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,Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047 2014

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

► Information about Form 990 and its instructions is at your irs grow/form990. Open to Public

Department of the Treasury

		enue Service	- Information about 1 offin 770 and its instructions is at WW					mapection
Α	For t	he 2014 calen	dar year, or tax year beginning $Jull$, 2014, a	and ending	Jun			2015
В	Check	ıf applicable	C Name of organization FRIENDS OF SEOUL FOREIGN S	CHOOL IN	IC	D Employ	er Identifi	cation number
	XA	ddress change	Doing business as			42-0	9824	42
	-	ame change	Number and street (or P O box if mail is not delivered to street address)	Room/suit	е	E Telepho	ne numbe	r
	H	iitial return	4053 - 240TH ST			(64)	L) 35	7-3744
	H	nal return/terminated	City or town, state or province, country, and ZIP or foreign postal code	<u> </u>			-,	<u></u>
	\mathbf{H}	mended return	CLEAR LAKE IA	50428		G Gross re	ceints S	537,266.
	Н	pplication pending	F Name and address of principal officer		a) Is this a	group return		
	⊔^	pplication pending	i i					
			<u> </u>		If 'No,' a	subordinates attach a list (s	ee instruc	tions)
<u> </u>		-exempt status	11 50 1 (c)(c) 50 1 (c) (527				
<u>J</u>		bsite: N/			<u> </u>	xemption nui		
<u>K</u>		n of organization		ear of formation	1970) Ms	tate of leg	al domicile IA
Pa		Summa	У					
- 1	1	Briefly descri	be the organization's mission or most significant activities: AS	SISTANCE	<u> </u>	SEOUL :	FORIE	GN SCHOOL
ايو								
듦								
Ę								
Activities & Governance	2	Check this bo						_
9	3		ting members of the governing body (Part VI, line 1a)				3	6
S	4		dependent voting members of the governing body (Part VI, line 1b)				5	4
ij	5		of individuals employed in calendar year 2014 (Part V, line 2a) of volunteers (estimate if necessary)				156	0
cţ	7-	Total number	d business revenue from Part VIII, column (C), line 12			0040	(7a	0.
⋖	/a	Not uprolated	business taxable income from Form 990-T, line 34		B 2 2	7016	(7b	0.
	U	i Net uniterated	business taxable income from 1 orn 330-1, line 34		 Di	rior Year	15,0	Current Year
	8	Contributions	and grants (Part VIII, line 1h)	QG	DEN	, 45, 5	25	8,795.
e	9	Drogram con	and grants (Fart VIII, line III).	==-		·, ·±J·, J	23.	0, 193.
Revenue	10	_	come (Part VIII, column (A), lines 3, 4, and 7d)			111,6	01	88,298.
Pe	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			111,0	0.	00,290.
_	12		e (Fait Viii, column (A), imes 3, 50, 50, 50, 150, and 116)			127,2		97,093.
			milar amounts paid (Part IX, column (A), lines 1-3)			228,5		144,347.
	13		to or for members (Part IX, column (A), line 4)			220,0	93.	144,347.
	14	•	-					
Ş	15		er compensation, employee benefits (Part IX, column (A), lines 5-10					
Expenses	16 a	Professional	fundraising fees (Part IX, column (A), line 11e)					
<u> </u>	ł	Total fundrais	sing expenses (Part IX, column (D), line 25) ▶	0.				
Û	17	Other expens	ses (Part IX, column (A), lines 11a-11d, 11f-24e)	 .		19,6	57.	18,584.
	18	•	es. Add lines 13-17 (must equal Part IX, column (A), line 25)			248,2		162,931.
	19		s expenses. Subtract line 18 from line 12			-121,0		-65,838.
× 8						ng of Curre		End of Year
3 5 5	20	Total assets	(Part X, line 16)			,171,3		3,110,454.
Net Assets or Fund Balances	21		s (Part X, line 26)		<u>-</u>	, , -		-, , 10 11
¥ 5	22		fund balances. Subtract line 21 from line 20			171 3	22	2 110 454
_						,171,3	33.	3,110,454.
	ırt II		re Block					
Com	er pena plete [alties of perjury, I de Declaration of prepa	clare that I have examined this return, including accompanying schedules and statements, rer (other than officer) is based on all information of which preparer has any knowledge	, and to the best	of my knowl	ledge and be	iet, it is tru	ie, correct, and
		1				V 07	1.11	116
Signature of officer Date								
Sig		ļ. *	V		DDECI	r Drivim		
He	re		L MEYER r print name and title		PRESI	LDENT		
			preparer's name Preparer's signature	Date	1	a	<u>, la</u>	PTIN
		, ,		_	Check	」"		
Pa				02/10/1	.6	self-employ	ed []	P00194748
	epa							
Us	e O	nly Firm's add				Firm's EIN		·1449513
			Mason City IA 5040			Phone no	(641) 424-5993 —
Ма	y the	IRS discuss the	is return with the preparer shown above? (see instructions)		<u>.</u>		<u> </u>	X Yes No
BA	A Fo	or Paperwork	Reduction Act Notice, see the separate instructions.	TEEA	0101 05/2	8/14		Form 990 (2014)

