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Form 990-PF

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

OMB No 1545-0052

2015

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

Open to Public Inspection

			ax year beginning	 	, 2015	<u>, and end</u>	ing			
Name of f								A	Employer identification num	nber
INTE	RNAT	IONAL HEA	LTH SERVICS FOU	JNDATI	ON	Room/suite	· · · · · · · · · · · · · · · · · · ·	_	26-1747728	-4
		ST BLUFF		auuress)		Roomsuke		В	Telephone number (see instruction (770) 753-101	•
City or tov	vn, state	or province, country,	, and ZIP or foreign postal code			L		-	(770) 753-101	.3
ALPH	ARET	TA			GA	30004		С	If exemption application is	pending, check here . 🟲
G Che	eck all	that apply.	Initial return	Initial	return of a forme		harity	1_	A Francisco - Inchisco - Inc	
_			Final return	_	ded return			שן	1 Foreign organizations, che	ck nere
			Address change	Name	change			į	2 Foreign organizations mee	ting the 85% test, check
H Che	ck tvr	oe of organization		<u> </u>	empt private for	ındation		1	here and attach computation	on' ► [
ſ	_ ''	_	nonexempt charitable tru		Other taxable p		ndation	lε	If private foundation status	was terminated
I Fair		value of all assets		counting			Accrual	1 -	under section 507(b)(1)(A)	, check here
		ll, column (c), line 1	Λ · 1 -	Other (spe			, 100, 00.	F	If the foundation is in a 40	month tormination
► \$		7			(d) must be on c	ash basis	. , -	۱۲	If the foundation is in a 60- under section 507(b)(1)(B)	
Part I	A	nalysis of Re		1				 -	1	
			total of amounts in nd (d) may not neces-		evenue and ses per books		investmen come	τ	(c) Adjusted net income	(d) Disbursements for charitable
	CO	lumns (b), (c), a	nd (d) may not neces-	5,45	, , , , , , , , , , , , , , , , , , ,	"	,00,,10			purposes
	sa. (se	riiy equai tne an ee instructions).)	nounts in column (a)	1						(cash basis only)
	1		rts, etc, received (attach schedule) •	.	35,900.	 				
	2		undation is not required to attach Sch B	 	55,555.	 				
	1	_				<u> </u>		-	 	
	3	_	temporary cash investments	·		<u> </u>				
	4 -		om securibes	·		<u> </u>			<u> </u>	
		Net rental income		`		<u> </u>				
_	_	or (loss)		 -					ļ	
R E		I Net gain or (loss) from s I Gross sales price fo	ale of assets not on line 10 · · ·	· -					<u> </u>	
٧	i _	assets on line 6a .	• •							
E	8		ome (from Part IV, line 2)	·		 				
N U	9	•	us	:		ļ				<u> </u>
Ě	10a	Gross sales less	1			 		٥.		
		returns and allowances				, ,	<u> </u>	ال أن	-1 . *	İ
	b	Less Cost of goods sold				, ,	7.1			
	c	~	lach schedule)			18	APR	2	2 2016	
	11	Other income (attac	h schedule)			<u> </u>		• ~	1-	
							00	<u> </u>	- C	
	12	Total. Add fines 1	through 11	1	35,900.				1N, U	
	13		ficers, directors, trustees, etc •	•						
	14	Other employee sa	alaries and wages	·						
	15	•	loyee benefits							
A		,	chedule)							
Ň			each sch). L-16b Strat		350.					
N			ach sch) L-16c Stmt	·	13,450.					
O S E R	17			·		<u></u>				- ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
E T R R	18		(see instrs)	·						
ÂÂ	19	Depreciation (attach schedule) and deple	n etion • • • • • • • • •	.]		1			1	}
i i	20	•			·	 			 	
ĞĚ	21		, and meetings		7,726.	 			 	
A E	22	Printing and publica	tions · · · · · · · · ·			 				
N X D P	23	Other expenses (att	ach schedule)							
E	1	See Line 23 St	tmt	_i	51.					
N D PENSES	24	Total operating an								
Š		•	s 13 through 23 · · · · ·	`	21,577. 10,373.	<u> </u>	 			ļ
	25		nts paid	·	10,373.	ļ				
	26	Total expenses an	d disbursements.	.1	21 050					Į
	27	Subtract line 26 from			31,950.	 			 	
		Excess of revenue								
			•		3,950.	1				L
	b	Net Investment inc	come (if negative, enter -0-).		· · · · · · · · · · · · · · · · · · ·]		_		
	c	Adjusted net Incor	ne (if negative, enter -0-)	.[Ι				

