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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Information about Form 990 and its instructions is at www.irs.gov/form990. For the 2014 calendar year, or tax year beginning and ending Check if applicable Name of organization Friends of Shanghai American School Foundation D Employer identification number Doing business as Address change Number and street (or PO box if mail is not delivered to street address) Room/suite 52-1957233 Name change PO BOX 5910 E Telephone number Initial return City or town ZIP code 609-452-0990 Princeton NJ 08543-5910 Final return/terminated Foreign country name Foreign province/state/county Foreign postal code Amended return G Gross receipts \$ 66,194 F Name and address of principal officer Yes X No Application pending H(a) is this a group return for subordinates? Deirdre A. Simon 15 Roszel Road, PO Box 5910, Princeton, NJ 08540 H(b) Are all subordinates included? -X-|-501(c)(3) If "No," attach a list (see instructions) 501(c)___(_. 4947(а)(1) ог Tax-exempt status J Website: ▶ none H(c) Group exemption number ▶ |x| Corporation K Form of organization Trust Association Other > L Year of formation 1995 M State of legal domicile DE Part I Summary Briefly describe the organization's mission or most significant activities Organized & operated for charitable and Activities & Governance educational purposes, and its primary purpose shall be furnishing financial and other assistance to educational institutions located within and without of the United States Support American Education overseas, Check this box ▶ If the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a). Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2014 (Part V, line 2a) 5 0 Total number of volunteers (estimate if necessary) 6 Total unrelated business revenue from Part VIII, column (C):ine:1 7a 7a 0 Net unrelated business taxable income from Form 990-T line 34-1 V 7b 0 Prior Year **Current Year** APR 1 6 2015 8 Contributions and grants (Part VIII, line 1h) 210,098 24,940 9 Program service revenue (Part VIII, line 2q) 0 10 Investment income (Part VIII, column (A), lines 3 4, and Zd). 45,941 33,930 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c (206 and (1e)) 17 11 49,413 7,324 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 305,452 66,194 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 0

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 0 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 0 3 4 47 48 Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 39,659 41,239 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 39,659 41,239 19 Revenue less expenses Subtract line 18 from line 12 265,793 24.955 **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) 1,392,617 1,417,598

Net assets or fund balances Subtract line 21 from line 20 1,381,983 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge

and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signature of officer Here Deirdre A Simon - Treasurer Type or print name and title Print/Type preparer's name Preparer's signature Check Paid self-employed Preparer Firm's name Firm's EIN **Use Only**

Firm's address May the IRS discuss this return with the preparer shown above? (see instructions)

10,634

Phone no

Form 990 (2014)

Yes

0

10,660

1,406,938

Total liabilities (Part X, line 26)

	Friends of Shanghal American School Foundation	52-195/233	Pa	age 3
Part	Checklist of Required Schedules	<u> </u>		
4	In the experimentary decembed in each on E01(a)(2) as 40.47(a)(4) (athless their a resent foundation) 2 (5.8)(a) (1		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2		
•	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)		-	
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C,			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes,"			
9	complete Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	8_		Х
3	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debi	.		
	negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		: 月. 这意。	
	VII, VIII, IX, or X as applicable	<u>.</u>		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI	11a		_X_
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	j '		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		_X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	امدا		v
a	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	11c		X
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part			$\hat{\mathbf{x}}$
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete the comparing the complete the comparing	lete		-
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Year"	əs,"		
	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	$\sqcup \sqcup$	Χ
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		_X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		_X
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		v
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	145		Х
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Χ
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Χ
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
46	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	\sqcup	_X_
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			v
20-	If "Yes," complete Schedule G, Part III Did the organization operate one or more bospital facilities? If "Yes," complete Schedule H	19		X X
∠va	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Λ.

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

20b

Part IV

Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	-		
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	1		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		Х
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	- 24d		-X
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	12.10		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or	i		
	990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	255		
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II .	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	120		^
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,		-32F	
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete</i>	20a	_	
_	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		
·	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		``
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	25	-	
-	conservation contributions? If "Yes," complete Schedule M	30		~
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N,</i>	30		<u>X</u>
01	Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?	31		<u>X</u>
-	If "Yes," complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
•	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		v
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R. Part II.	33		X
04	III, or IV, and Part V, line 1	34		v
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled	35a		
~	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	256	ŀ	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	35b	 	
	organization? If "Yes," complete Schedule R, Part V, line 2	26		~
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		<u>X</u>
٠,	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		v
38		37		<u> </u>
30	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990 (2014)

Form 9	P90 (2014) Friends of Shanghai American School Foundation 52-19	57233	р	age 5
<u>P</u> ar				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1		
b		2		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable		15.8	
_	gaming (gambling) winnings to prize winners?	1c	X	<u> </u>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	统		7 5
		의 		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		<u> </u>
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	-	-
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			
b	If "Yes," enter the name of the foreign country	4a	-3	_X
b	See instructions for filing requirements for FinCen Form 114, Report of Foreign Bank and Financial Accounts			٠,
	(FBAR)			1:
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	253	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		x
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		┢
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	130	-	
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	"	\vdash	<u> </u>
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		7 ,3	K * 74
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		, a,	Ľ.
	and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	,,		18
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		20.6	: 3
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	* * * * * * * * * * * * * * * * * * *	200	1.3
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter		1	8
a	Initiation fees and capital contributions included on Part VIII, line 12	┥		
b 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter	┨		1 to 1
''	Gross income from members or shareholders	4		
b	Gross income from other sources (Do not net amounts due or paid to other sources	- ₹,		*
D	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	ļ	- Est
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	120	l	<u> </u>
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	
-	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	7		1
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part VI

