

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



990

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

and ending

OMB No 1545-0047 201

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For the 2016 calendar year, or tax year beginning

Do not enter social security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990.

C Name of organization D Employer identification number Check if applicable Friends of Shanghai American School Foundation Doing business as Address change Number and street (or PO box if mail is not delivered to street address) 52-1957233 Name change E Telephone number Initial return City or town ZIP code 609-452-0990 NJ 08543-5910 Princeton Final return/terminated Foreign country name Foreign postal code Foreign province/state/county 128,919 Amended return Gross receipts \$ F Name and address of principal officer Yes X No Application pending H(a) Is this a group return for subordinates? Deirdre A. Simon 15 Roszel Road, PO Box 5910, Princeton, NJ 08540 H(b) Are all subordinates included? X 501(c)(3) If "No " attach a list (see instructions) 4947(a)(1) or Tax-exempt status 501(c)) < (insert no) Website: ▶ none H(c) Group exemption number X Corporation K Form of organization Trust Association Other ▶ L Year of formation 1995 M State of legal domicile DE Part I Summary Briefly describe the organization's mission or most significant activities Organized & operated for charitable and IDNRevenue Mactivities & Governance educational purposes, and its primary purpose shall be furnishing financial and other assistance to educational institutions located within and outside of the United States Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 3 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 0 Total number of individuals employed in calendar year 2016 (Part V, line 2a) Total number of volunteers (estimate if necessary) 6 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 7b Net unrelated business taxable income from Form 990-T, line 34 0 Prior Year **Current Year** Contributions and grants (Part VIII, line 1h) 188,943 85.004 9 Program service revenue (Part VIII, line 2g) 0 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 2,009 43,915 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0 0 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 190,952 128,919 5,072 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 124,551 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 0 0 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 42,583 43,315 18 48,387 167,134 19 23,818 80,532 Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 1,438,856 1,523,845 SFOB(21 Total liabilities (Part X, line 26) 8,100 9,338 22 Net assets or fund balances Subtract line 21 from line 20 1,430,756 1,514,507 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signature of officer Here Deirdre A Simon - Treasurer Type or print name and title PTIN Print/Type preparer's name Preparer's signature Date Check Paid self-employed **Preparer** Firm's name Firm's EIN **Use Only** Phone no Firm's address May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

	990 (2016) Friends of Shanghai American School Foundation	52-195/233 Page 2	<u> </u>
Pa	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission		_
1	To furnish financial and administrative aid and support educational programs to		
	organizations located in the U.S. and abroad		
			_
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes X No)
_	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		
	services?	Yes X No	,
4	If "Yes," describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest program service	as as measured by	
4	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and a		
	the total expenses, and revenue, if any, for each program service reported	mocations to ouriers,	
	and total expenses, and revenue, if any, for each program convice reported		
4a	(Code) (Expenses \$ 5,072 including grants of \$ 5,072) (Reven	nue \$	_
	Decide francial and other providence to advantaged make them bearing both in the LICA and		
	Internationally Support American Education overseas, by providing textbooks, school supplies		
	and other financial support Supporting approximately 2842 students Shanghai American School		
			- -
4b	(Code) (Expenses \$ including grants of \$) (Rever	nue \$	-
			~ _
			~ -
4c	(Code) (Expenses \$ including grants of \$) (Rever	iue \$	_
4d	Other program services (Describe in Schedule O)		_
	(Expenses \$ 0 including grants of \$ 0) (Revenue \$	0)	_
4e	Total program service expenses ► 5,072		_

Page 3

Form 990 (2016) Friends of Shanghai American School Foundation

Part IV Checklist of Required Schedules Part IV

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A .	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I .	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	1		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt			
^	negotiation services? If "Yes," complete Schedule D, Part IV	9		X
0	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		X
•	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	المستقلسة	<u> </u>	
_	Schedule D, Part VI.	11a		X
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII .	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	1 .		ł
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		_x_
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	1		
2-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u> </u>
4 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	х	J
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"	120	_^_	
	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X_
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			i
	fundraising, business, investment, and program service activities outside the United States, or aggregate			}
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Χ	
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	ļ
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			ļ
_	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	1 !		١.,
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions).	17		X
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	40		•
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	18		X
9	If "Yes," complete Schedule G, Part III	19		x
	in the first content of the first in the fir			<u> </u>