· ···	Page 2	
ir Market	Value	
7,	942.	
····		
., .		
		
		
7,	942.	

Pár	(Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only.	Beginning of year	End	of year
T ai	• • • •	(See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing	3,992.	7,942	. 7,942.
	2	Savings and temporary cash investments			
	3	Accounts receivable			
	1	Less: allowance for doubtful accounts			<u> </u>
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch)			
A		Less: allowance for doubtful accounts			
A S E T	8	Inventories for sale or use			
Ē	9	Prepaid expenses and deferred charges			
S	10:	a Investments — U.S. and state government obligations (attach schedule)			
	1 1	b Investments — corporate stock (attach schedule)			
		Investments — corporate bonds (attach schedule)			
	1	Investments – land, buildings, and			
	''	equipment: basis			
		(attach schedule)			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment: basis			
		Less: accumulated depreciation (attach schedule)			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers — see the instructions. Also, see page 1, item I).	3 , 992.	7,942	. 7,942.
L	17	Accounts payable and accrued expenses		···	
Ä	18	Grants payable			
B	19	Deferred revenue			
Ĺ	20	Loans from officers, directors, trustees, & other disqualified persons			
Ţ	21	Mortgages and other notes payable (attach schedule)			
i	22	Other liabilities (describe			
E S	23	Total liabilities (add lines 17 through 22)			
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			-
NF	24	Unrestricted	3,992.	7,942	
EU	25	Temporarily restricted			
D	26	Permanently restricted			
A B S A E L T A		Foundations that do not follow SFAS 117, check here . F and complete lines 27 through 31.			
ĔĈ	27	Capital stock, trust principal, or current funds			
TA	28	Pald-in or capital surplus, or land, bldg, and equipment fund			7
C	29	Retained earnings, accumulated income, endowment, or other funds			
OE RS	30	Total net assets or fund balances (see instructions)	3,992.	7,942	
	31	Total liabilities and net assets/fund balances (see instructions)	3,992.	7,942	
Par	t III	Analysis of Changes in Net Assets or Fund Balance			
1		I net assets or fund balances at beginning of year — Part II, column of-year figure reported on prior year's return)		vith 1	3,992.
2		r amount from Part I, line 27a			
3				F	
4		lines 1, 2, and 3 · · · · · · · · · · · · · · · · · ·			
5	_				
6	Tota	eases not included in line 2 (itemize)	art II, column (b), line 30	6	7,942.