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

	Check if Schedule O contains a response of hote to any line in this Part VI.			Ľ
Sect	ion A. Governing Body and Management			
	1		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	4 3	3	* * ,
	If there are material differences in voting rights among members of the governing body, or		المراذ	
	if the governing body delegated broad authority to an executive committee or similar	11.5	2 /	
	committee, explain in Schedule O			· · ·
b	Enter the number of voting members included in line 1a, above, who are independent 1b	4		[* ·]
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			·**.
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5 -		_X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		*	* 1
	the year by the following		3	
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	<u> </u>	<u> </u>
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue	<u>Code</u>		
10a	Did the organization have local chapters, branches, or affiliates?	400	Yes	No X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10a		 ^-
D	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	_
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	200		863
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	X	المنتشد
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give use to conflicts?		x	\vdash
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	123	<u> </u>	
_	describe in Schedule O how this was done	12c	x	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by	100		S
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		344	
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	*,200	\$ \$ \$ \$ \$	3
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	1	15.14	
	with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	*(£,,,,	\$, * >	2.1
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard	4.5		.
	the organization's exempt status with respect to such arrangements?	16b		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)	(3)s onl	y)	
	available for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain in Schedule C			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest p	olicy, ar	nd	
	financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	International Schools Services, Inc 609-452-0990) 		·

5 (00.1)	5l (8) l l										_
Form 990 (2014)	Friends of Shanghai American Sch			,	_					52-19572	33 Page 7
Part VII	Compensation of Officers, Dire	•	es, K	ey	Em	plo	oyee	s, ŀ	lighest Comp	ensated	
	Employees, and Independent C Check if Schedule O contains a re		te to	anv	/ lin	ne II	n this	s Pa	art VII		
Section A.	Officers, Directors, Trustees, Key Er							_			
1a Complete to	his table for all persons required to be I									with or within the	
=	of the organization's current officers, di	roctore trustoes	(who	tho			iuale	or 0	raanizations) ro	gardlage of amo	unt
of compensati	on Enter -0- in columns (D), (E), and (I	F) If no compens	ation	wa	s pa	aid					unt
	of the organization's current key emplo organization's five current highest com								, ,		voo)
who received	reportable compensation (Box 5 of Form any related organizations										yee)
List all c	of the organization's former officers, ke eportable compensation from the organ		_					ed e	employees who r	eceived more th	an
	of the organization's former directors of the organization of the										the
	the following order individual trustees		_						•		
•	employees, and former such persons						-,		.,,p,	-,g	
X Check this	s box if neither the organization nor any	y related organiz	atıon	con	npe	nsa	ted a	ny c	urrent officer, dir	ector, or trustee	
					((C)					
	(4)	(5)		• - •		ition			(5)	<i>(</i> -,	
	(A) Name and Title	(B) Average					than one is both		(D) Reportable	(E) Reportable	(F) Estimated
		hours per week (list any				$\overline{}$	or/trust		compensation from	compensation from related	amount of other
		hours for related	함	nstitu	Officer	(ey e	ighe	Former	the	organizations	compensation
		organizations	Individual trustee or director	Institutional	4	Key employee	Highest compensated employee	"	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
		below dotted line)	trust	al to		уее	mpe				and related organizations
			8	trustee			insat				
				_			<u> </u>	_			
(1) York-ch President	ı Harder	5 00	×		l 🗸		ŀ	1			
(2) Roger (3 Hove	0 00 5 00	 ^-	-	<u> </u>	 					
Secretary		0 00	x		х						
(3) Deirdre	A Simon	5 00				•					
Treasurer		0 00	Х		Х						
(4) Richard	Mueller	5 00									-
Director		0 00	X	_			<u> </u>				
(5)											
(6)											
(7)											
(8)											
(9)											
(10)			į							·	
(11)									"		
(12)								Г			

