

**Return of Organization Exempt From Income Tax**  
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements

**A For the 2003 calendar year, or tax year beginning JUL 1, 2003 and ending JUN 30, 2004**

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return  
 Amended return  
 Application pending

**C Name of organization**  
 ASIAN PERINATAL ADVOCATES  
 Number and street (or P O box if mail is not delivered to street address) Room/suite  
 1001 POTRERO AVENUE, MS6-E  
 City or town, state or country, and ZIP + 4  
 SAN FRANCISCO, CA 94110

**D Employer identification number**  
 94-3164091

**E Telephone number**  
 415-206-5450

**F Accounting method**  Cash  Accrual  
 Other (specify) \_\_\_\_\_

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).  
 H and I are not applicable to section 527 organizations.

**G Website:** N/A

**J Organization type** (check only one)  501(c) ( 3 ) (insert no)  4947(a)(1) or  527

**K Check here**  if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

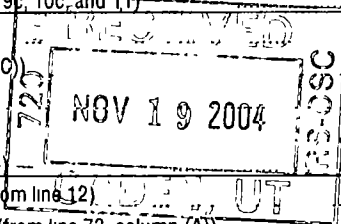
**H(a)** Is this a group return for affiliates?  Yes  No  
**H(b)** If "Yes," enter number of affiliates: \_\_\_\_\_  
**H(c)** Are all affiliates included? N/A  Yes  No (If "No," attach a list)  
**H(d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No

**I Group Exemption Number** \_\_\_\_\_

**L Gross receipts** Add lines 6b, 8b, 9b, and 10b to line 12: 2,060,854.  
**M Check**  if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

Revenue	1	Contributions, gifts, grants, and similar amounts received	1a	257,583.	1d	257,583.
	a	Direct public support	1b		2	1,781,676.
	b	Indirect public support	1c		3	
	c	Government contributions (grants)			4	
	d	Total (add lines 1a through 1c) (cash \$ 257,583. noncash \$ _____)			5	2,187.
	2	Program service revenue including government fees and contracts (from Part VII, line 93)			6c	
	3	Membership dues and assessments			7	
	4	Interest on savings and temporary cash investments				
	5	Dividends and interest from securities				
	6a	Gross rents	6a			
	b	Less rental expenses	6b			
	c	Net rental income or (loss) (subtract line 6b from line 6a)				
Revenue	7	Other investment income (describe _____)				
	8a	Gross amount from sales of assets other than inventory	(A) Securities	(B) Other	8a	
	b	Less cost or other basis and sales expenses			8b	
	c	Gain or (loss) (attach schedule)			8c	
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))			8d	
	9	Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>				
	a	Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a			
	b	Less direct expenses other than fundraising expenses	9b			
	c	Net income or (loss) from special events (subtract line 9b from line 9a)			9c	
	10a	Gross sales of inventory, less returns and allowances	10a			
b	Less cost of goods sold	10b				
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)			10c		
11	Other revenue (from Part VII, line 103)			11	19,408.	
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)			12	2,060,854.	
Expenses	13	Program services (from line 44, column (B))			13	1,730,530.
	14	Management and general (from line 44, column (C))			14	277,409.
	15	Fundraising (from line 44, column (D))			15	90,352.
	16	Payments to affiliates (attach schedule)			16	
	17	Total expenses (add lines 16 and 44, column (A))			17	2,098,291.
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)			18	<37,437.>
	19	Net assets or fund balances at beginning of year (from line 73, column (A))			19	731,920.
	20	Other changes in net assets or fund balances (attach explanation)			20	0.
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)			21	694,483.