Friends of Shanghai American School Foundation Checklist of Required Schedules (continued) Part IV

			res	NO
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H .	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Χ
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		_X_
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	1 22		v
242	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23		Х
_ TQ	\$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines</i>			
	24b through 24d and complete Schedule K. If "No," go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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 Schedule L, Part I	25b		Χ
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
27	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .	27		v
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	27	,-	X
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Χ
	A family member of a current or former officer, director, trustee, or key employee? <i>If</i> "Yes," <i>complete</i>			
	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Χ
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Χ
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
24	conservation contributions? If "Yes," complete Schedule M	30		_X_
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	_		.,
32	Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?	31		Х
JŁ	If "Yes," complete Schedule N, Part II	32		v
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32	\dashv	X
- -	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,			
	III, or IV, and Part V, line 1	34		Χ
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled			
	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
20	VI	37		<u>X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X 990 (00
		Form	330/	20161

orm 9	90 (2016) Friends of Shanghai American School Foundation	52-1957233	P	age 5
Par				_
	Check if Schedule O contains a response or note to any line in this Part V	<u>.</u>		
			Yes	No
1a	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	의		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	ــــــــــــــــــــــــــــــــــــــ		
	gaming (gambling) winnings to prize winners?	1c		<u> </u>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	, i, i,		· : ,
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	0	***	عف
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	, ,	2 '73
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		141	Trest 2
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		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.	3b		\vdash
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	10		x
L	account)? If "Yes," enter the name of the foreign country	4a	MEXIV.	 ^
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts		(3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	,
	(FBAR)		3	5. 14 5. 14
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?.	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
-	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	24	KΦ.	2.58
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		·, Limit	
	and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282? .	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	***	Ĭ	<u></u>
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	<u> </u>	Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as require		}	├
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 10		<u> </u>	14.
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8	M.	
_	sponsoring organization have excess business holdings at any time during the year?	•	100	() J
9	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> ` - ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~</u>
a	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	_	\vdash
b 10	Section 501(c)(7) organizations. Enter	 35		1
а	Initiation fees and capital contributions included on Part VIII, line 12	Î		' *
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			l
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	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		1	1
C	Enter the amount of reserves on hand			
14a	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	14b		

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Nο Yes 1a Enter the number of voting members of the governing body at the end of the tax year 1a 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 Enter the number of voting members included in line 1a, above, who are independent 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8a Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code No 10a 10a Did the organization have local chapters, branches, or affiliates? Х b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?. 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 K. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Х Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy? 13 Х 14 Х Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b 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 taxable entity during the year? 16a Х 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 organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Own website Another's website Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year 20 State the name, address, and telephone number of the person who possesses the organization's books and records International Schools Services, Inc. 15 Roszel Road, Princeton, NJ 08540

Form 990 (2016)	Friends of Shanghai American Sch	ool Foundation								52-19572	33 Page 7
Part VII	Compensation of Officers, Dire	ctors, Truste	es, K	ey	Em	plo	yee	s, F	lighest Comp	ensated	
•	Employees, and Independent C							_			 1
	Check if Schedule O contains a re									•	·
Section A.	Officers, Directors, Trustees, Key E									d Alexandra	
1a Complete organization's	this table for all persons required to be tax year	isted Report co	mpen	ısatı	on f	or ti	he ca	ienc	lar year ending v	with or within the	
	of the organization's current officers, di ion Enter -0- in columns (D), (E), and (luals	or o	rganızatıons), re	gardless of amo	unt
 List the who received 	 List all of the organization's current key employees, if any See instructions for definition of "key employee" List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations 										
	of the organization's former officers, ke eportable compensation from the organ		_			•		ed e	mployees who r	eceived more th	an
	of the organization's former directors of the organization's former directors of the organization of the										the
	n the following order individual trustees employees, and former such persons	or directors, ins	titutio	nal	trus	tee	s, offi	cers	s, key employees	s, highest	
X Check th	is box if neither the organization nor any	y related organiz	ation	con	nper	ารล	ted a	пу с	urrent officer, dır	ector, or trustee	
					(C						
	(A) Name and Title	(B) Average hours per	box,	unles	neck i ss pe d a di	more rson rect	than on the state of the state	an ee)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
		week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations

