

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



_{rForm} 990-PF

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

OMB No 1545-0052

2014

Department of the Treasury

► Do not enter social security numbers on this form as it may be made public.
► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

| | | oc.vice | | | | | | деттеттесерт. | en to rubiic inspection |
|-------------------|----------|-----------------------------------------------|---------------------------------------|-------------|---------------------------|--------------------------|--------------|-------------------------------|---------------------------|
| | | | tax year beginni | ng [| ec_8 ,2014 | , and ending $D\epsilon$ | e <u>c</u> | 31 , 2014 | |
| Name of f | | | | | | | A | Employer identification nur | nber |
| | | | BLE FOUNDA | | | I D | ↓_ | <u>47-2540099</u> | |
| | | • | er if mail is not delivered | to street a | address) | Room/suite | В | Telephone number (see instr | • |
| | | AEBURN DR | and 710 or former and | ntal anda | | | + | <u>(281) 217-745</u> | 0 |
| • | | • | , and ZIP or foreign pos | ouai COO® | | 77401 | c | If exemption application is | nending check here |
| BELL. | | | _ | | | 77401 | ٦, | п ехетрион аррисация із | pending, creek nere. |
| G Che | ck all | that apply | X Initial return | | Initial return of a forme | er public charity | Ь | 1 Foreign organizations, che | ck here ▶ □ |
| | | | Final return | 1 | Amended return | | | | |
| | | | Address chan | ge [| Name change | | | 2 Foreign organizations mee | ting the 85% test, check |
| H Che | ck tv | oe of organization | on: X Sec | tion 501 | (c)(3) exempt private for | indation | 1 | here and attach computation | on ▶ ∐ |
| ו | _ · | - | nonexempt chan | | | | E | If private foundation status | was terminated |
| 1 Fair | | | | | | | ┨- | under section 507(b)(1)(A) | |
| | | value of all assets II, column (c), line 1 | | | counting method: XC | ash Accrual | 1 | (,,,, | |
| • | iii aici | • • • • | • | | Other (specify) | , -, | ↓F | If the foundation is in a 60- | |
| ▶ \$ | | | ,000. | (Part I, | column (d) must be on c | ash basis) | 1 | under section 507(b)(1)(B) | , check here |
| Part I | | nalysis of Re | | | (a) Revenue and | (b) Net investmer | nt | (c) Adjusted net | (d) Disbursements |
| | E | penses (The | total of amounts | ın | expenses per books | income | | income | for charitable |
| | CO | iumns (D), (C), a. nly equal the an | nd (d) may not ne nounts in column | ces- | | | | | purposes |
| | | ee instructions)) | | (4) | | | | | (cash basis only) |
| | 1 | | nts, etc, received (attach sch | edule) | 200,000. | | | | 1 |
| | 2 | . 🗖 - | undn is not required to attac | | | | | | |
| | - | une too | enion is not required to attac | 11 JUI D | | | | | , , |
| | 3 | Interest on savings and t | temporary cash investments | | | | | | |
| | 4 | Dividends and interest fr | om securities | | | | | ··· | |
| | 5 a | Gross rents | | | | | | | |
| | b | Net rențal income | | | | | é | 1.8. | , |
| _ | ۔ء ا | or (loss) | -1111 | | | | | | |
| R E | | Gross sales price fo | ale of assets not on line 10 | | | | | ļ | |
| v | _~ | assets on line 6a . | · · | | ~. | | * | <u> </u> | |
| E | 7 | | ome (from Part IV, line : | | *** | | | *** | |
| N | 8 | | algaın | | | | | | |
| ñ | 9 | | | | | | | <u> </u> | |
| E | 10 a | Gross sales less returns and | | | | | | | |
| | ١. | allowances | | | | | | | |
| | D | Less Cost of goods sold | } | | | | _ | | 1 |
| | C | Gross profit or (loss) (att | ach schedule) | | | | 1 | | * |
| | 11 | Other income (attack | h schedule) · · · · | | | 6 | .0 | | |
| | | | | | | [| V. | | |
| | 12 | Total. Add lines 1 | through 11 | | 200,000. | | | 10:1 | |
| | 13 | | ficers, directors, trustee | | 200,000. | 1000 | igg. | | |
| | 14 | | alanes and wages . | | | 10 8 1 4 | <i>19</i> 7. | 1 12 11 | |
| | 15 | | loyee benefits | | | | <u>~</u> _ | | |
| | 1 | | chedule) | | | | -/ | | |
| A D | 1 | - | | | | \ | 45 | * // | |
| M | | | ach sch) · · · · · | | 1,400 | 1 all | × | ,// | |
| _ N | C | • | ach sch) · · · · · | | | | Y / | | |
| О 1 | 17 | | | | | WA VO | | <u></u> | |
| P S E T R R | 18 | Taxes (attach schedule) | (see Instrs) · · · · | | | | | | |
| R R A A T T | 19 | Depreciation (attach | | | | | | | |
| ŢŢ | | | | | | · · · | | | |
| ΝÝ | 20 | | | | | | | | |
| G E | 21 | | , and meetings · · · | | | | | | |
| A E N X D P | 22 | = - | tions | | | | | | |
| D P | 23 | Other expenses (att | · · | | | | | | |
| E | | GOVERNI | MENT FILING | FEE | 875. | | | | |
| Š | 24 | Total operating and | | | | | | | |
| S | | = | s 13 through 23 • | | 2,275. | | | | |
| | 25 | Contributions, gifts, gran | nts paid | | | | | | |
| | 26 | Total expenses and | | | | | | | |
| | L | Add lines 24 and 25 | · · · · · · · · | | 2,275. | | | | |
| | 27 | Subtract line 26 from | | | | | | | |
| | a | Excess of revenue | • | | 4.05 | : | | | |
| | | | s · · · · · · · · | | 197,725. | | | | |
| | b | Net investment inc | ome (if negative, enter | -0-) | | | | | |
| | С | Adjusted net incon | ne (if negative, enter -0 | -) | | | | 1 | |