SCANNED DEC 07 '04



**Part IV Balance Sheets**

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year	
<b>Assets</b>	45 Cash - non-interest-bearing	423,818.	45	204,181.	
	46 Savings and temporary cash investments		46		
	47 a Accounts receivable	47a			
	b Less allowance for doubtful accounts	47b	47c		
	48 a Pledges receivable	48a			
	b Less allowance for doubtful accounts	48b	48c		
	49 Grants receivable	348,022.	49	449,289.	
	50 Receivables from officers, directors, trustees, and key employees		50		
	51 a Other notes and loans receivable	51a			
	b Less allowance for doubtful accounts	51b	51c		
	52 Inventories for sale or use		52		
	53 Prepaid expenses and deferred charges	9,864.	53	20,490.	
	54 Investments - securities <b>STMT 3</b>	▶ <input checked="" type="checkbox"/> Cost <input type="checkbox"/> FMV	26,105.	54	26,105.
	55 a Investments - land, buildings, and equipment basis	55a			
	b Less accumulated depreciation	55b	55c		
56 Investments - other		56			
57 a Land, buildings, and equipment basis	57a	193,381.			
b Less accumulated depreciation <b>STMT 4</b>	57b	51,859.	57c	141,522.	
58 Other assets (describe ▶ <b>DEPOSITS</b> )		9,605.	58	9,428.	
59 <b>Total assets</b> (add lines 45 through 58) (must equal line 74)		880,571.	59	851,015.	
<b>Liabilities</b>	60 Accounts payable and accrued expenses	88,346.	60	66,816.	
	61 Grants payable		61		
	62 Deferred revenue		62		
	63 Loans from officers, directors, trustees, and key employees		63		
	64 a Tax-exempt bond liabilities		64a		
	b Mortgages and other notes payable		64b		
	65 Other liabilities (describe ▶ <b>ACCRUED VACATION</b> )		60,305.	65	89,716.
66 <b>Total liabilities</b> (add lines 60 through 65)		148,651.	66	156,532.	
<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
	67 Unrestricted	538,312.	67	580,478.	
	68 Temporarily restricted	193,608.	68	114,005.	
	69 Permanently restricted		69		
	Organizations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 70 through 74				
	70 Capital stock, trust principal, or current funds		70		
	71 Paid-in or capital surplus, or land, building, and equipment fund		71		
	72 Retained earnings, endowment, accumulated income, or other funds		72		
	73 <b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19, column (B) must equal line 21)		731,920.	73	694,483.
	74 <b>Total liabilities and net assets / fund balances</b> (add lines 66 and 73)		880,571.	74	851,015.

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.



Part VI Other Information		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77	X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	78b	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b	If "Yes," enter the name of the organization _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81 a	Enter direct or indirect political expenditures. See line 81 instructions. 81a 0.		
b	Did the organization file Form 1120-POL for this year?	81b	X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) 82b 181,758.		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions? N/A	83b	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A	84b	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A	85a	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A	85b	
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year		
c	Dues, assessments, and similar amounts from members 85c N/A		
d	Section 162(e) lobbying and political expenditures 85d N/A		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A	85g	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A	85h	
86	501(c)(7) organizations. Enter a Initiation fees and capital contributions included on line 12 86a N/A		
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A		
87	501(c)(12) organizations. Enter a Gross income from members or shareholders 87a N/A		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 87b N/A		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89 a	501(c)(3) organizations. Enter Amount of tax imposed on the organization during the year under section 4911 0., section 4912 0., section 4955 0.		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0.		
d	Enter Amount of tax on line 89c, above, reimbursed by the organization 0.		
90 a	List the states with which a copy of this return is filed CALIFORNIA		
b	Number of employees employed in the pay period that includes March 12, 2003 90b 40		
91	The books are in care of MAI-MAI HO, EXECUTIVE DIRECTOR Telephone no 415-206-5450		
	Located at 1001 POTRERO AVENUE, MS6E, SAN FRANCISCO, CA ZIP + 4 94110		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A		

**Part VII Analysis of Income-Producing Activities** (See page 33 of the instructions )

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
<b>Note:</b> Enter gross amounts unless otherwise indicated.					
93 Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					1,781,676.
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	2,187.	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a OTHER INCOME			01	19,408.	
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0.		21,595.	1,781,676.
105 Total (add line 104, columns (B), (D), and (E))					1,803,271.

**Note:** Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See page 34 of the instructions )

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
93G	FEEES FROM GOVERNMENT AGENCIES OFFSET COSTS OF PROVIDING COUNSELING
93G	SERVICES TO PARTICIPANTS

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See page 34 of the instructions )

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See page 34 of the instructions )

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

**Note:** If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. All information is true and correct to the best of my knowledge and belief, it is true, correct, and complete.