Part IV Capital Gains and (a) List and describ 2-story brick warehou	use; or common stock, 200 shares MLC	Company)	P — Purchase D — Donation	(mo., day, yr.)	(d) Date so (mo, day, yr)
1 a					
b					
C					
d					
8					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sale		(h) Gain or (e) plus (f) m	
a					
b					
C					·
đ					
е					***************************************
Complete only for assets show	wing gain in column (h) and owned by the	ne foundation on 12/31/69		(f) Gains (Co	nt (h)
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		gain minus col. (k), i than -0-) or Losses (i	but not less
a					
b					
C					· · · · · · · · · · · · · · · · · · ·
d					
e		······································			
, -	(loss) as defined in sections 1222(5) an	· · ·		2	
in gain, also enter in Part I, line in Part I, line 8	e 8, column (c) (see instructions). If (los	s), enter -0-	4	,	
in Part I, line 8	der Section 4940(e) for Reduce the foundations subject to the section 494 this part blank.	ed Tax on Net Investn 40(a) tax on net investment i	ncome.)	ie	
in Part I, line 8 art V Qualification Under optional use by domestic private ection 4940(d)(2) applies, leave the street of the server of the foundation does not qualification.	ter Section 4940(e) for Reduce the foundations subject to the section 4944 this part blank. Ction 4942 tax on the distributable amountailify under section 4940(e). Do not comparison.	ed Tax on Net Investment idea (a) tax on net investment idea (a) tax on net investment idea (b) tax on the base problete this part.	nent Incom	ie	N
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in Part I, line 8	this part blank. ction 4942 tax on the distributable amountains subject to the section 4942 this part blank. ction 4942 tax on the distributable amountains under section 4940(e). Do not compliant in each column for each year; see the interpretation distributions. Adjusted qualifying distributions the 5-year base period — divide the total on has been in existence if less than 5 year table-use assets for 2015 from Part X, come (1% of Part I, line 27b)	ed Tax on Net Investment in the base projecte this part. Instructions before making an interest value of an incharitable-use asset in the base project this part. I on line 2 by 5, or by the rears	enod?	(d) Distributio oil. (b) divided by c	n ratio

orn	n 990-PF (2015) INTERNATIONAL HEALTH SERVICS FOUNDATION 2	6-1747	7728		P:	age 4
_	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -			١		3-
	a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.	See mau	L			
	Date of ruling or determination letter. (attach copy of letter if necessary — see instrs)	ĺ				
	b Domestic foundations that meet the section 4940(e) requirements in Part V,	1				
	check here - and enter 1% of Part I, line 27b					
	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)	- 1				
2		2				
3	Add lines 1 and 2 · · · · · · · · · · · · · · · · · ·		 			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		 	•		<u> </u>
5	Tax based on Investment Income. Subtract line 4 from line 3. If zero or less, enter -0		 			0.
6	Credits/Payments:		 			<u> </u>
	a 2015 estimated tax pmts and 2014 overpayment credited to 2015	- 1	[
	b Exempt foreign organizations — tax withheld at source	\dashv	l			
	c Tax paid with application for extension of time to file (Form 8868)	\dashv	1			
	d Backup withholding erroneously withheld	\dashv				
7	Total credits and payments. Add lines 6a through 6d	7	1			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		}			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		 			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		 			0.
11	Enter the amount of line 10 to be Credited to 2016 estimated tax > Refunded		 			<u> </u>
_	rt VII-A Statements Regarding Activities	<u>·····</u>	J			
					Yes	No
7 8	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?			1 a		X
	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?			1 b		
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials publis or distributed by the foundation in connection with the activities.			- 1		X
	c Did the foundation file Form 1120-POL for this year?			1 c		Х
•	(1) On the foundation > \$ (2) On foundation managers > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers > \$					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		<u> </u>
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes			3		х
	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		<u> </u>	4 a		X
ì	b If 'Yes,' has it filed a tax return on Form 990-T for this year?		[4 b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	· · · · · ·	[5		X
	If 'Yes,' attach the statement required by General Instruction T.			Ţ		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			- 1		
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that cont with the state law remain in the governing instrument?	lict		6		х
7				7	х	
8 a	a Enter the states to which the foundation reports or with which it is registered (see instructions)		1	$\neg \uparrow$		
	GA - Georgia		- 1			
ŧ	b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation			8 b	х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 49 for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' complete F)42(j)(5) Part XIV	[9	х	

TEEA0304 10/13/15

Form 990-PF (2015)

