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Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For e	caler	ndar year 2014 or tax year beginning F	EB 1	8, 2014	, and e	nding	DEC 31, 2014	
Nar	ne o	f foundation		<u> </u>			A Employer identification	number
T	<u>HE</u>	JIN HUA FOUNDATION					46-5025837	
		and street (or P O box number if mail is not delivered to s	treet addres	ss)		Room/suite	B Telephone number	
		INE STREET					(201)608-5	067
		own, state or province, country, and ZIP or fore LEWOOD CLIFFS, NJ 07	ign posta 632	l code			C If exemption application is po	ending, check here
G C	heck	call that apply: X Initial return		Initial return of a	former public (charity	D 1. Foreign organizations	s, check here
		Final return	[Amended return			2 Foreign organizations me	eting the 85% test
		Address change		Name change		_	Foreign organizations me check here and attach co	mputation
H_ C	_	type of organization: X Section 501(c)	_				E If private foundation sta	
<u>_</u>		ection 4947(a)(1) nonexempt charitable trust		er taxable private found			under section 507(b)(1)	(A), check here
		·) —			Accr	ual	F If the foundation is in a	
(fr		Part II, col. (c), line 16) 1,961,592. (Part I,		(specify)	hassa l		under section 507(b)(1)	(B), check here
_	irt I	Analysis of Revenue and Expenses	Column				(1) Advisated and	(d) Disbursements
1, 6	11 61	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may n necessarily equal the amounts in column (a))	ot	(a) Revenue and expenses per books		ivestment ome	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received		2,020,200.	1		N/A	
	2	Check It the foundation is not required to attach Sch	B 5.50	经验证的数据	20,120	الآياد في الآياد ال من الايداد الآياد ا	BERTHART.	1 5 4 5 7 6 7 7 2 5 7
	3	Interest on savings and temporary cash investments	<u> </u>					The Control of the state of the
	4	Dividends and interest from securities	<u> </u>					The state of the s
	5a	Gross rents		E / /	1	· · · · · · · · · · · · · · · · · · ·	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
	b	Net rental income or (loss)						
ē	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all		" THE TOTAL TOTAL THE CETT	7	केट्ट हो १५६१ स्टब्स्टर राज्यसम्बद्ध	The state of the s	Rand Comments
Revenue	D	assets on line 6a	# # 7:		1 6 7 6 E	0.		
Rev	7 8	Capital gain net income (from Part IV, line 2)	7.5		7 7 7			The second second
	9	Net short-term capital gain Income modifications	300					the second
	10a	Gross sales less returns	1 1	and the state of the state of	7	5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	The second second	
		Less Cost of goods sold	- 12 N	Service of the servic	The state of the s	ETTATION OF THE COM	The state of the s	1
	c	Gross profit or (loss)	- 1-1	<u> </u>			1020 4 6 420 40 42	The state of the s
	11	Other income			<u>```</u>			Ly ("
	12	Total. Add lines 1 through 11		2,020,200.		0.		是是一个一种心
	13	Compensation of officers, directors, trustees, etc		0.		0.		0.
	14	Other employee salaries and wages						
ł	15	Pension plans, employee benefits	<u> </u>					
Ses	16a	Legal fees	<u> </u>			TONE !		
Expenses	b	Accounting fees			PEC		132T	
	C	Other professional fees		,, H		200		
Administrative	17	Interest	 		E MAY	1 0 501;	1.0	
tra	18	Taxes			2/1 [M/2 11		12	Promise Value Works
inis	19 20	Depreciation and depletion Occupancy	<u> </u>			DEN	17	A Total Market
Ę	21	Travel, conferences, and meetings	\ -		1 05			
and A	22	Printing and publications		·-				
		Other expenses STMT 1	1	200.		200.		0.
ati n	24	Total operating and administrative						
Operating		expenses. Add lines 13 through 23		200.	L	200.		0.
ŏ	25	Contributions, gifts, grants paid		65,000.				65,000.
	26	Total expenses and disbursements.						
		Add lines 24 and 25		65,200.		200.		65,000.
	27	Subtract line 26 from line 12:						
		Excess of revenue over expenses and disbursements	<u> </u>	1,955,000.	·	·		ļ
		Net investment income (If negative, enter -0-)			 	0.	<u> </u>	
- 1	C	Adjusted net income (if negative, enter -0-)	1	-			N/A	I

LHA For Paperwork Reduction Act Notice, see instructions.