	Section A. Officers, Directors, Tru	istees, Key Em	ploye	es,	and	HI C	gnes	t Co	ompensated Em	ployees	<u>(contin</u>	ued)	
	(A) Name and title	(B) Average hours per week (list any	box office	unles er an	Pos neck ss pe d a d	rson	than o	an ee)	(D) Reportable compensation from	(E) Reports compens from rela	able ation	(F) Estimat amount other	ted t of
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organiza (W-2/1099-	tions	compens from the organiza and rela organizati	ation ne ition ited
(15)													
(16)													
(17)							- = -						
(18)													
(19)										-			
(20)													
(21)													
(22)													
(23)										_			
(24)													
(25)													
1b	Sub-total	_						•	0		0		0
С	Total from continuation sheets to Part VII, Se	ection A						\blacktriangleright	0		0		0
d	Total (add lines 1b and 1c)							▶	0		0		0
2	Total number of individuals (including but not lir reportable compensation from the organization		sted a		'e) v 0	vho	recei	ved	more than \$100	0,000 of			_
3	Did the organization list any former officer, dire employee on line 1a? <i>If "Yes," complete Sched</i>	ector, or trustee,	-		loye	e, c	or higi	hes	t compensated			Yes 3	No X
4	For any individual listed on line 1a, is the sum of the organization and related organizations great individual								- ' - '			4	X
5	Did any person listed on line 1a receive or accifor services rendered to the organization? If "Y	•			•			_		vidual		5	X
Sec	tion B. Independent Contractors								·				
1	Complete this table for your five highest compe compensation from the organization Report co year	•										tax	
	(A) Name and business add	ress							(B) Description of ser	vices		(C) Compensation	n
								_					0

Total number of independent contractors (including but not limited to those listed above) who received

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

000

	990 (20		ican School	Fou	ndation			<u>52-</u> 19572	233 Page 9
Par	t VIII								
_		Check if Schedule O contains	s a response	or r	ote to any line ir	n this Part VIII		-	
> >	,			*	* E	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
'nα	1a	Federated campaigns		1a	0				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues		1b	0	, ,	* * , ,		¥
s, G	С	Fundraising events		1c	0	*	·\$ & •	, 445	
Gift lar,	d	Related organizations		1d	0	× *	» », ·	·	
ns,	е	Government grants (contribution		1e	0			*	ĺ.
er S	f	All other contributions, gifts, gran				*	~* ×	. · · · · · · · · · · · · · · · · · · ·	4 47
흡호		similar amounts not included abo		1f	24,940		, ,	** ;	* 20
Con	g	Noncash contributions included in	ines 1a-1f	\$	0	<u></u>	,		
	h	Total. Add lines 1a–1f			<u> </u>	24,940			
en e					- Business Code	248		<u> </u>	
Program Service Revenue	2a					0			
Ř	b		·		}	0		<u> </u>	
	C					0			
Se	a		· • • • • • • • • • • • • • • • • • • •			0		_	
Гап	e	All all				0			
rog	1	All other program service revenu	ie			0	· · · · · · · · · · · · · · · · · · ·	 	
	<u>g</u> 3	Total. Add lines 2a–2f			. <u>►</u>	0	37.7	1 3	* * * * * * * * * * * * * * * * * * *
	١ ،	Investment income (including divother similar amounts)	naenas, intei	est,	ano	12.044			40.04
	4	Income from investment of tax-e	vomnt hand	nroc	opodo -	13,911			13,911
1	5	Royalties	xempt bond	proc	eeus	20,019			20,019
	"	Royalles	(ı) Real		(II) Personal	0			
	6a	Gross rents	(7		(", " - " - " - " - " - " - " - " - " - "				
	b	Less rental expenses			l				
	C	Rental income or (loss)		0	0			10 8 45	
	d	Net rental income or (loss)	L)	<u> </u>		
	7a	Gross amount from sales of	(i) Securities	es	(II) Other		<u> </u>	-84. (3 5. 14)	.5%].
	'`	assets other than inventory	— · · · · · · · · · · · · · · · · · ·	0	· · · ·				1 1 34 5
	ь	Less cost or other basis		Ŭ	<u>~</u>	1			m in with
	~	and sales expenses		0	٥ ا				
	c	Gain or (loss)		0	0				
	d	Net gain or (loss)	L		. ▶	0		<u> </u>	
		,				32 - Fr - M. B. B.	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	TOP TO T	# ACX P
e	8a	Gross income from fundraising					* * * * * * * * * * * * * * * * * * * *		a alka a a
ē		events (not including \$	0				3		
ě		of contributions reported on line						\$\$\tau\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	· *33** · * \$
Other Revenue		See Part IV, line 18		а	0			A	
ţ	b	Less direct expenses		b	0	· (* · · · · · · · · · · · · · · · · · ·	~<		
0	С	Net income or (loss) from fundra	ising events		•	0			
	9a	Gross income from gaming activ	rities					,	*
		See Part IV, line 19		а	0	3.		*	ş
	b	Less direct expenses		b	0	, , , , , , , , , , , , , , , , , , , ,			, , , , , , , , , , , , , , , , , , ,
	С	Net income or (loss) from gamin	g activities		, <u>></u>	0			
	10a	Gross sales of inventory, less							
		returns and allowances		а	0]			
	b	Less cost of goods sold		b	0				
	С	Net income or (loss) from sales	of inventory			0			
		Miscellaneous Revenue			Business Code				
	11a	Unrealized GAIN			611710	7,324			7,324
	b					0			
	С		· • • • • • • • • • • • • • • • • • • •			0			
	d	All other revenue				0			
	е	Total. Add lines 11a-11d			. •	7,324			

