

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



foundations)

DLN: 93493203009305

OMB No 1545-0047

Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

▶ 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

Open to Public

			I						Inspection
A F	or the 2	2014 cale	endar year, or tax year beginning	, 01-01-2014 , and ending 1	2-31-2014	4		_	
	neck if ap		C Name of organization HOLT INTERNATIONAL FOUNDATION	OF CHINA			D Empl	oyer ider	ntification number
✓ Ad	ldress ch	ange					93-0	476873	3
Na	ame char	nge	Doing business as						
☐ In	ıtıal retur	rn			N		E Teleph	one num	ber
	nal turn/term	nınated	Number and street (or P O box if m 250 COUNTRY CLUB ROAD	all is not delivered to street address) Room/su	ite	(541)687-2	202
	nended r		City or town, state or province, cour	atry and 7ID or foreign postal code			(311	,007 2	202
		pending	EUGENE, OR 97401	icry, and zir or roleigh postar code			G Gross	receipts \$	3,573,128
, AF	plication	Pending	F N						
			F Name and address of prin PHILLIP LITTLETON	cipal officer			s this a group ubordinates?		for
			250 COUNTRY CLUB ROAD				aboramates.		1 1631 110
			EUGENE,OR 97401				re all subord	ınates	Γ Y es Γ N o
	ax-exem	npt status	✓ 501(c)(3)	nsert no)	527		ncluded? f "No." attacl	h a list	(see instructions)
	/ obsit o	· • • • • • • • • • • • • • • • • • • •	W HOLTINTERNATIONAL ORG						
						H(c) (Group exemp	tion nur	nber 📭
			Corporation Trust Associatio	n		L Year	of formation 1	956 M	State of legal domicile OR
Pa	art I	Sum	mary						
k Governance		THEIR F. POTENT CHILDRI	FAMILIES FOR CHILDREN WH AMILY, PROVIDE SERVICES T IAL, LEAD THE GLOBAL COMIEN IS box f the organization dis	O ENSURE THAT CHILDREN	N WILL GI	ROW AND	D DEVELOP E WORLD'S	TO THE MOST V	IR FULLEST 'ULNERABLE
Activities &		CHECK III	is box 🗐 if the organization dis	scontinued its operations of d	isposeu c	n more th	all 25 70 OF IC	s net as	sets
Ě	3 1	Number	of voting members of the govern	ng body (Part VI, line 1a) .				3	5
) S	4 1	Number	of independent voting members o	of the governing body (Part VI	(, lıne 1b)			4	3
q.	5 T	Total nur	mber of individuals employed in o	calendar year 2014 (Part V , I	ine 2a) .			5	0
			mber of volunteers (estimate if n	• •				6	1,520
			related business revenue from P					7a	0
	B N	vet unre	lated business taxable income fi	om Form 990-1, line 34 .			Prior Year	7b	Current Year
	8	Contril	butions and grants (Part VIII, lii	ne 1 h)			3,034	545	3,573,061
₫	9		m service revenue (Part VIII, III				3,001	0	0
Revenue	10		ment income (Part VIII, column					284	67
ď	11	Other	revenue (Part VIII, column (A),	lines 5, 6d, 8c, 9c, 10c, and	11e)			0	0
	12		evenue—add lines 8 through 11			e	3,034	920	2 572 120
	13		and similar amounts paid (Part				2,108		3,573,128 2,423,859
	14		ts paid to or for members (Part I				2,100	0	2,123,039
	15		es, other compensation, employe				275	,453	418,180
8		5-10)					3/3		
Expenses	16a		sional fundraising fees (Part IX,			·		0	0
핖	b	Total fur	ndraising expenses (Part IX, column (D)	, line 25) ► <u>'</u>					
	17		expenses (Part IX, column (A), l					,684	642,474
	18		expenses Add lines 13-17 (mus				3,040		3,484,513
	19	Reveni	ue less expenses Subtract line	18 from line 12				,445	88,615
Net Assets or Fund Balances						Begir	nning of Curre Year	ent	End of Year
See See	20	Totala	assets (Part X, line 16)				17	,366	108,612
RA RE	21		iabilities (Part X, line 26)					294	2,925
			sets or fund balances Subtract	line 21 from line 20			17	,072	105,687
	rt II		ature Block						
my k	cnowled	ige and b	perjury, I declare that I have exa pelief, it is true, correct, and com nowledge						
		****					2015-07-17		
Sig		Signa	ture of officer				Date		
Her	'e		IP LITTLETON PRESIDENT or print name and title						
		<u> </u>	or print name and title rint/Type preparer's name	Preparer's signature	Ιn	ate	Check If	PTIN	
Pai	Ч		/ENDY CAMPOS	WENDY CAMPOS			self-employed	P00446	
ı al	ч	l F	ırm's name 🕨 MOSS ADAMS LLP				Firm's EIN 🕨 🤉		

Firm's address ► 975 OAK STREET SUITE 500

EUGENE, OR 97401

May the IRS discuss this return with the preparer shown above? (see instructions) \checkmark Yes \ulcorner No

