Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 2019

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

Open to Public

Internel	Revenu	a Service	► Go to www.irs.gov/Form990 for Instructions	and the late	st informati	on.	Inspection
A Fo	or the 2	2019 calen	ar year, or tax year beginning, 20	19, and end	ling		- , 20
3 Ct	neck if a	pplicable:	C Name of organization National Tsing Hua University North A	America Fou	ndation, inc	. D Emp	loyer identification number
] Ad	idress c	hange .	Doing business as			-	83-0689060
] Na	ume cha	nge	Number and street (or P.O. box if mail is not delivered to street addr	1833)	Room/sulte	E Teler	phone number
Int	tial retu	m l	_777 Alexander Road		Suite 10	2	212-631-0808
] Ar	nal return	vterminated	City or town, state or province, country, and ZIP or foreign postal co	xde			
] An	nended	return	Princeton, NJ 08540			G Gros	s receipts \$ 413,687.5
Ap	plication	n pending	F Name and address of principal officer:	<u>`</u>) H(a) Is	this a group return	for subordinates? 🔲 Yes 📝 N
			Kuo-Lin Hu	10) H(b) A	re all subordina	ites Included? Xes N
Tä	x-exem	pt status:		(1) or 527	H	"No," attach a	list. (see instructions)
W	ebsite:	▶ , ,,	https://www.nthu-na-foundation.org/		H(c) G	roup exemption	number >
Fo	m of on	ganization: 📝	Corporation ☐ Trust ☐ Association ☐ Other ►	L Year of for	mation: 20	18 M State	e of legal domicile: DE
Par	t I	Summa	y	<u> </u>		···	· *
Т	1 E		ribe the organization's mission or most significant activ	/Itles: The C	orporation	s organized	exclusively for
8		-	and chantable purposes It supports National Tsing Hua U				
			nd research to improve the world today and for future gene				
	43		box $ ightharpoonup$ If the organization discontinued its operations		ed of more	than 25% o	f Its net assets.
			voting members of the governing body (Part VI, line 1a)	•		3	1
1			Independent voting members of the governing body (Pa		MVED.	4	<u> </u>
3			er of individuals employed in calendar year 2019 (Part)		1/2		1
}			er of volunteers (estimate if necessary)		K		·
			ted business revenue from Part VIII, column (C), line 12	. MAY Q	,2): 020	0 8 7a	4
١,			ed business taxable income from Form 990-T, line 39		\cdots	100	
+	ЬМ	ter millera	so business taxable income from Form 890-1, line 59	OGDE	N. Uph	75	Q.,
		^	no and growth (Dart VIII) line 4 h	OODL	-14, Oing	u tear	Current Year
),			ns and grants (Part VIII, line 1h)	• • •			405,471.8
ا!		_	rvice revenue (Part VIII, line 2g)		———		
•			income (Part VIII, column (A), lines 3, 4, and 7d)				1,674.7
			nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11	-	ļ		6,540.9
			ue-add lines 8 through 11 (must equal Part VIII, column	(A), line 12)			413,687.5
•			similar amounts paid (Part IX, column (A), lines 1-3) .		ļ	 	278,592.8
- 1		-	ld to or for members (Part IX, column (A), line 4)		<u> </u>		
B 1			ner compensation, employee benefits (Part IX, column (A),	lines 5-10)	<u> </u>		
1			il fundralsing fees (Part IX, column (A), line 11e)				
1			alsing expenses (Part IX, column (D), line 25)	· «Transo o « Samuelo o « Sacrett» :			
1 1	7 (Other expe	nses (Part IX, column (A), lines 11a-11d, 11f-24e) .				9,873.5
1	8 7	otal expe	ises. Add lines 13–17 (must equal Part IX, column (A), ili	ne 25) .	<u> </u>		288,466.3
1	9 F	levenue le	ss expenses. Subtract line 18 from line 12	`.			125,221.1
8					Beginning o	f Current Year	End of Year
퇽 2	10 ° 10	otal asset	s (Part X, line 16)	3 B. W. W.	4		260,640.4
죔 2	:1 T	otal llabili	les (Part X, line 26)				133,207.0
2 2			or fund balances. Subtract line 21 from line 20	· · ·	ì		127,433.4
art			e Block	 		····	
	- 11	as of partury.	i declare that I have examined this return, including accompanying sch	nedules and st	atements, and	to the best of	my knowledge and bellef, it
			. Declaration of preparer (other than officer) is based on all information				, .
- 15	. 3	.	the the			1	
ign		Signati	re of officer			Date ,	-1 -1
lere			Kun-lu Hu Cha	urma		ی	111/2020
u		Type o	print name and title	TE PRICEP	4		
		4	preparer's name Preparer's signature		Date		□ # PTIN
aid		, and type	broker a righte a difficulta	1	-a19	Check self-em	⊔"
rep	arer	ļ,		l			P. 0,30
	Only	Firm's nan				Firm's EIN ▶	
		Firm's add				Рһола по.	
ay t	ne IRS	discuss	nis return with the preparer shown above? (see instruct)	ions)	<u> </u>		· · Yes No
or Pe	perwo	rk Reduct	on Act Notice, see the separate instructions.	Cat	t. No. 11282Y		Form 990 (2019

3			ice Accomplishments		
	Check if	Schedule O contains	a response or note to any line in th	is Part III	
	Briefly describe	e the organization's r	nission:		
	The Corporation	n is organized exclusiv	ely for educational and charitable purpo	ses it supports National Tsing Hua University to	гел
			ation and research to improve the world		
	FIGURE TO THE PERSON OF THE PE	~			
	Did the organiz	zation undertake any	significant program services during th	e year which were not listed on the	
	If "Yes," descri	lbe these new service	s on Schedule O.		
			cting, or make significant changes	In how it conducts, any program	
					Ø
	If "Yes," descri	lbe these changes on	Schedule O.		
	expenses. Sec	otion 501(c)(3) and 50		of its three largest program services, as measu eport the amount of grants and allocations to i.	
_	- (Code:) (Expenses \$	50,000.00 including grants of \$	50,000.00) (Revenue \$.)
	,			inted to meet the financial needs for the costs an	ıd
				ong.	
	N 1 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1		The second secon		
	. • .			PHORE PERSON REPORT OF PROSEST PROSEST PROSEST REPOSTS REPOSTS PROSEST BERNELL FOR PROSEST PRO	
					
