 b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12).......

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1 Total expenses and losses per audited financial statements	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	1
a Donated services and use of facilities	
b Pnor year adjustments	
c Other losses	
d Other (Describe in Part XIII )	
e Add lines 2a through 2d	2 e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1. a Investment expenses not included on Form 990, Part VIII, line 7b	
C Add lines 4a and 4b	4 c
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Schedule D (Form 990) 2014

# SCHEDULE I

Grants and Other Assistance to Organizations,

OMB No 1545-0047

(Form 990)	Governments, and Individuals in the United States Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22.		2014
	► Attach to Form 990.	Č	Onen to Pu
Department of the Treasury Internal Revenue Service	▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.	<del>-</del>	Inspection
Name of the organization	43	Employer identification number	number
TSAI HSING SCE	TSAI HSING SCHOOL FOUNDATION	27-1825871	
Part   General II	Part I General Information on Grants and Assistance		
1 Does the organize the selection crite	1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grants of grants or assistance, and the selection criteria used to award the grants or assistance?	· · · · · · · · · · · · · · · · · · ·	XYes
2 Describe in Part I	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States		

Partilla Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answere Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	nce to Domestic	Organizations at received more	Organizations and Domestic Governments. Complete if the organization answered 'Yes' to at received more than \$5,000. Part II can be duplicated if additional space is needed.	<b>srnments.</b> Comple can be duplicated	te if the organizati if additional space	ion answered 'Yes is needed.	s' to
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)							
(2)							
(3)							
[4]							}
(5)							
(9)							
$\omega$							
(8)							
		-					
2 Enter total number of section 501(c)(3) and government organ	and government organ	nizations listed in the line 1 table	line 1 table				
3 Enter total number of other organizations listed in the line 1 table.	is listed in the line 1 ta	ble				•	
BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990	, see the Instruction	s for Form 990		TEEA3901 06/19/14	06/19/14	Schedu	Schedule I (Form 990) (2014)

TSAI HSING SCHOOL FOUNDATION Schedule I (Form 990) (2014)

Part III | Grants and Other Assistance to Domestic Individuals. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

ממון מע מתלמוני	נימון מת מתקווכמונים זו מתמונוטוומו אףמכה וא ווממעכם.	מוס וופפחפח.				
(a) Type of grant or assistance	t 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
1 SCHOLARSHIPS FOR STUDENTS ATTENDING STATE UNIVERSITY OF STONY BROOK	DING STATE UNIVERSITY OF STONY BROOK	4	108,856.			
2						
ო						
4						
រភ						
မှ						
7						
Part IV Supplement	tal Information. Provid	e the information	equired in Part I, lir	ne 2, Part III, colum	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	litional information.
Pt I Line 2	IF A STUDENT'S GRADES		T THAT THEY CA	N SKIP 12TH GR	WARRANT THAT THEY CAN SKIP 12TH GRADE, THAT STUDENT GIVEN FOUR YEARS	GIVEN FOUR YEARS
Pt III, col (b)	SCHOLARSHIP.IF STUDENT ATTENDS 12TH GRADE, RECEIVES 1/2 SCHOLARSHIP. THE FOUR RECIPIENTS ARE CATHERINE RAO, SHANG YONG CHEN, SYDNEY HSIN	STUDENT ATTER FENTS ARE CATE	IDS 12TH GRADE, IERINE KAO, SHA	RECEIVES 1/2 NG YONG CHEN,	SCHOLARSHIP.IF STUDENT ATTENDS 12TH GRADE, RECEIVES 1/2 SCHOLARSHIP. THE FOUR RECIPIENTS ARE CATHERINE KAO, SHANG YONG CHEN, SYDNEY HSIN JAU AND THERESA KUNG.	ND THERESA KUNG.

Schedule I (Form 990) (2014)

#### SCHEDULE O (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.

Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Open to Public Inspection

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

Name of the organization Employer (dentification numbe 27-1825871 TSAI HSING SCHOOL FOUNDATION ORGANIZATION DIDN'T RECEIVE ANY PAYMENT FOR INDOOR TANNING SERVICES Pt V, Line 14b DURING THE TAX YEAR. THERE ARE NO MATERIAL DIFFERENCES IN VOTING RIGHTS AMONG MEMBERS OF THE GOVERNING BODY OR GOVERNING BODY DELEGATED BROAD AUTHORITY TO AN Pt VI, Line la EXECUTIVE COMMITTEE OR SIMILIAR COMMITTEE. ONCE FORM 990 COMPLETED AND MAILED IS THEN ISSUED TO MEMBERS OF ALL Pt VI, Line 11b GOVERNING BODY. TOP 3% OF 11TH GRADERS CAN APPLY FOR SCHOLARSHIP TO STONY BROOK UNIVERSITY. TOP 10% OF 12TH GRADERS CAN APPLY FOR SCHOLARSHIP TO STONY BROOK UNIVERSITY. MAX ONE PERSON FROM EACH GRADE THAT IS ACCEPTED AT STONY BROOK IS SELECTED.ALL CANDIDATES ARE REVIEWED AND CHOSEN BY EXECUTIVE COMMITTEE. STUDENT IF SELECTED MUST MAINTAIN 3 0 OR BETTER AVERAGE, COMPLIANCE IS ENFORCED BY UNIVERSITY SENDING TRANSCRIPTS EACH Pt VI, Line 12c QUARTER. ALL OFFICERS AND KEY EMPLOYEES ARE VOLUNTEERS AND THEREFORE NO COMPENSATION GRANTED. Pt VI, Line 15b Pt VI, Line 19 NO DOCUMENTS AVAILABLE TO THE PUBLIC. NO OTHER CHANGES IN ASSETS OR FUND BALANCES. Pt XI Pt XII, Line 1 NO CHANGES TO METHOD OF ACCOUNTING. NO CHANGES IN OVERSIGHT PROCESS OR SELECTION PROCESS DURING THE TAX Pt XII, Line 2c YEAR.