66,194

12 Total revenue. See instructions

41,254

Friends of Shanghai American Schopart IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must complete all	columns All other o	rganizations must d	complete column (A)	
	Check if Schedule O contains a response or note	·-			
Do 8b,	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				• • • • • • • • • • • • • • • • • • • •
	domestic governments See Part IV, line 21	. 0		•	·
2	Grants and other assistance to domestic			·	}, , •% →
	individuals See Part IV, line 22	0		4, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3,	<u> </u>
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				•
_	individuals See Part IV, lines 15 and 16	0			`
4	Benefits paid to or for members	0			·
5	Compensation of current officers, directors,			1	
	trustees, and key_employees	0			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B) Other salaries and wages	0			
8	Pension plan accruals and contributions (include				
Ü	section 401(k) and 403(b) employer contributions)	0	,		
9	Other employee benefits	0			
10	Payroll taxes .	0			
11	Fees for services (non-employees)				-
а	Management	14,795		14,795	
b	Legal	0			
С	Accounting	7,800		7,800	
d	Lobbying	0			
е	Professional fundraising services. See Part IV, line 17	0	i i		
f	Investment management fees	15,807		15,807	
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)	0			
12	Advertising and promotion	0			
13	Office expenses	1,393		1,393	·
14	Information technology	0			
15	Royalties	0	`		
16	Occupancy	0			
17 18	Travel	0			
10	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0			 ·
22	Depreciation, depletion, and amortization	0	0	0	
23	Insurance	1,444		1,444	
24	Other expenses Itemize expenses not covered		1748,31	* *(***, **;	
	above (List miscellaneous expenses in line 24e If			`; .	£
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
а		0			
b		0			
C		0			
d	***************************************	0			
e	All other expenses	0			<u> </u>
25	Total functional expenses. Add lines 1 through 24e	41,239	0	41,239	(
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response or	note to	any line in this Part X			
					(A)		(B)
					Beginning of year		End of year
	1	Cash—non-interest-bearing				1	
	2	Savings and temporary cash investments			464,558	2	378,011
	3	Pledges and grants receivable, net			0	3	0
	4	Accounts receivable, net			0	4	0
	5	Loans and other receivables from current and fo	ormer of	ficers, directors,			
		trustees, key employees, and highest compensa	ated em	oloyees	37,	` 45 200	<u></u>
		Complete Part II of Schedule L				5	
	6	Loans and other receivables from other disqualified perso	ons (as de	fined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), an	nd contrib	outing employers and			
		sponsoring organizations of section 501(c)(9) voluntary er	mployees	' beneficiary		6, 104	3.4
S _		organizations (see instructions)-Complete-Part II of-Schei	dule-L		<u> </u>	6 _	
Assets	7	Notes and loans receivable, net			0	7	0
⋖	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			454	9	
	10a	Land, buildings, and equipment cost or				30 kg	
		other basis Complete Part VI of Schedule D	10a	0		345	**************************************
	b	Less accumulated depreciation	10b	0	<u> </u>		0
	11	Investments—publicly traded securities			927,605	11	1,039,587
	12	Investments—other securities See Part IV, line			0		0
	13	Investments—program-related See Part IV, line	11		0		0
	14	Intangible assets			0		0
	15	Other assets See Part IV, line 11			0	 	0
	16	Total assets. Add lines 1 through 15 (must equa	al line 34	4)	1,392,617	1	1,417,598
	17	Accounts payable and accrued expenses			10,634		10,660
	18	Grants payable				18	
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete F			. V 65-3500-901 1 2/89/000	21	1 2 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
Liabilities	22	Loans and other payables to current and former					
₩		trustees, key employees, highest compensated		ees, and		<u></u>	3/1.33
<u>ia</u>		disqualified persons Complete Part II of Schedu		d		22	
_	23	Secured mortgages and notes payable to unrela			0		0
	24 25	Unsecured notes and loans payable to unrelated Other liabilities (including federal income tax, pa			0	24	0
	25	parties, and other liabilities not included on lines	•				
		Part X of Schedule D	5 17-2 4)	Complete	0	25	0
	26	Total liabilities. Add lines 17 through 25			10,634		10,660
					/4,14,44,34	20	10,000
S		Organizations that follow SFAS 117 (ASC 958	-	k here ► X and			
ž		complete lines 27 through 29, and lines 33 ar	10 34.			263.380	
<u>a</u>	27	Unrestricted net assets		267,632	27	281,411	
8	28	Temporarily restricted net assets			414,351	28	425,527
Ĕ	29	Permanently restricted net assets	700,000	29	700,000		
Ē		Organizations that do not follow SFAS 117 (ASC958),		_			
Net Assets or Fund Balances		complete lines 30 through 34.			, ,	<u> </u>	
šet	30	Capital stock or trust principal, or current funds				30	
Ass	31	Paid-in or capital surplus, or land, building, or ed				31	
et	32	Retained earnings, endowment, accumulated in	come, c	or other funds		32	
Z	33	Total net assets or fund balances			1,381,983	+	1,406,938
	34	Total liabilities and net assets/fund balances		<u> </u>	1,392,617	34	1,417,598