Page 2

| Dart | 11 | Balance Sheets Column should be for end-of-year amounts only. | Beginning of year | Elia oi | year |
|------------------|--------------|-------------------------------------------------------------------------------------------------------------------------|-----------------------------|----------------|-----------------------------------------|
| rait | | (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash – non-interest-bearing | | | |
| | 2 | Savings and temporary cash investments | 0. | 200,000. | 200,000. |
| | 3 | Accounts receivable | | | |
| | | Less: allowance for doubtful accounts | | | |
| | 4 | Pledges receivable | | | |
| j | _ | Less: allowance for doubtful accounts | | | |
| | 5 | Grants receivable | | | |
| | 6 | Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) | | | |
| | 7 | Other notes and loans receivable (attach sch) | | | |
| ŝ | | Less: allowance for doubtful accounts | | | |
| A S E T | 8 | Inventories for sale or use | | | |
| | 9 | Prepaid expenses and deferred charges | | | |
| S | | a Investments — U.S. and state government obligations (attach schedule) | | | <u> </u> |
| | | b Investments — corporate stock (attach schedule) | | | |
| | | c Investments — corporate bonds (attach schedule) | | · · | |
| | 11 | Investments — land, buildings, and equipment: basis | | | |
| | | Less accumulated depreciation (attach schedule) | | | |
| | 12 | | | | |
| | 13 | Investments - other (attach schedule) | | <u></u> | |
| | 14 | Land, buildings, and equipment: basis | | | |
| | | Less: accumulated depreciation (attach schedule) | | | |
| | 15 16 | Total assets (to be completed by all filers — | | 222 222 | 222 222 |
| | | see the instructions. Also, see page 1, item I) | 0. | 200,000. | 200,000. |
| ī | 17 | Accounts payable and accrued expenses | | 2,275. | , , |
| A B | 18 | Deferred revenue | | | |
| ĭ | 19 20 | Loans from officers, directors, trustees, & other disqualified persons | | | |
| L | 21 | Mortgages and other notes payable (attach schedule) | | | |
| Т | 22 | Other liabilities (describe | | | |
| E | | | | | |
| E S | 23 | Total liabilities (add lines 17 through 22) | | 2,275. | |
| | | Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. | | : | |
| NF | 24 | Unrestricted | | 197,725. | ,,,,, |
| E U T N | 25 | Temporanly restricted | | | |
| D | 26 | <u> </u> | | | , · * * * * * * * * * * * * * * * * * * |
| A B S A E A | | Foundations that do not follow SFAS 117, check here . and complete lines 27 through 31. | | | |
| ĒĻ | 27 | Capital stock, trust principal, or current funds | | | |
| SÑ | 28 | Paid-in or capital surplus, or land, bidg , and equipment fund | | | |
| O E | 29 | Retained earnings, accumulated income, endowment, or other funds | | | · |
| RS | 30 | Total net assets or fund balances (see instructions) | | 197,725. | |
| | 31 | Total liabilities and net assets/fund balances (see instructions) | 0. | 200,000. | - |
| Part | : 111 | Analysis of Changes in Net Assets or Fund Balance | es | | |
| 1 | Tota end- | Il net assets or fund balances at beginning of year — Part II, column (| a), line 30 (must agree w | th 1 | |
| 2 | Ente | er amount from Part I, line 27a | | 2 | 197,725. |
| | | | | | |
| 4 | | lines 1, 2, and 3 | | 4_ | 197,725. |
| 5 | Decre | eases not included in line 2 (itemize) | | 5 | |
| 6 | Tota | eases not included in line 2 (itemize) | art II, column (b), line 30 | 6 | 197,725. |

