OMB No 1545-0052

Form 990-PF

Department of the Treasury

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation Do not enter social security numbers on this form as it may be made public.

1910

2018

		artment of the Treas nal Revenue Servic		o to www.irs.	gov/Form990PF fo	r instructions	and the I	latest inf	ormation.	191	U	Open to Public Inspection
			2018 or tax year b	eginning 1.	1/01/2018	, and ending	10/3	1/20	19			
	N	ame of foundation	n			-				er identifica	tion numb	oer
	Ρi	ne Spri	ng Founda	ation						24041		
	N	Number and street (or P O box number if mail is not delivered to street address) Room/suite						uite	B Telephone number (see instructions)			
	49	31 Pine	St						(713)	628-9	768	
			or province, country	and ZIP or fore	ign postal code		I.					ding, check here
		•	TX 77401		.g., poota, oodo					ост арриос.		
	_	Check all that			Initial return of a	former public cha	rity		D 1. Fore	gn organizat	nons chec	k here ▶ □
	Ŭ	Oncon un una	Final		Amended return							_
			=	ess change	Name change					gn organizat k here and a		ng the 85% test,
		Check type of			(3) exempt private four						•	_
પ્ત	H -	¬ · · · · ·						04		: foundation : 507(b)(1)(A),		terminated under
/ .	<u> </u>	Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation I Fair market value of all assets at Accounting method Cash X Accrual										_
94	I Fair market value of all assets at J Accounting method						11					th termination
, \			rom Part II, col (c),		(specify) nn (d) must be on cast	hacie)			under se	ection 507(b)	(I)(B), CHE	ck nere
	D	line 16) > \$	42,642.	- 1						I		(d) Disbursements
	التا			•	Denses (The total o	(-,			rvestment	(c) Adjus		for chantable
			in columns (b), (c),		• •	expense	· I	ır	icome	inc	ome	purposes
		1	unts ın column (a) (s		·	-						(cash basis only)
					(attach schedule)	60,2	:50.			<u> </u>		
				•	uired to attach Sch	³				<u> </u>		
			on savings and ter		nvestments	——						
			ls and interest fror	n secunties								
		5 a Gross re										
	4.		al income or (loss)	•		+						
	Revenue	1	or (loss) from sale									
	Je.		ales price for all as									
	é		jain net income (fr		e 2)					<u> </u>		
	•		t-term capital gain									<u> </u>
\odot			modifications		1							
2020		10 a Gross s	ales less returns a	nd allowances								ļ
5		b Less C	ost of goods sold									ļ
8		c Gross p	rofit or (loss) (attac	ch schedule)								<u> </u>
		11 Other in	come (attach sche	dule)								<u> </u>
NOV			Add lines 1 through			60,2	50.					_
.: Z		1	sation of officers,	-	ees, etc							
Q			nployee salaries ai	•								
NED	nses		plans, employee b			ļ						
£	Ē	16 a Legal fe	es (attach schedu	e) RF(ENED	¬[
SCAN	X	b Account	es (attach schedu ing fees (attach sc	hedule)	SCIACO.	I						
Q	8	c Other p	ofessional fees (a	ttach schedule)) 19	13,8	50.					13,850
U)	ī	17 Interest	4	S MAY	1 5 2020	1						
	ij	18 Taxes (a	ittach schedule) (s	eeinstructions	S	 						
	Ē	19 Depreci	ation (attach scheo acy	iule) and deple	LIT IIT	!						
	Ad	1	•		-14, U1	!						
	Operating and Administrative Expe		onferences, and n	neetings		$\frac{3}{3}$	23.			<u> </u>		3,323
	Ē	_	and publications			<u> </u>						
	atir		penses (attach sc	•		ļ——-	26.					626
	per		erating and adm	inistrative ex	penses.							
	Ō		s 13 through 23			17,7						17,799
			tions, gifts, grants	•			00.			я' -		4,000.
					Add lines 24 and 25	1. 21,7	99.					21,799
		i	line 26 from line 1									
		a Excess	of revenue over	expenses and	l disbursements	38,4	51.					