(A) Name and Title	Name and Title Average box, unless person is both				is both	an e)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of	
	week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) York-chi Harder	5 00	,		V						
President	0 00	Х		X		\vdash				
(2) Deirdre A Simon	5 00			V						
Treasurer (2)	0 00 5 00	X	╆╌	Х	\vdash					
(3) Marcel Gauthier	0 00	×								
Director (4) Elizabeth A Director		^	╁┈		<u> </u>				··	
(4) Elizabeth A Duffy Secretary	0 00	x		х						
		 ^-	1	<u> </u>	-					_
(5)										
(6)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

	(A) Name and title	(B) Average hours per	box,	untes	Pos eck s pe	rson	than one of the state of the st	an ee)	(D) Reportable compensation	(E) Reports compens	able ation	Esti amo	F) mated ount of
		week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from rel organiza (W-2/1099	tions	compe from organ and	ther ensation in the nization related izations
(15)													
(16)		, -				 							
(17)													
(18)										-		_	·
(19)													
(20)													
(21)													
(22)													
(23)													
(24)													
(25)													
1b Sub-to	otal from continuation sheets to Part VII, S	ection A		L		L		▶	0		0		(
d Total	(add lines 1b and 1c)	=						>	0		0		(
	number of individuals (including but not li able compensation from the organization		ited a		e) v 0	vho	recei	ved	more than \$100),000 of			
	e organization list any former officer, dire yee on line 1a? <i>If "Yes," complete Sched</i>		•		oye	e, o	r high	nest	t compensated			3 Y	es No
	y individual listed on line 1a, is the sum of ganization and related organizations greating	•	•						•	h		4	X
5 Did an	by person listed on line 1a receive or accivices rendered to the organization? If "Y									vidual		5	- X
	Independent Contractors	,											
	lete this table for your five highest compensation from the organization. Report co											ax	
	(A) Name and business add	ress							(B) Description of ser	vices	C	(C) ompensa	ition
													(
													(
													. (
2 Total r	number of independent contractors (inclu	dına but not limit	ed to	tho	se li	sted	d abo	ve)	who received				(
	han \$100,000 of compensation from the	-	•	•	"		0	,					

Form 9	90 (201	6) Friends of Shanghai Amer	ıcan School Fo	<u>ou</u> n	dation_					52-19	5723	33 Page 9
_	VIII	Statement of Revenue										
	•	Check if Schedule O contains	a response o	r no	ote to any line in	this Pa	art VIII	<u>. </u>				<u> </u>
•	-						(A) revenue	(B Relati exer fund	ed or npt tion	(C) Unrelated business revenue		(D) Revenue excluded from tax under sections 512-514
<u> </u>	1a	Federated campaigns		1a	0			reve	nue	, ,	一	\$ /× /
nts	b	Membership dues	- -	1b	0					÷ ;	\$ 5	*
S S	C	Fundraising events	<u> </u>	1c	0				*) \$	1 7	
r Ar	d	Related organizations		1d	0			, 4				
3, G	e	Government grants (contribution	s) 1	1e	0		٠,					
r Si	f	All other contributions, gifts, gran					3 1 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	F.	٠, ١	, , , , , ,		
Contributions, Gifts, Grants and Other Similar Amo <u>unts</u>		similar amounts not included abo		1f	85,004				, *Î	14 / A	ر بازج	
ontr od cr	g	Noncash contributions included in I	ines 1a-1f.	\$	0	. 24	<u> </u>		á ž	2.5	, (
O e	h	Total. Add lines 1a-1f			>	COMMAND AND	85,004		. 44.	1884	22	
9				ļ	Business Code	<u> </u>	1000		_333	(300)	2.	<u> Killis mi</u>
Revenue	2a						0				\dashv	<u> </u>
å	b						0					
Service	С						0		<u> </u>			
Sar	d						0		-		\dashv	
ram	e	All all					0				\dashv	
Program		All other program service revenue Total. Add lines 2a–2f	i c			<u> </u>	- 0				2 25,92	
	3	Investment income (including div	udends intere		and			6.384**823****	- *CALTE (880	**************************************	PM.A.	/ (200 M/00)
		other similar amounts)	ndends, intere	, J. J. L.	una ▶		43,915					43,915
	4	Income from investment of tax-e	xempt bond p	roc	eeds ►		0				\Box	
	5	Royalties			>		0					
	`	,	(ı) Real		(II) Personal	Vizi-					,3 ,li	
	6a	Gross rents							V., 34			
	b	Less rental expenses							, , , , , , , , , , , , , , , , , , ,			
	С	Rental income or (loss)		0	0				99			
	d	Net rental income or (loss)			<u> </u>		0		(9°, 3000 9°°°	Garatas Colo Sta	200-200-000	
	7a	Gross amount from sales of	(i) Securities		(II) Other	. 3.53						
		assets other than inventory		0	0						·	
	b	Less cost or other basis		_	_	2940						- 1
	}	and sales expenses		0	0	-						
	C	Gain or (loss)		Ų			0	28 X 10 - 11 1		**************************************		<u> </u>
	d	Net gain or (loss)						. 336	216	12.4	ř k	, 3
e e	8a	Gross income from fundraising				70.7					3 4	
Other Revenue	Oa	events (not including \$	0			<u>,</u> ,	.i.' X j		12.			ń ja
Š	İ	of contributions reported on line				,	₩·				, (
Ĕ		See Part IV, line 18	,	а	0	ı	,	1			4 1	
je	Ь			b	0			J 35°°	*	` `		\$ x *
ō	C	Net income or (loss) from fundra	aising events		>		C	, ,				
		Gross income from gaming activ]						
	ļ	See Part IV, line 19		а	0	<u>1</u>						
	b	Less direct expenses		b	0	4		 				
	C	Net income or (loss) from gamir	ng activities			<u> </u>	C	<u> </u>				
	10a	Gross sales of inventory, less			_	1		1				
		returns and allowances		a	<u>c</u>	⊣						
	b	Less cost of goods sold		b	c	<u> </u>		-				
	С	Net income or (loss) from sales	of inventory		Business Code	1		' 				
	<u> </u>	Miscellaneous Revenue			Business Code	┨──	(-		
	11a				<u> </u>	+				 		
	b					 		+		 		
	ر س	All other revenue				1		+		1		
	d	All Other revenue			L			·				