Preparer

Use Only

Phone no (541) 686-1040

Par		Service Accomplishments a response or note to any line in the	nis Part III	<u> </u>
1	Briefly describe the organization's n	nission		
WHII CHII TO E	T INTERNATIONAL IS A CHRISTIA LE ALWAYS UPHOLDING THE HIGH DREN WHO ARE ORPHANED, ABAN NSURE THAT CHILDREN WILL GRO OCATING ON BEHALF OF THE WOR	EST ETHICAL STANDARDS, WE - NDONED OR AT SERIOUS RISK ON W AND DEVELOP TO THEIR FULL	FIND AND SUPPORT PERMANEN F SEPARATION FROM THEIR FAM .EST POTENTIAL- LEAD THE GLO	T, LOVING FAMILIES FO ILLY- PROVIDE SERVICE:
2	Did the organization undertake any sthe prior Form 990 or 990-EZ? .		the year which were not listed on	
	If "Yes," describe these new service	es on Schedule O		
3	Did the organization cease conduction services?		iow it conducts, any program · · · · · · · · · · · ·	
4	Describe the organization's program expenses Section 501(c)(3) and 50 the total expenses, and revenue, if a	service accomplishments for each O1(c)(4) organizations are required	to report the amount of grants and a	
	(Code) (Expenses	\$ 1,060,654 including grants	s of \$) (Revenue \$)
-	INTERNATIONAL PROGRAM SERVICES CON SOCIAL WORK TRAINING FOR INDIGENOUS		HOLT IN CHINA FOR PERMANENCY PLANNII OR DISPLACED FAMILIES AND INDIVIDUALS,	AND MANAGEMENT ASSISTANCE
4b	(Code) (Expenses	\$ 2,423,859 including grants	s of \$ 2,423,859) (Revenue \$)
		ISISTS OF SUPPORT TO VARIOUS CHINESE (IES AND AGREEMENTS FOR SUPPORT OF TI		ER PROGRAMS THIS SUPPORT IS
4c	(Code) (Expenses	\$ including grants	of \$) (Revenue \$)
	-			
4d	Other program services (Describe (Expenses \$	<pre>in Schedule O) including grants of \$</pre>) (Revenue \$)
4e	Total program service expenses	3,484,513		

art IV	Checklist of	Required	Schedules

			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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
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		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 😼	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	9		No
LO	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		No
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII"	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
.2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
.3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
.4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
.5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
.6	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		No
. 7	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		No
8.	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
.9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
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		No
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2^7 If "Yes," complete Schedule I, Parts I and III	22		No
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? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part		1	
	<i>IV</i>	28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

	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 1a	o 🗀	163	140
		0		1
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
	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)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ►CH See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
5-2	(FBAR) Was the organization a party to a prohibited tay shelter transaction at any time during the tay year?	5a		No
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5b		10
С	In res, to fine 3a of 5D, the the organization line rottin 0000-17	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gift were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
d	file Form 8282?	7c		No
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 a required?	s 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 sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a	_		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders	4		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	_		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
	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			
	Enter the amount of reserves on hand	_		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		1

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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 a	line in this Part VI	_	_	_	_	_	_	_	_	_	

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νo
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		Νo
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Νo
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo
6	Did the organization have members or stockholders?	6		Νo
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		No
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		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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		Νo
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		•
	Did the organization have local chapters, branches, or affiliates?	10a 10b		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10b		No
b 11a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	10b	Yes	No
b 11a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	10b	Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10b 11a 12a	Yes Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b	Yes Yes Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10b 11a 12a 12b	Yes Yes Yes Yes	No
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10b 11a 12a 12b 12c 13 14 15a	Yes Yes Yes Yes Yes Yes	No No No No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No No No No

- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website V Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ►KEVIN SWEENEY

250 COUNTRY ROAD EUGENE, OR 97401 (541) 687-2202

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

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

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not box h ar	chec k, unle n offic rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) JIAN CHEN	1 00	х						0	78,145	14,278
DIRECTOR (2) JULIA BANTA DIRECTOR	1 00	х						0	0	0
(3) PHILLIP LITTLETON PRESIDENT & CEO	1 00	х		х				0	146,923	33,808
(4) GERALD MITMAN CHAIRMAN	1 00	х		х				0	0	0
(5) TARA LEAMAN VICE-CHAIRMAN	1 00	х		х				0	0	0

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

(A) Name and Title	(B) A verage hours per week (list any hours	more t perso	han d n is l	ne l both	box, an o r/tru	officer stee)	5	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	F			
c	Total from continuation sheets to Part VII, Section A	► [
d	Total (add lines 1b and 1c)	٠[0	225,068	48,086

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►0

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee			
	on line 1a? If "Yes," complete Schedule J for such individual	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such</i>			
	ındıvıdual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person			No

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
	·	'

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►0

Part V	•	· · · · · · · · · · · · · · · · · · ·	Povonuo					Page 9
Part V			e O contains a respon:	se or note to any lu	ne in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s ts	1a	Federated campa	igns 1a					
s, Grants Amounts	ь	Membership dues	1b					
Gr. mo	С	Fundraising event	ts 1c					
Contributions, Gifts, Grants and Other Similar Amounts	d	Related organizat	ions 1d	3,573,061				
ons, Gifts Similar	e	Government grants (c						
ms, Sin								
tributio Other !	f	All other contributions similar amounts not ii						
ijb Off	g	Noncash contributions 1a-1f \$	s included in lines	į	İ			
Cont and	h	Total. Add lines 1	a-1f		3,573,061			
C	••	Totali / (dd iii e s		▶	. ,			
шe	2a		_	Business Code				
Program Service Revenue	Za b	_						
₽. 12	C	_						
Ņ,	d							
Se Se	e							
เลก	f	All other program	service revenue					
rogi	'							
	g		2a-2f					
	3		ne (ıncludıng dıvıdend amounts)		67			67
	4		ent of tax-exempt bond p	- t				
	5	Royalties		▶ [
			(ı) Real	(II) Personal				
	6a	Gross rents						
	Ь	Less rental expenses						
	С	Rental income or (loss)						
	d	Net rental income	e or (loss)					
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of						
		assets other than inventory						
	ь	Less cost or other basis and						
	c	sales expenses Gain or (loss)						
	d	Net gain or (loss)	<u></u>					
	8a	Gross income from	_	· · · · · · · · · · · · · · · · · · ·				
ne		events (not includ						
Other Revenue		\$ of contributions re	_ eported on line 1c)					
Вè		See Part IV, line	18					
<u>.</u>			a . -					
Ċth.	b c	Less direct expe	nses b [ss) from fundraising e	vents -				
•			m gaming activities	vents p				
		See Part IV, line						
			a					
		Less direct expe						
		Gross sales of inv	ss) from gaming activ	ities				
	100	returns and allowa						
			a					
	b	Less cost of good						
	С	Miscellaneous R	ss) from sales of inve	Business Code				
	11a	miscenaneous R	Cvenue	Duamess Code				
	b							
	c							
	d	All other revenue						
	e		.1a-11d	🕨				
	12	Total revenue. Se	e Instructions	<u>.</u>				
	**	rocar revenue. Se	:CINSUMCHOUS	· · · •	3,573,128	0	0	67