Date 11/14/04  MAI-MAI HO, EXECUTIVE DIRECTOR

Date 11/2/04 Check if self-prepared  Preparer's SSN or PTIN

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Organization Exempt Under Section 501(c)(3)**

(Except Private Foundation) and Section 501(e), 501(f), 501(k),  
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

**Supplementary Information-(See separate instructions.)**

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

**2003**

Name of the organization

ASIAN PERINATAL ADVOCATES

Employer identification number

94 3164091

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**

(See page 1 of the instructions List each one If there are none, enter "None")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
BLANCHE KUNG ----- 1001 POTRERO AVE, MS6-E, SF, CA 94110	DIR OF OPERAT 40	55,500.	6,918.	
SHERRY TENNEYSON ----- 1001 POTRERO AVE, MS6-E. SF, CA 94110	DIR OF DEV 40	53,508.	0.	
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-----				
-----				
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-----				
Total number of other employees paid over \$50,000 ▶	0			

**Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services**

(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE -----		
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-----		
-----		
-----		
-----		
-----		
-----		
Total number of others receiving over \$50,000 for professional services ▶	0	

**Part III Statements About Activities** (See page 2 of the instructions )

	Yes	No
<b>1</b> During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities		X
<b>2</b> During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
<b>a</b> Sale, exchange, or leasing of property?		X
<b>b</b> Lending of money or other extension of credit?		X
<b>c</b> Furnishing of goods, services, or facilities?		X
<b>d</b> Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	X	
<b>e</b> Transfer of any part of its income or assets?		X
<b>3 a</b> Do you make grants for scholarships, fellowships, student loans, etc? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments )		X
<b>b</b> Do you have a section 403(b) annuity plan for your employees?		X
<b>4</b> Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		X

**Part IV Reason for Non-Private Foundation Status** (See pages 3 through 6 of the instructions )

The organization is not a private foundation because it is (Please check only **ONE** applicable box )

- 5  A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6  A school Section 170(b)(1)(A)(ii) (Also complete Part V )
- 7  A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8  A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9  A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ► \_\_\_\_\_
- 10  An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A )
- 11a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A )
- 11b  A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A )
- 12  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc , functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A )
- 13  An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3) )

Provide the following information about the supported organizations (See page 5 of the instructions )

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14  An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions )

**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.**  
**Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28)	1,848,321.	1,268,002.	1,102,933.	923,096.	5,142,352.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	44,308.	0.	96,043.	0.	140,351.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	3,232.	3,896.	2,483.	1,521.	11,132.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	1,345.		SEE STATEMENT 8		1,345.
23 Total of lines 15 through 22	1,897,206.	1,271,898.	1,201,459.	924,617.	5,295,180.
24 Line 23 minus line 17	1,852,898.	1,271,898.	1,105,416.	924,617.	5,154,829.
25 Enter 1% of line 23	18,972.	12,719.	12,015.	9,246.	

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24	26a	103,097.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1999 through 2002 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts	26b	0.
c Total support for section 509(a)(1) test Enter line 24, column (e)	26c	5,154,829.
d Add Amounts from column (e) for lines 18 <u>11,132.</u> 19 <u>                    </u> 22 <u>1,345.</u> 26b <u>                    </u>	26d	12,477.
e Public support (line 26c minus line 26d total)	26e	5,142,352.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))	26f	99.7580%

27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year **N/A**

	(2002)	(2001)	(2000)	(1999)
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year <b>N/A</b>				
c Add Amounts from column (e) for lines 15 <u>                    </u> 16 <u>                    </u> 17 <u>                    </u> 20 <u>                    </u> 21 <u>                    </u>	27c	N/A		
d Add Line 27a total <u>                    </u> and line 27b total <u>                    </u>	27d	N/A		
e Public support (line 27c total minus line 27d total)	27e	N/A		
f Total support for section 509(a)(2) test Enter amount on line 23, column (e) <b>N/A</b>	27f	N/A		
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))	27g	N/A %		
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))	27h	N/A %		

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15 **NONE**

**Part V Private School Questionnaire** (See page 7 of the instructions )

N/A

**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement )		
<hr/>			
32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement )	32d	
<hr/>			
33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement )	33h	
<hr/>			
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	34b	
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35	

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions)  
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

N/A

Check **a**  if the organization belongs to an affiliated group Check **b**  if you checked "a" and "limited control" provisions apply