| | | the kind(s) of property sold (e.g., rea | estate, | (b) How acquir | | (d) Date sold |
|-------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|----------------------------|------------------------------------------------------------------|--------------------|
| | 2-story brick warehouse | e; or common stock, 200 shares MLC | Company) | P — Purchas D — Donatio | | (month, day, year) |
| 1 a | <u> </u> | | | | | |
| t |) | | | | | |
| | | | · · · · · · · · · · · · · · · · · · · | | | |
| | | | <u> </u> | | | |
| | | (0.0 | | <u> </u> | | <u></u> |
| | (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other bas plus expense of sal | | (h) Gain or (e) plus (f) mi | |
| a | | | | | | |
| | • | | | | | · |
| _ | | | | | | |
| | - | | | | | |
| | | ng gain in column (h) and owned by the | ne foundation on 12/31/69 | | M Calas (Ca | h 41) |
| | (i) Fair Market Value as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of column over column (j), if an | (i) | (f) Gains (Co gain minus column (k than -0-) or Losses (fr |), but not less |
| a | | | | | | |
| t |) | | | | | |
| | : | | | | | |
| | <u> </u> | | | | | |
| | | | | | | |
| 2 | Capital gain net income or (net o | capital loss)If gain, also If (loss), ent | enter in Part I, line 7 er -0- in Part I, line 7 | | 2 | |
| 3 | Net short-term capital gain or (lo | ss) as defined in sections 1222(5) ar | d (6): | | | |
| | If gain, also enter in Part I, line 8 in Part I, line 8 | s, column (c) (see instructions). If (los | s), enter -0- | | 3 | |
| Par | t V Qualification Unde | r Section 4940(e) for Reduc | ed Tax on Net Investr | nent Incor | ne | |
| (For | optional use by domestic private t | foundations subject to the section 49- | 10(a) tax on net investment i | ncome.) | | |
| | | | | | | |
| If sec | tion 4940(d)(2) applies, leave this | s nart blank | | | | |
| | ction 4940(d)(2) applies, leave this | • | | | | |
| Was | the foundation liable for the section | on 4942 tax on the distributable amou | | eriod? | Yes | No |
| Was If Ye | the foundation liable for the sections,' the foundation does not qualify | on 4942 tax on the distributable amou y under section 4940(e) Do not comp | lete this part. | | · · · · · · · · Yes | No |
| Was | the foundation liable for the sections, the foundation does not qualify. Enter the appropriate amount in | on 4942 tax on the distributable amou y under section 4940(e) Do not comp each column for each year; see the i | elete this part. | | | ∏ No |
| Was If Ye | the foundation liable for the sections,' the foundation does not qualify | on 4942 tax on the distributable amou y under section 4940(e) Do not comp | lete this part. | ny entries. | Yes (d) Distribution olumn (b) divided by | ratio |
| Was If Ye | the foundation liable for the sections, the foundation does not qualify. Enter the appropriate amount in (a) Base period years Calendar year (or tax year | on 4942 tax on the distributable amount on 4940(e). Do not compleach column for each year; see the (b) | olete this part. nstructions before making ar (c) Net value of | ny entries. | (d) Distribution | ratio |
| Was If Ye | the foundation liable for the sections, the foundation does not qualify. Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning in) | on 4942 tax on the distributable amount on 4940(e). Do not compleach column for each year; see the (b) | olete this part. nstructions before making ar (c) Net value of | ny entries. | (d) Distribution | ratio |
| Was If Ye | the foundation liable for the sections, the foundation does not qualify. Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning in) 2013 2012 2011 | on 4942 tax on the distributable amount on 4940(e). Do not compleach column for each year; see the (b) | olete this part. nstructions before making ar (c) Net value of | ny entries. | (d) Distribution | ratio |
| Was If Ye | the foundation liable for the sections, the foundation does not qualify. Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning in) 2013 2012 2011 2010 | on 4942 tax on the distributable amount on 4940(e). Do not compleach column for each year; see the (b) | olete this part. nstructions before making ar (c) Net value of | ny entries. | (d) Distribution | ratio |
| Was If Ye | the foundation liable for the sections, the foundation does not qualify. Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning in) 2013 2012 2011 | on 4942 tax on the distributable amount on 4940(e). Do not compleach column for each year; see the (b) | olete this part. nstructions before making ar (c) Net value of | ny entries. | (d) Distribution | ratio |
| Was If Ye 1 | the foundation liable for the sections, the foundation does not qualify. Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning in) 2013 2012 2011 2010 2009 | on 4942 tax on the distributable amount on 4940(e). Do not compleach column for each year; see the (b) | olete this part. nstructions before making an (c) Net value of nonchantable-use ass | ets (d | (d) Distribution | ratio |
| Was If Ye 1 | the foundation liable for the sections, the foundation does not qualify. Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning in) 2013 2012 2011 2010 2009 Total of line 1, column (d) | on 4942 tax on the distributable among under section 4940(e). Do not compleach column for each year; see the research distributions. (b) Adjusted qualifying distributions. | olete this part. Instructions before making an (c) Net value of noncharitable-use ass | ets (d | (d) Distribution olumn (b) divided b | ratio |
| Was If Ye 1 | the foundation liable for the sections, the foundation does not qualify. Enter the appropriate amount in (a) Base penod years Calendar year (or tax year beginning in) 2013 2012 2011 2010 2009 Total of line 1, column (d) | on 4942 tax on the distributable among under section 4940(e). Do not compleach column for each year; see the result of the following distributions. Adjusted qualifying distributions. | olete this part. Instructions before making an (c) Net value of noncharitable-use ass | ets (d | Distribution olumn (b) divided b | ratio |
| Was If Ye 1 2 3 | the foundation liable for the sections, the foundation does not qualify. Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning in) 2013 2012 2011 2010 2009 Total of line 1, column (d) | on 4942 tax on the distributable among under section 4940(e). Do not compleach column for each year; see the result of the column for each year; see the result of the column for each year; see the result of the column for each year; see the result of the column for each year; see the result of the column for each year; see the result of the column for each year base period — divide the total has been in existence if less than 5 year. | olete this part. Instructions before making ar (c) Net value of nonchantable-use ass on line 2 by 5, or by the ears | ets (d | (d) Distribution column (b) divided b | ratio |
| Was If Ye 1 | the foundation liable for the sections, the foundation does not qualify. Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning in) 2013 2012 2011 2010 2009 Total of line 1, column (d) Average distribution ratio for the number of years the foundation. Enter the net value of noncharitation. | on 4942 tax on the distributable among under section 4940(e). Do not compleach column for each year; see the result of the column for each year; see the result of the column for each year; see the result of the column for each year; see the result of the column for each year; see the result of the column for each year; see the result of the column for each year base period — divide the total has been in existence if less than 5 year base assets for 2014 from Part X, able-use assets for 2014 from Part X, | olete this part. Instructions before making ar (c) Net value of nonchantable-use ass on line 2 by 5, or by the ears line 5 | ets (d | (d) Distribution column (b) divided b | ratio |
| Was If Ye 1 | the foundation liable for the sections, the foundation does not qualify. Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning in) 2013 2012 2011 2010 2009 Total of line 1, column (d) | on 4942 tax on the distributable among under section 4940(e). Do not compleach column for each year; see the result of the column for each year; see the result of the column for each year; see the result of the column for each year; see the result of the column for each year; see the result of the column for each year; see the result of the column for each year has been in existence if less than 5 years assets for 2014 from Part X, and the column for each year. | olete this part. Instructions before making an (c) Net value of nonchantable-use ass on line 2 by 5, or by the ears line 5 | ets (d | Distribution olumn (b) divided b | ratio |
| Was If Ye 1 1 2 3 4 5 6 | the foundation liable for the sections, the foundation does not qualify. Enter the appropriate amount in (a) Base penod years Calendar year (or tax year beginning in) 2013 2012 2011 2010 2009 Total of line 1, column (d) Average distribution ratio for the number of years the foundation of the number of years the nu | on 4942 tax on the distributable among under section 4940(e). Do not compleach column for each year; see the result of the column for each year; see the result of the column for each year; see the result of the column for each year; see the result of the column for each year; see the result of the column for each year; see the result of the column for each year, see the result of the column for each year. 5-year base period — divide the total has been in existence if less than 5 year. see the result of the column for each year, see the result of the column for each year. | olete this part. Instructions before making an (c) Net value of nonchantable-use ass on line 2 by 5, or by the ears line 5 | ets (d | Distribution olumn (b) divided b | ratio |

| : | | | |
|------|--------------------------------------------------------------------------------------------------------------------------|-----------|------------------|
| Form | 990-PF (2014) PEARL YEH CHARITABLE FOUNDATION 47 | -25400 | 99 Page 4 |
| Par | t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - s | e instruc | tions) |
| 1 a | Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1 | | |
| | Date of ruling or determination letter: (attach copy of letter if necessary – see instrs) | | |
| b | Boniesae loandadons that meet the section 4040(c) requirements in 1 art 4, | 1 | |
| | check here → and enter 1% of Part I, line 27b | | |
| С | All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b) | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable | | |
| _ | foundations only. Others enter -0-) | | |
| 3 | Add lines 1 and 2 | . 3 | 0. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | . 4 | |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 | . 5 | 0. |
| 6 | Credits/Payments: | | |
| а | 2014 estimated tax pmts and 2013 overpayment credited to 2014 | | |
| b | Exempt foreign organizations — tax withheld at source | | |
| C | Tax paid with application for extension of time to file (Form 8868) 6 c 0 |] | |
| d | Backup withholding erroneously withheld | | |
| 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 attached | . 8 | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | ▶ 9 | 0. |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | ▶ 10 | 0. |
| 11 | Enter the amount of line 10 to be Credited to 2015 estimated tax Refunded | ► 11 | |
| Par | t VII-A Statements Regarding Activities | | |
| 1 2 | During the tay year, did the foundation attempt to influence any national, state, or local legislation or did it | | Yes No |