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P	art IV Capital Gains an	d Losses for Tax on In	vestment	Income				
	(a) List and describ 2-story brick warel	e the kınd(s) of property sold (e.g house; or common stock, 200 shs	., real estate, s. MLC Co.)		(b) P	How acquired - Purchase - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a								
<u>b</u>	NON!	E			<u> </u>			
_ <u>c</u>					-		<u> </u>	
<u>d</u>					├-			
<u>e</u>	T	(f) Depression allowed	(5) (5)	at as other basis	_		(b) Coin or (loos	<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		expense of sale		_	(h) Gain or (loss (e) plus (f) minus	
<u>a</u>						 :	_ 	
<u>b</u>								
_ <u>c</u>								
<u>d</u>			 					
<u>e</u>	Complete only for assets showing	gain in column (h) and owned by	the foundation	on 12/31/69			(I) Gains (Col. (h) gain	minus
_	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) E:	xcess of col. (1)		C	ol. (k), but not less that Losses (from col. (n -0-) or
a				<u> </u>				·
_ <u></u>								
Ç							.	
d								
e								
2	Capital gain net income or (net capit	If gain, also ente			}	2		
	Net short-term capital gain or (loss)				,			· · · · · · · · · · · · · · · · · · ·
J	If gain, also enter in Part I, line 8, co		ia (<i>0)</i> .		Ĵ			
	If (loss), enter -0- in Part I, line 8					3		
Ч		der Section 4940(e) for					come	
(Fo	or optional use by domestic private fo	oundations subject to the section 4	4940(a) tax on	net investment in	come	.)		N/A
If s	section 4940(d)(2) applies, leave this	part blank.						
\A/-	as the foundation liable for the sectio	n 1010 tay on the distributable ar	nount of any w	nar in the hace nor	Char			Yes No
	Yes," the <u>foundation does not qualify</u>			•	100			103110
1	Enter the appropriate amount in each				ntries			
	(a) Base period years	(b)			(c)		Distri	(d) bution ratio
_	Calendar year (or tax year beginning	(n) Adjusted qualifying dis	stributions	Net value of no	ncha	ritable-use asse		vided by col (c))
_	2013							
_	2012							· · · · · · · · · · · · · · · · · · ·
_	2011			 				
_	2010 2009	 		 				
_	2003							
2	Total of line 1, column (d)						2	
	Average distribution ratio for the 5-y	year base period - divide the total	on line 2 by 5,	or by the number	of ye	ars		
	the foundation has been in existence			•	•		3	
4	Enter the net value of noncharitable-	-use assets for 2014 from Part X,	line 5				4	
5	Multiply line 4 by line 3						5	
6	Enter 1% of net investment income	(1% of Part I, line 27b)	•				6	
7	Add lines 5 and 6						7	
8	Enter qualifying distributions from F	Part XII. line 4					8	
J	• • •	,	a 1h and some	alote that nort war	0004	0/ tay rata		
	If line 8 is equal to or greater than li See the Part VI instructions.	ne 7, theta the box in Part VI, IIII	and com	DIETE TURT BRUT RZIL	ıy a l	/o lax fale.		