			FOREIGN SCHOOL INC		42-0982442	Page 2
Par		_	ice Accomplishments			
	Check if Schedule	O contains a resp	onse or note to any line in this Par	t III		📙
1	Briefly describe the organic	zation's mission:	-			
	ASSISTANCE TO SI		N SCHOOL			
	22222222					
2	Did the organization under	rtake any significa	nt program services during the yea	ar which were not listed on the p	rior	
-	ŭ .					X No
	If 'Yes,' describe these nev					<u> </u>
3			nake significant changes in how it o	conducts, any program services?	☐ Yes	X No
3	If 'Yes,' describe these cha	=		conducto, any program connects		Λ
4		_	accomplishments for each of its the	hree largest program services, a	s measured by expens	292
•	Section 501(c)(3) and 501	l(c)(4) organizatior	ns are required to report the amour	nt of grants and allocations to other	ners, the total expense	s,
	and revenue, if any, for ea	ach program service	ce reported.			
4 a	(Code:) (Exp	penses \$	144,347. including grants of	\$ 144,347.)(R	evenue \$	0.)
			ICE TO SEOUL FORIEGN)NS	
	AND SCHOLARSHIP					
					·	
					·	
						
						
					. 	-
				- 	 	
					. 	- -
4 t	(Code:) (Exp	penses \$	including grants of	f \$)(R	evenue \$)
	`	·				
				- 		
				- 		
				- 		
		- 				
				 		
						
		_ 				
			 			
						
			 _			
					-	
4 0	(Code:) (Exp	penses \$	including grants o	f \$)(R	evenue \$)
	·					
				- <i></i>		
						
						
			_ 	 		
				 		
					·	
					- 	
				·		
4	Other program services. ((Describe in Sched	dute O.)			
	(Expenses \$		including grants of \$) (Revenue \$)
4	Total program service exp		144,347.			
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Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Х 1 2 Х Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Х 3 Х 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 Х 5 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, Х 6 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' Х 8 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 9 Х Х 10 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. a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If Yes,' complete Schedule Х 11 a Х 11 b Х 11 c Х 11 d 11 e Χ e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X 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. Х 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Х 12a Х 12b Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E. 13 Х 14a Did the organization maintain an office, employees, or agents outside of the United States?....... 14a Χ 14b Х 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to Х 16 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) Х 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 18 Х 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' Х 19 Х 20

20 b

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

Checklist of Required Schedules (continued) Yes No 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 Х 21 22 Х Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If 'Yes,' complete* Х 23 24 a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of Х 24a 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 24c d Did the organization act as an 'on behalf of issuer for bonds outstanding at any time during the year? . . . 24d 25 a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I........ 25a Χ 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 Χ 25b Х 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III Х 27 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 IV Х 28a b A family member of a current or former officer, director, trustee, or key employee? If Yes,' complete Schedule L, Part IV. Х 28b Х 28c Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 Х Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 Х Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I Х 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete 32 Х 32 Х 33 Was the organization related to any tax-exempt or taxable entity? If Yes,' complete Schedule R, Part II, III, or IV, Х 34 Х 35a Х 35b Х 36

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Form 990 (2014)

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Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Form 990 (2014) FRIENDS OF SEOUL FOREIGN SCHOOL INC Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V

		Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	0		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	х	
2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	٥		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 b		
4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		х
b If 'Yes,' enter the name of the foreign country	_		
See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts. (FBAR)	-	ł	X
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
c if 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		 ^
	1 36	ļ	\vdash
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a		Х
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		х
d If 'Yes,' indicate the number of Forms 8282 filed during the year			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g	<u></u>	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7 h		
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		Х
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		Х
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		X
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	_	İ	
11 Section 501(c)(12) organizations. Enter			
a Gross income from members or shareholders	_		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	L	
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	_		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
a Is the organization licensed to issue qualified health plans in more than one state?	13 a	<u> </u>	┼
Note. See the instructions for additional information the organization must report on Schedule O.			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	4		
c Enter the amount of reserves on hand	١		,,
-14 a-Did-the-organization-receive any-payments-for-indoor-tanning-services-during-the-tax-year?	14a		<u>-</u> X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 b		

Form 990 (2014) FRIENDS OF SEOUL FOREIGN SCHOOL INC 42-0982442 Page 6 Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 6 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 4 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х 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 Х Did the organization make any significant changes to its governing documents 4 Х 5 X Did the organization become aware during the year of a significant diversion of the organization's assets? . . . 6 X 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7 a Χ b Are any governance decisions of the organization reserved to (or subject to approval by) members, Х 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х 8 a 8 b Х Is there any officer, director, trustee, or key employee listed in Part VII. Section A, who cannot be reached at the Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10a Did the organization have local chapters, branches, or affiliates? 10 a Х b if 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12 a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12 b Х c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Х 12 c 13 Х 14 Х 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15 a Х 15 b Х If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16 a Х b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Other (explain in Schedule O) Own website Another's website X Upon request Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year.