128,919

e Total. Add lines 11a-11d

Total revenue. See instructions

43,915

Part IX	Statement of Functional	Expenses
---------	-------------------------	----------

Secti	on 501(c)(3) and 501(c)(4) organizations must complete all Check if Schedule O contains a response or note			omplete column (A)	<u>' </u>
<u>. </u>		(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations			Fig. At You	
	domestic governments See Part IV, line 21	0			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22	0			1
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	Ì			
	individuals See Part IV, lines 15 and 16	5,072	5,072		
4	Benefits paid to or for members	0	··- <u>-</u> ·	304 30 0	
5	Compensation of current officers, directors,				
	trustees, and key employees	0		0	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and			Ì	
	persons described in section 4958(c)(3)(B)	0			<u> </u>
7	Other salaries and wages	0			
8	Pension plan accruals and contributions (include]
	section 401(k) and 403(b) employer contributions)	0		<u> </u>	ļ
9	Other employee benefits	0			
10	Payroll taxes	0			
11	Fees for services (non-employees)				
а	Management	14,950		14,950	
b	Legal	0			· · · · · -
С	Accounting	8,600		8,600	
d	Lobbying	0	Sim Seed In Mark 1 See	I had cade we - c	
e	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	16,134		16,134	
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)	0		 -	
12	Advertising and promotion	0			
13	Office expenses	2,643		2,643	
14	Information technology	0		 	
15	Royalties	0			
16	Occupancy	0	· · · · · · · · · · · · · · · · · · ·	 	
17	Travel				
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0	· · · · · · · · · · · · · · · · · · ·		
20	Interest	0		 	
21 22	Payments to affiliates Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	988		988	
24	Other expenses Itemize expenses not covered	300		300	4 m
44	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column			,	
	(A) amount, list line 24e expenses on Schedule O)				ĺ
а		0		<u> </u>	
b		0			
C		0			
d		0		 	
e	All other expenses	0			
25	Total functional expenses. Add lines 1 through 24e	48,387	5,072	43,315	0
26	Joint costs. Complete this line only if the	,301	3,3,2	.5,519	<u>-</u>
	organization reported in column (B) joint costs				
	from a combined educational campaign and				1
	fundraising solicitation Check here				
	following SOP 98-2 (ASC 958-720)				