| | participate or intervene in any political campaign / | l a | | X |
|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-------------|----------|
| t | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? | 1 b | | Х |
| | If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. | × . | ; \$. | Ž. |
| c | : Did the foundation file Form 1120-POL for this year? | 1 c | İ | Х |
| c | I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | | ٠. ٠ | *** |
| | (1) On the foundation · · · ▶ \$ (2) On foundation managers · · · · ▶ \$ | | | ı, |
| E | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ | | ٠. | ; |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 | | X |
| _ | If 'Yes,' attach a detailed description of the activities | | | 1 |
| | • | | ٧, | 1 |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles | | سَمَست | لنسنا |
| _ | of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes | | ļ <u>.</u> | X |
| | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | | X |
| | olf 'Yes,' has it filed a tax return on Form 990-T for this year? | | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | <u> </u> | <u>X</u> |
| | If 'Yes,' attach the statement required by General Instruction T | | | ***** |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | | | 777.3 |
| | By language in the governing instrument, or | *. | 3 | |
| | | | rii mini | |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? | 6 | | لتشتا |
| _ | | | X | ├─ |
| , | Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV | - | X | ļ |
| 8 a | Enter the states to which the foundation reports or with which it is registered (see instructions) | | ` | ` |
| | TX - Texas | ŀ | | |
| ŧ | o If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General | | | |
| | (or designate) of each state as required by General Instruction G? If 'No,' attach explanation | 8 b | X | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) | | | |
| • | for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If Yes, complete Part XIV | 9 | ŀ | Х |
| 10 | Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names | | | |
| 10 | and addresses · · · · · · · · · · · · · · · · · | 10 | х | |
| BAA | | rm 99 | 0-PF (| 2014) |
| | | | | |

BAA

| Form | 990-PF (2014) PEARL YEH CHARITABLE FOUNDATION 47-254009 | 9 | Р | age 5 |
|------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|---------------------------------------|--------------|
| Par | t VII-A Statements Regarding Activities (continued) | | | , |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions) | 11 | | х |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions) | 12 | | х |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Х | |
| | Website address | | | |
| 14 | The books are in care of WILLIAM YEH Located at 4708 BRAEBURN DR. BELLAIRE Telephone no. (281) ZIP + 4 77401 | 217 | <u>-745</u> | <u>0</u> |
| 15 | Located at 4708 BRAEBURN DR. BELLAIRE TX ZIP+4 77401 Section 4947(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041 — Check here | | | Т |
| | and enter the amount of tax-exempt interest received or accrued during the year | | | |
| 16 | At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? | 16 | Yes | No X |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If 'Yes,' enter the name of the foreign country | | | |
| Par | t VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| _ | File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies. | igsquare | Yes | No |
| 1 a | During the year did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | | | |
| | | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No | | | " |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No | | | r |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? | | | 2 |
| | (6) Agree to pay money or property to a government official? (Exception. Check 'No' if the | | | |
| | foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) | Li . | . 4 | , <u>i</u> , |
| b | If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | 1 b | | |
| | Organizations relying on a current notice regarding disaster assistance check here | 1 35 1 | ,sp. | , |
| С | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014? | 1 c | | X |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): | , , , | , ,, | |
| а | At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014? | ' ' ' | | |
| | and 6e, Part XIII) for tax year(s) beginning before 2014? | | 400-1 | *6. |
| | | | | |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions.) | 2 b | | '. |
| С | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | | 75 | |
| | ► 20, 20, 20 | , 1 | | 1 44 |
| 3 a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | , , , , | · · · · · · · · · · · · · · · · · · · | 44. 44. |
| b | If 'Yes,' did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding penod? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.) | 3 b | ٤ | - |
| | | 30 | | |
| 4 a | Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes? | 4 a | | X |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014? | 4 b | - | x |
| BAA | | orm 99 | D-PF (| |