For Paperwork Reduction Act Notice, see instructions.

b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)



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P:	art II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End o	f year
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing		42,642.	42,642.
	2	Savings and temporary cash investments			
	3	Accounts receivable		·	
		Less allowance for doubtful accounts ▶			
	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 schedule)▶			
		Less allowance for doubtful accounts ▶			
şţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ĕ	10a	Investments – U S and state government obligations (attach schedule)			
	b	Investments – corporate stock (attach schedule).			
	С	Investments – corporate bonds (attach schedule)			
	11	Investments – land, buildings, and equipment basis ▶			
		Less accumulated depreciation (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).		42,642.	42,642.
	17	Accounts payable and accrued expenses		4,191.	
'n	18	Grants payable			1
Liabilities	19	Deferred revenue			į
Ē	20	Loans from officers, directors, trustees, and other disqualified persons		•]
iab	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)		4,191.	
		Foundations that follow SFAS 117, check here			
Balances		and complete lines 24 through 26, and lines 30 and 31.			
Ĕ	24	Unrestricted			
<u>8</u>	25	Temporanly restricted			
	26	Permanently restricted			
<u>n</u>		Foundations that do not follow SFAS 117, check here			
F		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			
ţ	28	Paid-in or capital surplus, or land, bldg , and equipment fund		38,451.	
se	29	Retained earnings, accumulated income, endowment, or other funds			
Ą	302	Total net assets or fund balances (see instructions)		38,451.	
Net Assets		Total liabilities and net assets/fund balances			
Z		(see instructions)		42,642.	
Р	art I	Analysis of Changes in Net Assets or Fund Balance	S		
		tal net assets or fund balances at beginning of year - Part II, column (a), line 30		f-year	
		ure reported on prior year's return)		. 1	
2	_	ter amount from Part I, line 27a		2	38,451.
3		ner increases not included in line 2 (itemize)		3	<u> </u>
4		d lines 1, 2, and 3		4	38,451.
5		creases not included in line 2 (itemize)		. 5	
6		tal net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	mn (b), line 30	6	38,451.
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Form 990-PF (2018) Pine Spring Foundation

UYA

Form 99		-282			Page 4
Part '		- see	<u>instr</u>	<u>uctic</u>	ons)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)	_			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	_			
	here and enter 1% of Part I, line 27b	1			1
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of				
	Part I, line 12, col (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)				
3	Add lines 1 and 2				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 4				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0				
6	Credit/Payments				1
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a	ľ			- 1
b	Exempt foreign organizations - tax withheld at source				1
С	Tax paid with application for extension of time to file (Form 8868) . 6c				
d	Backup withholding erroneously withheld 6d 6				
7	Total credits and payments Add lines 6a through 6d				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8				
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 .	I			0.
_11	Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ Refunded ▶ 11				0.
Part	VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or			Yes	No
	Intervene in any political campaign?		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the				
	definition		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or				
	distributed by the foundation in connection with the activities				
С	Did the foundation file Form 1120-POL for this year?		1c		Х
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$		į		
е	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		X
	If "Yes," attach a detailed description of the activities				1
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
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a	\neg	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	\neg	x
-	If "Yes," attach the statement required by General Instruction T	-		\neg	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
•	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict				
	with the state law remain in the governing instrument?		6	$\overline{\mathbf{x}}$	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	, '	7		X
, 8a	Enter the states to which the foundation reports or with which it is registered. See instructions			-	<u> </u>
	TX				
Ь	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	đ			
	each state as required by General Instruction G? If "No," attach explanation		8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for				
	calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV If "Yes," complete Part XIV		9		<u> </u>
10	Did any persons become substantial contributors during the tax year?				
	If "Yes," attach a schedule listing their names and addresses		10	Х	
UYA		Fc	m 99	0-PF	(2018)

X

3b

4a

4b

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the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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 2018?

foundation had excess business holdings in 2018)