	Statement of Functional Expenses on 501(c)(3) and 501(c)(4) organizations must complete all columns. All	other organizati	ions must somn	lata calumn (A)	
secui	Check if Schedule O contains a response or note to any line in this				
	ot include amounts reported on lines 6b, b, 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 and domestic governments See Part IV, line 21			3	
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	2,423,859	2,423,859		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	411,875	411,875		
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	6,305	6,305		
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
ь	Legal	196,271	196,271		
С	Accounting	2,740	2,740		
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	163,976	163,976		
12	Advertising and promotion				_
13	Office expenses	32,949	32,949		_
14	Information technology				
15	Royalties				
16	Occupancy	62,105	62,105		
17	Travel	110,203	110,203		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	9,436	9,436		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,409	2,409		
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	STAFF DEVELOPMENT	45,425	45,425		
b	BANK FEES	11,953	11,953		
c	GENERAL EXPENSES	5,007	5,007		
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	3,484,513	3,484,513	0	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		3,381	1	4,082
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and former officers, direct employees, and highest compensated employees. Complete Part II	ors, trustees, key		5	
ste	6	Loans and other receivables from other disqualified persons (as def $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contrand sponsoring organizations of section $501(c)(9)$ voluntary employorganizations (see instructions) Complete Part II of Schedule L	ibuting employers		6	
Assets	7	Notes and loans receivable, net			7	
ď	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		11,217	9	102,158
	10a	Land, buildings, and equipment cost or other basis Complete	10a 8,467	·	9	102,100
	ь	F	10b 6,095	2,768	10c	2,372
	11	Investments—publicly traded securities		_,	11	_,
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		17.366		108,612
	17	Accounts payable and accrued expenses		294	17	2,925
	18	Grants payable		251	18	2,020
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule			21	
lities	22	Loans and other payables to current and former officers, directors, t key employees, highest compensated employees, and disqualified			21	
Liabilit		persons Complete Part II of Schedule L			22	
≟	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related the and other liabilities not included on lines 17-24) Complete Part X (nird parties,		25	
		D	• •	204	25	2.025
	26	Total liabilities. Add lines 17 through 25		294	26	2,925
S)		Organizations that follow SFAS 117 (ASC 958), check here ► 🔽 an lines 27 through 29, and lines 33 and 34.	d complete			
2	27	Unrestricted net assets		17,072	27	105,687
<u>ಟ್</u>	28	Temporarily restricted net assets		·	28	r
<u>_</u>	29	Permanently restricted net assets			29	
r Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here becomplete lines 30 through 34.				
S 0.	30	Capital stock or trust principal, or current funds			30	
ψ Q	31	Paid-in or capital surplus, or land, building or equipment fund			31	
Assets	32	Retained earnings, endowment, accumulated income, or other funds			32	
Š	33	Total net assets or fund balances		17,072	33	105,687
Ž	34	Total liabilities and net assets/fund balances		17.366		108.612

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,!	573,128
2	Total expenses (must equal Part IX, column (A), line 25)	2			
3	Revenue less expenses Subtract line 2 from line 1	3			88,615
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			17,072
5	Net unrealized gains (losses) on investments	5			17,072
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			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			105,687
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revia separate basis, consolidated basis, or both	ewed o	n		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate			
	☐ Separate basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign audit, review, or compilation of its financial statements and selection of an independent accountant?	tht of th	ne 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t Single Audit Act and OMB Circular A-133?	he	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits explain why in Schedule O and describe any steps taken to undergo such audits		3b		

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493203009305

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

2014

Open to Public Inspection

HOLT I	NTERN	IATIONAL FOUNDATION OF	CHINA								
							93-0476873				
	Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. ne organization is not a private foundation because it is (For lines 1 through 11, check only one box.)										
The o	rganı	·		•		•	•				
1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).									
2	Γ	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)									
3	Γ	A hospital or a coope	erative hospital se	ervice organization de	scribed in sect	ion 170(b)(1)((A)(iii).				
4	Γ	A medical research o	organization opera	ated in conjunction wit	h a hospital de	scribed in sec	tion 170(b)(1)(A)(iii)	. Enter the			
		hospital's name, city									
5	Г	An organization opera	ated for the benef	it of a college or unive	ersity owned or	operated by a	governmental unit de	escribed in			
		section 170(b)(1)(A)(iv). (Complete Part II)									
6	Γ	A federal, state, or lo	cal government o	or governmental unit d	escribed in sec	tion 170(b)(1)(A)(v).				
7	Γ	An organization that	normally receives	s a substantial part of	its support fro	m a governme	ntal unit or from the g	eneral public			
	_	described in section :									
8	<u> </u>	A community trust de	escribed in sectio	n 170(b)(1)(A)(vi)(Complete Part	II)					
9	Г	An organization that	normally receives	s (1) more than 331/3	3% of its suppo	rt from contrib	utions, membership f	ees, and gross			
		receipts from activiti	es related to its e	exempt functions—sub	oject to certain	exceptions, a	nd (2) no more than 3	31/3% of			
		ıts support from gros	s investment inco	ome and unrelated bus	sıness taxable	ıncome (less s	ection 511 tax) from	businesses			
		acquired by the organ	nızatıon after June	e 30, 1975 See secti	on 509(a)(2).	Complete Part	tIII)				
10	Γ	An organization orgai	nızed and operate	ed exclusively to test	for public safet	y See section	509(a)(4).				
11	✓	An organization orgai	nized and operate	d exclusively for the	benefit of, to pe	rform the func	tions of, or to carry o	ut the purposes of			
				zations described in s							
	_			describes the type of							
а	 ~			rated, supervised, or o regularly appoint or							
				IV, Sections A and B.		or the directo	is of trustees of the s	supporting			
ь	Г			pervised or controlled		with its suppor	ted organization(s), b	y having control or			
	·			ation vested in the sa							
	_	must complete Part 1									
С	ļ			pporting organization				rated with, its			
d	$\overline{}$			tions) You must com A supporting organiza				anization(c) that is			
u	,			zation generally must							
		, =	_	Part IV, Sections A	•	•					
e	Γ			eived a written determ			a Type I, Type II, Ty	pe III functionally			
_				ly integrated supporti				_			
T				ations				_1			
g		Provide the following	information abou	t the supported organ	ization(s)						
	(:\N -		(III) ETNI	(:::) T	(i) T		() A	(:\			
	` '	ime of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the or listed in your	_	(v) A mount of monetary support	(vi) A mount of other support (see			
	`	organization		(described on lines	docum		(see instructions)	instructions)			
				1- 9 above or IRC			(55551 451.55)	,			
				section (see							
instructions))											
					Yes	No					
		TERNATIONAL	237257390	7	Yes		0	0			
CHILE	REN'S	SERVICES INC									
 Total	1						0				