10 BAA

FUH	1990-FF (2015) INTERNATIONAL HEALTH SERVICS FOUNDATION 26-174772	8	P	age 5
Pai	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
14	The books are in care of CHARLES EVANS Telephone no. (770)	753	-101	3
15	The books are in care of CHARLES EVANS Located at 14925 EAST BLUFF ROAD Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here			
16	and enter the amount of tax-exempt interest received or accrued during the year		Yes	No
	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16		Х
IB.	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			· · · · · ·
_	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.	ļ	Yes	No
1 8	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			
t	o If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1 b		
	Organizations relying on a current notice regarding disaster assistance check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?	1 c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
8	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015?]		
	If 'Yes,' list the years ► 20 _ , 20 _ , 20			
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions.)	2 b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	► 20, 20, 20			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
ŧ	of If 'Yes,' did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015.)	3 b		
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a		х
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4 b		х
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Form 990-PF (2015) INTERNATIONAL HEAD			26-174	17728	Page 6
Part VII-B Statements Regarding Activit		n 4720 May Be Req	uired (continued)		
5 a During the year did the foundation pay or incur a	-				
(1) Carry on propaganda, or otherwise attempt t	o influence legislation (se	ection 4945(e))? · · · ·	· · · · L Yes X	No	
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registration	n drive?	· · · · · · · · · · · · · · · · · · ·		No	
(3) Provide a grant to an individual for travel, stu	idy, or other similar purp	oses?	· · · · Yes X	No	
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions) .	a charitable, etc, organi	zation described	···· Yes X	No	
(5) Provide for any purpose other than religious educational purposes, or for the prevention of the	, chantable, scientific, lite of cruelty to children or a	erary, or nimals?	···· Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in a (see instructions)?	current notice regarding	disaster assistance		5 b	
Organizations relying on a current notice regardi					
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsib	foundation claim exemp ility for the grant?	tion from the	Yes	No	
If 'Yes,' attach the statement required by Regula	tions section 53.4945-5(d).		'	
6 a Did the foundation, during the year, receive any on a personal benefit contract?	funds, directly or indirect	ly, to pay premiums	···· Yes X	No	
b Did the foundation, during the year, pay premiun	ns, directly or indirectly, o	on a personal benefit con	tract?	6b	X
If 'Yes' to 6b, file Form 8870.			— . —	.	
7 a At any time during the tax year, was the foundation					
b If 'Yes,' did the foundation receive any proceeds					
Part VIII Information About Officers, D and Contractors	irectors, i rustees,	, Foundation Manag	gers, Hignly Paid E	:mployees	,
1 List all officers, directors, trustees, foundation	n managers and their	rompensation (see inst	nuctions)	 	
. Electric enteres and enteres, in distance	(b) Title, and average	(c)Compensation	(d)Contributions to	(e) Expense	account,
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other alk	owances
CHARLES EVANS					
14925 EAST BLUFF ROAD ALPHARETTA GA 30004	PRESIDENT 10.00	0.	0.		6,464.
				ļ	
				<u> </u>	
		!			
	<u> </u>	<u> </u>	<u> </u>	<u> </u>	
2 Compensation of five highest-paid employee					
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense other all	account, owances
NONE					
				<u> </u>	
		}			
				 	
Total must be of above to		1	<u> </u>	 	
Total number of other employees paid over \$50,000 .	TELAGOR 40	·		Form 990-	None

Form	990-PF (2015) INTERNATIONAL HEALTH SERVICS FOUNDATION 26-17	47728 Page 7
Pai	t VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
йби	E	
		
Tota	number of others receiving over \$50,000 for professional services	None
Par	t IX-A Summary of Direct Charitable Activities	
l ist th	e foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of	T _
organ	zallons and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	PREDISAN-USA, INC	
	P.O. BOX 72618	
2	MARIETTA, GA 30007 ROCK BRIDGE MINISTRIES	3,600.
-	25 STONE CREEK TRAIL	-
	ALPHARETTA, GA 30004	6,773.
3		
		ļ
4		_
		-
Par	t IX-B Summary of Program-Related Investments (see instructions)	<u> </u>
Des	cribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	ROCK Bridge Ministry: scholarship awards for students in Kenya	7.1100.112
		6,773.
2	Predisan Health Ministries: scholarship awards for students in Honduras	<u>-</u>
		-
All o	ther program-related investments. See instructions.	3,600.
3	, ,	

10,373.