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GAIL MEYER

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4053 - 240TH ST CLEAR LAKE

(641) 357-3744

50428

State the name, address, and telephone number of the person who possesses the organization's books and records:

				_	-					
Form 990 (2014) FRIENDS OF SEOUL FOREI									42-09824	
Partivil Compensation of Officers, Direct	ors, Tru	stee	es, I	Key	/ Ei	mplo	ye	es, Highest C	ompensated En	nployees, and
Check if Schedule O contains a response or	note to an	v line	ın t	his F	⊃art	VII .				
Section A. Officers, Directors, Trustees, K										
Complete this table for all persons required to be listed organization's tax year. List all of the organization's current officers, directors.	•	•								
compensation. Enter -0- in columns (D), (E), and (F) if no						,,,,,,,	0, 0	//ga///24/10/10/, 10g/	ardiess of amount of	
 List all of the organization's current key employees 	•									
 List the organization's five current highest compens who received reportable compensation (Box 5 of Form W organization and any related organizations. 										
• List all of the organization's former officers, key em of reportable compensation from the organization and any	y related o	rgani	zatı	ons.						00,000
 List all of the organization's former directors or truorganization, more than \$10,000 of reportable compensation. 										
List persons in the following order: individual trustees or cemployees; and former such persons.	lirectors; ir	nstitu	tiona	al tru	ıstee	es; off	icer	rs; key employees,	highest compensate	ed
Check this box if neither the organization nor any rela	ited organi	zatio	n co	mpe	ensa	ted a	ny c	current officer, dire	ctor, or trustee.	
				(C)						
(A) Name and Title	(B) Average hours	thar	one s both	box, ι	unless fficer fruste	ck more s person and a e)	י	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) SYNN MINKI	1.00									
DIRECTOR	1	X	<u> </u>	ļ	<u> </u>			0.	0.	0.
(2) JOHN LEE	100	x						_		•
DIRECTOR (3) CALL MEYER	1.00	<u> </u>		\vdash	\vdash	\vdash		0.	0.	0.
	-	X		х				0.	0.	0.
(4) RUTH RICHTER	1.00	+	\vdash	<u> </u>	 	\vdash		ļ .		
	-1						1			

VICE PRES. 0. 0. 0. 1.00 (5) DR HARLAN LYSO Х 0. 0. 0. TREASURER (6) RON RICHTER SECRETARY 1.00 Х 0. 0. 0. _(7)_____ (8) (9) (10) (11) (12) (13) (14)

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Form 990 (2014)

Partivil Section A. Officers, Directors, Tr	ustees, (B)	Key 	Em	1 0 (0		es, a	anc	Hignest Con	ipensated Empl	oyee:	S (conti	nued)
、 (A) Name and title	Average hours per week	Position (do not check more than one box, unless person is both ar officer and a director/trustee					an ee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from	amou	(F) timated int of other	
	(list any hours for related organiza - tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	fr orga and	pensation om the anization d related anization:	
(15)						-						
(16)												
(17)								:				
(18)												
(19)												
(20)												
(21)										· · · · · ·		
(22)												
(23)		+										
(24)		-										
(25)												
1 b Sub-total							•	0.	0.			Ö.
c Total from continuation sheets to Part VII, Sector of Total (add lines 1b and 1c)							^	0.	0.			0.
Total number of individuals (including but not limit from the organization	ed to those	listed	d abo	ove)	who	rece	ive			pensa	tion	
											Yes	No
3 Did the organization list any former officer, direct on line 1a? If 'Yes,' complete Schedule J for such	or, or truste <i>individual</i>	e, ke	y em	ıploy	yee, • •	or hig	hes	st compensated en	nployee 	. 3		х
4 For any individual listed on line 1a, is the sum of rethe organization and related organizations greater such individual	· than \$150	,000?	' If 'Y	/es'	and com	other	cor Sch	mpensation from hedule J for		. 4		х
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,	compensa	ition f	rom dule	any <i>J fo</i>	unre r suc	elated ch per	org	ganization or ındıvı	dual	. 5		Х
Section B. Independent Contractors 1 Complete this table for your five highest compens	ated indep	ender	nt co	ntra	ctor	that	rec	eived more than \$	100,000 of			
compensation from the organization. Report comp	ensation for	or the	cale	enda	ar ye	ar en	dıng	with or within the	organization's tax yea		C)	
Name and business add	iress							Description of	of services	Compe	ensatio	<u>n</u>
												
Total number of independent contractors (including	g but not li	mited	to t	hose	e lıst	ed ab	ove) who received mo	ore than		,	
\$100,000 of compensation from the organization	>											

Form 990 (2014)