1 01111 0	Friends of Shanghar American School Foundation	ວ	2-195/233	Page I∡	
Part	XI Reconciliation of Net Assets				-
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		66,194	ŀ
2	Total expenses (must equal Part IX, column (A), line 25)	2		41,239	,
3	Revenue less expenses Subtract line 2 from line 1	3		24,955	,
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	-	1,381,983	,
5	Net unrealized gains (losses) on investments	5			_
6	Donated services and use of facilities	6		•	_
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	}	•		
	column (B))	10		1,406,938	į
<u>Part</u>	, c				
	Check if-Schedule O contains a response or note to any line in this Part XII.			[]	_
1 2a b	Accounting method used to prepare the Form 990		2a 2b	Yes No	استبعيا المدديسية المعتشرية
c 3a b	X Separate basis	•	2c 3a	X	- Comment
~	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
	, ,		Form	990 (2014)	_

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury		► Attach	ito Form 990 or Form 9	990-EZ.			Jpen to Public
Internal Revenue Service	► Informatio	on about Schedule A (For	m 990 or 990-EZ) and its ins	tructions is a	it www.irs.ge		Inspection
Name of the organization			-			Employer identificatio	n number
Friends of Shanghai Ar	nerican School F	oundation				52-19	57233
Part Reason f	<u>or Public Cha</u>	rity Status (All org	ganizations must co	mplete tr	ns part)	See instructions	
The organization is not	•	•		•			
1 A church, con	vention of church	nes, or association o	f churches described ii	n section	170(b)(1)((A)(i).	
2 A school desc	ribed in section	170(b)(1)(A)(ii). (Att	ach Schedule E)				
3 A hospital or a	a cooperative hos	spital service organiz	ation described in sec	tion 170(l	o)(1)(A)(iii	i).	
	earch organizatione, city, and state		nction with a hospital d	lescribed i	n section	170(b)(1)(A)(iii). En	ter the
5 An organizati	•	ne benefit of a colleg	e ⁻ or ⁻ university ⁻ owned ⁻	or operate	d-by a-go	vernmental-unit desc	cribed-in- — — —
		,	ital unit described in se	ection 170	(b)(1)(A)(v).	
		receives a substantia (A)(vi). (Complete F	al part of its support fro Part II)	m a gover	nmental u	ınıt or from the gene	ral public
8 A community	trust described in	section 170(b)(1)(A)(vi). (Complete Part	II)			
receipts from support from	activities related gross investment	to its exempt function income and unrelated	nan 33 1/3% of its supp ons—subject to certain ed business taxable in See section 509(a)(2) .	exception come (les	s, and (2) s section (no more than 33 1/3 511 tax) from busine	3% of its
10 An organizati	on organized and	l operated exclusive	ly to test for public safe	ety See se	ection 509	e(a)(4).	
of one or mor	e publicly suppor	ted organizations de	ly for the benefit of, to pescribed in section 509 bes the type of support	9(a)(1) or s	section 50	09(a)(2). See section	n 509(a)(3).
the suppor	ted organization(ervised, or controlled tall larly appoint or elect a tions A and B.				
control or	management of t		r controlled in connecti ization vested in the sa ections A and C.				
c Type III fu	nctionally integr	rated. A supporting of	organization operated i				rated with,
d Type III no	n-functionally i	ntegrated. A suppor	ting organization operation generally must sat	ated in cor	nection w	rith its supported org	
			olete Part IV, Sections				
			itten determination froi			Type I, Type II, Type	e III
		• •	illy integrated supporting	ng organiz	ation		
	ber of supported	_					0
g Provide the to		on about the support	ed organization(s) (iii) Type of organization	(w) Is the	organization	(v) Amount of monetary	(vi) Amount of
(i) Name of Supporte	2 organization	(ii) Liiv	(described on lines 1–9 above or IRC section (see instructions))	listed in you	or governing ment?	support (see instructions)	other support (see instructions)
			(000,)	Yes	No		
(A)							
(B)							<u> </u>
(C)							
(D)							
(E)							
Total		i	1	1			

Schedule A (Form 990 or 990-EZ) 2014 Friends of Shanghai American School Foundation 52-1957233 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 192,642 22,451 153,735 210,098 24,940 603.866 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 0 192,642 22.451 153,735 210.098 24.940 603.866 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4 603,866 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2010 (c) 2012 (f) Total (b) 2011 (d) 2013 (e) 2014 192,642 22,451 210,098 Amounts from line 4 153,735 24,940 603,866 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 33,269 29,529 41,512 45,941 33,930 184,181 Net income from unrelated business activities, whether or not the business is regularly carried on 0 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 788.047

13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3
	organization, check this box and stop here

Total support. Add lines 7 through 10

12 Gross receipts from related activities, etc. (see instructions)

Section C. Computation of Public Support Percentage

4	Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14		<u>76 63%</u>
5	Public support percentage from 2013 Schedule A, Part II, line 14	15		76 39%
6a	33 1/3% support test—2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, che	ck this	box	

ьа	33 1/3% support test—2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box
	and stop here. The organization qualifies as a publicly supported organization

b	33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more,	check this
	box and stop here. The organization qualifies as a publicly supported organization	

17a	10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14
	is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain i
	Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported
	organization

b	10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line
	15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain
	Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly
	supported organization .