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	t VI Excise Tax Based on Investment Income (Section 4940		4948 -	see ins	struc	tions	<u>s)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and e		3. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.			- =	
	Date of ruling or determination letter: (attach copy of letter if nec		1. 3 -1.	1.2.1.2		<u></u>	7, 11
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	► and enter 1%	1	2 7		<u> </u>	0.
	of Part I, line 27b	İ	£ 3.	() () () () () () () () () ()	, , ,		
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%		· ,= 3,-"	1 - 1 2 2 2 2 3	4		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Ot	hers enter -0-)	2				<u>0.</u>
3	Add lines 1 and 2		3_				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. O	thers enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5				0.
6	Credits/Payments:	1 1	12.	1. 14.		1, 4	
	2014 estimated tax payments and 2013 overpayment credited to 2014			1 1 1 2	1394		200
	Exempt foreign organizations - tax withheld at source	6b	و د دا		ا الأسطير الأسوا	ù ziv ≈v.ezw	
	Tax paid with application for extension of time to file (Form 8868)	6c					200 DE
	Backup withholding erroneously withheld	6d	1,500	建建筑	美 , * · à		<u> </u>
7	Total credits and payments. Add lines 6a through 6d		7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	ached	8	 			
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		▶ <u>9</u>				0.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		► <u>10</u>	<u> </u>			
11	Enter the amount of line 10 to be: Credited to 2015 estimated tax Tt VII-A: Statements Regarding Activities	Refunded	<u> </u>		_		
<u> </u>					(W)	Yes	Nio
1a	During the tax year, did the foundation attempt to influence any national, state, or local legis	station or did it participate or interv	ene in	}		162	
	any political campaign?		١٥.	ŀ	1a		X
þ	Did it spend more than \$100 during the year (either directly) or indirectly) for political purpo	· ·	•	}	1b	- ; ;	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities an	d copies of any materials publis	shed or			٠, '-	
	distributed by the foundation in connection with the activities			}	ا <u>د د د</u>		<u>X</u>
	Did the foundation file Form 1120-POL for this year?			ŀ	1c 양성 :	÷ 25. 1.	_ ∧ 3.30
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the).		ر روزي روزي) s 1,5	
	(1) On the foundation. ► \$ (2) On foundation managers Enter the reimbursement (if any) paid by the foundation during the year for political expendi		<u>·</u>	Ì	ر څ	,	
е	managers. > \$ 0.	nure tax imposed on foundation					, N
9	Has the foundation engaged in any activities that have not previously been reported to the II	263		ŀ	2		X
2		10.		İ	- <u>*</u>	1.50	(2, 4,
9	If "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in its governing i	netrument articles of incorporation	n or				77
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change		, 01	ŀ	3		X
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year			f	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	•	N	/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?)			5		X
·	If "Yes," attach the statement required by General Instruction T.			Ì	. ÷		, ,
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied ei	ther:		ļ	1 44 1		2.7
•	By language in the governing instrument, or					¥ (.	
	By state legislation that effectively amends the governing instrument so that no mandator	y directions that conflict with the s	tate law	1	<u>.</u> .~]		. i . i
	remain in the governing instrument?		-	Ì	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," col	mplete Part II. col. (c). and Part	χv	ļ	7	Х	
		,	•	Ì	·-	-	(3.4
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ons) ►			ا: `	٠,	, '-
	DE						-
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	attorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation			Ţ	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of se	ection 4942(j)(3) or 4942(j)(5) for c	alendar	j	, a ~		
	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," of				9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedu		STM		10	X	
				Forn	ո 990	-PF (2014)

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orm 990-PF (2014) THE JIN HUA FOUNDATION			46-50258	3.7 Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be Re	equired (continu	ued)	
 5a During the year did the foundation pay or incur any amount to: (1) Carry on propaganda, or otherwise attempt to influence legislation (section (2) Influence the outcome of any specific public election (see section 4955); or 			es X No	
any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes	7	Ye	es X No	
 (4) Provide a grant to an organization other than a charitable, etc., organization 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary, 		or	es X No	
the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify universection 53.4945 or in a current notice regarding disaster assistance (see instru-			es X No F	5b
Organizations relying on a current notice regarding disaster assistance check h c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr expenditure responsibility for the grant?	ere om the tax because it maintair	ned /A Ye	es No	
If "Yes," attach the statement required by Regulations section 53.4945 6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract?	pay premiums on	Y6	es X No	6b X
 b Did the foundation, during the year, pay premiums, directly or indirectly, on a p If "Yes" to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax s b If "Yes," did the foundation receive any proceeds or have any net income attributions. 	helter transaction?	Ye	es X No	6b X
Part*VIII Information About Officers, Directors, Truste Paid Employees, and Contractors	ees, Foundation Man	agers, Highly		70 1
List all officers, directors, trustees, foundation managers and their	compensation.		(-D)	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
FRANK D. ZHANG VINE STREET	PRES., TREAS.	& SECT'Y		
ENGLEWOOD CLIFFS, NJ 07632 DAVID D. ZHANG	1.00 VICE PRESIDEN	0. r	0.	0.
30 CEDAR DRIVE GREAT NECK, NY 11021	1.00	0.	0.	0.
	1.00		<u>. </u>	
Compensation of five highest-paid employees (other than those inc		enter "NONE."	1 / 10 -	·
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000		<u> </u>		0