Part X	Balance	Sheet
--------	---------	-------

	•	Check if Schedule O contains a response or	note to any line in this Part X			
•				(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	-		1	
	2	Savings and temporary cash investments		311,590	2	415,665
	3	Pledges and grants receivable, net		0	3	0
	4	Accounts receivable, net		0	4	0
	5	Loans and other receivables from current and fo	ormer officers, directors,	· · · · · · · · · · · · · · · · · · ·	23.	
		trustees, key employees, and highest compensation	ated employees		,	
		Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified person	ns (as defined under section		ŭ	
		4958(f)(1)), persons described in section 4958(c)(3)(B), a	nd contributing employers and		7 -	
		sponsoring organizations of section 501(c)(9) voluntary el	mployees' beneficiary		7.2.	
ţ		organizations (see instructions) Complete Part II of Sche	dule L		6	
Assets	7	Notes and loans receivable, net		0	7	0
ğ	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or	1		3,63	1.1 76 6 - 14 15 - 13 15 15
		other basis Complete Part VI of Schedule D	10a 0			
	b	Less accumulated depreciation	10b 0	0	10c	0
	11	Investments—publicly traded securities	·	1,127,266	11	1,108,180
	12	Investments—other securities See Part IV, line	11	0	12	0
	13	Investments—program-related See Part IV, line		0	13	0
	14	Intangible assets		0	14	0
	15	Other assets See Part IV, line 11		0	15	0
	16	Total assets. Add lines 1 through 15 (must equa	al line 34)	1,438,856	16	1,523,845
	17	Accounts payable and accrued expenses		8,100	17	9,338
	18	Grants payable			18	
	19	Deferred revenue .		19		
	20	Tax-exempt bond liabilities .			20	
	21	Escrow or custodial account liability Complete F	Part IV of Schedule D		21	
es	22	Loans and other payables to current and former			2 %	
Liabilities		trustees, key employees, highest compensated			<u> </u>	
ab		disqualified persons Complete Part II of Schedu			22	
	23	Secured mortgages and notes payable to unrela		0	23	0
	24	Unsecured notes and loans payable to unrelated	•	0	24	0
	25	Other liabilities (including federal income tax, pa	•			
		parties, and other liabilities not included on lines	s 17-24) Complete			
		Part X of Schedule D		0	25	0 000
	26	Total liabilities. Add lines 17 through 25		8,100	26	9,338
10		Organizations that follow SFAS 117 (ASC 958		, 21	*	
če		complete lines 27 through 29, and lines 33 ar	nd 34.			
lan.	27	Unrestricted net assets		297,993	27	526,010
Ba	28	Temporarily restricted net assets		432,763	28	288,497
nd	29	Permanently restricted net assets		700,000	29	700,000
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC958),	check here ▶ ☐ and			
ō		complete lines 30 through 34.	_			
ste	30	Capital stock or trust principal, or current funds			30	
SS	31	Paid-in or capital surplus, or land, building, or ed	quipment fund		31	
t A	32	Retained earnings, endowment, accumulated in			32	
Z	33	Total net assets or fund balances		1,430,756	33	1,514,507
	34	Total liabilities and net assets/fund balances		1,438,856	34	1,523,845

Parl	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			
.1	Total revenue (must equal Part VIII, column (A), line 12)	1		128,919
2	Total expenses (must equal Part IX, column (A), line 25)	2		48,387
3	Revenue less expenses Subtract line 2 from line 1	3		80,532
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4		1,430,756
5	Net unrealized gains (losses) on investments	5		3,219
6	Donated services and use of facilities .	_6		
7	Investment expenses .	7		
8	Prior period adjustments .	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B))	10		1,514,507
Part	XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII.	•		
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			Yes No
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	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		100	
	X Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant? .		2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		Man.	
	separate basis, consolidated basis, or both			
	X Separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	of		
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X
	If the organization changed either its oversight process or selection process during the tax year, explain in	Ì	A***	76 - Mary
	Schedule O		<u> </u>	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?		3a_	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b_	<u> </u>

52-1957233 Page **12**

Form **990** (2016)

Form 990 (2016) Friends of Shanghai American School Foundation

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

2016 Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Friends of Shanghai American School Foundation 52-1957233 Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g 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. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having h control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. C Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) đ that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III е functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations 0 Provide the following information about the supported organization(s) (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E) Total 0

Schedule A (Form 990 or 990-EZ) 2016 Friends of Shanghai American School Foundation 52-1957233 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2012 **(b)** 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 153,735 210.098 24.940 188.943 85.004 662,720 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 153.735 210.098 24.940 85.004 662.720 188.943 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 662,720 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2012 (b) 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total 188,943 153,735 210,098 24,940 85,004 662,720 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar sources 41.512 45.941 33.930 2.008 47,134 170,525 Net income from unrelated business activities, whether or not the business is regularly carried on 0 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 833.245 11 Total support. Add lines 7 through 10 12 12 Gross receipts from related activities, etc. (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 79 53% 14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f)) 15 67 38% 15 Public support percentage from 2015 Schedule A, Part II, line 14 16a 33 1/3% support test—2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test-2016. 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

b 10%-facts-and-circumstances test-2015. 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