		Check if Schedule O co	оа о тооре	1		(B)	(C)	
	,				(A) Total revenue	Related or exempt function revenue	Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
တ္တ	1 a	Federated campaigns .	1а					
턽털		Membership dues						
5 5		Fundraising events		ļ				
ar Ar			—	,				
를 ಪ		Related organizations .		 				
g E	е	Government grants (contribution	ons) 1 e	!				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grasimilar amounts not included a	ants, and bove · · 1 f	8,795.				
들의	g	Noncash contributions included	d in lines 1a-1f \$	3				•
동티	h	Total. Add lines 1a-1f			8,795.			
<u>•</u>				Business Code	- 1 · · · · · · · · · · · · · · · · · ·			
Program Service Revenue	2 a	1						
Ě	b							
Se F	_							
ž	C		_					
S,	C	'					<u>.</u> .	
am	е	·						
ğ	f	All other program service	revenue					
g.	ç	Total. Add lines 2a-2f .						
	3	Investment income (inclu other similar amounts) .	ding dividends	, interest and	76,374.	0.	0.	76,374
	4	Income from investment			, 0, 3, 11			
	5	Royalties						L-
	3	Royaldes	(ı) Real	(II) Personal		<u></u>		<u> </u>
			(1) 11021	(,				
		Gross rents	-					
	Į.	Less: rental expenses						
		Rental income or (loss)					-	
	(Net rental income or (los	s)					
	7,	Gross amount from sales of	(i) Securities	(II) Other				
	' `	assets other than inventory	452,09	7.				
	,	Less cost or other basis						
		and sales expenses	440,17					
			11,92				~	
		d Net gain or (loss)		<u> </u>	11,924.	0.	0.	11,924
Other Revenue	8 8	Gross income from funda (not including\$		_				
Š		of contributions reported	on line 1c).					
æ		See Part IV, line 18		a				
호	l	Less: direct expenses .		b				
Ħ	١,	Net income or (loss) fron	n fundraising e	vents · · · · . ▶				
Ŭ		a Gross income from gami See Part IV, line 19	ing activities.		-		,	
	Ι.	b Less: direct expenses			ž, ·		•	
						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		· · · · · ·
	۱ ۱	Net income or (loss) from	n gaming activi	ties				
	10:	a Gross sales of inventory and allowances	, less returns	а		-		
		b Less: cost of goods sold		b		, , , , , , , , , , , , , , , , , , , ,		
		c Net income or (loss) from						
	\vdash	Miscellaneous Reveni		Business Code				
	11:				1			
			. – – – – -	-				
	<u> </u>	d All other revenue · · · ·						
					 		<u> </u>	
		e Total. Add lines 11a-11d				- -		99 209

Section 501(c)(3) and 501(c)(organizations must complete all columns. All other organizations must complete column (A).

Do n 6b, 7	ot include amounts reported on lines b, 8b, 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		одранов	general expenses	- I
2	Grants and other assistance to domestic individuals. See Part IV, line 22			7 0 _F 1	
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	144,347.	144,347.	***	
_	•	144,34/.	144,347.		
4 5	Benefits paid to or for members				
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				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
	Management				
	Legal				
	Accounting	1,425.	0.	1,425.	0.
-	Lobbying	1,123.		17.201	
	Professional fundraising services See Part IV, line 17				
	Investment management fees	12,248.	0.	12,248.	0.
g	Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	12,240.	0,	12,240.	<u> </u>
	Advertising and promotion				
13	Office expenses		·		
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	4,873.	0.	4,873.	0.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23 24	Insurance				
á	BANK_FEES	38.	0.	38.	0.
ŧ)				
•	;				
•	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	162,931.	144,347.	18,584.	0.
26	Joint costs. Complete this line only if the organization reported in column (B)				
	campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Balance Sheet

Part X

(B) Beginning of year End of year 1 15,787 10,863 2 Savings and temporary cash investments 3 3 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L £ 7 8 Prepaid expenses and deferred charges 9 10 a Land, buildings, and equipment cost or other basis. 10 b 10 c 11 11 3,155,546 3,099,591 Investments — other securities. See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 14 14 Other assets. See Part IV, line 11 15 15 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 3,171,333 3,110,454 17 17 18 18 19 19 20 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 jabilities Loans and other payables to current and former officers, directors, trustees. 22 23 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D . . . 25 0 26 0. Total liabilities. Add lines 17 through 25....... Organizations that follow SFAS 117 (ASC 958), check here ▶ and complete 4 or Fund Balances lines 27 through 29, and lines 33 and 34. Unrestricted net assets...... 27 27 28 28 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Net Assets 30 Paid-in or capital surplus, or land, building, or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds 3,171,333 3,110,454 3,171,333 33 33 3,110,454. Total liabilities and net assets/fund balances 34 3,171, 333 3,110,454

BAA

Form 990 (2014)