Total. Add lines 1 through 3

All other program-related investments. See instructions.

3,000	Minimum investment Heturn (All domestic foundations must complete this part. Foreign	in foundations, see	instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	97,830.
Ь	Average of monthly cash balances	1b	97,830. 805,741.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	903,571.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	0.	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	903,571.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	_13,554.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	890,017.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	38,649.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundate	ions and certain	
	foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	38,649.
2a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3_	38,649.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	38,649.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	38,649.
P	Qualifying Distributions (see instructions)		
	Cadmy 3 2 (See matactions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	ALC:	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	65,000.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	65,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	65,000.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the found	lation qualifies for the	section
	4940(e) reduction of tax in those years.		

Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				38,649.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2014:		The state of the s		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
a From 2009				
b From 2010			The state of the s	
c From 2011				
d From 2012	Barbara Start			
e From 2013				
f Total of lines 3a through e	0.	MATE (在46)的。		
4 Qualifying distributions for 2014 from	[1]等一次"门"载			
Part XII, line 4: ►\$ 65,000.	i in a common of the			
a Applied to 2013, but not more than line 2a			0.	
b Applied to undistributed income of prior			1- 1- 12 12 12	100 mg
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		(इ.स्वर्ग) कृष्टिक स्थापन स्थापन स्थापन स्थापन स्थापन स्थापन स्थापन स्थापन स्थापन स्थापन स्थापन स्थापन स्थापन स्थापन स्थापन	The state of the s	
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount	and the second of the second o	The state of the s	表现 "我们"	38,649.
e Remaining amount distributed out of corpus	26,351.			
Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	0.		The second secon	0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	26,351.		ر ا مارات مراجع	
b Prior years' undistributed income. Subtract	1 2 2 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2		\$1 \\ \frac{1}{2} = \frac{1}{2} \frac{1}{2	
line 4b from line 2b		0.		
c Enter the amount of prior years'	و المعالم المع		**************************************	1.74 (2) / 1.15 / 1.15 (2) (2) / 1.15 (2) (2) (2) (2) (2) (2) (2) (2) (2) (2)
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable	*		The state of the state of	
amount - see instructions	1171	0.	1. 2	7
e Undistributed income for 2013. Subtract line				
4a from line 2a. Taxable amount - see instr.	14, 11 4, 11	and the state of t	0.	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
f Undistributed income for 2014. Subtract				
lines 4d and 5 from line 1. This amount must be distributed in 2015	أأس أما ألما ألم المأسمة بينا			•
7 Amounts treated as distributions out of			<u> </u>	<u> </u>
corpus to satisfy requirements imposed by		`	. '	
		•	,	
section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.	• ,	•	
8 Excess distributions carryover from 2009	0.			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015		· · · · · · · · · · · · · · · · · · ·		<u> ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' </u>
Subtract lines 7 and 8 from line 6a	26,351.			
O Analysis of line 9:	20,331.			
a Excess from 2010			1	
b Excess from 2011			, ,	1
c Excess from 2012	.			. ,
d Excess from 2013	1			ļ
e Excess from 2014 26, 351.		· •		
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PartiXV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor a Paid duning the year THE ELISABETH MORROW SCHOOL NONE PUBLIC CHARITY PURSUE THE HIGHEST 435 LYDECKER STREET EDUCATIONAL STANDARDS ENGLEWOOD, NJ 07631 IN A SUPPORTIVE, CREATIVE ENVIRONMENT 15,000. DHARMAKARA BUDDHIST SOCIETY, INC. NONE PUBLIC CHARITY SUPPORT OF RELIGIOUS 350 MEADOWLANDS PARKWAY ORGANIZATION SECAUCUS, NJ 07094 15,000. NONE TZU CHI FOUNDATION - DISASTER RELIEF PUBLIC CHARITY RELIGIOUS ORGANIZATION DEDICATED TO HELPING FUND 1100 SOUTH VALLEY CENTER AVENUE THE NEEDY SAN DIMAS, CA 91773 5,000. SKIDMORE COLLEGE NONE PUBLIC CHARITY SUPPORT OF HIGHER 815 NORTH BROADWAY EDUCATION SARATOGA SPRINGS, NY 12866 10,000. FOUNDATION FOR MORRISTOWN MEDICAL NONE PUBLIC CHARITY PROMOTE QUALITY HEALTH CENTER - TREASURE BOX FUND CARE AT MORRISTOTOWN 475 SOUTH STREET MEDICAL CENTER MORRISTOWN, NJ 07920 5,000. SEE CONTINUATION SHEET(S) 65,000. ► <u>3a</u> **Total** Approved for future payment NONE Total