| | BLE FOUNDATION | | 47-254 | 10099 | Pag |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|----------------------------------------------------------------------------------------|---------------------------|----------|
| Part VII-B Statements Regarding Activit | | 4720 May Be Req | uired (continued) | | |
| 5 a Dunng the year did the foundation pay or incur a | - | | | _ | |
| (1) Carry on propaganda, or otherwise attempt | to influence legislation (se | ection 4945(e))? | · · · · Yes X | No | |
| (2) Influence the outcome of any specific public on, directly or indirectly, any voter registration | on drive? | | | No | |
| (3) Provide a grant to an individual for travel, st | udy, or other similar purpo | oses? | · · · · Yes X | No | |
| (4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions) | n a chantable, etc, organi | zation described | · · · · · Yes X | No | |
| (5) Provide for any purpose other than religious educational purposes, or for the prevention | s, chantable, scientific, lite of cruelty to children or ar | rary, or nimals?........ | · · · · Yes X | No | |
| b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in a (see instructions)? | transactions fail to qualification to the transactions fail to qualification to the transactions to the transactions are transactions. | y under the exceptions disaster assistance | | 5b | |
| Organizations relying on a current notice regard | | | | ı | -+ |
| a lifth a grower in Weel to guestion Eq.(4), does the | foundation plaim avamet | on from the | | ¹ [| |
| c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsible. If 'Yes,' attach the statement required by Regula | oility for the grant? | | Yes | No | |
| | | | | | |
| 6 a Did the foundation, during the year, receive any on a personal benefit contract? | tunds, directly or indirectl | y, to pay premiums | · · · · Yes X | No | |
| b Did the foundation, during the year, pay premiur | | | | 6b | \dashv |
| If 'Yes' to 6b, file Form 8870. | , ,,- | - | | | \dashv |
| 7 a At any time during the tax year, was the foundat | ion a party to a prohibited | tax shelter transaction? | · · · · · Yes X | | |
| b If 'Yes,' did the foundation receive any proceeds | or have any net income | attributable to the transac | tion? | 7b | |
| Part VIII Information About Officers, D | irectors, Trustees, | Foundation Manag | gers, Highly Paid B | Employees, | |
| and Contractors | | | | | |
| 1 List all officers, directors, trustees, foundation | 1 7 | | | Lave | |
| (6) Norman and add | (b) Title, and average hours per week | (c)Compensation (if not paid, | (d)Contributions to employee benefit | (e) Expense a other allow | |
| (a) Name and address | devoted to position | enter -0-) | plans and deferred | | |
| ATT TAM VIII | | • | compensation | | |
| WILLIAM YEH | DDECTDENE | | | | |
| 4708 BRAEBURN DR BELLAIRE TX 77401 | PRESIDENT 2.00 | 0. | 0. | - | |
| TNA VEU | 2.00 | U. | 0. | | |
| 4708_BRAEBURN_DR | TREASURER | | | | |
| | 1 | ^ | _ | I | |
| | / 11111 | 1.1 | Λ | | |
| | 2.00 | 0. | 0. | | |
| ETHAN YEH | | 0. | 0. | | |
| ETHAN YEH 4708 BRAEBURN DR | DIRECTOR | 0. | 0. | | |
| ETHAN YEH 4708 BRAEBURN DR TX 77401 | | | | | |
| ETHAN YEH 4708 BRAEBURN DR BELLIARE TX 77401 GRACE YEH | DIRECTOR | | | | |
| ETHAN YEH 4708 BRAEBURN DR BELLIARE TX 77401 GRACE YEH 4708 BRAEBURN DR | DIRECTOR 1.00 | | | | |
| ETHAN YEH 4708 BRAEBURN DR BELLIARE TX 77401 GRACE YEH 4708 BRAEBURN DR | DIRECTOR 1.00 DIRECTOR 1.00 | 0. | 0. | nter 'NONE.' | |
| ETHAN YEH 4708 BRAEBURN DR BELLIARE TX 77401 GRACE YEH 4708 BRAEBURN DR BELLAIRE TX 77401 2 Compensation of five highest-paid employee (a) Name and address of each employee | DIRECTOR 1.00 DIRECTOR 1.00 es (other than those inc (b) Title, and average | 0. | 0. nstructions). If none, e | (e) Expense a | |
| ETHAN YEH 4708 BRAEBURN DR BELLIARE TX 77401 GRACE YEH 4708 BRAEBURN DR BELLAIRE TX 77401 2 Compensation of five highest-paid employed | DIRECTOR 1.00 DIRECTOR 1.00 es (other than those inc | 0. 0. luded on line 1 – see li | 0. o. nstructions). If none, e | | |
| ETHAN YEH 4708 BRAEBURN DR BELLIARE TX 77401 GRACE YEH 4708 BRAEBURN DR BELLAIRE TX 77401 2 Compensation of five highest-paid employee paid more than \$50,000 | DIRECTOR 1.00 DIRECTOR 1.00 es (other than those inc (b) Title, and average hours per week | 0. 0. luded on line 1 – see li | 0. ostructions). If none, el (d)Contributions to employee benefit plans and deferred | (e) Expense a | |
| ETHAN YEH 4708 BRAEBURN DR BELLIARE TX 77401 GRACE YEH 4708 BRAEBURN DR BELLAIRE TX 77401 2 Compensation of five highest-paid employee paid more than \$50,000 | DIRECTOR 1.00 DIRECTOR 1.00 es (other than those inc (b) Title, and average hours per week | 0. 0. luded on line 1 – see li | 0. ostructions). If none, el (d)Contributions to employee benefit plans and deferred | (e) Expense a | accou |
| ETHAN YEH 4708 BRAEBURN DR BELLIARE TX 77401 GRACE YEH 4708 BRAEBURN DR BELLAIRE TX 77401 2 Compensation of five highest-paid employee paid more than \$50,000 | DIRECTOR 1.00 DIRECTOR 1.00 es (other than those inc (b) Title, and average hours per week | 0. 0. luded on line 1 – see li | 0. ostructions). If none, el (d)Contributions to employee benefit plans and deferred | (e) Expense a | accou |
| ETHAN YEH 4708 BRAEBURN DR BELLIARE TX 77401 GRACE YEH 4708 BRAEBURN DR BELLAIRE TX 77401 2 Compensation of five highest-paid employee paid more than \$50,000 | DIRECTOR 1.00 DIRECTOR 1.00 es (other than those inc (b) Title, and average hours per week | 0. 0. luded on line 1 – see li | 0. ostructions). If none, el (d)Contributions to employee benefit plans and deferred | (e) Expense a | accou |
| ETHAN YEH 4708 BRAEBURN DR BELLIARE TX 77401 GRACE YEH 4708 BRAEBURN DR BELLAIRE TX 77401 2 Compensation of five highest-paid employee paid more than \$50,000 | DIRECTOR 1.00 DIRECTOR 1.00 es (other than those inc (b) Title, and average hours per week | 0. 0. luded on line 1 – see li | 0. ostructions). If none, el (d)Contributions to employee benefit plans and deferred | (e) Expense a | accou |
| ETHAN YEH 4708 BRAEBURN DR BELLIARE TX 77401 GRACE YEH 4708 BRAEBURN DR BELLAIRE TX 77401 2 Compensation of five highest-paid employee paid more than \$50,000 | DIRECTOR 1.00 DIRECTOR 1.00 es (other than those inc (b) Title, and average hours per week | 0. 0. luded on line 1 – see li | 0. ostructions). If none, el (d)Contributions to employee benefit plans and deferred | (e) Expense a | accou |
| ETHAN YEH 4708 BRAEBURN DR BELLIARE TX 77401 GRACE YEH 4708 BRAEBURN DR BELLAIRE TX 77401 2 Compensation of five highest-paid employee paid more than \$50,000 | DIRECTOR 1.00 DIRECTOR 1.00 es (other than those inc (b) Title, and average hours per week | 0. 0. luded on line 1 – see li | 0. ostructions). If none, el (d)Contributions to employee benefit plans and deferred | (e) Expense a | accou |
| ### ETHAN YEH ### ### ### ### ### ### ### ### ### # | DIRECTOR 1.00 DIRECTOR 1.00 es (other than those inc (b) Title, and average hours per week | 0. 0. luded on line 1 – see li | 0. ostructions). If none, el (d)Contributions to employee benefit plans and deferred | (e) Expense a | accou |
| ETHAN YEH 4708 BRAEBURN DR BELLIARE TX 77401 GRACE YEH 4708 BRAEBURN DR BELLAIRE TX 77401 2 Compensation of five highest-paid employee paid more than \$50,000 | DIRECTOR 1.00 DIRECTOR 1.00 es (other than those inc (b) Title, and average hours per week | 0. 0. luded on line 1 – see li | 0. ostructions). If none, el (d)Contributions to employee benefit plans and deferred | (e) Expense a | accou |
| ETHAN YEH 4708 BRAEBURN DR BELLIARE TX 77401 GRACE YEH 4708 BRAEBURN DR BELLAIRE TX 77401 2 Compensation of five highest-paid employee paid more than \$50,000 | DIRECTOR 1.00 DIRECTOR 1.00 es (other than those inc (b) Title, and average hours per week | 0. 0. luded on line 1 – see li | 0. ostructions). If none, el (d)Contributions to employee benefit plans and deferred | (e) Expense a | accou |
| ETHAN YEH 4708 BRAEBURN DR BELLIARE TX 77401 GRACE YEH 4708 BRAEBURN DR BELLAIRE TX 77401 2 Compensation of five highest-paid employee paid more than \$50,000 | DIRECTOR 1.00 DIRECTOR 1.00 es (other than those inc (b) Title, and average hours per week | 0. 0. luded on line 1 – see li | 0. ostructions). If none, el (d)Contributions to employee benefit plans and deferred | (e) Expense a | |
| ETHAN YEH 4708 BRAEBURN DR BELLIARE TX 77401 GRACE YEH 4708 BRAEBURN DR BELLAIRE TX 77401 2 Compensation of five highest-paid employee paid more than \$50,000 | DIRECTOR 1.00 DIRECTOR 1.00 es (other than those inc (b) Title, and average hours per week | 0. 0. luded on line 1 – see li | 0. ostructions). If none, el (d)Contributions to employee benefit plans and deferred | (e) Expense a | accou |