Form	990 (2014) FRIENDS OF SEOUL FOREIGN SCHOOL INC	12-0982442			Pa	age 12			
Par	t ※ Reconciliation of Net Assets								
	Check if Schedule O contains a response or note to any line in this Part XI					$\cdot \square$			
1	Total revenue (must equal Part VIII, column (A), line 12)		1		97,(093.			
2	Total expenses (must equal Part IX, column (A), line 25)		2	1	62,	931.			
3	Revenue less expenses. Subtract line 2 from line 1	٠ . [3		65,8	838.			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	• • [4	3,1	71,	333.			
5	<u> </u>								
6									
7	Investment expenses		7						
8	Prior period adjustments	-	8						
9	Other changes in net assets or fund balances (explain in Schedule O)	\cdots [9						
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,								
_	column (B))	· ·	10	3,1	10,4	<u>454.</u>			
Pai	t XII [®] Financial Statements and Reporting					_			
	Check if Schedule O contains a response or note to any line in this Part XII					$\cdot \Box$			
					Yes	No			
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			_					
If the organization changed its method of accounting from a prior year or checked 'Other,' explain									
	in Schedule O.								
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?			. 2a		X			
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				'			
	separate basis, consolidated basis, or both:				•	1			
	Separate basis Consolidated basis Both consolidated and separate basis								
	Were the organization's financial statements audited by an independent accountant?			· 2b		Х			
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate								
	basis, consolidated basis, or both:								
	Separate basis Consolidated basis Both consolidated and separate basis					ł			
(If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	audit	, 	. 2c					
	If the organization changed either its oversight process or selection process during the tax year, explain					1			
	ın Schedule O.			ļ					
3 :	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si Audit Act and OMB Circular A-133?	ngle · · ·		. За		Х			
ı	o If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required								
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u>	<u>.</u> .	. 3 b					
BAA	<u> </u>			Form	990	(2014)			

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of	f the organization					Employer Identificat	ion number			
FRIE	ENDS OF SEOUL FOREIGN	SCHOOL INC				42-0982442	2			
Part	I Reason for Public Cha	rity Status (All or	ganizations must co	mplete	this p	art.) See instruction	S.			
The or	rganization is not a private foundati	on because it is: (For I	ines 1 through 11, check	only one	box.)					
1	A church, convention of church	es, or association of c	hurches described in sec	ction 176)(b)(1)(<i>A</i>	۸)(i).				
2	A school described in section	170(b)(1)(A)(ii). (Attac	ch Schedule E.)							
3	A hospital or a cooperative hos	pital service organizat	tion described in section	170(b)(1	I)(A)(iii)	•				
4	A medical research organization	n operated in conjunc	tion with a hospital descr	ibed in s	ection 1	170(b)(1)(A)(iii). Enter th	e hospital's			
	name, city, and state:									
5	An organization operated for the 170(b)(1)(A)(iv). (Complete Pa	ne benefit of a college art II.)	or university owned or op	erated b	y a gove	ernmental unit described	in section			
6	A federal, state, or local govern	<u> </u>				•				
7	An organization that normally r in section 170(b)(1)(A)(vi).	Complete Part II.)	• • •	governm	ental un	it or from the general pu	blic described			
8	A community trust described in	section 170(b)(1)(A)	(vi). (Complete Part II.)							
9	An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.)									
10	An organization organized and	•	· · · · · · · · · · · · · · · · · · ·							
11	X An organization organized and or more publicly supported org lines 11a through 11d that des	anizations described in	n section 509(a)(1) or se	ection 50	9(a)(2).	See section 509(a)(3).	rposes of one Check the box in			
а	lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B.									
b	Type II. A supporting organiza management of the supporting must complete Part IV, Secti	organization vested in	trolled in connection with n the same persons that o	its supp control o	orted org r manag	ganization(s), by having on the supported organization.	control or ation(s). You			
c	Type III functionally integrate organization(s) (see instruction	ed. A supporting organ	nızation operated in conn ete Part IV, Sections A, I	ection wi D, and E	th, and t	functionally integrated wi	th, its supported			
d	Type III non-functionally inte functionally integrated. The org instructions). You must comp	anization generally m	ust satisfy a distribution r	connecti equirem	on with i ent and	ts supported organization an attentiveness requirer	n(s) that is not ment (see			
е	Check this box if the organizat integrated, or Type III non-fund	ion received a written	determination from the IF	RS that is	а Туре	I, Type II, Type III function	onally			
f	Enter the number of supported org	ganizations								
g	Provide the following information a	about the supported or	rganızatıon(s).							
	(i) Name of supported organization	(ii) EIN	(IIi) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(IV) Is organizatio In your go docum	n listed verning	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
				Yes	No					
<u>(A)</u>	SEOUL FOREIGN SCHOOL	N/A	LINE 2: A SCHOOL	Х		144,347.				
<u>(B)</u>							······································			
(C)										
(D)										
<u>(E)</u>										
Total						144,347.	<u> </u>			
RΔΔ	For Paperwork Reduction Act N	otice, see the Instruc	tions for Form 990 or 9	90-FZ.		Schedule A (Form	990 or 990-FZ) 2014			

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

(Complete only	if you chacked the box on line 5.	7, or 8 of Part I or if the organization below, please complete Part III.)	n failed	to qualify in	nder Part III If the
(Complete only	il you checked the box on the o	1, or o or rail roll in the organization	ii iaiica	to quality of	ider i dit iii. Ii tile
organization fa	ils to qualify under the tests listed	below, please complete Part III.)			