Sch	edule A (Form 990 or 990-EZ) 2014						Page 2
Pa	Support Schedule for (Complete only if you c	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	ipiete Part I	11.)
	endar year (or fiscal year beginning	(-) 2010	(1) 2011	(-) 2012	(4) 2012	(-) 201	(6) T. t. l
	in) 🟲	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
,	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public support. Subtract line 5 from line 4						
S	ection B. Total Support	1	l			1	
	endar year (or fiscal year beginning	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	in) ►	(a) 2010	(0) 2011	(6) 2012	(d) 2013	(e) 2014	(I) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI)						
11	Total support Add lines 7 through 10						
12	Gross receipts from related activities	es, etc (see inst	ructions)		•	12	<u> </u>
13	First five years. If the Form 990 is f	or the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	section 501	(c)(3)
	organization, check this box and sto					<u> </u>	<u> </u>
	ection C. Computation of Pub			4.4 1 (5)		 	
14	Public support percentage for 2014	· ·		11, column (f))		14	
15	Public support percentage for 2013	•	•			15	
16a	33 1/3% support test—2014. If the				line 14 is 33 1/3%	∕o or more, ch	
h	and stop here. The organization qua 33 1/3% support test—2013. If the				and line 15 is 3	3 1/3% or mo	re check this
	box and stop here. The organization				, and fine 13 is 3.	3 1/3/0 01 1110	re, check this ▶□
17a	10%-facts-and-circumstances test-	-2014. If the org	anızatıon dıd not	check a box on li			,
	is 10% or more, and if the organizat						
	in Part VI how the organization mee	ts the "facts-and	d-circumstances'	test The organi	zation qualifies as	s a publicly s	
h	organization 10%-facts-and-circumstances test-	-2013. If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and b	▶ ┌
	15 is 10% or more, and if the organ						
	Explain in Part VI how the organizat						ublicly
	supported organization				471		▶ ┌
18	Private foundation. If the organization instructions	on ala not check	cabox on line 13	, 16a, 16b, 1/a,	or 1 / b, check this	s pox and see	• ▶□

Schedule A (Form 990 or 990-EZ) 2014 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 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 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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 c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) 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 Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2014 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18

19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Castian	_	AII	Supporting	0	1:
Section	Α.	AII	Supporting	Organiza	TIONS

Se	ection A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents?		163	110
_	If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	Yes	
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) .	2		No
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		No
t	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		Νo
t	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	: Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4 c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		No
Ŀ	• Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		No
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		No
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		No
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		No
Ŀ	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		No
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		No
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		No
Ŀ	DID DID THE ORGANIZATION HAVE ANY EXCESS BUSINESS HOLDINGS IN THE TAX YEAR? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
L1	Has the organization accepted a gift or contribution from any of the following persons?	TOD		
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
_	the governing body of a supported organization?	11a		No
Ŀ	A family member of a person described in (a) above?	11b		No
	: A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		Νο

Par	t IV Supporting Organizations (continued)			
Se	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	Yes	
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		No
Se	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Se	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
	ation E. Tuna III Functionally Integrated Comparting Organizations			
	The organization is the parent of each of its supported organizations. Complete line 3 below			
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
Ь	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions	Current Year		
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 Amounts paid to perform activity that directly furthexcess of income from activity	ers exempt purposes of supp	ported organizations, in	
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
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			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010			
b From 2011			
c From 2012			
d From 2013			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493203009305

OMB No 1545-0047

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Open to Public **Inspection**

Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization **Employer identification number** HOLT INTERNATIONAL FOUNDATION OF CHINA 93-0476873 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Γ Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🟲 Number of states where property subject to conservation easement is located -Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Revenue included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