| : | | |
|----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| Form | 990-PF (2014) PEARL YEH CHARITABLE FOUNDATION 47-254 WILL Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E | |
| -Fgal | and Contractors (continued) | imployees, |
| 3 | Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.' | |
| | (a) Name and address of each person paid more than \$50,000 (b) Type of service | (c) Compensation |
| NON | E | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total | number of others receiving over \$50,000 for professional services | None |
| Par | tiliza Summary of Direct Charitable Activities | |
| List the | e foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of zations and other beneficiaries served, conferences convened, research papers produced, etc. | Expenses |
| 1 | | |
| | | |
| 2 | | |
| | | |
| 3 | | |
| | | |
| 4 | | |
| | | |
| Par | Summary of Program-Related Investments (see instructions) | |
| Desc | cabe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. | Amount |
| 1 | | |
| | | |
| 2 | | |

TEEA0307 06/17/14

Form **990-PF** (2014)

All other program-related investments See instructions.

BAA

| Form | | 47-2540099 | Page 8 |
|--------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|--------|
| Par | Minimum Investment Return (All domestic foundations must complete this part. Fo see instructions.) | reign foundation | S, |
| 1 a | Fair market value of assets not used (or held for use) directly in carrying out chantable, etc, purposes. Average monthly fair market value of securities | 1a | |
| | Average of monthly cash balances | | 5,479. |
| | Fair market value of all other assets (see instructions) | | |
| d | Total (add lines 1a, b, and c) · · · · · · · · · · · · · · · · · · | 1 d | 5,479. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and 1c | | |
| | (attach detailed explanation) | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | | |
| 3 | Subtract line 2 from line 1d | 3 | 5,479. |
| 4 | Cash deemed held for chantable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions) | 4 | 82. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 5,397. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 18. |
| | t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operat and certain foreign organizations check here ☐ and do not complete this part.) | | |
| | Mınımum ınvestment return from Part X, line 6 | 1 | 18. |
| | | <u>o.</u> | |
| | Income tax for 2014. (This does not include the tax from Part VI.) | | |
| C | Add lines 2a and 2b | | 0. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | | 18. |
| 4 | Recoveries of amounts treated as qualifying distributions | | |
| 5 | Add lines 3 and 4 · · · · · · · · · · · · · · · · · · | | 18. |
| 6 | Deduction from distributable amount (see instructions) | | |
| 7 | Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 18. |
| Par | t XII Qualifying Distributions (see instructions) | | |
| 1 a | Amounts paid (including administrative expenses) to accomplish chantable, etc, purposes: Expenses, contributions, gifts, etc — total from Part I, column (d), line 26 | 1a | |
| b | Program-related investments — total from Part IX-B | 1b | , |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes | 2 | |
| 3 a | Amounts set aside for specific chantable projects that satisfy the. Suitability test (prior IRS approval required) | 3a | _ |
| b | Cash distribution test (attach the required schedule) | 3 b | |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | |
| 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 (see instructions) | 5 | 0. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 0. |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the qualifies for the section 4940(e) reduction of tax in those years. | e foundation | |

BAA Form 990-PF (2014)

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 | | | | 18. |
| 2 Undistributed income, if any, as of the end of 2014 | | | | 10. |
| a Enter amount for 2013 only | | | | |
| b Total for pnor years 20 , 20 , 20 | | | | |
| 3 Excess distributions carryover, if any, to 2014 | | | · ·- | |
| a From 2009 | | | | |
| b From 2010 | | | | |
| c From 2011 | | | | |
| d From 2012 | | | | |
| e From 2013 | | | | |
| f Total of lines 3a through e | | | | |
| 4 Qualifying distributions for 2014 from Part | | | | |
| XII, line 4: S | | | | |
| a Applied to 2013, but not more than line 2a . | | | | |
| b Applied to undistributed income of prior years (Election required — see instructions) | | | | |
| c Treated as distributions out of corpus (Election required — see instructions) | | | | , |
| d Applied to 2014 distributable amount | | | | |
| e Remaining amount distributed out of corpus | 0. | | | |
| 5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a).) | | | | |
| 6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | | | | |
| a Corpus Add lines St, 4C, and 4e Subtract line 5 | 0. | | | |
| b Pnor years' undistributed income. Subtract line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | | | |
| d Subtract line 6c from line 6b. Taxable amount — see instructions | | 0. | | |
| e Undistributed income for 2013 Subtract line 4a from | | | | |
| line 2a Taxable amount — see instructions | • • | | 0. | |
| f Undistributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015 | | | | 18. |
| 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions) | | | | |
| 8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions). | 0. | | | |
| 9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a | 0. | | | |
| 10 Analysis of line 9 | 0. | | | |
| | o. | | | |
| |).). | | | |
| |). | | | |
| | <u>). </u>). | | | |
| | | | | |
| 6 EXCESS (10111 2014 | 0. | | | |