Sec	tion A. Public Support								
	ndar year (or fiscal year nning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total		
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')		-						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf								
3	The value of services or facilities furnished by a governmental unit to the organization without charge								
4	Total. Add lines 1 through 3								
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						<u> </u>		
<u>Sec</u>	tion B. Total Support	r	-		T	,			
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total		
7	Amounts 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					. 32			
12	Gross receipts from related activit	ies, etc (see instru	ctions)			12			
13	First five years. If the Form 990 is organization, check this box and s	top here		hird, fourth, or fifth	tax year as a sec	tion 501(c)(3)			
	tion C. Computation of Pu								
14	Public support percentage for 201						<u>%</u>		
15	Public support percentage from 20						<u></u> %		
16 a	a 33-1/3% support test — 2014. If and stop here. The organization of	the organization di qualifies as a public	d not check the bo cly supported orga	x on line 13, and the nization	he line 14 is 33-1/3	3% or more, check	this box		
ŧ	33-1/3% support test — 2013. If to and stop here. The organization	the organization di qualifies as a publi	d not check a box of cly supported orga	on line 13 or 16a, a nization · · · ·	and line 15 is 33-1/	3% or more, check	this box		
17 8	17 a 10%-facts-and-circumstances test — 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization								
	b 10%-facts-and-circumstances test — 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization								
18	Private foundation. If the organiz	zation did not chec	k a box on line 13,	16a, 16b, 17a, or	17b, check this bo	x and see instruction	ons ▶ 📗		
BAA					90	hedule A (Form 99	0 or 900 EZ\ 2014		

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

(Complete only if you	checked the box on line 9 of F	art I or if the organization failed to qualify	under Part II. If the organization fails
to guislify under the te	ests listed below inlease compl	ete Part II \	

Sectio	Section A. Public Support								
	year (or fiscal yr beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total		
and red	fts, grants, contributions id membership fees ceived. (Do not include iy 'unusual grants.')								
	ross receipts from admis-								
SIO	ons, merchandise sold or								
fur rel	rvices performed, or facilities rnished in any activity that is lated to the organization's x-exempt purpose	·							
	ross receipts from activities						· · · · · ·		
tha	at are not an unrelated trade business under section 513						_		
org eit	ax revenues levied for the ganization's benefit and ther paid to or expended on behalf								
5 Th fac go	ne value of services or cilities furnished by a syemmental unit to the ganization without charge.				-				
•	otal. Add lines 1 through 5	· · · · · ·							
7 a An 2,	mounts included on lines 1, and 3 received from squalified persons		, ,						
an dis ex 1%	mounts included on lines 2 and 3 received from other than squalified persons that sceed the greater of \$5,000 or 6 of the amount on line 13 r the year								
c Ac	dd lines 7a and 7b								
8 Pu	ublic support (Subtract line	· · · · · · · · · · · · · · · · · · ·	「	1911年日報中 1975年	garan .	4. 2.			
7c from line 6)。...... 新衛星 (1.5) 日本市内 日本市 日本語 新田田田田田田田田田田田田田田田田田田田田田田田田田田田田田田田田田田田									
	Calendar year (or fiscal yr beginning in) > (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total								
	mounts from line 6	(4) 2010	(5) 2511	(0, 20.2	(0, 20.0	(0) = 0	(1) 1 5 10		
pay rer sın b Ur ınd	ross income from interest, dividends, injunents received on securities loans, ints, royalties and income from milar sources								
ac	xes) from businesses equired after June 30, 1975								
c Ac	dd lines 10a and 10b et income from unrelated business								
wh	ctivities not included in line 10b, hether or not the business is gularly carried on								
ga ca	ther income Do not include ain or loss from the sale of apital assets (Explain in art VI.)								
	otal support. (Add lines 9, 0c, 11 and 12.)								
14 Fi	5044 (0)								
Section	iganization, check this box and a	otop nere i i i i							
15 P	on C. Computation of Pu	ıblic Support P	Percentage						
10 F		ıblic Support P	Percentage			15	ક		
	on C. Computation of Pu	iblic Support F 14 (line 8, column (f	Percentage) divided by line 1	3, column (f))			00 00		
16 Po	on C. Computation of Pu ublic support percentage for 201 ublic support percentage from 2 on D. Computation of Inv	Iblic Support F 14 (line 8, column (f 013 Schedule A, Pa vestment Incol	Percentage) divided by line 13 art III, line 15 me Percentag	3, column (f))		16			
16 Po	on C. Computation of Pu ublic support percentage for 201 ublic support percentage from 2	Iblic Support F 14 (line 8, column (f 013 Schedule A, Pa vestment Incol	Percentage) divided by line 13 art III, line 15 me Percentag	3, column (f))		16			
16 Po	on C. Computation of Pu ublic support percentage for 201 ublic support percentage from 2 on D. Computation of Inv	Iblic Support F 14 (line 8, column (f 013 Schedule A, Pa vestment Incol or 2014 (line 10c, co	Percentage () divided by line 1: art III, line 15 me Percentag () divided by	3, column (f))	f))		96		
16 Pt Section 17 In 18 In 19 a 33	on C. Computation of Public support percentage for 201 ublic support percentage from 2 on D. Computation of Investment income percentage for	Iblic Support F 14 (line 8, column (f 013 Schedule A, Pa vestment Incol or 2014 (line 10c, co om 2013 Schedule f the organization of	Percentage b) divided by line 1: art III, line 15 me Percentag blumn (f) divided by A, Part III, line 17 lid not check the b	3, column (f))	f))	16 17 18 n 33-1/3%, and lin	% % % e 17		
16 Pt Section 17 In 18 In 19 a 33 is	ublic support percentage for 201 ublic support percentage from 2 ublic support percentage from 2 on D. Computation of Investment income percentage for 2-1/3% support tests — 2014. It is not more than 33-1/3%, check 3-1/3% support tests — 2013. It	Iblic Support F 14 (line 8, column (f 013 Schedule A, Pa vestment Incol or 2014 (line 10c, co om 2013 Schedule if the organization of this box and stop h if the organization of	Percentage () divided by line 1: art III, line 15 me Percentag () divided by () divided by () A, Part III, line 17 () did not check the by () dere. The organization of check a box	e y line 13, column (f))	16 17 18 n 33-1/3%, and lin organization more than 33-1/39	% % % % % % % % % % % % % % % % % % %		
16 Pt Section 17 In 18 In 19 a 33 is b 33 lin	ublic support percentage for 201 ublic support percentage from 2 ublic support percentage from 2 on D. Computation of Investment income percentage for exestment income percentage from 3-1/3% support tests — 2014. It is not more than 33-1/3%, check it	Iblic Support F 14 (line 8, column (f 013 Schedule A, Pa vestment Incol or 2014 (line 10c, co om 2013 Schedule if the organization of this box and stop h if the organization of check this box and	Percentage () divided by line 13 art III, line 15 me Percentag () divided by () divided by () A, Part III, line 17 () did not check the by () diere. The organization of check a boot stop here. The o	e y line 13, column (f) ox on line 14, and thon qualifies as a con line 14 or line organization qualifier	f))	16 17 18 133-1/3%, and lin organization more than 33-1/39 oported organization	% % % % % % % % % % % % % % % % % % %		