	<u>, , , , , , , , , , , , , , , , , , , </u>				

_	******)
-	(Code:) (Expenses \$	48,900.00 including grants of \$	48,900.00) (Revenue \$	
•	(Code: Huan-Yuan Sch) (Expenses \$ alorship Fund - A scho	48,900.00 including grants of \$	48,900.00) (Revenue \$ nts' financial needs for the cests and expenses to) o st
•	(Code: Huan-Yuan Sch) (Expenses \$ alorship Fund - A scho	48,900.00 including grants of \$	48,900.00) (Revenue \$ nts' financial needs for the cests and expenses to) o st
•	(Code: Huan-Yuan Sch) (Expenses \$ alorship Fund - A scho	48,900.00 including grants of \$	48,900.00) (Revenue \$ nts' financial needs for the cests and expenses to) o st
•	(Code: Huan-Yuan Sch In National Tein) (Expenses \$ Blorahip Fund - A acho By Hua University	48,900.00 including grants of \$ blarship fund was granted to meet stude	48,900.00) (Revenue \$ nts' financial needs for the costs and expenses to) o st
•	(Code:) (Expenses \$) alorahip Fund - A scho	48,900.00 including grants of \$	48,900.00) (Revenue \$ ints' financial needs for the costs and expenses to) o st
•	(Code:) (Expenses \$) alorahip Fund - A scho	48,900.00 including grants of \$	48,900.00) (Revenue \$ nts' financial needs for the costs and expenses to) o st
•	(Code:) (Expenses \$) alorahip Fund - A scho	48,900.00 including grants of \$	48,900.00) (Revenue \$ ints' financial needs for the costs and expenses to) o st
•	(Code:) (Expenses \$) alorahip Fund - A scho	48,900.00 including grants of \$	48,900.00) (Revenue \$ ints' financial needs for the costs and expenses to) o st
•	(Code:) (Expenses \$) alorahip Fund - A scho	48,900.00 including grants of \$	48,900.00) (Revenue \$ ints' financial needs for the costs and expenses to) o st
	(Code:) (Expenses \$) alorahip Fund - A scho	48,900.00 including grants of \$	48,900.00) (Revenue \$ ints' financial needs for the costs and expenses to) o st
	(Code:) (Expenses \$) alorahip Fund - A scho	48,900.00 including grants of \$	48,900.00) (Revenue \$ ints' financial needs for the costs and expenses to) o st
	(Code: Huan-Yuan Sch In National Tain) (Expenses \$	48,900.00 including grants of \$ plarship fund was granted to meet stude	48,900.00) (Revenue \$ ints' financial needs for the costs and expenses to) o st
	(Code: Huan-Yuan Sch In National Tain) (Expenses \$	48,900.00 including grants of \$ plarship fund was granted to meet stude	48,900.00) (Revenue \$ mts' financial needs for the costs and expenses to) o st
	(Code: Huan-Yuan Sch In National Tain) (Expenses \$	48,900.00 including grants of \$ plarship fund was granted to meet stude	48,900.00) (Revenue \$ ints' financial needs for the costs and expenses to) o st
	(Code: Huan-Yuan Sch In National Tain) (Expenses \$	48,900.00 including grants of \$ plarship fund was granted to meet stude	48,900.00) (Revenue \$ mts' financial needs for the costs and expenses to) o st
	(Code: Huan-Yuan Sch In National Tain) (Expenses \$	48,900.00 including grants of \$ plarship fund was granted to meet stude	48,900.00) (Revenue \$ mts' financial needs for the costs and expenses to) o st
	(Code: Huan-Yuan Sch In National Tain) (Expenses \$	48,900.00 including grants of \$ plarship fund was granted to meet stude	48,900.00) (Revenue \$ mts' financial needs for the costs and expenses to) o st
	(Code: Huan-Yuan Sch In National Tain) (Expenses \$	48,900.00 including grants of \$ plarship fund was granted to meet stude	48,900.00) (Revenue \$ mts' financial needs for the costs and expenses to) o str
	(Code: Huan-Yuan Sch In National Tain) (Expenses \$	48,900.00 including grants of \$ plarship fund was granted to meet stude	48,900.00) (Revenue \$ mts' financial needs for the costs and expenses to) o st
	(Code: Huan-Yuan Sch In National Tain) (Expenses \$	48,900.00 including grants of \$ plarship fund was granted to meet stude	48,900.00) (Revenue \$ mts' financial needs for the costs and expenses to) o st
	(Code: Huan-Yuan Sch In National Tain) (Expenses \$	48,900.00 including grants of \$ plarship fund was granted to meet stude	48,900.00) (Revenue \$ mts' financial needs for the costs and expenses to) o st
	(Code: Huan-Yuan Sch In National Tain) (Expenses \$	48,900.00 including grants of \$ plarship fund was granted to meet stude	48,900.00) (Revenue \$ mts' financial needs for the costs and expenses to) o st
	(Code: Huan-Yuan Sch In National Tain) (Expenses \$	48,900.00 including grants of \$ plarship fund was granted to meet stude	48,900.00) (Revenue \$ mts' financial needs for the costs and expenses to) o st
	(Code: Huan-Yuan Sch In National Tain) (Expenses \$	48,900.00 including grants of \$ plarship fund was granted to meet stude	48,900.00) (Revenue \$ mts' financial needs for the costs and expenses to) o stu
	(Code: Huan-Yuan Sch In National Tein (Code: Endowment Fu) (Expenses \$	48,900.00 including grants of \$ plarship fund was granted to meet stude 48,900.00 including grants of \$ for National Teing Hua University to ma	48,900.00) (Revenue \$ mts' financial needs for the costs and expenses to) o stu

Form **990** (2019)

ABDIT MO

1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
•	complete Schedule A	1	1	
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campalgn activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	_	/
4	-Section 501(c)(3) orgānizātionā. Did the orgānizātion engagē in löbbying activities, or have a section 501(h)	_	·	
теннациятан • 5	election in effect during the tax year? If "Yes," complete Schedule C, Part II	5		1
6 co.t.	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	5	1	
7``'	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
1.17.41W 414HW	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		1
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
. 8	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		1
	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		1
	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		1
, d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
8	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	<u> </u>	1
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	111	., ,	. 🗸
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, and XII	12a		1
, 1910 to 1910	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	ļ	1
14 e	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u> </u>	1
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundralsing, 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		1
15	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	1	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		1
6 and 17 -	Did the organization report a total of more than \$15,000 of expenses for professional fundralsing services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	 	1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	206	\vdash	
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		1

Part	Checklist of Required Schedules (continued)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
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	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		ļ
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	_	1
Ь	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	250		1
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	.26		1
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27.		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
8	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		1
þ	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28ь		1
C	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	~	<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	\$0		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31:		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	. 32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
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, Ilne 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35 a	-	✓
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	3 5 b		
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	<u> </u>	1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
	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	1	
-	Statements Regarding Other IRS Filings and Tax Compliance			_
* "	Check if Schedule O contains a response or note to any line in this Part V	• •	Yes	No
 1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a		1 03	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1	٤	
C ک	reportable gaming (gambling) winnings to prize winners?	1ç		1

art	Statements Regarding Other INS Hillings and Tax Compliance (continued)		· ·	 :
		(28.38.3%)	Yes,	No
2 e	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
_	Statements, filed for the calendar year ending with or within the year covered by this return 22 at 1 and 1	2b 2		
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	地址		1400
20	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a	1000	
3a •b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	. 7	
_	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
48	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	' '	1-
ь	If "Yes," enter the name of the foreign country			(28.29)
-	See Instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	- ,	1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	6c	, xxx -	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		٧	, _ ,
	organization solicit any contributions that were not tax deductible as charitable contributions?	88 .	·	√
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	are teal. To	
7	Organizations that may receive deductible contributions under section 170(c).			
8	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods !		die.	
	and services provided to the payor?	7a	· '.	<u>. 7</u> .
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	.7b	1 1	** **
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7C		٠,
	required to file Form 8282?	0. SEC.	ARCES C	1000
. 0	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	3. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
8	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71		· 1
T,	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		_₩_L+
þ	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	1 * -	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	74.	1	
.,	sponsoring organization have excess business holdings at any time during the year?	В	And the second	. 1
9	Sponsoring organizations maintaining donor advised funds.	表質型		的独
. 8	Did the sponsoring organization make any taxable distributions under section 4966?	92		> /
Ь,	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	,9b ∶		<u> </u>
0	Section 501(c)(7) organizations. Enter:		绿岭	
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part Vill, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter:			
8	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
.	against amounts due or received from them.)	12a	478474E	200
2a	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	3.100		E.S. T
ь 3	Section 501(c)(29) qualified nonprofit health insurance issuers.		(1)	
8	Is the organization licensed to issue qualified health plans in more than one state?	13a		1, T.
•	Note: See the instructions for additional information the organization must report on Schedule O.			akom'
ь	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			
C	Enter the amount of reserves on hand			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a:		<u>"</u>
b.	A M. C.	146	;	
5	is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	, 12,	, ir	,
	excess parachute payment(s) during the year?	15	: ************************************	interpretation of
	If "Yes," see Instructions and file Form 4720, Schedule N.			2615
16	is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	(450ses	-
	If "Yes," complete Form 4720, Schedule O.	器級		3.40
	· · · · · · · · · · · · · · · · · · ·	Form	n 990	(2019)

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. Check if Schedule O contains a response or note to any line in this Part VI			
Sect	Ion A. Governing Body and Management		_ 1	
		·	Yes	No
18	Enter the number of voting members of the governing body at the end of the tax year	433		
_	If there are material differences in voting rights among members of the governing body, orif the governing body delegated broad authority to an executive committee or similar		15	**
7.44	committee, explain on Schedule O.		1000	
ь	Enter the number of voting members included on line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
_	any other officer, director, trustee, or key employee?	2		1
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person? .	* 3 ,7	1	1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	. 4	. VK 4	✓.
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5.		
6 .	Did the organization have members or stockholders?	<u>. 6</u> ?		1
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	' نے ا	1	١,
	one or more members of the governing body?	7a	<u> </u>	↓ √
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	70		
. 8	Did the organization contemporaneously document the meetings held or written actions undertaken during		138	200
v	the year by the following:			
·a	The governing body?	88	1	
b	Each committee with authority to act on behalf of the governing body?	86	1	ļ —
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	- T		
A	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9.		<u> </u>
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	iue C		
½ 10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	108	<u> </u>	-
4	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10Ь	, ,	١,
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1	<u> </u>
ď	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
128	Did the organization have a written conflict of interest policy? If "No," go to line 13	128		
Ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	'- 	1
Ċ	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	1		1 .
4.5	describe in Schedule O how this was done	12c	1	خينا
13 -	Did the organization have a written whistleblower policy?	13		1
14	Did the organization have a written document retention and destruction policy?	14	interior de	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	1862.0	1
ь	Other officers or key employees of the organization	15b		1
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		4.25	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	3		
	with a taxable entity during the year?	16a	1 7	1
′ b∙	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			3.0
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
A	organization's exempt status with respect to such arrangements?	16b	<u> </u>	<u> </u>
	I let the states with which a copy of this Form 900 is required to be fled by New Jersey.	·		
17	List the states with which a copy of this Form 990 is required to be filed New Jersey	T /0-		 -04/ `
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	1 (5 6 0	TION :	(a) ruc
	Own website Another's website "W" Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of	f inte	nest n	olicv
	and financial statements available to the public during the tax year.		p	,
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords	•	
	Kuo-Lin Hu. 777 Alexander Road suite 102, Princeton, NJ 08540, Tel: 212-631-0808		'	

Form	990	(201	8

16.8 99	· · · · · · · · · · · · · · · · · · ·			
Dog VIII	Compensation of Officers, Directors,	Injetoce Key Employees	Highest Compensated	Employees and
Fait VII Q	Compensation of Officers, Directors,	iifamas, val riiibioloos	, ingrest compensated	Zb.03000) 0110
المناهدين والمناهدة	Independent Contractors			

Check if Schedule O contains a response or note to any line in this Part VII . . .