4a

	O-PF (2018) Pine Spring Foundation VII-B Statements Regarding Activities	n s for Which Form	4720 May Be F		-28240	41	Page 6
5a	During the year, did the foundation pay or incur any amou		1 41 20 may De I	tequired (oormin	1	Yes	No
Ja	(1) Carry on propaganda, or otherwise attempt to influen		045/6)\2	Tyes [X No	165	- 100 -
	(2) Influence the outcome of any specific public election	• .		Lites E	<u> </u>	1	
		(see section 4955), or i	o carry on,	□vaa F	X No		
	directly or indirectly, any voter registration drive?			= =	=		
	(3) Provide a grant to an individual for travel, study, or ot	• •		Yes [X No	1	1 1
	(4) Provide a grant to an organization other than a charit	. •			 .		
	· // //			LYes [X No	1	
	(5) Provide for any purpose other than religious, chantab	le, scientific, literary, or	educational		_		
	purposes, or for the prevention of cruelty to children	or animals? .		∐Yes [X No		1
b	If any answer is "Yes" to 5a(1)-(5), did any of the transaction	ctions fail to qualify und	er the exceptions des	cribed in			<u> </u>
	Regulations section 53 4945 or in a current notice regard	ing disaster assistance	? See instructions	<u>.</u>	· <u> 5t</u>	<u>. </u>	X
	Organizations relying on a current notice regarding disas	ter assistance, check h	ere .	▶[」 │		1
C	If the answer is "Yes" to question 5a(4), does the foundar	tion claim exemption fro	m the tax			1	
	because it maintained expenditure responsibility for the g	rant? .			X No	i	
	If "Yes," attach the statement required by Regulations se	ction 53 4945-5(d)					ı
6a	Did the foundation, during the year, receive any funds, di	rectly or indirectly, to pa	y premiums			1	
	on a personal benefit contract?		•	☐ Yes [X No	1	1 1
b	Did the foundation, during the year, pay premiums, direct	ly or indirectly, on a per-	sonal benefit contrac				X
	If "Yes" to 6b, file Form 8870	,,,,,					
7a	At any time during the tax year, was the foundation a part	v to a prohibited tax she	elter transaction?.	. Yes [X No	ļ	1
b	If "Yes," did the foundation receive any proceeds or have	•			7t	.	x
8	Is the foundation subject to the section 4960 tax on paym	•			· F		
·	remuneration or excess parachute payment(s) during the	* *	000,000 111	Yes [X No		
Par	t VIII Information About Officers, Dire		Foundation Ma			oloves	,e
1 (41	and Contractors	cotors, rrustees,	r our aution mit	anagers, mgmy	· ala Elli	picycc	,
1	List all officers, directors, trustees, and foundation r	nanagers and their co	mnensation See in	etructions			
•		(b) Title, and average	(c) Compensation	(d) Contributions to	[(-), <u></u>		
	(a) Name and address	hours per week	(If not paid,	employee benefit pla	ans litethe	pense ac er allowar	count, nces
v: -:	Tim	devoted to position CEO	enter -0-)	and deferred compens	ation		
	Lin				ļ		
	Pine St Bellaire, TX 77401	02.00					—
	omeng Lian	CFO					
4931	Pine St Bellaire, TX 77401	02.00					
	· · · · · · · · · · · · · · · · · · ·						
2	Compensation of five highest-paid employees (othe	r than those included	on line 1 - see instr	ructions). If none, en	ter		
	"NONE."		 	T 2			
(a) N	ame and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit pla		pense ac er allowar	
		devoted to position		and deferred compens		ei allowai	ices
NON	3						
NON							
				 	_		
NON	3						
				ļ			
NON	<u> </u>						
NONI	2						
Total n	number of other employees paid over \$50,000			ı	•		
'				•	- 1		

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All other program-related investments. See instructions

3

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Total. Add lines 1 through 3

section 4940(e) reduction of tax in those years

UYA

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes Average monthly fair market value of securities 1a Average of monthly cash balances . . . 1b ь Fair market value of all other assets (see instructions) 1c С 44,777. d Total (add lines 1a, b, and c) . . 1d Reduction claimed for blockage or other factors reported on lines 1a and 2 Acquisition indebtedness applicable to line 1 assets 2 44,777. 3 Subtract line 2 from line 1d 3 Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see instructions) 4 672. 44,105. Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 5 Minimum investment return. Enter 5% of line 5 2,205. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations Part XI and certain foreign organizations, check here ▶ ☐ and do not complete this part.) 2,205. Minimum investment return from Part X. line 6 Tax on investment income for 2018 from Part VI, line 5 0. 2a 0. h Income tax for 2018 (This does not include the tax from Part VI) 2c 2,205. 3 Distributable amount before adjustments. Subtract line 2c from line 1. 4 Recoveries of amounts treated as qualifying distributions. . . 4 2,205. Add lines 3 and 4 5 Deduction from distributable amount (see instructions) . . . 6 6 0. Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1. 2,205. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 21,799. 1a Program-related investments - total from Part IX-B ь 1b 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 Suitability test (prior IRS approval required) За Cash distribution test (attach the required schedule) 3b 4 21,799. Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of 5 21,799. 6 Adjusted qualifying distributions. Subtract line 5 from line 4 6 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