Form 990-PF (2015)

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Form 990-PF (2015) INTERNATIONAL HEALTH SERVICS FOUNDATION 26-	-174772	8 Page 8
Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	n founda	itions,
1 Fair market value of assets not used (or held for use) directly in carrying out chantable, etc, purposes: a Average monthly fair market value of securities	1 a	
b Average of monthly cash balances	1 b	
© Fair market value of all other assets (see instructions)		
d Total (add lines 1a, b, and c)	1 d	
Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)		
2 Acquisition indebtedness applicable to line 1 assets	2	
3 Subtract line 2 from line 1d	3	0.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3		
(for greater amount, see instructions)	4	0.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0.
6 Minimum Investment return. Enter 5% of line 5	6	0.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here \(\big \times and do not complete this part.)	foundation	ons
1 Minimum Investment return from Part X, line 6	1	
2 a Tax on investment income for 2015 from Part VI, line 5		
b Income tax for 2015. (This does not include the tax from Part VI.)		
C Add lines 2a and 2b	2 c	
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4 · · · · · · · · · · · · · · · · · ·		
6 Deduction from distributable amount (see instructions)		
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish chantable, etc, purposes: a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	
b Program-related investments — total from Part IX-B		10,373.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3 a	

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

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Form 990-PF (2015)

10,373.

10,373

3 b

4

6

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7 · · · · · · · · · · · · · · · · · ·				
2 Undistributed income, if any, as of the end of 2015	· · · · · · · · · · · · · · · · · · ·			
a Enter amount for 2014 only			0.	
b Total for prior years 20 , 20 , 20				· · · · · · · · · · · · · · · · · · ·
3 Excess distributions carryover, if any, to 2015.			· · · · · · · · · · · · · · · · · · ·	
a From 2010 0 .				
b From 2011 0 .				
c From 2012 0 .				
d From 2013				
e From 2014 12,287.				
f Total of lines 3a through e	19,498.			
4 Qualifying distributions for 2015 from Part	19,490.			
XII, line 4: \$ 10,373.				
a Applied to 2014, but not more than line 2a				
b Applied to undistributed income of prior years (Election required — see instructions)				
c Treated as distributions out of corpus (Election required – see instructions)				
d Applied to 2015 distributable amount				
e Remaining amount distributed out of corpus	10,373.			
5 Excess distributions carryover applied to 2015				
(If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e Subtract line 5	29,871.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
C Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount — see instructions		0.		
Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required – see instructions)				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	29 , 871.			
10 Analysis of line 9:				
a Excess from 20110 .				
b Excess from 2012 0 .]			
c Excess from 2013 7,211.	1			
d Excess from 2014 12,287.	1			
e Excess from 2015 10,373.	1			
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Form 990-PF (2015) INTERNATIONAL HEA Part XIV Private Operating Foundati			/II-A, guestion 9)	26-1747728	Page 10
1 a If the foundation has received a ruling or determined is effective for 2015, enter the date of the ruling or determined in the ruling or d	rmination letter that i	t is a private operati	ng foundation, and t		
b Check box to indicate whether the foundation				X 4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum investment return from Part X for	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
each year listed	0.	0.	0.	0.	N/A
b 85% of line 2a [0.	0.	0.	0.	N/A
C Qualifying distributions from Part XII, line 4 for each year listed	10,373.	12,287.	7,211.	24,732.	54,603.
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	10,373.	12,287.	7,211.	24,732.	54,603.
Complete 3a, b, or c for the alternative test relied upon:			:	,	
a 'Assets' alternative test — enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information (Complete this	part only if the	foundation had	\$5,000 or more	in
assets at any time during the		structions.)		- ··· · · · · · · · · · · · · · · · · ·	
Information Regarding Foundation Manager a List any managers of the foundation who have close of any tax year (but only if they have contained to the	e contributed more th	nan 2% of the total o \$5,000). (See section	contributions received on 507(d)(2).)	d by the foundation b	efore the
Charles Evans					
b List any managers of the foundation who own a partnership or other entity) of which the four NONE	10% or more of the ndation has a 10% or	stock of a corporation greater interest.	on (or an equally larg	ge portion of the own	ership of
2 Information Regarding Contribution, Grant Check here X if the foundation only maker requests for funds. If the foundation makes grant complete items 2a, b, c, and d.	ces contributions to p	preselected charitab	le organizations and	does not accept uns ns under other condit	olicited ions,
a The name, address, and telephone number of both the form in which applications should be sub-				oe addressed:	
c Any submission deadlines:					
d Any restrictions or limitations on awards, such	as by geographical	areas, charitable fie	elds, kinds of instituti	ons, or other factors:	