423811 11-24-14

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelat	ed business income		uded by section 512, 513, or 514	(e)
•	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion	Amount	function income
a	-		 		
b			ļ		
c			 	ļ	
d			—	<u> </u>	
e	-		-		
f			}—	ļ	
g Fees and contracts from government agencies			┼─-		ļ
2 Membership dues and assessments		<u> </u>	 	<u> </u>	<u> </u>
3 Interest on savings and temporary cash		ļ			
Investments		-	 		· · · · · · · · · · · · · · · · · · ·
4 Dividends and interest from securities	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	The same of the same of the	i See at		The same that we set the set with the set
5 Net rental income or (loss) from real estate:a Debt-financed property	1 Jan 1 Jan	\$ \$ 1.25 () Sept. () Sep	3 75 67	1 25 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Parent Mercelt in television and the
b Not debt-financed property			†	 	
6 Net rental income or (loss) from personal			+		
property			1		
7 Other investment income	-		+-		
8 Gain or (loss) from sales of assets other		-	1	<u> </u>	
than inventory			1		
9 Net income or (loss) from special events			1		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
C	.				
d				<u> </u>	
e	-				
12 Subtotal. Add columns (b), (d), and (e)	A CAR	<u> </u>	ं न	0.	
13 Total. Add line 12, columns (b), (d), and (e)				13 _	0.
(See worksheet in line 13 instructions to verify calculations.)	ha Aba Aaaa			Dumasas	
Relationship of Activities	to the ACCC	Implishment of Ex	empi	Purposes	
Line No. Explain below how each activity for which inc			A contri	buted importantly to the accor	nplishment of
the foundation's exempt purposes (other than	by providing fu	nds for such purposes).			
					
			_		
					
			_		
		· 			
	-				
					
					
					
				 	
			_		
423821 11-24-14					Form 990-PF (2014)