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		N/A	
<b>36</b>	Total lobbying expenditures to influence public opinion (grassroots lobbying)	<b>36</b>	
<b>37</b>	Total lobbying expenditures to influence a legislative body (direct lobbying)	<b>37</b>	
<b>38</b>	Total lobbying expenditures (add lines 36 and 37)	<b>38</b>	
<b>39</b>	Other exempt purpose expenditures	<b>39</b>	
<b>40</b>	Total exempt purpose expenditures (add lines 38 and 39)	<b>40</b>	
<b>41</b>	Lobbying nontaxable amount Enter the amount from the following table -		
	<b>If the amount on line 40 is -</b>		
	Not over \$500,000		
	Over \$500,000 but not over \$1,000,000		
	Over \$1,000,000 but not over \$1,500,000		
	Over \$1,500,000 but not over \$17,000,000		
	Over \$17,000,000		
	<b>The lobbying nontaxable amount is -</b>		
	20% of the amount on line 40		
	\$100,000 plus 15% of the excess over \$500,000		
	\$175,000 plus 10% of the excess over \$1,000,000		
	\$225,000 plus 5% of the excess over \$1,500,000		
	\$1,000,000		
<b>42</b>	Grassroots nontaxable amount (enter 25% of line 41)	<b>42</b>	
<b>43</b>	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	<b>43</b>	
<b>44</b>	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	<b>44</b>	

**Caution:** If there is an amount on either line 43 or line 44, you must file Form 4720.

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below See the instructions for lines 45 through 50 on page 11 of the instructions)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A (e) Total
	(a) 2003	(b) 2002	(c) 2001	(d) 2000	
<b>45</b> Lobbying nontaxable amount					0.
<b>46</b> Lobbying ceiling amount (150% of line 45(e))					0.
<b>47</b> Total lobbying expenditures					0.
<b>48</b> Grassroots nontaxable amount					0.
<b>49</b> Grassroots ceiling amount (150% of line 48(e))					0.
<b>50</b> Grassroots lobbying expenditures					0.

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
<b>a</b> Volunteers			
<b>b</b> Paid staff or management (Include compensation in expenses reported on lines c through h.)			
<b>c</b> Media advertisements			
<b>d</b> Mailings to members, legislators, or the public			
<b>e</b> Publications, or published or broadcast statements			
<b>f</b> Grants to other organizations for lobbying purposes			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
<b>i</b> Total lobbying expenditures (Add lines c through h.)			0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities



2003 DEPRECIATION AND AMORTIZATION REPORT

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Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
1	DESKS	070193SL	5.00	16	200.				200.	200.		0.
2	CONFERENCE TABLES	070193SL	5.00	16	40.				40.	40.		0.
3	COMPUTER TABLES	070193SL	5.00	16	80.				80.	80.		0.
4	CHAIRS	070193SL	5.00	16	240.				240.	240.		0.
5	FOLDING CHAIRS	070193SL	5.00	16	10.				10.	10.		0.
6	BLACK CABINET	070193SL	5.00	16	50.				50.	50.		0.
7	FILLING CABINET	070193SL	5.00	16	200.				200.	200.		0.
8	IBM WHEEWRIER	070193SL	5.00	16	60.				60.	60.		0.
9	SANYO MICROWAVES	070193SL	5.00	16	40.				40.	40.		0.
10	FAX MACHINES	091397SL	3.00	16	651.				651.	651.		0.
11	TELEPHONE	091397SL	3.00	16	350.				350.	350.		0.
12	ELECTRIC RANGE	093097SL	3.00	16	373.				373.	373.		0.
13	MICROWAVE	093097SL	3.00	16	137.				137.	137.		0.
14	BOOKCASES	092597SL	3.00	16	150.				150.	150.		0.
15	COMPUTER CART	110797SL	3.00	16	76.				76.	76.		0.
16	VERTICAL BLINDS	103197SL	3.00	16	110.				110.	110.		0.
17	METAL FOLDING CHAIRS	112197SL	3.00	16	63.				63.	63.		0.
18	FURNITURE	100197SL	3.00	16	800.				800.	800.		0.

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Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
19	COPIER CENTER	011798SL		3.00	16	65.			65.	65.		0.
20	CANON 710/730	032898SL		3.00	16	542.			542.	542.		0.
21	EQUIPMENT COMMUNICATION	070199SL		3.00	16	1,001.			1,001.	1,001.		0.
22	ENGINEERING	051700SL		3.00	16	1,925.			1,925.	1,925.		0.
23	CHILDREN CHAIRS	102500SL		3.00	16	185.			185.	159.		26.
24	FURNITURE	082500SL		3.00	16	319.			319.	301.		18.
25	FURNITURE	111600SL		3.00	16	421.			421.	351.		70.
26	OFFICE FURNITURE FURNITURE-DINNING	080301SL		3.00	16	1,792.			1,792.	1,145.		597.
27	TABLE	081601SL		3.00	16	380.			380.	243.		127.
28	REFRIGERATOR	082201SL		3.00	16	483.			483.	309.		161.
29	PHONE SYSTEM	090501SL		3.00	16	3,718.			3,718.	2,272.		1,239.
30	OFFICE FURNITURE/MISC. ITEMS	091201SL		3.00	16	7,099.			7,099.	4,339.		2,366.
31	VCR/DVD	080103SL		3.00	16	216.			216.			72.
32	LASER PRINTER	090103SL		3.00	16	1,298.			1,298.			433.
33	TELEPHONE SYSTEM	020104SL		10.00	16	17,756.			17,756.			888.
34	STOVE	020104SL		3.00	16	497.			497.			166.
35	MONITOR AND A PROJECTOR	061804SL		3.00	16	2,125.			2,125.			708.
36	SANTRON	091893SL		5.00	16	1,381.			1,381.	1,381.		0.