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per week (list any hours for related	box, office	unles er eine	Pos sck s pe d a d	raon	s both Highest compe	n an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations.	
	organizations below dotted line)	Individual trustee or director	nei trustee		руж	ompensated		·	,	, , , ,	
(1) Jordan Hu			,		Γ		-			-	
Chairman of the Board		*	<u> </u>	4	 		┼		<u> </u>		
(2) Donald Sung	<u> </u>	!	-	 کڏ ،	j.	1	1:				
Treasurer	- 	A. Sec.		1	275	- TY	ست		<u> </u>	<u> </u>	
(S) Alpha Chen	2	ļ.	ŀ '	ľ	ļ.		1				
Director		1	ļ	<u> -</u> -	_	14.	ļ. 		,	, , ,	
(4) Kyle Pi		1	1	;	J :	. :					
Director	, 1 (3-X)	₩				<u> </u>	 	<u> </u>			
(5) Yu-En Tsai	<u> </u>	, ,	1 1				l ₌	<u>ـ</u> ـ	•	'	
Secretary	<u> </u>	1.7	1	~	ri i		!				
(6) Cannon Chen	272	j.		Ĭ.,	,,,	' '	· .		,	j .	
Director	- 		╂	-	!	ļ	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			N 14 1	
(7) Heldi Wang	<u> </u>	1	1	. :		,					
Director	100	1.4	-	-	-		+	<u> </u>			
Lin-Wen Hu	- 			1	1		1-			, ,	
Director	-	1.	٠.	-	╄	16	-		-	 	
(9) Chuping Huang		Ž.			1	1	1			". ,	
Director Director		1.00	+-	ļ	╁	<u> </u>	╫┈		-		
(10) Eric Ma		V.		-	l		,	,		<u>.</u>	
Director	-	₩.	-	-	╀	├	+	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
(11) iHein Chung	32-1-1-1	ار ا		1	1			.0	ļ. 1	,	
Director	-	+	+-	\vdash	╁	1-	╫			- 1	
12		1	`							39.00 W E 3.7.1	
(13)		1	1				1	- A			
		1	╄	┼	+	 	-			\$ V P PE	
(14)	<u> </u>	1	£ .	Ť		ŀ	1			1	

Part	VII Li Section A. Officers, Directors,	rustees,	Key	Em	plo	yee	s, an	d H	lighest Compe	nsated E	mplo	yees (co	entinued)
-	**************************************				•	C)			:				
•	(4)	(B) Position						(D)	(E)		į (F)	
	Name and title	(do not check more to Average box, unless person to							Reportable	Reports			d amount
	hours	officer and a director/tru						compensation	compens from rela			ther	
		per week (list any	Individual trustae or desctor	7	3	8	3.7	ਰ	from the organization	organizat			nsation 1 the
		: hours for	유축	institutional	Officer	Key emptoyee	Highest ox employee	-Former	(W-2/1099-MISC)	(W-2/1099-		organiza	ttion and
		related	8€.	1	 	룅	8 g-		-			related on	antzations
		organizations below	7 2	훈	١,	3	Į	٠.					
		dotted line)	🖁	trustee	١.	•	1 3	:					
				8			Highest compensated employee						
·		 }	 		╫	├	╁	- -					
(15)		 	ł		٠.	l							
/4 <i>B</i> \		 		┝╌	 -	+-	 -	-	<u>'</u>				
(16)			٠		١٠,				ľ				
****				 	⊢	┢	├	├		<u> </u>			
(17)		 	ł		İ								
		ļ	ļ	 	 	ļ	ļ	 		ļ			
(18)			ł	l			1						
		ļ	L	<u></u>	L	<u> </u>	<u> </u>	<u> </u>		 			
(19)		<u></u>].		ŀ	1	1	,- <u>-</u>	1	1			
•	-1 +++	1.	<u> -</u>	<u> </u>	'		<u> </u>	<u> </u>					
(20)			i i	'									
		T	l			l		<u> </u>					
(21)	*	K . 11			П	Г							
3Z			1		,		l				1		
(22)	-	 	1	┢					1				
Y		************	1				1			l			
/29\	77	1		 	╁╌	t^-	 		 				
(23)		 	ď		1			ĺ					
.				⊢	├	┼	├	┢	 				
(24)		 :	1			İ							
		ļ. ·		<u> </u>	-	 	├	├	ļ	ļ			
(25)			į .		ľ		ŀ		ļ				
		<u> </u>	<u> </u>	<u> </u>		L	<u> </u>	<u> </u>	ļ	<u> </u>			
15	Subtotal			٠	•	•			0		Ü		
C	Total from continuation sheets to Part			•	•	٠							
d	Total (add lines 1b and 1c)	<u></u>		•	4	٠		<u> </u>	0		0		
2	Total number of Individuals (including bu	t not limited	d to th	1066	e lls	ted	above	e) w	ho received mor	e than \$10	000,000	of	
	reportable compensation from the organ	Ization ▶							0				
												\	res No
3	Did the organization list any former	officer, din	ector,	tru	ıste	e, l	сву в	mp	loyee, or highes	st compe	nsated		
	employee on line 1a? If "Yes," complete											3	1
4	For any individual listed on line 1a, is the	sum of re	porta	ble	con	npe	nsatio	n a	ind other compe	nsation fro	om the		
•	organization and related organizations												
	individual	.		,				-, 				4	17
	Did any person listed on line 1a receive of			-	Hon	fm	m anı	,,,,,,	related organiza	tion or ind	ikidual		-
5	for services rendered to the organization									uon or ma	.IVIQUEI	5	1
04		111 100,	Julip	0,0		100	0.00.	-	sour pordon .	_ 		1 4 1	
36CU	on B. Independent Contractors	· • · · · · · · · · · · ·			14							Li- 010	0000
,1	"Complete this table for your five high												
	compensation from the organization. Rep	ort comper	ISATIO	n to	rtne	е са	uenda	r ye	ar ending with oi	r within the	organ	ization's	tax year.
	(A)								(B)	. 1		(C)	
<u> </u>	Name and business add	17988						L	Description of ser	VICES		Compensat	10N
	-												
ļ.,	ř-												
٠ ,	+ +												
- د د د م	<u></u>							Г					
								t		i		 	
~	Total number of Independent contractor	are Archiel	na h	# -	V7+	llm	ted to		nge ligted show	(a) who			
2	received more than \$100,000 of compens							<i>.</i>	MAG HOTON STON	(C) WINC			
4 ⁸ -1 + 41	Tracervaci more man \$100,000 or compans	SAUOTI ITOM	LING O	Han	IIZKI	uUII			0	!·			200