18	Private foundation If the organization did not check a bo	x on line 13,	16a, 16b,	17a, or 17b,	check this box and se
	instructions				

12

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II

	If the organization fails to qu	alify under the	tests listed beli	ow, please com	iplete Part II)		
Sec	tion A. Public Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees	·					
2	received (Do not include any "unusual grants ")						0
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the					Ì	
	organization's tax-exempt purpose						0
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
	ıts behalf		· · · · · · · · · · · · · · · · · · ·				0
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						0
6	Total. Add lines 1 through 5	0	0	0	0	0	0
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						0
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						0
С	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from line 6)		Ž				0
Sec	tion B. Total Support					-	
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6	0	0	0	0	0	0
10a	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar sources						0
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						,
	acquired after June 30, 1975						0
С	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business						
	activities not included in line 10b, whether					•	
	or not the business is regularly carried on						0
12	Other income Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI)						0
13	Total support. (Add lines 9, 10c, 11,						
	and 12)	0	0	0	0	0	0
14	•	rganızatıon's first, s	second, third, fourt	h, or fifth tax year a	is a section 501(c)	3)	
	organization, check this box and stop here			. <u>-</u>			▶
Sec	tion C. Computation of Public Su	pport Percenta	age			-· <u>-</u>	
15	Public support percentage for 2014 (line 8, c		•	f))		15	0 00%
16	Public support percentage from 2013 Sched					16	0 00%
Sec	tion D. Computation of Investmer	<u>nt Income Perc</u>	entage				
17	Investment income percentage for 2014 (line	e 10c, column (f) di	vided by line 13, c	olumn (f))		17	0 00%
18	Investment income percentage from 2013 S					18	0 00%
19a	33 1/3% support tests—2014. If the organi					and line 17 is	, -
	not more than 33 1/3%, check this box and s	stop here. The org	anızatıon qualıfies	as a publicly suppo	orted organization		▶
L	33 1/3% support tests—2013. If the organi				-	22.4/20/ =1	

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes" to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. 2014

OMB No 1545-0047

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

Haitle	i the organization			Employer identification number
Friend	s of Shanghai American School Foundation			52-1957233
Part				ds or Accounts.
	Complete if the organization ans	wered "Yes" to Form 990, Pa	rt IV, line 6	
_		(a) Donor advised funds	Ţ,	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			-
3	Aggregate value of grants from (during year)			· · ·
4	Aggregate value at end of year	•		
5	Did the organization inform all donors and d	onor advisors in writing that the	assets held in do	onor advised
•	funds are the organization's property, subject	_		Yes No
- -	Did the organization inform all grantees, doi	· · · · · · · · · · · · · · · · · · ·		
·	used only for charitable purposes and not for		-	
	purpose conferring impermissible private be		o. aao., oo.	Yes No
Dord				
Part			- N/ 1: 7	
	Complete if the organization ans			
1	Purpose(s) of conservation easements held			
	Preservation of land for public use (e g , re	creation or education)	Preservation of	a historically important land area
	Protection of natural habitat		Preservation of	a certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organiza	ation held a qualified conservation	n contribution in	the form of a conservation
-	easement on the last day of the tax year	4		Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation ea	sements		2b
c	Number of conservation easements on a ce		ın (a)	2c
d	Number of conservation easements include		, ,	
•	historic structure listed in the National Regis		ind not on a	2d
3	Number of conservation easements modifie		shed or termina	<u> </u>
•	during the tax year	a, transferred, refedeed, extinga	ortea, or terrinine	aced by the organization
4	Number of states where property subject to	conservation easement is locate	ed ▶	
5	Does the organization have a written policy			indling of
•	violations, and enforcement of the conserva		5 , - P - - - .	Yes No
6	Staff and volunteer hours devoted to monitor		onservation eas	
	>	J, J, J, J, J, J		g ,
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conse	rvation easemei	nts during the year
	▶ \$			Jan. 9 9
8	Does each conservation easement reported	d on line 2(d) above satisfy the re	aurements of se	ection
	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?			☐ Yes ☐ No
9	In Part XIII, describe how the organization r		n its revenue an	d expense statement, and
	balance sheet, and include, if applicable, th			
	the organization's accounting for conservati			
Par			reasures, or	Other Similar Assets.
	Complete if the organization ans			
4-	If the organization elected, as permitted und			nue statement and halance sheet
1a	works of art, historical treasures, or other si	•	•	
	of public service, provide, in Part XIII, the te	•		
L	· · · · · · · · · · · · · · · · · · ·			
b	If the organization elected, as permitted und			
	works of art, historical treasures, or other si	•	ntion, education,	or research in furtherance
	of public service, provide the following amo			► •
	(i) Revenue included in Form 990, Part VIII	, mre i		► \$ ► \$
2	(ii) Assets included in Form 990, Part X	fort brokeningstageseries		
2	If the organization received or held works o			- ·
	following amounts required to be reported u		ng to these item	
a	Revenue included in Form 990, Part VIII, Iir	ne i		\$
b	Assets included in Form 990. Part X			▶ S