					r
		(a)	(b)	(c)	(d)
1	Distributable amount for 2018 from Part XI,	Corpus	Years prior to 2017	2017	2018
	line 7				2,205.
2	Undistributed income, if any, as of the end of 2018				
а	Enter amount for 2017 only				
b	Total for prior years				
3	Excess distributions carryover, if any, to 2018				
а	From 2013				
b	From 2014				
c	From 2015				
d	From 2016 .				
е	From 2017 .				
f	Total of lines 3a through e .				
4	Qualifying distributions for 2018 from Part XII,				
	line 4 ▶ \$21,799.				
а	Applied to 2017, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required - see instructions)				
С	Treated as distributions out of corpus (Election				
	required - see instructions)				
d	Applied to 2018 distributable amount				2,205.
е	Remaining amount distributed out of corpus	19,594.			
5	Excess distributions carryover applied to 2018	-			
	(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:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	19,594.			
b	Prior years' undistributed income Subtract		•		
	line 4b from line 2b				
С	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 .				
е	Undistributed income for 2017 Subtract line				
	4a from line 2a Taxable amount - see			:	
	instructions				
f	Undistributed income for 2018 Subtract lines				
	4d and 5 from line 1 This amount must be				
	distributed in 2019 .				
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 2013 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2019.				
	Subtract lines 7 and 8 from line 6a	19,594.			
10	Analysis of line 9				
а	Excess from 2014				
b	Excess from 2015 .				
C	Excess from 2016	1			
d	Excess from 2017 .	1			
e	Excess from 2018 . 19,594.]			

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Part	XIV Private Operating Foundat	ions (see instru	ctions and Part	VII-A, question 9)		
1a	If the foundation has received a ruling or de-	termination letter that	t it is a private operatii	ng foundation, and		
	the ruling is effective for 2018, enter the dat	e of the ruling .				
b	Check box to indicate whether the foundation	n is a private operati	ng foundation describ	ed in section	4942(j)(3)	or 4942(j)(5)
2a	Enter the lesser of the adjusted net income	Tax year		Prior 3 years		
	from Part I or the minimum investment	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
	return from Part X for each year listed .	-		<u> </u>		
ь	85% of line 2a		†	1		
С	Qualifying distributions from Part XII, line 4		1			
•	for each year listed					
d	Amounts included in line 2c not used directly					
_	for active conduct of exempt activities				/	
е	Qualifying distributions made directly for		 			
•	active conduct of exempt activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative		`\			
·	test relied upon				i	
а	"Assets" alternative test – enter			1		1
•	(1) Value of all assets					
	(2) Value of assets qualifying under	-	+	<u> </u>		
	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 .		1	 \ 		
С	"Support" alternative test - enter					
	(1) Total support other than gross invest-			.		
	ment 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)		<u> </u>	+	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ 	
	(3) Largest amount of support from an					
	exempt organization			 		
Part	(4) Gross investment income . XV Supplementary Information	- (Complete th	in mark ambu if th		d 65 000 and	
rail		•	•	ie roundation na	ia \$5,000 or mo	re in assets at
	any time during the year-		<u>s.j</u>			
	Information Regarding Foundation Manag					
	List any managers of the foundation who have			tributions received by	the foundation before	the close of any
	tax year (but only if they have contributed more	e than \$5,000) (See	section 507(d)(2))			
	i Lin Xiaomeng Lian				 	
	List any managers of the foundation who own			(or an equally large po	ortion of the ownership	p of a partnership
'	or other entity) of which the foundation has a 1	10% or greater intere	st			
	Information Regarding Contribution, Gran					
'	Check here X if the foundation only mak	es contributions to p	reselected charitable	organizations and doe	s not accept unsolicit	ed requests for
1	funds. If the foundation makes gifts, grants, et	tc , to individuals or c	organizations under of	ther conditions, comple	ete items 2a, b, c, and	d See instructions
	The control of the co				 	
а	The name, address, and telephone number or	email address of the	e person to whom app	lications should be ad	dressed	
	The first state of the state of					
D	The form in which applications should be sub-	mitted and informatio	n and materials they	should include		
С,	Any submission deadlines					
			.			
d /	Any restrictions or limitations on awards, such	as by geographical	areas, charitable field	s, kinds of institutions,	or other factors	

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation show any relationship to any foundation manager or substantial contributor Purpose of grant or status of recipient Amount contribution Name and address (home or business) a Paid during the year LongYan No.2 High School Jiuyi N Rd, Xinluo Dist. Longyan, Fujian, China PC Educational 4,000. Total 4,000. **b** Approved for future payment