Form 990-PF (2		IN HUA FU						025837	Pag	ge 13
Part XVII	Information Re		sters To a	nd Transactio	ns and	d Relationsh	ips With Nonc	haritable		
	Exempt Organi					— 		1		
1 Did the or	ganization directly or indir	ectly engage in any	of the following	g with any other orga	nızatıon	described in section	on 501(c) of	3, , "	Yes	No
-	(other than section 501(c)				organiza	ations?		(-1.	77,	, , ,
a Transfers	from the reporting founda	tion to a noncharita	ble exempt org	anization of:						
(1) Cash								1a(1)		<u>X</u>
(2) Other	assets							1a(2)		X
b Other tran	sactions:							<u>```</u> ;	200	· - '
(1) Sales	of assets to a noncharitat	ole exempt organiza	tion					1b(1)		<u>X</u>
(2) Purch	nases of assets from a nor	ncharitable exempt (organization					1b(2)		X
(3) Renta	il of facilities, equipment, (or other assets						1b(3)		X
(4) Reiml	bursement arrangements							1b(4)		X
(5) Loans	s or loan guarantees							1b(5)		X
(6) Perfo	rmance of services or mei	mbership or fundrai	sing solicitation	ns				1b(6)		X
c Sharing of	f facilities, equipment, mai	ling lists, other ass	ets, or paid emp	ployees				1c		X
d If the ansv	ver to any of the above is	"Yes," complete the	following sche	dule. Column (b) sho	uld alwa	ays show the fair m	arket value of the go	ods, other asse	ets,	
or service:	s given by the reporting fo	oundation. If the fou	ndation receive	d less than fair mark	et value	in any transaction	or sharing arrangem	ent, show in		
column (d) the value of the goods, o	other assets, or serv	rices received.							
(a) Line no	(b) Amount involved	(c) Name o	f noncharitable	exempt organization		(d) Description	of transfers, transactions	, and sharing arra	ngement	s
			N/A]				
		-								
T		_								
									_	
							· · · · · · · · · · · · · · · · · · ·		_	
2a is the four	ndation directly or indirect	ly affiliated with, or	related to, one	or more tax-exempt	organiza	itions described				
in section	501(c) of the Code (other	than section 501(c)(3)) or in secti	on 527?				Yes	X] No
	omplete the following sche		,, ,,							•
	(a) Name of org			(b) Type of organiz	ation	- ((c) Description of rela	tionship		
	N/A									
										
		· · · · · · · · · · · · · · · · · · ·								
	penalties of perjury, I declare the							May the IRS d	ecuse th	ie T
Sign L	elief, it is true, correct, and com	plete Declaration of pro	eparer (other than	taxpayer) is based on all	nformatio سسیر	n of which preparer ha	s any knowledge	return with the	prepare	đ
Here		>			ک'	PRESID	ENT	X Yes	, SSS	No
8fgri	ature of officer or trustee			Date		Title	-			
	Print/Type preparer's na	me	Preparer's si	gnature /		Date	Check If	PTIN		_
			1/1				self- employed			
Paid	MICHELE RO	SENBERG	MICHEL	E ROSENBE	RG 10	14/22/15		P01346	138	
Preparer	Firm's name ► COR				LP		Firm's EIN ► 13			
Use Only					,					
	Firm's address ▶ 82	5 THIRD A	VENUE							
			TY 1002	2			Phone no. (21	2) 557	-390	0 (
								Form 990		

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047
2014

Name of the organization

Employer identification number

Т	HE JIN HUA FOUNDATION	46-5025837					
Organization type (check	one):						
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
·	us covered by the General Rule or a Special Rule . c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special I	Rule. See instructions					
General Rule							
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions total by one contributor. Complete Parts I and II. See instructions for determining a contribut	-					
Special Rules							
sections 509(a)(1 any one contribu	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16 tor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amage, line 1 Complete Parts I and II	a, or 16b, and that received from					
year, total contrib	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III.						
year, contribution is checked, enter purpose. Do not	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from sections exclusively for religious, chantable, etc., purposes, but no such contributions totaled refere the total contributions that were received during the year for an exclusively religion complete any of the parts unless the General Rule applies to this organization becausely, etc., contributions totaling \$5,000 or more during the year	more than \$1,000 If this box ous, charitable, etc.,					
but it must answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedule on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its et the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization

Employer identification number

THE JIN HUA FOUNDATION

46-5025837

Part	Contributors (see instructions) Use duplicate copies of Part I if add	itional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	FRANK D. ZHANG 4 VINE STREET ENGLEWOOD CLIFFS, NJ 07632	sss	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Omnocash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