201	Gift Organizations Maintaining Co	liections of Art	<u>, His</u>	tor	cai	reasur	es, or Oti	ner :	Similar Ass	sets (c	<u>continuea)</u>
3	Using the organization's acquisition, accessicollection items (check all that apply)	on, and other recor	ds, ch	neck 			_		gnıfıcant use	of its	
а	Public exhibition		d	Г	Loa	n or excha	ange progra	ms			
b	Scholarly research		e	Γ	Oth	er					
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	llections and expla	ın hov	w the	y furt	ner the or	ganızatıon's	exen	npt purpose ır	ו	
5	During the year, did the organization solicit o assets to be sold to raise funds rather than t	o be maintained as	part o	of the	e orga	nızatıon's	collection?		Г	_ Yes	┌ No
Pa	rt IV Escrow and Custodial Arrange Part IV, line 9, or reported an am				_		answered	"Yes	" to Form 99	90,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	dıary	ford	ontril	outions or	other asset	s not		_ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	ving	table						
									Am	ount	
С	Beginning balance						1	с			
d	Additions during the year						1	d			
е	Distributions during the year						1	e			
f	Ending balance						1	f			
2a	Did the organization include an amount on Fo	rm 990, Part X, lin	e 21,	for e	scrow	orcusto	dıal account	lıabıl	lity? [_ Yes	┌ No
ь	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anat	on ha	s been pr	ovided in Pa	rt XI	II		
Pa	rt V Endowment Funds. Complete										
1.	Paginning of year halance	(a)Current year	(b))Prior	year	b (c)Tw	o years back	(d)Thr	ee years back	(e)Four	years back
1a	Beginning of year balance					+	+				
b	Contributions					_	+				
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
_	and programs										
г -	Administrative expenses					+	-				
g	End of year balance										
2	Provide the estimated percentage of the curr	ent year end baland	e (lin	e 1g	, colu	mn (a)) he	eld as				
a	Board designated or quasi-endowment ►										
Ь	Permanent endowment ►										
C	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c show	ıld equal 100%									
За	Are there endowment funds not in the posses organization by	-			are he	eld and ad	mınıstered 1	or the		Yes	No
	(i) unrelated organizations				•				3a(i		
b	(ii) related organizations If "Yes" to 3a(ii), are the related organization	ns listed as require	d on S	che	dule R				3b		
4	Describe in Part XIII the intended uses of th									TV	
Pa	rt VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line 1		ne o	rgai	lizatio	on answe	ereu res	to Fo	oriii 990, Pai	רנ זע, ו	ine
	Description of property					t or other vestment)	(b)Cost or ot basis (othe		(c) Accumulated depreciation	(d)	Book value
1a	Land										
Ь	Buildings										
С	Leasehold improvements										
d	Equipment						8,4	167	6,0	95	2,372
_е	Other	<u></u>	•								
	al. Add lines 1a through 1e <i>(Column (d) must e</i>			mn (B), lın	e 10(c).)		•	▶		2,372
									Schedule D	(Form	990) 2014

Part VII Investments—Other Securities. Co	mplete if the organizatio	n answered 'Yes' to Form 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•	
Part VIII Investments—Program Related. C	Complete if the organizati	on answered 'Yes' to Form 990, Part IV, line 11c
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) Book value	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	F	
		90, Part IV, line 11d See Form 990, Part X, line 15
(a) Desc	ription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15)	
Part X Other Liabilities. Complete if the org		-
Form 990, Part X, line 25.		, , ,
1 (a) Description of liability	(b) Book value	
Federal income taxes		
		7
		-
		-
		-
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	F	
2 Linkship for an arrange to a position of the Doub VIII manage	do the tayt of the feet - t-	************************************

ren		evenue per Audited Financial State vered 'Yes' to Form 990, Part IV, line 12		рет ке	turn Complete II
1		r support per audited financial statements		1	
2	A mounts included on line 1 bu	t not on Form 990, Part VIII, line 12			
а	Net unrealized gains (losses)	on investments	2a		
b	Donated services and use of f	acilities	2b	1	
С	Recoveries of prior year grants	5	2c	7	
d	Other (Describe in Part XIII)		2d	1	
e	Add lines 2a through 2d .			2e	
3	Subtract line 2e from line 1 .			3	
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1			
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)		4b	7	
c	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and	i 4c. (This must equal Form 990, Part I, line :	12)	5	
Part	XIII Reconciliation of E	xpenses per Audited Financial Stat	tements With Expense	s per l	Return. Complete
		swered 'Yes' to Form 990, Part IV, line		Τ.	
1		raudited financial statements		1	
2		t not on Form 990, Part IX, line 25	11		
a		acilities	2a	_	
b			2b	_	
C			2c	_	
d	·		2d	4	
е	Add lines 2a through 2d			2e	_
3				3	_
4		0, Part IX, line 25, but not on line 1:	1 . 1		
a	·	uded on Form 990, Part VIII, line 7b	4a	_	
b	·		4b		
С				4c	_
5		nd 4c. (This must equal Form 990, Part I, line	218)	5	_
	XIII Supplemental Inf				_
Part		Part II, lines 3, 5, and 9, Part III, lines 1a a lines 2d and 4b, and Part XII, lines 2d and 4			e any additional
	Return Reference	Explanation			
PART	X, LINE 2	HICS IS A NOT-FOR-PROFIT ORGANIZA INTERNAL REVENUE CODE AND IS EXENBEEN CLASSIFIED AS AN ENTITY THAT MEANING OF THE INTERNAL REVENUE (MADE FOR INCOME TAXES IN THE FINA STANDARDS CODIFICATION (ASC) 740 POSITIONS CONSISTENT WITH THE AC ASC 450 HICS DID NOT HAVE ANY UNCTHESE FINANCIAL STATMENTS	MPT FROM FEDERAL INCOMIS NOT A PRIVATE FOUND CODE ACCORDINGLY, NO NCIAL STATEMETNS PURS HICS GENERALLY EVALUACOUNTING AND DISCLOSI	1E TAXE ATION PROVIS UANT T ATES AI JRE REG	S HICS HAS ALSO WITHIN THE SION HAS BEEN O ACCOUNTING NY UNCERTAIN TAX

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS

HOLT INTERNATIONAL FOUNDATION OF CHINA

As Filed Data -

DLN: 93493203009305

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

2014

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990.