Total

Рa	rt XV	I-A Analysis of Income-Producing A	ctivities				
Ente	r gross	amounts unless otherwise indicated		isiness income	Excluded by sect	ion 512, 513, or 514	(e)
		•	(a)	(b)	(c)	(d)	Related or exemp function income
1	Progra	am service revenue	Business code	Amount	Exclusion code	Amount	(See instructions
	a _						
	b _						
	c _						
					ļ		
	f						
	g F	ees and contracts from government agencies					
2		pership dues and assessments					
3		st on savings and temporary cash investments .					
4		ends and interest from securities			ļ		
5		ental income or (loss) from real estate					
		ebt-financed property			<u> </u>		
_		ot debt-financed property .					<u></u>
6		ental income or (loss) from personal property					
7		investment income			 		<u> </u>
8		or (loss) from sales of assets other than inventory					
9		come or (loss) from special events					ļ
10		s profit or (loss) from sales of inventory .					
11		revenue a					
					 		
					 		
	е —	· · · · · · · · · · · · · · · · · · ·	-				
12		otal Add columns (b), (d), and (e)					
		. Add line 12, columns (b), (d), and (e)			·	. 13	I
		sheet in line 13 instructions to venfy calculations)		•	•		
	rt XVI		Accomplishin	ent of Exemi	ot Purposes		
	e No.	Explain below how each activity for which income				ortantly to the acc	omplishment
	▼	of the foundation's exempt purposes (other than b				-	
			<u> </u>		•		
						-	-
						,	
						-	
							
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			<u>. </u>				
				 			
							
			· · · · · · · · · · · · · · · · · ·	<u> </u>			
				_			•
_							
							

	rt XVII	Informati	pring Found ion Regarding Ti Organizations		Transaction	ons and	Relationships With I	-282404 Noncharita		
1	Did the	***************************************		in any of the followin	g with any other	er organiza	ition described in section 501(c) 💍	Yes	No
			(3) organizations) or in			-	•		1	3 -
								17, 5	ļ. ' '	<
а	Transfe	rs from the report	ting foundation to a non	charitable exempt oig	ganization of				٠	<u> </u>
	(1) Cas	h						1a(1)		X
	(2) Oth	er assets						1a(2)		X
b	Other tr	ansactions						and the second s	. ,	
	(1) Sal	es of assets to a	noncharitable exempt o	rganization				1b(1)		X
	(2) Pur	chases of assets	from a noncharitable e	xempt organization				. 1b(2)		X
	(3) Rer	ital of facilities, ed	quipment, or other asse	ets				1b(3)		X
	(4) Rei	mbursement arra	ngements	-				1b(4)	ļ	X
		ns or loan guaran						1b(5)	ļ	X
			ces or membership or f					1b(6)		X
С	_		oment, mailing lists oth				l always show the fair market	1c		X
(a) Li		Amount involved	umn (d) the value of the	haritable exempt organ			ription of transfers transactions,	and sharing arr	angem	ents
									m	
2 a b	(other th)(3)) or in section 527?	th, or related to, one	or more tax-ex	empt orgar	nizations described in section	501(c) Yes	1 X	No
		(a) Name of org	anızatıon	(b) Type	of organization		(c) Description of re	elationship		
							·	*****		
							_			
							-			
			I declare that I have examined laration of preparer (other that				ments and to the best of my knowled			
Sign Here	 	D		m tanpayary ia dased dif di	CEC		Ma the	y the IRS discuss preparer shown I ructions		
	Sign	ature of officer or tr	rustee	Date	Title			[v]√	[No.

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Pine Spring Foundation

Employer identification number

83-2824041

Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule [X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33^{1/3} % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or(2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

totaling \$5,000 or more during the year

Employer Identification number

P	ine	Spring	Founda	ation
_		~ [

83-2824041

Part I	Contributors (see instructions). Use duplicate copies of	f Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	Yiji Lin 4931 Pine St Bellaire, TX 77401	\$30,125.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Xiaomeng Lian 4931 Pine St Bellaire, TX 77401	\$30,125.	Person X Payroli
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization

Pine Spring Foundation

Employer identification number

83-2824041

Part II	Noncash Property (see instructions). Use duplicate co	opies of Part II if additional space	ce is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
.		s	
a) No. from Part I	(b) Description of noncash property given	(C) FMV (or estimate) (See instructions.)	(d) Date received
· · ·		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		<u> </u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-		<u> </u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
- - -		<u> </u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

Schedule B (Form 990, 990-EZ, or 990-PF) (2018) Page 4 Name of organization **Employer identification number** Pine Spring Foundation 83-2824041 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once. See instructions.) ▶ Use duplicate copies of Part III if additional space is needed (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift from (b) Purpose of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Form 990-PF Professional Fees Expense