12616	-VIIIR	Check if Schedule O contains a resp	bonse	e or note to an	y line in this Pa	rt VIII		\sqcap
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
88	18	Federated campaigns 1	10					
5 5	ь		16					
Giffs, Grants ilar Amounts	C		10		before we also have any fire and reflection in some			
₽ 2	d	<u></u>	14					•
ons, Gif Similar	•		10		د			
Contributions, and Other Sim	1	All other contributions, gifts, grants,						
专章			11	405,471.89		' '	}	ļ
貴思	9	Noncash contributions included in	. L		. 25			
Contributk and Other	١.		10 \$	79,669.69		, ,		
0 8	h	Total Add lines 1a-1f		, , , >	405,471.89			
			F	Business Code	,			
Program Service Revenue	2a	AND THE RESIDENCE OF THE STREET OF THE STREE	 -					<u> </u>
gram Ser Revenue	b	<u> </u>	 -					
EB	G d	V2						
2.2			 				 	
Ē		All other program service revenue .						———
<u>.</u>	g	Total. Add lines 2a–2f		>				
	3	Investment income (including divide			**************************************			
	-	other similar amounts)			1,674.73			
	4	Income from Investment of tax-exempt						
	5	Royaltles						
		(I) Real		(II) Personel				
	6a	Gross rents 6a						
	b	Less: rental expenses 615	\bot					
	C	Rental Income or (loss) Sc						
	đ	Net rental income or (loss)		>				
	7a	Gross amount from (i) Securities	<u>'</u>	(II) Other				}
		sales of assets					į	<u> </u>
		other than inventory 7a						1
9	Ь	Less: cost or other basis						
Revenue		and sales expenses . 7b						ļ
Re	d	Gain or (loss)					<u> </u>	
2		- · · · -	÷	>				
₩	8a	Gross income from fundraising events (not including \$	i					
	1	of contributions reported on line	- 1			1		
			8a 📗			ŀ		
	ь		Bb				ļ	1
	C	Net income or (loss) from fundralsing	event	ls . >				
	9a	Gross income from gaming						
		activities. See Part IV, line 19 .	<u>Da</u>		· ·		ļ	ĺ
	Ь	Less: direct expenses	95					
	С	Net Income or (loss) from gaming activ	vities	>				
	10a	Gross sales of inventory, less						
	l		0a					1
			OP			ļ		
	C	Net income or (osa) from sales of inve	<u>entor</u>					
9			L	Business Code				-
Miscellaneous Revenue	118	Activity Revenue	-	651110	6,540.90			
	b		 					
scellaned Revenue	C	All add - and and and and and and and and and and	├			ļ		
₹ "	d	All other revenue						
	12	Total revenue See Instructions	• •	<u> </u>	6,540.90			
					. 467 007 69	-	-	ā

Form 99	00 (2019)			-	Page 10
Part	IX Statement of Functional Expenses in 501(c)(3) and 501(c)(4) organizations must comp	plete ell columns "All	other organizations	must complete colu	ımn (A)
Secuo	Check if Schedule O contains a response			mast complete cold	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
ì* 1 "	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	+ -			
2	Grants and other assistance to domestic individuals. See Part IV, line 22	4.	1_ x		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	278,592.84	278,592.84		
4	Benefits paid to or for members	,			783267802813
5	Compensation of current officers, directors, trustees, and key employees	1	- F		7
6 .	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				،
7	Other salaries and wages	: .			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1 1	V-	, , , , , , , , , , , , , , , , , , , ,	
9	Other employee benefits	,		, ,	
10	Payroll taxes				
11	Fees for services (nonemployees):		- 1 <u>5 171</u> -	, , , , , , , , , , , , , , , , , , , ,	
8	Management		- 15 77 5	البيدين با	, , ,
· D	Legal	S A S A A A A A A A A A A A A A A A A A		Ababa as a aga abbababa	F1" /* - /*
d	Lobbying			7	
e	Professional fundraising services. See Part IV, line 17	1 189			· · · · · · · · · · · · · · · · · · ·
f or	Investment management fees			,	·
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	,		126.00	News and a second and a second and a
12	Advertising and promotion			,	1
13	Office expenses	, , , , , , , , , , , , , , , , , , , ,	",		,1 ,
14	Information technology		-		4
15	Royalties	9 2 2 3 3 4 1 1 2 2 3		15	
16 17	Occupancy			•	-
17 18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	, "			,
19	Conferences, conventions, and meetings .	9,587.98	j la d	9,587.98	1 :
20	Interest			1	
21	Payments to affiliates			V	
22	Depreciation, depletion, and amortization .		7-7	<u> </u>	
23	Insurance	Davida de la California		30.524004014430004015	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If	Market and the second			
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
8	Registration Fee	25		25.00	
b	Postages	134.56	,	134.56	i
C	्रिक्टर स्टूबर्स्टर स्टूबर /del>	, ,			
d	p dem le stambare le l'actionne à dominable de describble d'élèmet et d'élèmet le la follogique de manuelle se	<u> </u>	<u> </u>		
8	All other expenses	159.56	- (159.56	
25 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	288,466.38	278,592.84	9,873.64	1
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)			,	,
	INIUMIN OUT OUT LINUU OUUT ZU	<u> </u>	<u> </u>	<u> </u>	

P	art X	Balance Sheet			
,	• -,	Check if Schedule O contains a response or note to any line in this Pa	(A)	• ••	(B)
٠.	. 4	e e e e e e e e e e e e e e e e e e e	Beginning of year	,	End of year
	1	Cash—non-interest-bearing	1,225.30	٠ 1 ٠	2,381.76
	, 2	Savings and temporary cash investments		2	257,271.68
	. 3	Pledges and grants receivable, net	Th =1	3	,
	4	Accounts receivable, net	/	₹40	17
	5	Loans and other receivables from any current or former officer, director,			
,		trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		6	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	1	8	
8	7	Notes and loans receivable, net	·	7	
Assets	8	Inventories for sale or use	n al march American Edite	.8	1 . 200
₹	9	Prepaid expenses and deferred charges		.9	· -
;	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			the first of the second section is a second
:	b	Less: accumulated depreciation		10c	
:	11	Investments—publicly traded securities	Σ.,	'11]	
	12	Investments—other securities. See Part IV, line 11		12	
,	13	Investments—program-related. See Part IV, line 11		13	1
1	14	Intangible assets	987.00	14	987.00
,	15	Other assets. See Part IV, line 11	· '. '	/-,	11km : 2
· <u>`</u> `	16	Total assets. Add lines 1 through 15 (must equal line 33)	2,212.30		260,640.44
-q-1	17 .	Accounts payable and accrued expenses	Zer 1 - 2 - 565 C 5	17	
-	18	Grants payable	<u>, i </u>	18	133,207.00
	19	Deferred revenue	<u>, , , , , , , , , , , , , , , , , , , </u>	19	\$ 4 1
,	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	A-10/2019/01/2019/2019/2019	21 ,	
Llabilities	22	Loans and other payables to any current or former officer, director, forustee, key employee, creator or founder, substantial contributor, or 35%?			
a ,		controlled entity or family member of any of these persons	, t- , , , , , -	22	ļ:-
_	23	Secured mortgages and notes payable to unrelated third parties	, , ,	23:	1
	24	Unsecured notes and loans payable to unrelated third parties		24	
,	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X		-	
ξ.		of Schedule D	<u> </u>	25	A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	26	Total liabilities. Add lines 17 through 25		26	133,207.00
82	' p	Organizations that follow FASB ASC 958, check here ► ☑ and complete lines 27, 28, 32, and 33.			at the interest of the control of th
묨	27	Net assets without donor restrictions	2,212.30		37,470.77
	28	Net assets with donor restrictions	To a supplied of the supplied	28	89,962.67
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds	107	29	4
8	30	Paid-in or capital surplus, or land, building, or equipment fund	4 1	30	1
3	31	Retained earnings, endowment, accumulated income, or other funds		-31	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
at /	32	Total net assets or fund balances	2,212.30	32	127,433.44
Ž	33	Total liabilities and net assets/fund balances	2,212.30	33	260,640.44

Form 99	30 (2018)			Page 12
Pan	XI A 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)	12	4	13,687.52
2	Total expenses (must equal Part IX, column (A), line 25)	,2 \	2	88,466.38
3	Revenue less expenses. Subtract line 2 from line 1	-3	1	25,221.14
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4 , j.,	, ,	2,212.30
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	: 8.		
7	Investment expenses	7/		***
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain on Schedule O)	9		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	· '		
	32, column (B))	10	1	27,433.44
Part	XII Financial Statements and Reporting			* 11
*	Check if Schedule O contains a response or note to any line in this Part XII	٠, ١, ٠		. :. 🔲
1 -				es No
1	Accounting method used to prepare the Form 990: Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other,"	explain in) (1)	
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an Independent accountant?		29	✓.
	If "Yes," check a box below to indicate whether the financial statements for the year were co	mpiled o		
	reviewed on a separate basis, consolidated basis, or both:			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
ь	Were the organization's financial statements audited by an independent accountant?		2b.	√
	If "Yes," check a box below to indicate whether the financial statements for the year were aud	ited on a		
	separate basis, consolidated basis, or both:			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
C	if "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov		f	
	the audit, review, or compilation of its financial statements and selection of an independent account	ant?.	20	M4(1.4) _ 3 .44
	If the organization changed either its oversight process or selection process during the tax year, e	explain or	1 1 1 1 1	
	Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	orth in the		l' .
	Single Audit Act and OMB Circular A-133?		38.	✓.
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not un			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such	audits .		
, .			Form	990 (2019)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Tressury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047 201**9**

Open to Public Inspection

Name of the organization Employer Identification number National Taking Hua University North America Foundation, Inc. 83-0689060 Part I 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). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 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: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 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). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 10 An organization that normally receives: (1) more than 331/3% 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 331/8% 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.) 11 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 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. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) 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. functionally integrated, or Type III non-functionally integrated supporting organization. Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (lw) is the organization (v) Amount of monetary (vi) Amount of 60 EIN (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) docum instructions) instructions) Yes No (A) (B) (C) (D) ; (E) 22. 3.3