Using the regination's Qualitorian Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)			aı American School Foundati	on	52-19	57233 Page 2
use of its collection items (check all that apply) a Public exhibition d Loan or exchange programs b Scholarly research e Other Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 10. The presentation of the organization answered "Yes" to Form 990, Part IV, line 10. The part IV Part I	Par	III Organizations Maintaining	Collections of Art, Hist	torical Treasures,	or Other Similar As:	sets (continued)
b Scholarly research e Other		use of its collection items (check all the		٦		nt
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII 5 During the year, did the organization's collection or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?			d [_	ī -	ge programs	
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII 5 During the year, did the organization solict or receive donations of art, historical treasures, or other similar assets to be sold to traise funds rather than to be maintained as part of the organization's collection?	b			Other		
Part XIII Surrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a. Is the organization an agent, fusitee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1a. Is the organization of agent, fusitee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1a. Is the organization of agent, fusitee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1b. If "Yes," explain the arrangement in Part XIII and complete the following table: 1c. Amount 1c. Amou	_					
Secrow and Custodial Arrangements. Ves No		Part XIII				pose in
Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21 1a. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? 1b. If "Yes," explain the arrangement in Part XIII and complete the following table 1c. Beginning balance d. Additions during the year f. Ending balance a. Distributions during the year f. Ending balance to the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 2a. Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 2b. If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. 2c. Part V. Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 2c. Portification of year balance d. Committee of the explanation answered "Yes" to Form 990, Part IV, line 10. 2c. No. Described in the organization answered "Yes" to Form 990, Part IV, line 10. 2c. No. Described in the organization answered "Yes" to Form 990, Part IV, line 10. 2c. No. Described in the organization answered "Yes" to Form 990, Part IV, line 10. 2c. No. Described organization in the possession of the organization that are held and administered for the organization by the organization in the possession of the organization that are held and administered for the organization by (i) unrelated organizations 2c. No. Described organizations 2c. Temporally restricted endowment 2c. Temporally restrict	5	assets to be sold to raise funds rather	than to be maintained as par			Yes No
included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table Beginning balance c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? yes X No b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance Cornibutions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 1 Cremporarily restricted endowment year end balance (ine 1g, column (a)) held as a Board designated or quasi-endowment year and 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations If "Yes" to Sa(n), are the related organizations listed as required on Schedule R? 1 Describe in Part XIII the intended uses of the organization's endowment funds Describe in Part XIII the intended uses of the organization's endowment funds Describe or property (a) Cost or other basis (b) Cost or other depreciation (b) Buddings C Leasehold improvements O O O O O O O D O O D O O O O D O O O O	Part	Complete if the organization	-	990, Part IV, line	9, or reported an amo	unt on Form
b If "Yes," explain the arrangement in Part XIII and complete the following table Amount 1c	1a		custodian or other intermedia	ry for contributions of	r other assets not	
C Beginning balance						Yes No
C Beginning balance	D	if "Yes," explain the arrangement in Pa	art XIII and complete the follo	wing table	<u> </u>	A
d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	c	Reginning halance			10	
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Ending balance						
Board Fire Front	f					0
Board Fire Front	2a	Did the organization include an amour	nt on Form 990. Part X. line 2	1. for escrow or cust	odial account liability?	Yes X No
Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years	b				•	
Complete if the organization answered "Yes" to Form 990, Part IV, line 10. a Beginning of year balance	Part					
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (d) Three years back (e) Four years back (d) Three years back (d) Three years back (d) Three years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (d) Three years back (d) Three years back (e) Four years back (d) Three years back (e) Four ye			answered "Yes" to Form	990. Part IV. line	10	
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quasi-endowment b Permanent endowment The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIII the intended uses of the organization's endowment funds Land, Buildings, and Equipment Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10 Describing and Equipment Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10 Land Buildings 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0						ick (e) Four years back
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 0 0 0 0 0 0 0 0 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment % b Permanent endowment % c Temporarily restricted endowment % The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations (iii) related organizations (iii) related organizations b If "Yes" to 3a(ii), are the related organization's endowment funds 4 Describe in Part XIII the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10 Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land 0 0 0 0 0 0 0 0 0 Describtion of property (a) Cost or other basis (other) (c) Accumulated depreciation of the organization	1a	Beginning of year balance	0	0		
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e Other expenditures for facilities and programs f Administrative expenses g End of year balance	С					
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g End of year balance	е	Other expenditures for facilities				
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quasi-endowment % Permanent endowment % The percentages in lines 2a, 2b, and 2c should equal 100% Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations (iii) related organizations (iii) related organizations (iv) unrelated organizations (iv) related organ						
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quasi-endowment % Permanent endowment % The percentages in lines 2a, 2b, and 2c should equal 100% Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIII the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10 Description of property (a) Cost or other basis (investment) (b) Cost or other desire depreciation (d) Book value depreciation (d) Buildings Land 0 0 0 0 0 0 0 Description of property 0 0 0 0 0 0 0 Easehold improvements 0 0 0 0 0 0 0 C Leasehold improvements 0 0 0 0 0 0 0 Equipment 0 0 0 0 0 0 0 Collection of the current year end balance (line 1g, column (a)) held as a second the second to the second that are held and administered for the second that are held and adm	f	Administrative expenses				
Board designated or quasi-endowment	3	•				_00
b Permanent endowment	2		· · · · · · · · · · · · · · · · · · ·	(line 1g, column (a)) l	held as	
Temporarily restricted endowment	_	- ,				
The percentages in lines 2a, 2b, and 2c should equal 100% Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations (iii) related organizations (iii) related organizations (iii) related organizations (iii) related organizations (iv) related organization and interest of the organization of organization organization of organization organization of organization ore						
Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations (iii) related organizations (iiii) related organizations (iii) r	С	· · · · · · · · · · · · · · · · · · ·				
Yes No	32			on that are hold and	administered for the	
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Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10	4		The state of the s			
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation	Part	VI Land, Buildings, and Equi	pment.			
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1a Land 0 0 0 b Buildings 0 0 0 0 c Leasehold improvements 0 0 0 0 d Equipment 0 0 0 0 e Other 0 0 0 0		Description of property	(a) Cost or other basis	(b) Cost or other	(c) Accumulated	(d) Book value
b Buildings 0 0 0 0 c Leasehold improvements 0 0 0 0 d Equipment 0 0 0 0 e Other 0 0 0 0			(investment)	basis (other)	depreciation	
c Leasehold improvements 0 0 0 0 d Equipment 0 0 0 0 0 e Other 0 0 0 0 0			-			
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e Other 0 0 0 0	_	-				
· · · · · · · · · · · · · · · · · · ·				 		
		·		<u> </u>	<u> </u>	