Supporting Details for Form 990-PF. Part I, Line 16							
(a) Description	(b) Revenue and expenses per books	(c) Net investmen income	(d) Adjusted net income	(e) Disbursement for charitable purpose			
Legal fees:							
` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	0.	0.	0.	0.			
· · · · · · · · · · · · · · · · · · ·	0.	0.	0.	0.			
	0.	0.	0.	0.			
	0.	0.	0.	0.			
-	0.	0.	0.	0.			
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**	0.	0.	0.	0.			
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· · · · · · · · · · · · · · · · · · ·	0.	0.	0.	0.			
	0.	0.	0.	0			
Accounting fees:			-				
	0.	0.	0.	0			
	0.	0.	0.	0			
	0.	0.	0.	0			
	0.	0.	0.	0			
	0.	0.	0.	0			
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	0.	0.	0.	0			
	0.	0.	0.	0			
	0.	0.	0.	0			
	0.	0.	0.	0			
Other professional fees:							
Outside Services	8,850	0.	0.	8,850			
Setup Fee	5,000	0.	0.	5,000			
	0.	0.	0.	0.			
		I	l	I			

Form 990-PF Other Expenses Supporting Details for Form 990-PF. Part I. Line 23

(a) Description	(b) Revenue and	(c) Net investmen		(e) Disbursement
, ,	expenses per books	income	income	for charitable purpose
Office Expenses	626.	0.	0.	626.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
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	0.	0.	0.	0.
	0.	0.	0.	0.

Form 990-PF Amortization

Supporting Details for Form 990-PF, Part I, Line 23

	Supporting Details for Form 990-PF. Part I, Line 23								
_	(a) Description	(b) Date	(c) Amount	(d) Deduction	n (e)	(f) Current	(g) Net	(h) Adjusted	(i) Total
		Acquired,	Amortized	for Pnor	Amortization	Year	Investment	Net Income	Amount of
		Completed, o	r	Years	Period	Amortization	Income		Amortization
		Expended							
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 0.	0. 0.00000	0.	0.	0.	0.
0.	0. 0.00000	0.	0.	0.	0.
0.	0. 0.00000	0.	0.	0.	0.
 0.	0. 0.00000	0.	0.	0.	0.
0.	0. 0.00000	0.	0.	0.	0.
0.	0. 0.00000	0.	0.	0.	0.

Form 990-PF Substantial Contributors

Name (enter either the person's name or to business's name	he	(b) Address	
Person Yiji Lin	Street address 4931 Pine St		Room or suite no.
Business	City, town or post office	State	ZIP Code
	Bellaire	ТX	77401
	Foreign country	Foreign province/county	Foreign postal code
Person	Street address		Room or suite no.
Xiaomeng Lian	4931 Pine St		
Business	City, tow n or post office	State	ZIP Code
	Bellaire	TX	77401
-	Foreign country	Foreign province/county	Foreign postal code
Person	Street address		Room or suite no.
Business	City, tow n or post office	State	ZIP Code
	Foreign country	Foreign province/county	Foreign postal code
Person	Street address		Room or suite no.
Business	City, town or post office	State	ZIP Code
	Foreign country	Foreign province/county	Foreign postal code
Person	Street address		Room or suite no.
Business	City, town or post office	State	ZIP Code
	Foreign country	Foreign province/county	Foreign postal code

Street address		Room or suite no.
City, town or post office	State	ZIP Code
Foreign country	Foreign province/county	Foreign postal code
Street address		Room or suite no.
City, town or post office	State	ZIP Code
Foreign country	Foreign province/county	Foreign postal code
Street address		Room or suite no.
City, tow n or post office	State	ZIP Code
Foreign country	Foreign province/county	Foreign postal code
Street address		Room or suite no.
City, tow n or post office	State	ZIP Code
Foreign country	Foreign province/county	Foreign postal code
Street address		Room or suite no.
City, town or post office	State	ZIP Code
		
	City, town or post office Foreign country Street address City, town or post office Foreign country Street address City, town or post office Foreign country Street address City, town or post office Foreign country Street address City, town or post office Foreign country	City, town or post office Foreign country Street address City, town or post office State Foreign country Street address City, town or post office State Foreign province/county Street address City, town or post office State Foreign country Foreign province/county Street address City, town or post office State Foreign country Foreign province/county Street address City, town or post office State Foreign country Foreign province/county