Total

		_
n	-1	о
Pac	18	4

* ************************************	(Complete only if you checked the Part III. If the organization fails to						airy under
Secti	on A. Public Support						/
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2015 .	(b) 2016	(c) 2017	(d) 2018	(e) 2019 /	_(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	,		,	_		,
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	y 5 1	*	, .	/		
3	The value of services or facilities furnished by a governmental unit to the organization without charge			-			
4	Total. Add lines 1 through 3		<u>}</u> , ,		/		, 4.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)	,					
6	Public augiport. Subtract line 5 from line 4	A GEORGIA G	ų	L manual	Communication (wii
	on B. Total Support	<u> </u>		/	4 1	<u> </u>	. =
	dar year (or fiscal year beginning in)	. (a) 2015 ···	(b) 2016	(c) 2017	9 42 2018	(e) 2019	(f) Total
7	Amounts from line 4	,	/				,**
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on	/	-				
10	Other Income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	10/1 1100	السائد والمالي	* **			
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc	•	•			12	
13	First five years. if the Form 990 is for the		n's first, secor	ıd, third, fourti	n, or fifth tax y	ear as a sectio	n 501(c)(3)
- r	organization, check this box and stop he						🕨 [
	on C. Computation of Public Suppor						· · · · · · · · · · · · · · · · · · ·
1-1	Public support percentage for 2019 (line			***		14	· %
15	Public support percentage from 2018 Sci 331x% support test—2019. If the organi	hedule A, Part	II, line 14 .			15	shook this
16a	box and stop here. The organization qua					5./376 OF HIORE,	
_	331/2% support tost—2018. If the organi						► L
Þ	this box and stop here. The organization					15 33 73 70 01 111	ore, check
17a		•	• •	_		6a, or 16b, and	d line 14 is
	10% or more, and if the organization me Part VI how the organization meets the " organization	eets the "facts	and-circumsi	ances" test, c	heck this box i	and stop here .	. Explain in
b	10%-fects-and-circumstances test—2 15 is 10% or more, and if the organization in Part VI how the organization r	ation meets th	e "facts-and-	circumstances	7 test, check	this box and	stop here. a publicly
	supported organization						▶ [
18	 → Private foundation. If the organization di ✓ instructions 				-		

	577 (1 dim 555 di 555 LL) 2516			E E E E E E			
Part	USUNDER SCHEDULE FOR Organize (Complete only if you checked the				nization failed	to qualify unc	for Part II
٠- ،	If the organization fails to qualify						201 I QIL III.
Secti	on A. Public Support	undor the te	JOIO HOLOG DON	Diri piodoc ot	ompioto i are ii	•/	······································
	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees	(a) 20.0	(0) 20.0	<u> </u>	(0) 20:0	10/ = 0	
•	received. (Do not include any "unusual grants.")				2,000.00	107,664.00	109,664.00
2	Gross receipts from admissions, merchandise	€ I	- 1		2,000.00	101,004.00	100,004.00
	sold or services performed, or facilities						
	furnished in any activity that is related to the organization's tax-exempt purpose					6.540.90	6,540.90
3	Gross receipts from activities that are not an					0,340.50	<u>0,3≒0.50</u>
•	unrelated trade or business under section 513		1	t			
4	Tax revenues levied for the		 				 -
•	organization's benefit and either paid to						
	or expended on its behalf						
_	The value of services or facilities						
5	furnished by a governmental unit to the					1	
	organization without charge			1	1		
•	_					444.004.00	440.004.00
6	Total. Add lines 1 through 5	· · · · · · · · · · · · · · · · · · ·	 		2,000.00	114,204.90	116,204.90
7 e	received from disqualified persons .						
	· · ·				2,000.00	69,500.00	71,500.00
Þ	Amounts included on lines 2 and 3					1	
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year		t t				i
	•						
	Add lines 7a and 7b				2,000.00	69,500.00	71,500.00
8	Públic support. (Subtract line 7c from		t				
	line 6.)		المهادات المساورة	/	المستثنا		44,704.90
		(=) 001E	A3 0016	(-) 0017	(d) 2018	(e) 2019	(f) Total
	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	1 1		
9	• 1		ļ	<u> </u>	2,000.00	114,204.90	116,204.90
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties, and income from similar sources.						
			∤	ļ	212,.30	1,674.73	1,887.03
D	Unrelated business taxable income (less			}			
	section 511 taxes) from businesses acquired after June 30, 1975						
	•			ļ			
C	Add lines 10a and 10b				212.30	1,647.73	1,887.03
11	Net income from unrelated business						
	activities not included in line 10b, whether				1		
	or not the business is regularly carried on		 	<u> </u>	ļ		
12	Other income. Do not include gain or				1 1		
	loss from the sale of capital assets (Explain in Part VI.)					1	
40	• •		· · · · · · · · · · · · · · · · · · ·	<u> </u>		<u></u>	
13	Total support. (Add lines 9, 10c, 11, and 12.)		ļ	Ì			
44	,			1	2,212.30	115,879.63	118,091.93
14	First five years. If the Form 990 is for the	-					
74 ,	organization, check this box and stop he on C. Computation of Public Suppo			· · · · · ·			· · • 🗸
				10		1481	0/
15	Public support percentage for 2019 (line					16	%
16	Public support percentage from 2018 Sci			<u> </u>		1 10 1	70
	on D. Computation of investment in			hy line 40 ani	(f)	147	%
- 17 - 10	Investment income percentage for 2019 (='		-		17	
18	Investment income percentage from 2016 331/s% support tests—2019. If the organ						
19a	17 is not more than 331/3%, check this box						
b	331/s% support tests—2018. If the organization 18 is not more than 331/s% shock this						
	line 18 is not more than 331/3%, check this	=	_	•			
: ZU -	 Private foundation, if the organization di 	io not check a	LDOX ON IING 14	. 182. OT 190. (CHECK THIS DOX (anu see mstruc	ווטווט 📂 📗

	orting Orga	

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

70CL	on A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
_	class or purpose, describe the designation. If historic and continuing relationship, explain.	. 1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3 a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
_	(b) and (c) below.	3a .	,	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
C		3c		
4 a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and If you checked 12a or 12b in Part I, answer (b) and (c) below.	40.		
_	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign.	76		
Þ	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	.4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination		-,	
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)		-	
	purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
137 100	answer (b) and (c) below (if applicable). Also, provide detail in Pert VI, including (i) the names and EIN	,		
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;			1
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	<u>.</u> 5a		
ь	Type I or Type II only. Was any added or substituted supported organization part of a class already	38	:	-
	designated in the organization's organizing document?	бb	·	
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5¢		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	. 8:		F
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity	-		
	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L. (Form 990 or 990-EZ).	4.7,	· ·	Γ '
8	Did the organization make a lean to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	В		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described			
	In section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	96	<u>.</u>	
þ	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	96		
C	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		}
10a			[3
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a)
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			
	determine whether the organization had excess business holdings.)	10b		

,1 ',

Part	Supporting Organizations (continued)			· · · · · · · · · · · · · · · · · · ·	.* *-	
	The state of the s	200025	Yes	No.	, i	
11 -	l-las the organization accepted a gift or contribution from any of the following persons?				,	-" -
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	A Property of		Þ	٦.
ь	A family member of a person described in (a) above?	11b	- Amplitudes to		• -	
_	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or.c, provide detail in Part VI.	Sti	àr "	'À1	.'	
	on B. Type I Supporting Organizations		,	1111 144446		
ж .,	, TAK	~~~ \$ } }*	Yes	Nó.	ř	
,1	Did the directors, trustees, or membership of one or more supported organizations have the power to				2	
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the				٠,	
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization,				1	
990000000	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported		では、		aretji	1
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		100		1	•
2	Did the organization operate for the benefit of any supported organization other than the supported				•	
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part				-	
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,				3	
	supervised, or controlled the supporting organization.	2.	44	ик 1454.1°	ii Ke	
Section	on C. Type II Supporting Organizations թատարանը արերականությանը արդականի հանդարական արդականի հայարականության ա			ilitigani qui	Tiber	
ili opa s Igritti	AND THE REPORT OF THE PARTY OF	180456	Yes	No.	ř.,	
. 1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control					
om diate	or management of the supporting organization was vested in the same persons that controlled or managed		11.4		£ i	i'' i
*KKK, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	the supported organization(s).	14.5	Time.	(in in	ı_	:
Section	on D. All Type III Supporting Organizations	12. 5.s	λ • Δ.!	بر الأراب الأرابا	r d i	
;; 	·		Yes	, No		' -
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the				3-1	
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax					,
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1			1	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		12420	TO AND THE	۹,	
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how				¥ ~	-,
11	the organization maintained a close and continuous working relationship with the supported organization(s).	2	** *** *******************************	ALCONOMIA I	'.	٠,,
3	By reason of the relationship described in (2), did the organization's supported organizations have a					
	significant voice in the organization's investment policies and in directing the use of the organization's				-75	
- **- این د	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		<u> </u>	80.33		
4	Tree - The tree first	1.33	14.7		, š	
Mecti-	on E. Type III Functionally integrated Supporting Organizations. Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	in otra	, , , , , , , , , , , , , , , , , , ,		ł., ,	
i dini.	The organization satisfied the Activities Test. Complete line 2 below.	nion fré	ەزىگەن) • • 1		
Ь	The organization is the parent of each of its supported organizations. Complete line 3 below.					
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity	(see ins	truct	ons).) i i	
2	Activities Test. Answer (e) and (b) below.	,	Y68	No	ă.	ιģ
8 1	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		類別		. 11	ī
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	1700	ล้ากล้าสักใหม่ ใช้เป็นได้		1 '	<i>i</i> 1 1
	those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined					
•	that these activities constituted substantially all of its activities.	24	T. C. L.	111111111111111111111111111111111111111		•
 b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more				Ť	
•	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	接到				7.7
•	reasons for the organization's position that its supported organization(s) would have engaged in these				х.	7
1 19191	activities but for the organization's involvement.	25	ي. د ال	7	Žui	11.711
3	Parent of Supported Organizations. Answer (a) and (b) below.				ar.	+ 14 s
8	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a			· AK	
ь	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		6 . F		-	ı=
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	Эь.	, 3, 4; , 3, 4,	Br 20, 1000 a		