Friends of Shanghai American School Foundation

Schedule D (Form 990) 2014

	f security or category	(b) Book value		(c) Method of valuation	
	ame of security)			Cost or end-of-year market	value
 Financial derivatives Closely-held equity in 	<u></u>		0		· ·
		···	- 	<u> </u>	
			 -	<u> </u>	
(C)		-	<u> </u>		
(D)					
(E)					
(F)					
(G)					
<u>(H)</u>		- 			
Total (Column (b) must equal Form			0 323 - 23 -	× * * * * * * * * * * * * * * * * * * *	
	ments—Program Relate ete if the organization and		990, Part IV,	line 11c See Form 99	0, Part X, <u>line</u> 13
(a) Description	on of investment	(b) Book value		(c) Method of valuation Cost or end-of-year market	
(1)			,		
(2)					
(3)					
(4)					
(5) (6)					
(7)					
(8)					 -
(9)					
Total (Column (b) must equal Form	m 990, Part X, col (B) line 13)		0 🗱 👯		
	Assets.				
Comple	ete if the organization and	-	990, Part IV,	line 11d. See Form 99	
(1)	(a_	Description			(b) Book value
_(1)					(a) Book toldo
(2)					(5) 2001 1010
(2)					(a) Been leide
(3)					(2) 25511 10102
(3) (4)					(2) 23311 (2) 2
(3)					(1) 25511 10110
(3) (4) (5)					(2) 25511 1010
(3) (4) (5) (6) (7) (8)					(2) 25511 1010
(3) (4) (5) (6) (7) (8) (9)					
(3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must	equal Form 990, Part X, col	(B) line 15)		>	
(3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must Part X Other	Liabilities.				
(3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must Part X Other I Complete line 25	Liabilities. ete if the organization an	swered "Yes" to Form	990, Part IV,	line 11e or 11f See Fo	
(3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must Part X Other I Completed Inne 25 1. (a) Description	Liabilities. ete if the organization and				
(3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must Part X Other I Completine 25 1. (a) Desc. (1) Federal income tax	Liabilities. ete if the organization and	swered "Yes" to Form	990, Part IV,	line 11e or 11f See Fo	
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(3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must Part X Other I Comple line 25 1. (a) Desc (1) Federal income tax (2) (3)	Liabilities. ete if the organization and	swered "Yes" to Form		line 11e or 11f See Fo	
(3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must Part X Other I Complete line 25 1. (a) Desc. (1) Federal income tax (2) (3) (4)	Liabilities. ete if the organization and	swered "Yes" to Form		line 11e or 11f See Fo	
(3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must Part X Other I Comple line 25 1. (a) Desc (1) Federal income tax (2) (3) (4) (5)	Liabilities. ete if the organization and	swered "Yes" to Form		line 11e or 11f See Fo	
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(3) (4) (5) (6) (7) (8) (9) Fotal. (Column (b) must Part X Other I Comple line 25 1. (a) Desc (1) Federal income tax (2) (3) (4) (5) (6)	Liabilities. ete if the organization and	swered "Yes" to Form		line 11e or 11f See Fo	
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organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form	990) 2014	Friends of Shai	nghai American S	chool Foundation	<u>n</u>	_	52-1957233	Page 5
Part XIII	Suppl	emental Inforn						
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SCHEDULE'O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

Open to Public

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

Inspection Employer identification number

Friends of Shanghai American School Foundation	52-1957233			
Form 990, Part VI, Section B, Line 11B Copies of the Form 990 are sent to all board members				
for rtheir review before the Form 990 is submitted to the IRS				
Form 990, Part VI, Section B, Line 12C. The Corporate Conflict of Interest Policy is reviewed				
annually by all board members				
Form 990, Part VI, Section C, Line 19 Corporate Documents and Tax Forms are kept at 15 Rosz	el			
Road, Princeton, nJ 08540 and are available to the public upon request				
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