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

Open to Public Inspection

Employer identification number

93-0476873

					33 0170073			
Pa	General Information "Yes" to Form 990, Pa			he United States. C	omplete if the organiza	ation answered		
1	For grantmakers. Does the of and other assistance, the grants or a	the selection criteria	ি Yes					
2	2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants assistance outside the United States.							
3	Activites per Region (The follow	ung Part I, line 3	3 table can be d	uplicated if additional sp	ace is needed)			
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe , specific type of service(s) in region	(f) Total expenditures for and investments in region		
(1) EAST ASIA & THE PACIFIC	2	31	PROGRAM SERVICES	VARIOUS CHILDREN SERVICES	1,060,654		
(2) EAST ASIA & THE PACIFIC	2	31	GRANTMAKING	VARIOUS CHILDREN SERVICES	2,423,859		
(3)							
(4)							
(5)							
	a Sub-total	4	6 2			3,484,513		
	b Total from continuation sheets to Part I	0	0			C		
	c Totals (add lines 3a and 3b)	4	62			3,484,513		
For I	Paperwork Reduction Act Notice, see	the Instructions	for Form 990.	Cat	No 50082W Schedu	le F (Form 990) 2014		

Enter total number of other organizations or entities

	•
Part II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990,
	Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1) See Add'l Data								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
			ted above that are r e or counsel has pro					134

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be	duplicated if addit	ional space is ne	eeded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
	1			l .			

Part IV Foreign Forms

1	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Γ	Yes	<u> </u>	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Г	Yes	<u>\</u>	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	<u> </u>	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Г	Yes	<u>\</u>	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Г	Yes	▼	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Г	Yes	<u> </u>	No

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 Page **5**

Part V Supplemental Information

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2	BUDGETS PREPARED BY GRANT RECIPIENTS ARE REVIEWED FOR ASSURANCE THAT PROJECTED EXPENSES AR E REASONABLE AND FOCUSED ON ACHIEVING THE GRANT OBJECTIVES AND ORGANIZATION'S MISSION REG ULAR FINANCIAL REPORTS FROM THE GRANT RECIPIENTS ARE REVIEWED FOR ASSURANCE THAT ACTUAL EX PENDITURES ARE IN LINE WITH THE BUDGET AND FOCUSED ON REACHING GRANT OBJECTIVES IN ADDITION, STAFF PERSONALLY VISIT GRANT SITES AND REVIEW FINANCIAL SYSTEMS

Additional Data

Software ID: Software Version:

EIN: 93-0476873

Name: HOLT INTERNATIONAL FOUNDATION OF CHINA

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)
		1	EDUCATIONAL SUPPORT	32,369	WIRE TRANSFER			
		EAST ASIA & THE PACIFIC	INTERNATIONAL ADOPTION	5,706				
		EAST ASIA & THE PACIFIC	MEDICAL	63,177	WIRE TRANSFER			
		EAST ASIA & THE PACIFIC	FOSTER CARE	39,825	WIRE TRANSFER			

Form 990 Schedule F Part II - Grants or Entities Outside The United States									
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)	
		I	EDUCATIONAL SUPPORT	38,165	WIRE TRANSFER				
			INTERNATIONAL ADOPTION	16,930	WIRE TRANSFER				
			INTERNATIONAL ADOPTION	28,475	WIRE TRANSFER				
			INTERNATIONAL ADOPTION	22,953	WIRE TRANSFER				

Form 990 Schedule F Part II - Grants or Entities Outside The United States									
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV , appraisal, other)	
			INTERNATIONAL ADOPTION	17,258	WIRE TRANSFER				
			INTERNATIONAL ADOPTION	5,870					
			INTERNATIONAL ADOPTION	22,843	WIRE TRANSFER				
		EAST ASIA & THE PACIFIC	INTERNATIONAL ADOPTION	5,719	WIRE TRANSFER				

Form 990 Schedule F Part II - Grants or Entities Outside The United States									
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)	
			INTERNATIONAL ADOPTION	5,870					
		EAST ASIA & THE PACIFIC	FOSTER CARE	27,688	WIRE TRANSFER				
		EAST ASIA & THE PACIFIC	FOSTER CARE	27,753	WIRE TRANSFER				
			EDUCATIONAL SUPPORT	329,258	WIRE TRANSFER				

Form 990 Schedule F Part II - Grants or Entities Outside The United States									
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)	
			INTERNATIONAL ADOPTION	63,168	WIRE TRANSFER				
			INTERNATIONAL ADOPTION	162,596					
			TRANSITIONAL HOUSING	9,441	WIRE TRANSFER				
			INTERNATIONAL ADOPTION	5,795					

, Form 990 Scheav	Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)			
			INTERNATIONAL ADOPTION	5,610							
			INTERNATIONAL ADOPTION	28,337	WIRE TRANSFER						
			INTERNATIONAL ADOPTION	17,210	WIRE TRANSFER						
			INTERNATIONAL ADOPTION	5,642	'	(

Form 990 Scheau	Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)			
			INTERNATIONAL ADOPTION	199,712	WIRE TRANSFER						
			INTERNATIONAL ADOPTION	11,476							
			INTERNATIONAL ADOPTION	6,242	WIRE TRANSFER						
		EAST ASIA & THE PACIFIC	INTERNATIONAL ADOPTION	223,409	WIRE TRANSFER						

, rorm 990 Scheau	ie F Part II	- Grants or Entitle	as outside the or	ited States		_	_	
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		EAST ASIA & THE PACIFIC	FOSTER CARE	17,693	WIRE TRANSFER			
		EAST ASIA & THE PACIFIC	FOSTER CARE	32,709	WIRE TRANSFER			
		EAST ASIA & THE PACIFIC	CHILD CARE	5,785	WIRE TRANSFER			
		EAST ASIA & THE PACIFIC	GROUP HOME	24,538	WIRE TRANSFER			

Form 990 Schedu	Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)			
			EDUCATIONAL SUPPORT	31,369	WIRE TRANSFER						
			INTERNATIONAL ADOPTION	5,733							
	1	EAST ASIA & THE PACIFIC	FOSTER CARE	7,800	WIRE TRANSFER						
		EAST ASIA & THE PACIFIC	GROUP HOME	18,202	WIRE TRANSFER						