Part V 13 Type III Non-Functionally integrated 509(a)(3) Supporting On	gan	izations	
Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organizations.			
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
- 3 Other gross Income see instructional	8		
4 Add lines 1.through 3.	. 4		
5 Depreciation and depletion	5	_	
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	8		
7. Other expenses (see instructions)	7	•	
3 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	:	
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	13		
b Average monthly cash balances	16		,
c Fair market value of other non-exempt-use assets	1c		***
"d.Total (add lines 1a, 1b, and 1d)	14		
e Discount claimed for blockage or other factors explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		'
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	8		
7 Recoveries of prior year distributions	.7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C—Distributable Amount	•		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year:(from Section B, line 8, Column A)	3	1	
4 Enter greater of line 2 or line 3.	4	4	
5 Income tax imposed in prior year	5	,	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional instructions).	lly in	tegrated Type III support	ing organization (see

Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continued)	
Secti	on D—Distributions			Current Year
_~ 1	Amounts paid to supported organizations to accomplish			
2	Amounts paid to perform activity that directly furthers exc organizations, in excess of income from activity	empt purposes of suppo	rtod	
· 3	Administrative expenses paid to accomplish exempt purp	loses of supported orga	nizations	
4		· · · · · · · · · · · · · · · · · · ·		
. 5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI): See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whice (provide details in Part VI). See instructions.	h the organization is res	ponalva	
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
	on E—Distribution Allocations (see Instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
• 1	Distributable amount for 2019 from Section C, line 6	,		
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required—explain in Part VI). See instructions.	ν		
3	Excess distributions carryover, if any, to 2019			
8	From 2014			
	·From 2015			
	From 2016			
	From 2017			
	From 2018			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
	Carryover from 2014 not applied (see Instructions)			
	Remainder. Subtract lines 3g; 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D, line 7:			
8	Applied to underdistributions of prior years			
<u>b</u>	Applied to 2019 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.		<u> </u>	
5	Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.	Ą y		,
· 6 · ·	Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j and 4c.			
8	Breakdown of line 7:			
	Excess from 2015			
<u> </u>				
	Excess from 2017			
	Excess from 2018			
` \ 8 ·	Excess from 2019	1		i

Part VI N	III, line 12; Part IV, B. lines 1 and 2: P	, Section A, lines 1 Part IV, Section C, 7, line 1; Part V, Se	I , 2, 3b, 3c, 4b, line 1; Part IV, 9 ection B, line 1e	4c, 5a, 6, 9a, 9b Section D, lines 2 ; Part V, Section	, 9c, 11a, 11b, and 2 and 3; Part IV, Se D, lines 5, 6, and	t II, line 17a or 17b; Part d 11c; Part IV, Section ection E, lines 1c, 2a, 2b B; and Part V, Section E ons.)
	· · · · · · · · · · · · · · · · · · ·					
*			-	•		
, , ,	••• , • . • -			· · · · · · · · · · · · · · · · · · ·		
			, ,			
	a paramente de la familia de la familia de la familia de la familia de la familia de la familia de la familia					ه د موسوعه د هوهومه و در موهومه د د موهوم د د موسوم د د موسوعه د د موسوعه د د موسوعه
	 				· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
	`					
(<u></u>	· · · · · · · · · · · · · · · · · · ·		 		
			ran Winnsan an nan nan Salikin in in indikern k	n 4 (14)		n ar de felición de la recent de la companya de designada de la companya de designada de la companya de la comp
<u> </u>						
************	· · · · · · · · · · · · · · · · · · ·	***				,
. * 1.	× ,					,
***************************************	+					

1 4442		•	·			,
PV-1	4 annain 11 a 5 mine 12 a 5 a 7 a 14 d 17 a 14 d 17 a 15	10 (10 (10 (100 0)))) (10 (10 (10 (10 (10 (10 (10 (10 (10 (10	. 4 4 16 2 9 46. 6 6 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9		as an experience to an an-ancrease to as assessment to be as assessment for 10 to 40	Ne se mariju se se a ambaro se a mariju se se se se se se se se se se se se se
	 					
, z 	· · ·					
. 5						
			a di derrolden de est est a. De de de est de est est est estimatelle d		n warnes to a community of the state of the	
	· · · · · · · · · · · · · · · · · · ·					
/s 4						
						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	J. P.	· ·				··· (- ·······)
* ***********						· · · · · · · · · · · · · · · · · · ·
~ 11	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>				
·						
-						
		t do 14 dd do 2 Aj up 14 wo dowy P P T			B - C ADPHOC HX ND - C ARNOC AL + D - C	t an arbert an arrent en arrent en arment en de estéreix (en la minimistre de la company) en la
						<u> </u>
- INNER OF REF.	*** ** *** **** **********************					

SCHEDULE D (Form 990)

Department of the Treasury internal Revenue Service Name of the organization

Supplemental Financial Statements

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

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

2019

Open to Public Inspection

Employer identification number

83-0689060 National Tsing Hua University North America Foundation, inc. Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate value of contributions to (during year) . 368,555.51 Aggregate value of grants from (during year) . . 3 278,592.84 Aggregate value at end of year 89,962.67 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? Yes 🗌 No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ✓ Yes □ No. Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) ☐ Protection of natural habitat Preservation of a certifled historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year c Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(l) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b if the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: Assets included in Form 990, Part X