Form 990-PF (2015) INTERNATIONAL HEALTH SERVICS FOUNDATION 26-1747728 Page 11 Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual. Foundation Recipient show any relationship to any foundation manager or substantial contributor Purpose of grant or contribution Amount status of recipient Name and address (home or business) a Paid during the year PREDISAN-USA, INC P.O. BOX 72618 MARIETTA GA 30007 501(C)(3) PROGRAM DEVELOPMENT 3,600. ROCK BRIDGE MINISTRIES 25 STONE CREEK TRAIL ALPHARETTA GA 30004 501(C)(3) PROGRAM DEVELOPMENT 6,773.

Total	 	 a 10,373.
b Approved for future payment		
		}

Part XVI-A	Analysi	s of Inco	me-Produc	Ing Activities
------------	----------------	-----------	-----------	----------------

inter gross amounts unless otherwise indicated.	Unrelate	ed business income	Excluded by section 512, 513, or 514		
-	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (See instructions.)
1 Program service revenue:			code		· · · · · · · · · · · · · · · · · · ·
3 NONE			-	· · · · · · · · · · · · · · · · · · ·	
b			 		
C			 -		
d			 	<u> </u>	
e			 		
For and assessed from any annual and a second			 -		· · · · · · · · · · · · · · · · · · ·
g Fees and contracts from government agencies			 -		
2 Membership dues and assessments			┼──┼		
Interest on savings and temporary cash investments Dividends and interest from securities			-		
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property			+		
7 Other investment income			+		
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events			1		
10 Gross profit or (loss) from sales of inventory				· · · · · · · · · · · · · · · · · · ·	
11 Other revenue:			1		·
a			ļl.		
b			1		
С			ļļ.		
d			ļ	· · · · · · · · · · · · · · · · · · ·	
42			ļ		
Subtotal. Add columns (b), (d), and (e)					<u> </u>
13 Total. Add line 12, columns (b), (d), and (e)				13	
See worksheet in line 13 instructions to verify calculations	.)				
Part XVI-B Relationship of Activities to the	Accomp	lishment of Exem	pt Purpo	ses	
Line No. Explain below how each activity for which inco	mo is report	ed in column (a) of Bort	V/I A cont	dhutad impartantly to	lha .
Line No. Explain below how each activity for which inco accomplishment of the foundation's exempt pr	urposes (oth	er than by providing fun	ds for such	purposes). (See instru	ictions.)
				<u></u>	······································
1A N/A		 			
				 	