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

instructions

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees		-				
	received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities			}			
	furnished in any activity that is related to the				\		
	organization's tax-exempt purpose						C
3	Gross receipts from activities that are not an		-				
	unrelated trade or business under section 513						
4	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
	its behalf			_			C
5	The value of services or facilities						
	furnished by a governmental unit to the			ļ			
	organization without charge	<u> </u>		İ	1		C
6	Total. Add lines 1 through 5	0	0	0	0	0	
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons			ļ			C
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year				İ		C
С	Add lines 7a and 7b	0	0	0	0	0	
8	Public support (Subtract line 7c from	S. Fig. 18.					
	line 6)						C
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6	0	0	0	0	0	
10a	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar sources						0
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						_ 0
С	Add lines 10a and 10b	0	0	0	0	0	C
11	Net income from unrelated business						
	activities not included in line 10b, whether			İ			
	or not the business is regularly carried on						C
12	Other income Do not include gain or						
	loss from the sale of capital assets	ļ		ļ	ļ		
	(Explain in Part VI)						C
13	Total support. (Add lines 9, 10c, 11,						
	and 12)	l ol	0	l o	0	0	C
14	First five years. If the Form 990 is for the o	rganization's first, s	second, third, fourt	h, or fifth tax year a	as a section 501(c)		
	organization, check this box and stop here			-		•	▶ [
Sec	tion C. Computation of Public Su	pport Percenta	age				
15	Public support percentage for 2016 (line 8, c	column (f) divided b	y line 13, column ((f))		15	0 00%
16	Public support percentage from 2015 Sched	iule A, Part III, line	15			16	0 00%
Sec	ction D. Computation of Investmen	nt Income Perc	entage		_		
17	Investment income percentage for 2016 (line	e 10c, column (f) di	vided by line 13, co	olumn (f))		17	0 00%
18	Investment income percentage from 2015 S	chedule A, Part III,	line 17			18	0 00%
19a	33 1/3% support tests—2016. If the organ					and line 17 is	
	not more than 33 1/3%, check this box and	-	•		-		▶ _
b	33 1/3% support tests—2015. If the organ						. r-
	line 18 is not more than 33 1/3%, check this	box and stop here	e. The organization	i qualifies as a pub	licly supported orga	anization	▶ [_

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

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No 1545-0047 2016

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

_			
	ds of Shanghai American School Foundation		52-1957233
Part		or Advised Funds or Other Similar	
	Complete if the organization answ	ered "Yes" on Form 990, Part IV, line	
	Total number of and of upon	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and do		
_	funds are the organization's property, subject		
6	Did the organization inform all grantees, dono	-	
	used only for charitable purposes and not for		
	purpose conferring impermissible private ben	ent /	Yes No
Pari			
	Complete if the organization answ	ered "Yes" on Form 990, Part IV, line	7
1	Purpose(s) of conservation easements held b	y the organization (check all that apply)	
	Preservation of land for public use (e g , recre	eation or education) Preservatio	on of a historically important land area
	Protection of natural habitat	Preservatio	on of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organizati	on held a qualified conservation contributi	on in the form of a conservation
_	easement on the last day of the tax year	on note a quanto a concentration continuation	Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation ease	ments	2b
c	Number of conservation easements on a cert		2c
ď	Number of conservation easements included		
_	historic structure listed in the National Registe		2d
3	Number of conservation easements modified,		minated by the organization during
	the tax year ▶	, , , , , , , , , , , , , , , , , , ,	, 5
4	Number of states where property subject to co	onservation easement is located	
5	Does the organization have a written policy re		n, handling of
	violations, and enforcement of the conservation	- · · · · · · · · · · · · · · · · · · ·	Yes No
6	Staff and volunteer hours devoted to monitoring, in	specting, handling of violations, and enforcing	conservation easements during the year
			