	8,D ₂ (Form 990) 2019		<u> </u>		ga				Page 2
Part	Organizations Maintaining	Collections of	Art, His	torical	Lusainies	, or Ot	her Similar A	sets (con	tinued)
ં23 ∾	Using the organization's acquisition,		her recor	ds, chec	k any of th	e follov	ving that make	significant u	se of its
4.5	collection items (check all that apply):								
8	☐ Public exhibition		d i	🗌 Loan	or exchang	je progr	am	,	1
b	☐ Scholarly research		•	Other	L X	<u> </u>		1 1 	
C	Preservation for future generations	}			1 +11 , 1-	- 11	· • •	: 10 x, x	å
4	Provide a description of the organizar	tion's collections a	and expla	in how t	hey further	the org	janization's exe	empt purpos	e in Part
, 5	During the year, did the organization								
ar Karangara	assets to be sold to raise funds rather	<u> </u>	ined as p	part of th	e organizat	ion's co	diection? .	. LYes	. D.No
Part	Complete if the organization 990, Part X, line 21.	answered "Yes"							
18	Is the organization an agent, trustee included on Form 990, Part X?	, custodian or oth	er intern	ediary fi	or contribu	tions or	other assets	not	☐ No
ь	If "Yes," explain the arrangement in P							1	
	. ,	•						Amount 755	, , ,
C	Beginning balance					ंग्ट		0 h.e	
d	Additions during the year					110	- -		
e	Distributions during the year					7 10			
•						11		The state of the s	
28	Did the organization include an amou				SCOW OF C			tv? TYes	No
	.if Yes, explain the arrangement in P								
	V Endowment Funds.	ar All. Orlock flore	3 11 11 10 02	Dien ierio	111100 00011	piovidi	SO OTT WEXT	* * * * * * * * * * * * * * * * * * * *	بيا-
	Complete if the organization	onourorod "Voo!	' on Eor	000	Dort IV lin	، أn '			
\$	William Complete in the organization	(a) Current year		or year			(d) Three years ba	ck (ê) Four ye	are back
4-		(a) Curent year	(D) P11	y year	(0) 180 960	THE COLUMN	And times less co	COLUMN CONTRACTOR	and Dack
18	Beginning of year balance		34 07467	• •	}	<u>`-</u>			• -
Đ	Contributions	_ + 144	, V 1 9 /	<u> </u>		77		*	<u> </u>
C	Net investment earnings, gains, and	- 1	,	,		,			-
	losses	, ,	g ** * * * * * *					1 484 mga 1 38	1488 17
d	Grants or scholarships	· · · · · · · · · · · · · · · · · · ·				-		1 V 12.7 38	- ALC 21 44 -
0	Other expenditures for facilities and		, 3		, " '			-	
	programs	, , ,	, , ,	**** 	. √ . V′	`	' ·		
f	Administrative expenses			·	<u> </u>	.E .*.	·	<u> </u>	
8	End of year balance			<u></u>	<u> </u>	,			
2	Provide the estimated percentage of the	the current year en	d balanc	e (line 1ç	3, column (a	a)) held	as: ,	1 1	
a	Board designated or quasi-endowme	nt ▶	_%						
b	Permanent endowment	%	**						
C	Term endowment ▶ %	1							
	The percentages on lines 2a, 2b, and	2c should equal 10	00%.						
3a	Are there endowment funds not in th	e possession of th	e organi	zation th	at are held	and ad	ministered for	the	
	organization by:		J						es No
	(i) Unrelated organizations							. (3e(i)	
	(ii) Related organizations						n + . 4 + 3 t s	36(1)	
s- h	If "Yes" on line 3a(II), are the related of	roanizations listed	as recul	red on S	chedule R?			. 3b	257 3 44
4	Describe in Part XIII the intended use							18 671 - 31 67	10 /100
Part	VI Land, Buildings, and Equip	oment.	,,			. 11.	See Ferre 00/	Dort V. lin	10
4.1	Complete if the organization				-				
-" -"	Description of property	(a) Cost or ot (investm			or other basis other)		Accumulated epreciation	* (d) Book v	/alue
18	Land	•		Ľ		and the	##	4	
ь	Buildings	.1							die die de
C	Leasehold improvements				'xx		, ,	AF DE 27 27	- '- '
ď	Equipment		هر اا			Ī.	- ţ-	1	
. 8	Other						, "		A
<u> ~ </u>	Add lines 1a through 1e. (Column (d) r	nust equal Form 9	90. Part	C columi	n (B), line 1	Oc.)	ا ا ح د د . ب. د د	*** * ** ** ** **	· /** • / _
<u> </u>	x x 200 T x x x x x x x x x x x x x x x x x x		,	<i>y</i> = ====		V 10	Sc.	hedule D (Form	990) 2019

7 1, 1

Ç,

	(a) Description of security or category	(b) Book value		thod of valuation
	(including name of security)		Cost or end	I-of-year market value
Financial deriv		f • 3		
-	equity interests			
Other				
<u> </u>	·			
B) ~			,	
<u>0)</u> D)				
= <u>;</u> E)			<u> </u>	-
- /		1		
3)		:	` -	
H)	R 588247 5: 4217 456448 554848 504848 404448 44448 44448 44448 44448 44448 44448 44448 44448 44448 44448 44448			
	b) must equal Form 990, Part X, col. (B) line 1	2.) . ▶		
rt VIII : Inv	restmentsProgram Related.	. **		
Tai Co	mplete if the organization answered "Yes	s" on Form 990, Part IV, li	ne 11c. See Forn	n 990, Part X, line 1
-	(a) Description of investment	(b) Book value		thod of valuation:
i. es.			Cost of end	d-of-year market value
********	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1	· · · · · · · · · · · · · · · · · · ·
* 7			<u> </u>	***************************************
13.				
_			 	
1				
4	• •			
1	, ,			
	•			
) tal. (Column (t	b) must equal Form 990, Part X, col. (53) line 1:	3.) . >		
tal (Column () art IX Oti	b) must equal Form 990, Part X, col. (E) line 1:			
tal. (Column () art IX Oti			ne 11d. See Forn	
al Column (Co	her Assets.		ne 11d. See Form	n 990, Part X, line 1
bal Column (Column Column Colu	her Assets. Implete if the organization answered "Yes (a) Description		ne 11d. See Forn	
al Column (Column (Col	her Assets. Implete if the organization answered "Yes		ne 11d. See Forn	
at IX Ot	her Assets. Implete if the organization answered "Yes (a) Description		ne 11d. See Forn	
cal Column (column (co	her Assets. Implete if the organization answered "Yes (a) Description		ne 11d. See Forn	
Column (to Co	her Assets. Implete if the organization answered "Yes (a) Description		ne 11d. See Forn	
Column (to Co	her Assets. Implete if the organization answered "Yes (a) Description		ne 11d. See Forn	
bal. Column (Co	her Assets. Implete if the organization answered "Yes (a) Description		ne 11d. See Forn	
bal. Column (Co	her Assets. Implete if the organization answered "Yes (a) Description		ne 11d. See Forn	
bal. Column (column (c	her Assets. Emplete if the organization answered "Yes (a) Description	s" on Form 990, Part IV, li		
bal. (Column (t	her Assets. Implete if the organization answered "Yes (a) Description	s" on Form 990, Part IV, li		
al. (Column (Lart X Ottal	her Assets. Implete if the organization answered "Yes (a) Description (b) must equal Form 990, Part X, col. (B) line 1: ther Liabilities.	5.)		(b) Book value
EL (Column (to art X Otto	her Assets. Implete if the organization answered "Yes (a) Description (b) must equal Form 990, Part X, col. (B) line 1 ther Liabilities. Implete if the organization answered "Yes	5.)		(b) Book value
EL (Column (to art X Otto	her Assets. Implete if the organization answered "Yes (a) Description (b) must equal Form 990, Part X, col. (B) line 1: ther Liabilities. Implete if the organization answered "Yes 25.	5.)		(b) Book value
al. (Column (tart X Otto	her Assets. Implete if the organization answered "Yes (a) Description (b) must equal Form 990, Part X, col. (B) line 1: ther Liabilities. Implete if the organization answered "Yes (a) Description of liab	5.)		(b) Book value
al. (Column (tart X Otto	her Assets. Implete if the organization answered "Yes (a) Description (b) must equal Form 990, Part X, col. (B) line 1: ther Liabilities. Implete if the organization answered "Yes (a) Description of liab	5.)		(b) Book value
bal. (Column (her Assets. Implete if the organization answered "Yes (a) Description (b) must equal Form 990, Part X, col. (B) line 1: ther Liabilities. Implete if the organization answered "Yes (a) Description of liab	5.)		(b) Book value
bal. (Column (Co	her Assets. Implete if the organization answered "Yes (a) Description (b) must equal Form 990, Part X, col. (B) line 1: ther Liabilities. Implete if the organization answered "Yes (a) Description of liab	5.)		(b) Book value
bal. (Column (her Assets. Implete if the organization answered "Yes (a) Description (b) must equal Form 990, Part X, col. (B) line 1: ther Liabilities. Implete if the organization answered "Yes (a) Description of liab	5.)		(b) Book value
bal. (Column (to Co	her Assets. Implete if the organization answered "Yes (a) Description (b) must equal Form 990, Part X, col. (B) line 1: ther Liabilities. Implete if the organization answered "Yes (a) Description of liab	5.)		(b) Book value
bal. (Column (Lant X Otto) Co Co Co Co Inc. Co Inc. Federal Income	her Assets. Implete if the organization answered "Yes (a) Description (b) must equal Form 990, Part X, col. (B) line 1: ther Liabilities. Implete if the organization answered "Yes (a) Description of liab	5.)		(b) Book value
al Column (Column (Col	her Assets. Implete if the organization answered "Yes (a) Description (b) must equal Form 990, Part X, col. (B) line 1: ther Liabilities. Implete if the organization answered "Yes (a) Description of liab	5.)		(b) Book value
bal. (Column (Lant X Otto) Co Co Co Co Inc. Co Inc. Federal Income	her Assets. Implete if the organization answered "Yes (a) Description (b) must equal Form 990, Part X, col. (B) line 1: ther Liabilities. Implete if the organization answered "Yes 19 25. (a) Description of liab e taxes	5.)		(b) Book value

	le D (Form 990) 2019 .		Page 4
	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	Retu	m.
4	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	•.1	•
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		•
8	Net unrealized gains (losses) on investments		
ъ	Donated services and use of facilities		
C	Recoveries of prior year grants		
· d.	Other (Describe in Part XIII.)	<u> </u>	1 ,
8	Add lines 2a through 2d	20	1
3	Subtract line 2e from line 1	-3	· · ·
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
ь	Other (Describe in Part XIII.)		
c	Add lines 4a and 4b	4c	
_	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
	Reconciliation of Expenses per Audited Financial Statements With Expenses per		turn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
	Total expenses and losses per audited financial statements	1011	
1	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
2			
a			
Ь	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII.)		
8	Add lines 2a through 2d	20	•
3	Subtract line 2e from line 1	3	,
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
8	Investment expenses not included on Form 990, Part VIII, line 7b 4a .		
b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b	40	
5 5∵	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) :	5	
Hart.	**************************************		1) ,
Provid	te the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b	; Part	V, line 4; Part X, line
2; Par	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional in	iforma	tion.
	### mp-/_m		
49			,
,			
			z > 0 0 000000 0 00000 x > 0 0 0000 x > 0 0
, -			
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		44-
<u></u>			
٤ .	and the second of the second		
<u> </u>	100		
	er La Vanta		
`	1+		
	tuffit" 4		
. 488 1			· ·