		<u></u>			
		 		 	
	······	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
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	90-PF			CALTH SERVICS FOUN				17477		Pa	ge 13
Part 2	KVII	Information Reg Exempt Organiz	arding Tran	nsfers To and Transact	ions and	Relationships	With No	nchar	itable		
		Exempt Organiz	alions							Yes	No
1 5	id the	organization directly of	r indirectly enga	age in any of the following with	any other or	ganization				103	110
a re	escribe elating	to political organization	ne Code (otne	r than section 501(c)(3) organ	izations) of ir	1 Section 527,					
аΤ	ransfer	s from the reporting for	oundation to a n	oncharitable exempt organiza	tion of.						
									1 a (1)		Х
(2	2) Oth	er assets						[1 a (2)		Х
_		ansactions:						į			
				ot organization				_	1 b (1)		X
•	•			e exempt organization					1 b (2)	ļ	X
•	•		•	ssets					1 b (3)		X
-	•	=						<u> </u>	1 b (4) 1 b (5)		X
-	•	-		or fundraising solicitations.				<u> </u>	1 b (6)	-	X
-	-		•	other assets, or paid employe					1 c		X
	_							<u>-</u>			
d II ti a	the an ne good ny tran	swer to any of the abo is, other assets, or se saction or sharing arra	ove is 'Yes,' con rvices given by angement, show	nplete the following schedule. the reporting foundation. If the win column (d) the value of th	Column (b) so foundation of goods, other	should always show received less than f er assets, or service	the fair m air market as received	arket val value in 3.	lue of		
(a) Line		(b) Amount involved		of nonchantable exempt organization		Description of transfers			aring arran	gement	s
						<u>-</u>					
							 				
		 	-				 		 		
								 			
	-										
						· · · · · · · · · · · · · · · · · · ·					
	-			· · · · · · · · · · · · · · · · · · ·		····					
		· · · · · · · · · · · · · · · · · · ·									
											
		····						 			
			<u> </u>								
		undation directly or ined in section 501(c) of complete the following		d with, or related to, one or more than section 501(c)(3)) or in	ore tax-exem section 5277	pt organizations			. Ye	X	No
) Name of organizatio		(b) Type of organizat	ion	(c) D	escription	of relatio	nship		
		<u>,</u>		(.,, .,,,							
				-							
	Under p	penalties of perjury, I declare and complete. Declaration of	that I have examine of preparer (other tha	d this return, including accompanying son taxpayer) is based on all information of	chedules and state of which preparer	ements, and to the best of has any knowledge	f my knowled	ge and belie	ef, it is true,		
Sign			AC	. / /		. .			May the		
lere		Bruke	11/21/	n 4/16/1	<u>6</u> ▶ 1	PRESIDENT			preparer (see Inst	shown b	oelow
	Signa	ature of officer or trustee	1	Dájlé /		tle			Х	Yes	No
		Print/Type preparer's nam	10	Preparer's signature		Date	Check	X of	PTIN		

Preparer Use Only

Paid

BAA

GARRY KARSNER GARRY KARSNER Firm's address

313 EBB TIDE COURT

PONTE VEDRA BEACH

Form 990-PF (2015)

266-74-2653

(904) 540-4652

self-employed

Firm's EIN

Phone no.

32082

FL

GARRY KARSNER

Form 990-PF, Page 1, Part I, Line 23

Line 23 Stmt

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
BANK FEES	48.			
POSTAGE	3.			

Total

51.

Form 990-PF, Page 1, Part I Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
KARSNER & ASSOC	TAX PREPARATION	350.			

Total

350.

Form 990-PF, Page 1, Part I

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
JULIE KASTEN	ADMINISTRATIVE	13,450.			

Total

13,450.

Supporting Statement of:

Form 990-PF, p1/Line 1(a)

Description	Amount		
CHARLES EVANS	31,500.		
INERNATIONAL HEALTH SERVICES GROUP AMERICAN COLLEGE OF HEALTHCARE EXECUTIVES	4,000.		

Supporting Statement of:

Form 990-PF, p1/Line 21(a)

Description	Amount
JULIE KASTEN IHF WORLD CONF	1,262.
CHARLES EVANS-RE GRANT PURPOSES	6,464.
Total	7,726.