Form 990 Schedı	Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)			
			INTERNATIONAL ADOPTION	33,877	WIRE TRANSFER						
		EAST ASIA & THE PACIFIC	FOSTER CARE	21,404	WIRE TRANSFER						
			INTERNATIONAL ADOPTION	79,733	WIRE TRANSFER						
			INTERNATIONAL ADOPTION	5,630	WIRE TRANSFER						

Form 990 Schedı	Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)			
		EAST ASIA & THE PACIFIC	FOSTER CARE	21,889	WIRE TRANSFER						
		EAST ASIA & THE PACIFIC	FOSTER CARE	16,753	WIRE TRANSFER						
			INTERNATIONAL ADOPTION	17,099	WIRE TRANSFER						
			INTERNATIONAL ADOPTION	5,850	WIRE TRANSFER						

Form 990 Scheau	Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV , appraisal, other)			
			INTERNATIONAL ADOPTION	5,642							
			INTERNATIONAL ADOPTION	11,302	WIRE TRANSFER						
			INTERNATIONAL ADOPTION	5,733	WIRE TRANSFER						
		EAST ASIA & THE PACIFIC	INTERNATIONAL ADOPTION	5,706	WIRE TRANSFER						

Form 990 Schedu	le F Part II	- Grants or Entiti	es Outside The Uni	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraısal, other)
			INTERNATIONAL ADOPTION	11,374	WIRE TRANSFER			
			EDUCATIONAL SUPPORT	81,398	WIRE TRANSFER			
			INTERNATIONAL ADOPTION	35,396				
			EDUCATIONAL SUPPORT	91,213	WIRE TRANSFER			

Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV , appraısal, other)		
		EAST ASIA & THE PACIFIC	INTERNATIONAL ADOPTION	5,464	WIRE TRANSFER					
		EAST ASIA & THE PACIFIC	INTERNATIONAL ADOPTION	17,127	WIRE TRANSFER					
		EAST ASIA & THE PACIFIC	INTERNATIONAL ADOPTION	16,911	WIRE TRANSFER					
		EAST ASIA & THE PACIFIC	INTERNATIONAL ADOPTION	5,716						

, Form 990 Scheav	Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)			
			INTERNATIONAL ADOPTION	5,692							
			INTERNATIONAL ADOPTION	5,642							
	1		INTERNATIONAL ADOPTION	11,383							
			INTERNATIONAL ADOPTION	11,292	'						

Form 990 Schedı	ıle F Part II	- Grants or Entiti	ies Outside The Uni	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			INTERNATIONAL ADOPTION	40,281				
			INTERNATIONAL ADOPTION	5,642				
			INTERNATIONAL ADOPTION	5,806				
			INTERNATIONAL ADOPTION	16,882	1			

Form 990 Schedı	ule F Part II	- Grants or Entiti	es Outside The Un	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV, appraisal, other)
			INTERNATIONAL ADOPTION	11,712				
			INTERNATIONAL ADOPTION	5,716				
			INTERNATIONAL ADOPTION	5,692	1			
			INTERNATIONAL ADOPTION	5,715	1			

Form 990 Schedi	Form 990 Schedule F Part II - Grants or Entities Outside The United States											
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)				
			INTERNATIONAL ADOPTION	5,692								
			INTERNATIONAL ADOPTION	5,737								
			INTERNATIONAL ADOPTION	5,692								
			INTERNATIONAL ADOPTION	5,785	'							

, Form 990 Scheav	orm 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)			
			INTERNATIONAL ADOPTION	5,650							
		EAST ASIA & THE PACIFIC	FOSTER CARE	27,598							
			INTERNATIONAL ADOPTION	5,490							
			INTERNATIONAL ADOPTION	5,795	[

Form 990 Schedi	Form 990 Schedule F Part II - Grants or Entities Outside The United States											
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(1) Method of valuation (book, FMV, appraisal, other)				
		EAST ASIA & THE PACIFIC	INTERNATIONAL ADOPTION	5,795								
		EAST ASIA & THE PACIFIC	INTERNATIONAL ADOPTION	5,785								
		EAST ASIA & THE PACIFIC	FAMILY STRENGTHENING	23,430								
		EAST ASIA & THE PACIFIC	FAMILY STRENGTHENING	25,455								

Form 990 Scheav	orm 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)			
			INTERNATIONAL ADOPTION	11,261							
			INTERNATIONAL ADOPTION	5,692							
			INTERNATIONAL ADOPTION	5,795							
			INTERNATIONAL ADOPTION	11,438	[

Form 990 Scheau	ie i Part II	- Grants or Entiti	es outside i ne un	itea States	_	_	_	_
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		EAST ASIA & THE PACIFIC	INTERNATIONAL ADOPTION	11,411				
		EAST ASIA & THE PACIFIC	INTERNATIONAL ADOPTION	5,795				
		EAST ASIA & THE PACIFIC	INTERNATIONAL ADOPTION	5,610				
		EAST ASIA & THE PACIFIC	INTERNATIONAL ADOPTION	5,795				

, Form 990 Scheav	orm 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)			
			INTERNATIONAL ADOPTION	5,692							
			INTERNATIONAL ADOPTION	5,490							
	1		INTERNATIONAL ADOPTION	5,424							
			INTERNATIONAL ADOPTION	11,252							