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

Sec	tion A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? 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	X	-
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)		x	
	described in Section 509(a)(1) or (2)	2		-
3 8	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below	3a	-	Х
ı	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		
(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		
4:	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	х	
ı	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	Х	
(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)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c	х	
5 :	a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		<u> </u>
١	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		
	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
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		X
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		Х
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 I of Schedule L (Form 990)	8)
9	a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))?	·; .		
	If Yes,' provide detail in Part VI	9a		}
	b 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		
	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	9с		
10	a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If Yes,' _answer(b) below	10a		×
	b Did the organization, have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

Section E.	Type	III Functi	onally	/-Integrated	Supporting	Organizations

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

Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):

а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruction	ons)		
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		
ŧ	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.			
- a	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees ofeach_of_the supported organizations? Provide details in Part VI	3a		<u></u>
ı	b 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		

Х

1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nother Type III non-functionally integrated supporting organizations must complete Section 1.	loven tions	nber 20, 1970. See Instruc A through E.	tions. All
Sec	tion A – Adjusted Net Income		(A) Pпоr 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	127,206.	97,093.
4	Add lines 1 through 3	4	127,206.	97,093.
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	12,576.	12,247.
7	Other expenses (see instructions)	7	, , , , , , , , , , , , , , , , , , , ,	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	114,630.	84,846.
Sec	tion 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):	.,	, !	
a	Average monthly value of securities	1 a	3,033,458.	3,127,569.
t	Average monthly cash balances	1 b	17,913.	13,325.
	Fair market value of other non-exempt-use assets	1 c	0.	
	Total (add lines 1a, 1b, and 1c).	1 d	3,051,371.	3,140,894.
	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	3,051,371.	3,140,894.
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	45,771.	47,113.
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	3,005,600.	3,093,781.
6	Multiply line 5 by .035	6	105,196.	108,282.
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8	105,196.	108,282
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		114,630.
2	Enter 85% of line 1	2	1 %	97,436.
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	i de	105,196
4	Enter greater of line 2 or line 3	4		105,196
5	Income tax imposed in prior year	5	1995年 · 新	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		105,196
7	Check here if the current year is the organization's first as a non-functionally-integrate (see instructions).	d Typ	e III supporting organizatio	
BAA			Schedule A (For	n 990 or 990-EZ) 2014

Par	V Type III Non-Functionally Integrated 509(a)(3) Sur	oporting Organizat	iions (continuea)	
Sect	ion D — Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purpose	s		144,347
2	Amounts paid to perform activity that directly furthers exempt purposes on excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of support	ted organizations		
4	Amounts paid to acquire exempt-use assets	<u> </u>		
5	Qualified set-aside amounts (pnor IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6			144,347
8	Distributions to attentive supported organizations to which the organization Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			105,196
10	Line 8 amount divided by Line 9 amount			·
Sect	ion 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			105,196
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required — see instructions)			
3	Excess distributions carryover, if any, to 2014			
a				
b				
С				
d	Committee of the second	00 00 × 100 00		
е	From 2013			
f	Total of lines 3a through e	131,167.		
g	Applied to underdistributions of prior years		0.	
h	Applied to 2014 distributable amount			105,196
i	Carryover from 2009 not applied (see instructions)			
i	Remainder, Subtract lines 3g, 3h, and 3i from 3f	25,971.		
4	Distributions for 2014 from Section D, line 7 \$ 144,347.			
а	Applied to underdistributions of prior years		0.	
b	Applied to 2014 distributable amount	# e h		0
С	Remainder. Subtract lines 4a and 4b from 4	144,347.		
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)		0.	
6	Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			0
7	Excess distributions carryover to 2015. Add lines 3j and 4c	170,318.		
8	Breakdown of line 7			
a				
b				
	 			
	Excess from 2013	· · · · · · · · · · · · · · · · · · ·		
_	Excess from 2014 144, 347.			
		 	Schedule A (For	m 990 or 990-EZ) 2014
BAA			Schedule A (For	m 990 or 990-EZ) 20 [.]