7	Amount of expenses incurred in monitoring, inspe-	cting, handling of violations, and enforcing con	servation easements during the year
	▶ \$		
8	Does each conservation easement reported of	in line 2(d) above satisfy the requirements	of section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization rep		•
	balance sheet, and include, if applicable, the	•	nancial statements that describes
	the organization's accounting for conservation		011 - 01-11 - 0
Part		ctions of Art, Historical Treasures,	
	Complete if the organization answ	ered "Yes" on Form 990, Part IV, line	8
1a	If the organization elected, as permitted unde	r SFAS 116 (ASC 958), not to report in its	revenue statement and balance sheet
	works of art, historical treasures, or other simi	lar assets held for public exhibition, educa	ition, or research in furtherance
	of public service, provide, in Part XIII, the text		
b	If the organization elected, as permitted unde	• • • • • • • • • • • • • • • • • • • •	
	works of art, historical treasures, or other simi	•	ation, or research in furtherance
	of public service, provide the following amount		
	(i) Revenue included on Form 990, Part VIII,	line 1	▶ \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of a		sets for financial gain, provide the
	following amounts required to be reported und	· · · · · · · · · · · · · · · · · · ·	items
а	Revenue included on Form 990, Part VIII, line	:1	► \$ <u></u>
_ b _	Assets included in Form 990, Part X		▶ \$

Part	III Organizations Maintaining	Collections of A	rt, Histo	orical Tr	easures, or	Other S	imilar Asse	ts (continued)	
3	Using the organization's acquisition, ac	cession, and other i	records, c	heck any	of the follows	ng that are	e a significant	use of its	
	collection items (check all that apply)								
а	Public exhibition		d 📙	Loan	or exchange p	programs			
b	Scholarly research		е 🗌	Other			. 		_
С	Preservation for future generation	ns							
4	Provide a description of the organization		explain h	ow they fu	irther the orga	anızatıon's	exempt purp	ose in Part	
_	During the year, did the organization so	aliait ar ragaina dana	stions of s	et bistorie	cal traceurae	or other s	ımılar		
5	assets to be sold to raise funds rather						iiiiiai	Yes N	No
Dort			o do part						_
Part	Complete if the organization		on Form	990 Pa	rt IV line 9	or report	ed an amou	ent on Form	
	990, Part X, line 21	anowered ree			, 0,	о ор о			
	Is the organization an agent, trustee, c	ustodian or other int	ermedian	v for contr	ributions or ot	her assets	not		
	included on Form 990, Part X?			,				Yes I	No
b	If "Yes," explain the arrangement in Pa	rt XIII and complete	the follow	ving table					
								Amount	
С	Beginning balance					1c			0
d	Additions during the year					1d			
e	Distributions during the year					1e 1f			
f	Ending balance					<u> </u>	1.1.1.0		
2a	Did the organization include an amoun							Yes X I	No
b	If "Yes," explain the arrangement in Pa	rt XIII Check here if	the expla	anation ha	as been provi	ded on Pa	rt XIII		
Part			_						
	Complete if the organization						Th	. T (2) 5 5-	
4	December of wear balance	(a) Current year	(b) Pno	or year O	(c) Two years	0 (a)	Three years bac	k (e) Four years ba	C
1a h	Beginning of year balance Contributions			0				<u> </u>	
b	Net investment earnings, gains,							-	
·	and losses								
d	Grants or scholarships			_					
е	Other expenditures for facilities								
	and programs		<u> </u>						
f	Administrative expenses								
g	End of year balance	0]		0	<u> </u>	0		0	
2 `	Provide the estimated percentage of the			line 1g, co	olumn (a)) hel	d as			
a b	Board designated or quasi-endowmen Permanent endowment	%	%.						
C	Temporarily restricted endowment	▶ %							
Ŭ	The percentages on lines 2a, 2b, and		%						
3a	Are there endowment funds not in the			n that are	held and adr	ministered	for the		
	organization by							Yes	No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" on line 3a(ıı), are the related of	•	•					_3b	
4	Describe in Part XIII the intended uses		s endowr	nent fund	<u>s</u>		 		
Part			on Form	.000 Da	ort IV June 11	a Saa E	orm 000 Dr	art V. lino 10	
	Complete if the organization								
	Description of property	(a) Cost or oth (investme			ost or other is (other)		cumulated eciation	(d) Book value	
1a	Land	, ,	0		0				(
b	Buildings		0		0		0		
c	Leasehold improvements		0		0		0		(
d	Equipment		0		0		0		(
<u>e</u>	Other		0		0		0		(
Total	. Add lines 1a through 1e (Column (d)	must equal Form 99	0, Part X,	column (i	B), line 10c)		▶		(