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493203009305

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Inspection

Internal Revenue Service Name of the organization

HOLT INTERNATIONAL FOUNDATION OF CHINA

Employer identification number

93-0476873

Pai	rt I Questions Regarding Compensation							
			Yes	No				
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items							
	First-class or charter travel Housing allowance or residence for personal use							
	Travel for companions Payments for business use of personal residence							
	Tax idemnification and gross-up payments Health or social club dues or initiation fees							
	Discretionary spending account Personal services (e g , maid, chauffeur, chef)							
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b						
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2						
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III							
	Compensation committee Written employment contract							
	☐ Independent compensation consultant ☐ Compensation survey or study							
	Form 990 of other organizations Approval by the board or compensation committee							
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization							
а	Receive a severance payment or change-of-control payment?	4a		No				
b	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?							
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No				
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III							
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.							
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of							
а	The organization?	5a		No				
ь	Any related organization?	5b		No				
	If "Yes," to line 5a or 5b, describe in Part III							
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of							
а	The organization?	6a		Νo				
b	Any related organization?	6b		Νo				
	If "Yes," to line 6a or 6b, describe in Part III							
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No				
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe							
	ın Part III	8		Νo				
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9						

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred in prior Form 990
1 PHILLIP LITTLETON, PRESIDENT & CEO	i)	0	0	0	0	0	0	0
(i	ii)	146,923	0	0	10,920	22,888	180,731	0

Schedule J (Form 990) 2014

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

T

Return Reference Explanation

Schedule J (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493203009305

OMB No 1545-0047

2014

Open to Public Inspection

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.

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

Name of the organization
HOLT INTERNATIONAL FOUNDATION OF CHINA

Employer identification number

93-0476873

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	
FORM 990, PART VI, SECTION B, LINE 12C	SENIOR STAFF ARE CHARGED WITH ENSURING COMPLIANCE WITH HOLT'S CONFLICT OF INTEREST POLICY THROUGH SUPERVISION OF STAFF AND APPROVAL OF FINANCIAL TRANSACTIONS
FORM 990, PART VI, SECTION C, LINE 19	ALL GOVERNING DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST AND THROUGH HOLT'S WEBSITE FOR SELECTED DOCUMENTS

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493203009305

2014

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990.

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

Name of the organization HOLT INTERNATIONAL FOUNDATION OF CHINA **Employer identification number**

93-0476873

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (ıf applıcable) of dısregarded entıty	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
					_

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section	ntrolled
						Yes	No
250 COUNTRY CLUB ROAD	GRANT MAKING TO SUPPORT INTERNATIONAL ADOPTION, FOSTER CARE, AND EDUCATION	OR	501(C)(3)	LINE 9			No

Part III	Identification of Related Organizations Taxable a	as a Partne	ership	Complete i	f the organiz	atıon ansv	ered "Ye	s" on Form	990, Part 1	[V, line 3	4
	because it had one or more related organizations treate	ed as a part	nership	during the	tax year.						
											$^{-}$

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h))	(i)	Ü)	(k)
Name, address, and EIN of	Primary activity	Legal	Direct	Predominant	Share of	Share of	Dispropr	rtionate	Code V-UBI	Gener	al or	Percentage
related organization		domicile	controlling	ıncome(related,	total income	lend-of-year	allocati	ions?	amount in box	mana	iging	ownership
-		(state or	entity	unrelated,		assets			20 of	partr	ner?	
		foreign		excluded from		1			Schedule K-1			
		country)		tax under		1			(Form 1065)			
				sections 512-		1						
		1 1		514)		1	L			L		
				,		1	Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)		
Name, address, and EIN of	Primary activity	Legal	Direct controlling	Type of entity	Share of total	Share of end-	Percentage	Section 512		
related organization		domicile	entity	(C corp, S	ıncome	of-year	ownership	(b)(13)	(b)(13)	
		(state or foreign		corp,		assets		controlled		
		country)		or trust)				entity?		
								Yes		

Part V Transactions With Related Organizations Complete if the organization answer	red "Yes" on Form	n 990, Part IV, line	e 34, 35b, or 36.		
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more rel	ated organizations li	sted in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1 a		No
b Gift, grant, or capital contribution to related organization(s)			1b		No
c Gift, grant, or capital contribution from related organization(s)			1c	Yes	
d Loans or loan guarantees to or for related organization(s)			1d		No
e Loans or loan guarantees by related organization(s)			1e		No
f Dividends from related organization(s)			1f		No
g Sale of assets to related organization(s)			1 g		No
h Purchase of assets from related organization(s)			1h		No
i Exchange of assets with related organization(s)			1i		No
j Lease of facilities, equipment, or other assets to related organization(s)			<u>1j</u>		No
k Lease of facilities, equipment, or other assets from related organization(s)			1k		No
I Performance of services or membership or fundraising solicitations for related organization(s)			11		No
m Performance of services or membership or fundraising solicitations by related organization(s)			1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1n		No
• Sharing of paid employees with related organization(s)			10		No
P Reimbursement paid to related organization(s) for expenses			1p		No
q Reimbursement paid by related organization(s) for expenses			1q		No
r Other transfer of cash or property to related organization(s)			1r		No
s Other transfer of cash or property from related organization(s)			1s		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete	this line, including co	overed relationships	and transaction thresholds		
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount	ınvolved	1
	1	1			

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN of entity	Primary activity	/ Legal	Predominant	Are all partners	Share of	Share of	Disproprtionate	e Code V-UBI	General or	Percentage
1	1	domicile	ıncome	section	total	end-of-year	allocations?	amount in	managing	ownership
1	1	(state or	(related,	501(c)(3)	ıncome	assets	1	box 20	partner?	, , , , , , , , , , , , , , , , , , ,
1	1	foreign	unrelated,	organizations?		1	1	of Schedule	1	, , , , , , , , , , , , , , , , , , ,
1	1	country)	excluded from	1		1	1	K-1	1	·
1	1	1 "	tax under	1		1	1	(Form 1065)	1	1
1	1	1	sections 512-	1		1	1	' ' '	1	
1	1	1	514)	$\overline{}$	\neg	,		⊣ '		+
	1	1	1 ' '	Yes No		'	Yes N	No	Yes No	7
1	<u> </u>		1	$\overline{}$	+	 				_
1			<u> </u>			'				

Schedule R (Form 990) 2014

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2014

Page **5**