Schedule D (Form 990) 2019

Schedule D (Form 990) 2019	Page 5
Part XIII F Supplemental Information (continued)	
**************************************	وري و موسيد و سخين و د ه و د موسيد به د مينو مينون باري مناهي و بيندم و وي ي بران و و
1 -	
•	¥7
	in de la company de mande de la company de company de company de company de company de la company de de company de de company de com
2 - A C	

The state of the s	· · · · · · · · · · · · · · · · · · ·
	e a a comment of minimum or comment of the comment of the comment of the comment of the comment of the comment
•	
The state of the s	
V 1100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 -	
	e a a a blesse e de le propos a augustos a augustos a augustos a a compos a augustos a augustos a augustos a a
* , , , , , , , , , , , , , , , , , , ,	
	·
	•
/= Wittersee*vv vv vv - 1	
•	
7 T 1 T 1 T 1 T 1 T 1 T 1 T 1 T 1 T 1 T	
-	
LTP	

,	
	•

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

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

Employer identification number

Natio Per	General Information	on Activit	dation, inc. des Outside	the United States. Com		inswered "Yes" öñ	
1	Form 990, Part IV, line 1 For grantmakers. Does the other assistance, the grante award the grants or assistance.	organizatio	n maintain re	ts or assistance, and the s	election criteria used to		
2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other outside the United States.							
<u>, 3</u>	Activities per Region. (The fo	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	can be duplicated if additions (d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	al space is needed.) (e) if activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region	
ş (1)							
(2)				,			
(3)	- 1	,					
(4)							
(5)	'						
				_			
. (7)	eraannungannanninaan resulta a sere	Tat day of a P					
. (8)							
(9)							
(10)							
(11)							
(12)	LEAN BAT WAR PRAGUE TA THE TANK TO THE TAN						
,(13)				,			
(14)							
(15)							
(16)	_						
(17)							
3 a	Subtotal						
b	Total from continuation sheets to Part I						
C .	Totals (add lines 3a and 3b)			Branch Strategy			

Page	4
------	---

Sched	ule F (Form 890) 2019		Page
Par	IV Foreign Forms		
A TOTAL			
. 1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	☑ No
. 2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	☐ Yes	 No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	☐ Yes	✓ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐ Yes	i <u>√</u> i No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	☐ Yes	<u>T</u> vi No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	☐ Yes	 No

Schedule F (Form 990) 2019

SCHEDULE M (Form 980)

Noncash Contributions

► Complete if the organizations enswered "Yes" on Form 990, Part IV, lines 29 or 30.

▶ Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revonuo Service Name of the organization

Employer identification number

	al Taken Hua University North Americ Types of Property	a Foundation	on, Inc.		·	83-06890	60
	1) pes of Property	(a) Check if applicable	. (b) Number of contributions or items contributed	Noncash cont amounts repo Form 990, Part \	rted on		(d) of determining tribution amounts
1	ArtWorks of art						
2	Art—Historical treasures						
3	Art-Fractional Interests						
4	Books and publications						
5	Ciothing and household	,					
	goods					<u> </u>	
6	Cars and other yehicles				·		
7	Boats and planes						
8	Intellectual property						
9	Securities—Publicly traded		4 · ·		79,669.88	Selling Price	<u> </u>
10	Securities—Closely held stock .		.,				
11	Securities—Partnership, LLC, or trust interests						
12	Securities-Miscellaneous						
13	Qualified conservation contribution—Historic structures						
14	Qualified conservation	 					
17	contribution—Other						
15	Real estate Residential						
16	Real estate—Commercial						
17	Real estate—Other						*
18	Collectibles	ļ					
19	Food Inventory						
20	Drugs and medical supplies					<u> </u>	
21	Taxidermy					 	
22	Historical artifacts						
23	Scientific specimens	<u> </u>					
24 05	Archeological artifacts	ļ				 	
25 28	Other ► ()	 		<u> </u>			
25 27	Other ()						
. 28	Other > ()	· 					
29	Number of Forms 8283 received	l by the on	ganization during the tax s	vear for contribu	utions for		
25	which the organization completed					29	1
	Willow the organization completes		, , ,				Yes No
30a	During the year, did the organizates, that it must hold for at least t	tion receive	by contribution any proper	erty reported in i	Part I, lines	s 1 through	
	to be used for exempt purposes					i i i i i i i i i i i i i i i i i i i	30a ✓
ь	If "Yes," describe the arrangement		o notating portout		·	• • •	عد اسات
	Does the organization have a		ntence notice that requir	ne the roview	of any n	onstandard	
31	contributions?						31 🗸
32a	Does the organization hire or us	-	_		cess, or s	ell noncash	32a /
b	contributions?						32a /
33	If the organization didn't report an describe in Part II.	amount In	column (c) for a type of pro	perty for which	column (a)	ls checked,	

	om 990) 2019	Page 2
Part II	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whet the organization is reporting in Part I, column (b), the number of contributions, the number of items received a combination of both. Also complete this part for any additional information.	her ved,
Part I Line 3	I2a - The organization used Fidelity Investment company to sell 2,600 share of donated Uber common stock.	-
	<u> </u>	

		. mair era y 1 no
		
		
· · · · · · · · · · · · · · · · · · ·		
uro a arazzaren a efekteria		
		•
		. www. 2 2 57
		
		

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service
Name of the organization

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.

▶ Go to www.lrs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Employer Identification number

National Tstag Hua University North America Foundation, Inc.	83-0689060
Form 990 Part III Line 4d:	······································
Junshan Concert Hall Fund - A \$33,140.24 fund was granted for National Tsing Hua University to improve t	he quality of the concert hall
named after one of the university's former presidents.	
Material Science And Engineering Fund - A \$32,447.60 fund was granted to National Tsing Hua University	Department of Material Science
and Engineering for development and maintenance.	
Green Laboratory Fund - A \$30,215.50 fund was granted for National Tsing Hua University Department of N	uclear Engineering to develop
and maintain a green laboratory	
Mathematics Scholarship Fund - A \$19,500.00 fund was granted to National Tsing Hua University Departm	ent of Mathematics
for scholarship.	
Sunrise Scholarship Fund - A \$11,182.50 fund was granted to meet the financial needs of indigent students	B
IGEN Fund - A \$2,387.00 fund was granted to develop students' ability in research and development.	
Electrical Engineering Fund - A \$1,940.00 fund was granted to National Teing Hua University Department o	f Electrical Engineering for
development and maintenance.	
Form 990 Part VI Line 11b:	
A draft copy of this tax return was submitted and reviewed by the organization's board of directors on Apr	il 28, 2020. A final draft was sent
to the board members for final comments before the chairman of the board sign and file this tax return.	-
Form 990 Part VI Line 12c:	
The organization's conflict of interest policy was sent to each director every year. The policy was also men	tioned in the April 28, 2020
board of directors meeting	
Form 990 Part VI Line 13:	
The organization's legal and compliance committee has sent a draft of whistleblower policy to all board me	embers for consideration and
discussion in the next board meeting.	
Form 990 Part VI Line 14	
The organization's legal and compliance committee has sent a draft of document retention and destruction	policy to all board members for
consideration and discussion in the next board meeting.	

Schedule O (Form 990 or 990-EZ) (2019)	Page 2
Name of the organization	Employer identification number
ν αν΄ αν νν μ	•
abdatomásnerhánerhaddem mander hadder hadder hadder abdat abdat mander abdat begge mander hadder hadder hadder begge had	nas réneme province de composition de la desarca de la desarca de la composition della composition del
	
	autorium viene
·	
	•
11	
ì	
· · · · · · · · · · · · · · · · · · ·	
(a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	
· 100	
	,
1 - Company of Company	ه تا ۱ ۵ تا ۲ تا ماشده د در مستون و در سومه در با د د مو د در خوش با باز در خوش و در بخوس و در بخوس و
대: -: ·	

, = ...

1.1