Part VII	Investments—Other Secu		990, Part IV, line 11b See For	m 990 Part X line 12
(a)	Description of security or category (including name of security)	(b) Book value	(c) Method of v	aluation
(1) Financial o	derivatives		0	
(2) Closely-he	eld equity interests		0	
(3) Other				
				
(D)				
(E)				
(F) (G)			 	
(H)			 	
	nust equal Form 990, Part X, col (B) line 12)	>	0	
Part VIII	Investments—Program R			- 00 (00 (00 (00 (00 (00 (00 (00 (00 (00
T WITE VIII			990, Part IV, line 11c See For	m 990. Part X. line 13.
	(a) Description of investment	(b) Book value	(c) Method of v Cost or end-of-year	aluation
(1)	· · · · · · · · · · · · · · · · · · ·			
(2)				
(3)				
(4)				
(5)				
(6)				
_(7)				
	· · · · · · · · · · · · · · · · · · ·			
(9)				0.04.2
	nust equal Form 990, Part X, col (B) line 13)	>	0	
Part IX	Other Assets. Complete if the organization	n answered "Yes" on Form	990, Part IV, line 11d See For	m 990, Part X, line 15
		(a) Description		(b) Book value
(1)				
(2)				
(3)				
(4)			·	
(5)	······································			
(6)				
				ļ. —————
(8)				
(9)	<u> </u>			
	n (b) must equal Form 990, Part	X, col (B) line 15)		0
Part X	Other Liabilities.		000 Dest IV/ lose 44 a as 446 C	F 000 D+ V
	line 25	n answered "Yes" on Form	990, Part IV, line 11e or 11f S	ee Form 990, Part X,
1.	(a) Description of liability	(b) Book value		
(1) Federal i	ncome taxes		<u> </u>	
(2)			_	
_(3)			-	
(5)				
(6)			\dashv	
<u>(7)</u>				
(8)				
Total (Column (h) m	ust equal Form 990, Part X, col (B) line 25)	•	0	
			the organization's financial statement	s that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

SCHEDULE 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.

OMB No 1545-0047 2016 Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection Employer identification number Name of the organization Friends of Shanghai American School Foundation 52-1957233 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award X Yes the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States 3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (b) Number of (c) Number of (a) Region (d) Activities conducted in the (e) If activity listed in (d) is (f) Total offices in the employees, region (by type) (such as, a program service, expenditures for region agents, and fundraising, program services, describe specific type of and investments independent investments, grants to recipients service(s) in the region in the region contractors located in the region) in the region East Asia and the Educational Support (1) Pacific 5,072 (2) (3) (4) _ (5) (6) (7) (8) (9) (10)(11) (12) (13) (14) (15)(16)

0

0

0

0

0

0

5.072

5,072

(17)

3a Sub-total

b Total from continuation

sheets to Part I c Totals (add lines 3a and 3b) 52-1957233

Schedule F (Form 990) 2016 Friends of Shanghai American School Foundation

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. Part II

(if applicable) Eas Pac		:				COLOURON.
Da Ba				disbursement	assistance	valuation (book, FMV, appraisal, other)
	East Asia and the Pacific	General Support	5,072	WIRE		
	•					
-						
`						
-						

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 . 7

Schedule F (Form 990) 2016

Enter total number of other organizations or entities.

Page 3

52-1957233

Friends of Shanghal American School Foundation

Schedule F (Form 990) 2016

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. Part III

(a) Type of grant or assistance	grant or assistance (b) Region (c) Nur	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)						:	
(4)						,	
(5)							
(9)							
(7)							
(8)							
(6)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
						Sche	Schedule F (Form 990) 2016

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 separately file Form 5713, International Boycott Report (see

Foreign Partnerships (see Instructions for Form 8865)

Instructions for Form 5713, do not file with Form 990)

Schedule F (Form 990) 2016

X No

Yes

Yes

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization Employer identification number Friends of Shanghai American School Foundation 52-1957233 Form 990, Part VI, Section B, Line 11B Copies of the Form 990 are sent to all the board members for review before the Form 990 is submitted to the IRS Form 990, Part VI, Section B, Line 12C The Corporate Conflict of Interest Policy is reviewed annually by all board members Form 990, Part VI, Section C, Line 19 Corporate documents and tax forms are kept at 15 Roszel Road, Princeton, NJ 08540 and are available upon request