| Form 990-PF (2014) PEARL YEH CHARIT | | | | 47-2540099 | 9 Page 10 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|--------------------------------------------|-------------------------------|----------------------------------------------|-------------------|
| Pant VIV Private Operating Founda | tions (see instru | ctions and Part \ | /II-A, question 9 |) | N/A |
| 1 a If the foundation has received a ruling or def is effective for 2014, enter the date of the ru | termination letter that ling | t it is a private operati | ing foundation, and f | the ruling | |
| b Check box to indicate whether the foundation | n is a private operati | ng foundation describ | oed in section | 4942(J)(3) or | 4942(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | |
| income from Part I or the minimum investment return from Part X for each year listed | (a) 2014 | (b) 2013 | (c) 2012 | (d) 2011 | (e) Total |
| b 85% of line 2a | | | | | |
| Qualifying distributions from Part XII, line 4 for each year listed | | | | | |
| d Amounts included in line 2c not used directly for active conduct of exempt activities | | | | | |
| e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c | | | | | |
| 3 Complete 3a, b, or c for the alternative test relied upon: | | | | | |
| a 'Assets' alternative test — enter | | | | 1 | |
| (1) Value of all assets | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b 'Endowment' atternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| c 'Support' alternative test - enter: | | | | | |
| (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(ii) | | | | | |
| (3) Largest amount of support from an exempt organization | | | | | |
| (4) Gross investment income | | | | | |
| Rant XVI Supplementary Information assets at any time during the | | | foundation had | \$5,000 or more | in |
| Information Regarding Foundation Managers a List any managers of the foundation who has close of any tax year (but only if they have of WILLIAM YEH, PRESIDENT OF | ve contributed more ontributed more than | \$5,000). (See sectio | n 507(d)(2).) | · | efore the |
| b List any managers of the foundation who ow a partnership or other entity) of which the foundation | n 10% or more of the undation has a 10% o | e stock of a corporation greater interest. | on (or an equally larg | ge portion of the own | ership of |
| 2 Information Regarding Contribution, Gran | e Gift Loop Sabal | larchin eta Peses | me! | | |
| Check here X if the foundation only marequests for funds. If the foundation makes goomplete items 2a, b, c, and d. | akes contributions to | preselected charitable | le organizations and | does not accept uns ns under other condit | olicited uons, |
| a The name, address, and telephone number | or e-mail address of | the person to whom a | applications should t | e addressed: | |
| WILLIAM YEH | | | | | |
| 4708 BRAEBURN DR | | | | | |
| BELLAIRE | TX 7740 | | | · · · · · · · · · · · · · · · · · · · | |
| b The form in which applications should be sul | omitted and informat | on and materials the | y should include [.] | | |
| c Any submission deadlines: | | | | | |
| d Any restrictions or limitations on awards, suc | h as by geographica | ll areas, charitable fie | lds, kinds of instituti | ons, or other factors: | |
| | | | | | |

| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|-------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------|----------------------------------|--------|
| Name and address (home or business) | substantial contributor | recipient | | |
| Paid during the year | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | 1 | | |
| | | | | |
| | | | | |
| | | 1 | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | 1 | | |
| | | + + | | |
| | | 1 | | |
| | | 1 1 | | |
| | | | | |
| | | 1 | | } |
| | | 1 1 | | |
| | | 1 1 | | |
| | | 1 1 | | |
| | | 1 1 | | |
| | | 1 1 | | |
| | | 1 1 | | |
| | | 1 1 | | |
| | | 1 1 | | |
| | | 1 1 | | |
| Total | | Ll | | _ |
| Approved for future payment | | | | 9 |
| Approved for future payment | | | | |
| | | | | |
| | | | | |
| | | 1 | | |
| | | | | |
| | | | | |
| | | 1 | | |
| | | | | |
| | | | | |
| | | 1 | | 1 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Part XVI-A Analysis of Income-Producing Activities

| Enter gross amounts unless otherwise indicated. | | Unrelate | d business income | Excluded by section 512, 513, or 514 | | |
|-------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------|--------------------------------------|----------------------------------------|-----------------------------------------------------------|
| | Program service revenue. | (a) Business code | (b) Amount | (c) Exclu- sion code | (d) Amount | (e) Related or exempt function income (See instructions.) |
| а | | | | | | |
| b_ | | | | | ······································ | |
| c - | | | | | | |
| q_ | | | | | | |
| | | | | - | | |
| e_ | | | | <u> </u> | | |
| f | | | | | | |
| | ees and contracts from government agencies | | | | | |
| 2 N | Membership dues and assessments | | | | | |
| 3 tr | nterest on savings and temporary cash investments | j | | | | |
| 4 [| Dividends and interest from securities | | | | | |
| 5 N | let rental income or (loss) from real estate. | | | | | |
| аC | Debt-financed property | | | | | |
| | lot debt-financed property | | | | - ' | |
| | let rental income or (loss) from personal property | | <u> </u> | - | | |
| | Other investment income | | | | | |
| | la contraction of the contractio | | | | | |
| | Gain or (loss) from sales of assets other than inventory | | | <u> </u> | | · · · · · · · · · · · · · · · · · · · |
| | let income or (loss) from special events | | | | | |
| 10 0 | Gross profit or (loss) from sales of inventory \dots | | | | | |
| 11 (| Other revenue: | , | | | | , , |
| а | | | · · · · · · · · · · · · · · · · · · · | | | |
| b _ | | | | | | |
| c ⁻ | | | | | | - |
| ď | | | | | | |
| e e | | | | | | · |
| _ | Subtotal Add salumns (b) (d) and (a) | | · · · · · · · · · · · · · · · · · · · | | | |
| 40 7 | Subtotal. Add columns (b), (d), and (e) · · · · · · · · Total. Add line 12, columns (b), (d), and (e) · · · · | i | | 46. | | |
| | | | | | 13 | |
| (See w | orksheet in line 13 instructions to verify calculations. |) | | | | |
| Part | XVI-B Relationship of Activities to the | Accompl | lishment of Exem | ot Purr | oses | |
| | | | | | | |
| Line i | No. Explain below how each activity for which inco | me is reporte | ed in column (e) of Part | XVI-A co | intributed importantly to t | he |
| | accomplishment of the foundation's exempt pu | irposes (otne | er than by providing fund | is for suc | n purposes). (See instru | ctions.) |
| | | | | | | |
| - | | | | | | |
| | | | | - | | |
| | | | | | * | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | <u> </u> | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | - | | | | |
| | | · · · · · · · · · · · · · · · · · · · | | | | |
| | | | | | | |
| | 13 | | | | · <u>·······</u> | |
| | | | | | | |
| | | | | | | |
| | | | | · | | |
| | | | | | | |