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

Pt IV Sec A Ln 2 SUPPORTED ORGANIZATION IS A SCHOOL.

Pt IV Sec A Ln 4b ORGANIZATION IS MADE UP OF AN INDEPENDENT BOARD AND REVIEWS REQUESTS FOR FUNDS BASED ON INVESTMENT EARNINGS AND NEEDS OF THE SCHOOL.

Pt IV Sec A Ln 4c SUPPORTED ORGANIZATION IS A PRIVATE SCHOOL IN SEOUL SOUTH KOREA. THE BOARD IS ENGAGED IN THE PURPOSE AND FUNCTION OF THE SCHOOL.

Schedule F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered 'Yes' on Form 990, Part IV, line 14b, 15, or 16.
 ► Attach to Form 990.
 ► Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

FRIENDS OF SEOUL FOREIGN SCHOOL INC

Employer identification number

42-0982442

Par	t I General Informati on Form 990, Part	on on Activiti IV, line 14b.	es Outside the	e United States. Complet	e if the organization	answered 'Yes'
1	For grantmakers. Does the the grantees' eligibility for the	organization main e grants or assistai	tain records to sub	stantiate the amount of its grantition criteria used to award the gr	s and other assistance, ants or assistance?	· · · Yes No
2	For grantmakers. Describe United States.	ın Part V the orgar	nızation's procedur	es for monitoring the use of its g	rants and other assistan	ce outside the
3	Activities per Region. (The fo	ollowing Part I, line	3 table can be du	plicated if additional space is nee	eded.)	
	(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)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
<u>(11)</u>						
(12)						
(13)						
(14)						<u> </u>
(15)						
<u>(16)</u>						
(17)						
	a Sub-total					
	sheets to Part I					
	C Totals (add lines 3a and 3b)	T			1	<u> </u>

Schedule F (Form 990) 2014 FRIENDS OF SEOUL FOREIGN SCHOOL INC

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered 'Yes' on 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.

								:	
-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
£			East Asia and Pacific	and Pacific SUPPORT SCHOOL	144,347.	СНЕСК			
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<u>(S</u>									
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(16)								į	
	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	tions listed above that setion 501(c)(3) equiva	are recognized as chalency letter	anties by the for	eign country, recogn	ized as tax-exempt	by the IRS, or for w	:	1
3 Enter	Enter total number of other organizations or entitles.	s or entities.						Schedule F	Schedule F (Form 990) 2014
BAA									(2)

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Schedule F (Form 990) 2014 FRIENDS OF SEOUL FOREIGN SCHOOL INC

Pariting Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

	Far IV, line 16. Far III can be duplicated II additional space is needed.	n be duplicated if additi	Ioliai space is ii	nanaa.			- 1	
(a)	(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non- cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, 'EMV, áppraısal, other)
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9								
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8								
6								
<u>6</u>								
Ξ								
(25)								
(13)								-
(14)								
(15)								
(16)								
(17)								
(18)								
BAA				TEEA3503 06/13/14			Schedule F	Schedule F (Form 990) 2014

Sche	dule F (Form 990) 2014 FRIENDS OF SEOUL FOREIGN SCHOOL INC 42	2-0982442	Page 4
Par	t/V線 Foreign Forms		
1	Was the organization a U.S transferor of property to a foreign corporation during the tax year? If 'Yes,' the 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)	· · · □Yes	X 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)	Yes	X No
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)	· · · ①Yes	X No
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)	· · · 🔲 Yes	X No
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)	Yes	X No
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)	· · · ☐Yes	X No
BAA	TEEA3505 06/16/13	Schedule F (Fo	rm 990) 2014

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).

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047 2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service	Internal Revenue Service at www.irs.gov/form990.					
Name of the organization		Employer identific	ation number			
FRIENDS OF SEOUL	FOREIGN SCHOOL INC	42-098244	12			
Pt VI, Line 2	RON RICHTER AND RUTH RICHTER ARE HUSBAND & WI	IFE				
Pt VI, Line 11b	BOARD MEMBERS ARE E-MAILED A COPY OF THE FORM	4 990 PRIOR T	O FILING.			
Pt VI, Line 12c	THROUGH ANNUAL DISCLOSURE AND NON-PARTICIPATE	ON ON ISSUE,	PER BY-LAWS.			
	NO COMPENSATION ALLOWED. REIMBURSEMENT OF VOI	JCHERED TRAVE	EL EXPENSES			
Pt VI, Line 15b	ONLY.					
Pt VI, Line 19	AVAILABLE ON REQUEST TO VIEW OR BY MAIL.					