THE JIN HUA FOUNDATION

46-5025837

art II	Noncash Property (see instructions) Use duplicate copies of Pa	art II if additional space is needed	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\ \$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Name of organ	nization			Employer identification number					
THE JII	N HUA FOUNDATION			46-5025837					
Part III	Exclusively religious, charitable, etc., contributions the year from any one contributor. Complete columns (to organizations describe	ed in section 501(c)(7), (8), or	(10) that total more than \$1,000 for					
	completing Part III, enter the total of exclusively religious, charitable	e, etc., contributions of \$1,000	or less for the year (Enter this info onc	s ► \$					
(a) No.	Use duplicate copies of Part III if additional space	is needed							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held					
									
.									
-									
		(e) Transfer of							
į		(-,	3						
<u> </u>	Transferee's name, address, and ZIP +	4	Relationship of tra	nsferor to transferee					
-									
-									
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held					
Part I									
-									
<u> </u>			L						
	(e) Transfer of gift								
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee								
-									
-									
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held					
Part I									
				· · · · · · · · · · · · · · · · · · ·					
-		(e) Transfer of	aift						
		(e) Transier Or	giit						
	Transferee's name, address, and ZIP +	4	Relationship of tra	nsferor to transferee					
									
-									
_									
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held					
Part I				· · · · · · · · · · · · · · · · · ·					
F		(a) T							
		(e) Transfer of	gιπ						
	Transferee's name, address, and ZIP +	4	Relationship of tra	nsferor to transferee					
Γ.									
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-									

FORM 990-PF	OTHER E	R EXPENSES ST		PATEMENT 1	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
BANK FEES	200.	200.		0.	
TO FORM 990-PF, PG 1, LN 23	200.	200.		0.	

FORM 990-PF (CORPORATE STOCK		STATEMENT 2
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
ALLIANCE BERNSTEIN SELECT US EQUI INSTITUTIONAL SHARES NEUBERGER BERMAN EQUITY INCOME FU		150,000.	149,632
INSTITUTIONAL SHARES VANGUARD S&P 500ETF		150,000. 174,462.	150,119, 175,777
NEUBERGER BERMAN GENESIS FUND INS SHARES SELECT EQUITY GROUP	STITUTIONAL	150,000. 150,000.	149,868, 152,625,
ISHARES MSCI ACWI EX US INDEX FUND NEUBERGER BERMAN LONG SHORT FUND	ND	175,049. 150,000.	174,360, 150,264,
TOTAL TO FORM 990-PF, PART II, L	INE 10B	1,099,511.	1,102,645
FORM 990-PF (CORPORATE BONDS		STATEMENT 3
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
NEUBERGER BERMAN – KAMINSKY GROUI VANGUARD SHORT TERM INVESTMENT GE		250,000. 448,745.	249,852 449,377
TOTAL TO FORM 990-PF, PART II, LI	INE 10C	698,745.	699,229

FORM 990-PF OTHER INVESTMENTS			STATEMENT 4	
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
GOLUB CAPITAL BDC INC.	COST	151,744.	154,718.	
TOTAL TO FORM 990-PF, PART II, LINE 13	3	151,744.	154,718.	

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT 5
NAME OF CONTRIBUTOR	ADDRESS	
FRANK D. ZHANG	4 VINE STREET ENGLEWOOD CLIFFS, NJ 070	632

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
INTERNATIONAL SURGICAL MISSION	NONE	DIIBI.IC CHARITY	TO PROVIDE FREE	
SUPPORT - OPERATION KIDS	NONE.	FOBBIC CHARITI	MEDICAL AND SURGICAL	
225 WINDMILL LANE - SUITE 1			CARE TO THE POOR ALL	
SOUTHAMPTON, NY 11968			OVER THE WORLD.	10,00
SOUTHWEIGH, NI 11300		 	OVER THE WORLD.	10,00
DWIGHT-ENGLEWOOD SCHOOL	NONE	PUBLIC CHARITY	SUPPORT EDUCATION	
315 EAST PALISADE AVENUE				
ENGLEWOOD, NJ 07631			<u> </u>	5,00

·				
				
		<u> </u>		
Total from continuation sheets				15,00