Form **990-PF** (2014)

BAA

| Form 9 | 90-PF (| 2014) PEARI | YEH CHARI | TABLE FOU | NDATION | | | 47-2540 | 099 | Pa | age 13 |
|--------------------------|------------------------------------------------------|-----------------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------|-----------------------------------------------------------------|---------------------------------|--------------------------------------------|-----------------------------------------------------------|-----------------------|----------|---------------|
| Part) | | Information F Exempt Orga | | nsfers To a | nd Transactio | ns and | Relationship | os With Noncha | aritable | | |
| | | | | | | | | | | Yes | No |
| d- | escribed | rganization direct d in section 501(c o political organiz |) of the Code (other | age in any of the rection | ne following with ar 501(c)(3) organiza | ny other of tions) or in | rganization n section 527, | | | | |
| аТ | ransfers | s from the reportir | ng foundation to a | noncharitable e | xempt organizatio | n of: | | | | | <u> </u> |
| | • | | | | | | | | | | Х |
| (2 | 2) Othe | r assets | · · · · · · · · · · · · · · · · · · · | | | | · · · · · · · · · | | 1 a (2) | | X |
| _ | | nsactions: | | | | | | | | ļ | ļ |
| • | • | | | | | | | | L | ļ | X |
| - | - | | | | | | | | | - | X |
| | (3) Rental of facilities, equipment, or other assets | | | | | | | | - | X | |
| | - | | = | | | | | | | | X |
| | • | • | | | | | | | | - | X |
| | | | | | or paid employees. | | | | 1 b (6) | | X |
| • 5 | naring (| or racilities, equipi | ment, maning iists, | other assets, c | paid employees. | | · · · · · · · · · | | 16 | <u> </u> | <u> </u> |
| th | ne good | s, other assets, or | r services aiven by | the reporting f | wing schedule. Co oundation. If the fo the value of the g | undation : | received less tha | now the fair market van fair market value vices received. | /alue of in | | |
| (a) Line | e no | (b) Amount involve | d (c) Name | of noncharitable ex | empt organization | (d) | Description of trans | sfers, transactions, and s | sharing arran | gement | is |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | ļ | | | | | |
| | | .= | | | | | | | | | |
| | | | | | | ļ | | | | | |
| | _ | | | | <u>.</u> | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | <u> </u> | | | | | |
| | | | | | - | - | | | | | |
| | | | | | | | | | | | |
| | | | | | | - | | | | | |
| | | <u> </u> | | | | | | | | | |
| | | | | | | | | | | | |
| d | escribe 'Yes,' c | d in section 501(complete the follow |) of the Code (other wing schedule. | er than section | ed to, one or more 501(c)(3)) or in sec | tax-exemp ction 527? | | | . Yes | x | No |
| (a) Name of organization | | | ation | (b) Type of organization | | | (c) Description of relationship | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | - | | | <u> </u> | | | | · · · · · · | | | |
| | | | | | | | | | | | |
| | T | | | 10 1 1 | | | | | line in in anio | | |
| | Correct, | enalties of perjury, I dec and complete Declarat | dare that I have examine ion of preparer (other th | ed this return, includi an taxpayer) is base | ng accompanying scried d on all information of wh | ules and state lich preparer | ements, and to the be has any knowledge | st of my knowledge and be | ellet, it is true, | | |
| Sign | | _ | , 1 | | | | | | May the this retur | | |
| Here | ļ | MOST | h yoh | | 05/15/15 | P | RESIDENT | | preparer (see Inst | shown t | below |
| | Signal | ture of officer or trustee | 7 | | Date | | tle | | _ \see SI | Yes | No |
| | | Pnnt/Type preparer's | name | Preparer | 's signature | | Date | Check If | PTIN | - | |
| Paid | | Chialing W | √u | Oh | al M | U | 05/15/15 | self-employed | P0049 | 3731 | |
| Prepa | rar | Firm's name | | & COMPAN | Y. P.C. | | | Firm's EIN ► 76-0 | | | |
| Use C | | Firm's address | 9889 BELL | | | 4 | | , , , | | | |
| USE (| - i ii y | | HOUSTON | | | | 036 | Phone no | | | |
| | | • | | | | / / | | | | | |

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, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

| Name of the organization | Employer Identification number | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|-------------------------|--|--|--|--|
| PEARL YEH CHARITABLE FOUNDATION | 47-2540099 | | | | | |
| 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 | | | | | |
| Check if your organization is covered by the Gene | eral Rule or a Special Rule | | | | | |
| Note. Only a section 501(c)(7), (8), or (10) organiz | zation can check boxes for both the General Rule and a Special | Rule. See instructions. | | | | |
| General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. | | | | | | |
| Special Rules | | | | | | |
| For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. | | | | | | |
| 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, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. | | | | | | |
| 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, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year | | | | | | |

Caution: An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer 'No' on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

| , | | | |
|---------------|-------------------------------------------------------------------------------------|-------------------------------|-----------------------------------------------------------------------|
| Schedule | B (Form 990, 990-EZ, or 990-PF) (2014) | Page | 1 of 1 of Part |
| Name of org | antzation YEH CHARITABLE FOUNDATION | 1 - | Identification number |
| | Contributors (see instructions). Use duplicate copies of Part I if additional space | • | 710093 |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | WILILAM YEH 4708 BRAEBURN DR BELLAIRE TX 77401 | \$200,000. | Person X Payroll |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| - | | \$ | Person Payroll Complete Part II for noncash contributions) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash Complete Part II for noncash contributions.) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |

BAA

Person Payroll Noncash

(Complete Part II for noncash contributions.)