328102 05-01-03

(D) - Asset disposed

\* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction

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Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
37	PANASONIC PRINTER	090192SL		5.00	16	199.			199.	199.		0.
38	HP PRINTER	102697SL		3.00	16	293.			293.	293.		0.
39	COMPAQ PRESERIO	102697SL		3.00	16	1,145.			1,145.	1,145.		0.
40	VOXON 14'	110797SL		3.00	16	107.			107.	107.		0.
41	HP COMPUTER PRINTER	063099SL		3.00	16	2,473.			2,473.	2,473.		0.
42	VEVONX	100197SL		3.00	16	1,700.			1,700.	1,700.		0.
43	IBM 433S-D	060398SL		3.00	16	300.			300.	300.		0.
44	IBM 466DX2-D	060398SL		3.00	16	300.			300.	300.		0.
45	IBM COMPUTER	060398SL		3.00	16	300.			300.	300.		0.
46	COMPUTER EQUIPMENT	082500SL		3.00	16	838.			838.	792.		47.
47	COMPUTERS	052301SL		3.00	16	1,212.			1,212.	842.		370.
48	COMPUTER	070501SL		3.00	16	1,575.			1,575.	1,050.		525.
49	DELL COMPUTER	092701SL		3.00	16	2,667.			2,667.	1,630.		889.
50	DELL COMPUTER	041002SL		3.00	16	541.			541.	226.		180.
51	COMPUTER AND PRINTER	090202SL		3.00	16	489.			489.	129.		163.
52	DELL COMPUTER	070103SL		3.00	16	6,810.			6,810.			2,270.
53	DIGITAL CAMERA	080103SL		3.00	16	825.			825.			275.
54	COMPUTER	080103SL		3.00	16	2,025.			2,025.			675.

328102  
05-01-03

(D) - Asset disposed

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Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
555	COMPUTERS	050504	SL	3.00	16	3,827.			3,827.			213.
56	CHINATOWN OFFICE	090597	SL	3.00	16	4,450.			4,450.	4,450.		0.
57	ALARM SYSTEM	102397	SL	3.00	16	550.			550.	550.		0.
58W&J	CONSTRUCTION	121500	SL	40.00	16	10,000.			10,000.	753.		250.
59W&J	CONSTRUCTION	011300	SL	40.00	16	12,000.			12,000.	904.		300.
60W&J	CONSTRUCTION	022300	SL	40.00	16	10,000.			10,000.	753.		250.
61	REIMBURSEMENT MAI MAI HO	032200	SL	40.00	16	1,767.			1,767.	133.		44.
62	REIMBURSEMENT MAI MAI HO	042000	SL	40.00	16	888.			888.	67.		22.
63	REIMBURSEMENT MAI MAI HO	062100	SL	40.00	16	358.			358.	27.		9.
64	REIMBURSEMENT MAI MAI HO	063000	SL	40.00	16	130.			130.	10.		3.
65W&J	CONSTRUCTION	063000	SL	40.00	16	2,130.			2,130.	160.		53.
66W&J	CONSTRUCTION	063000	SL	40.00	16	4,999.			4,999.	377.		125.
67W&J	CONSTRUCTION	100401	SL	40.00	16	3,500.			3,500.	174.		88.
68W&J	CONSTRUCTION	020104	SL	40.00	16	6,000.			6,000.			63.
69W&J	CONSTRUCTION	020104	SL	40.00	16	25,000.			25,000.			260.
70W&J	CONSTRUCTION	020104	SL	40.00	16	15,000.			15,000.			156.
71W&J	CONSTRUCTION	020104	SL	40.00	16	2,400.			2,400.			25.
72W&J	CONSTRUCTION	020104	SL	40.00	16	16,184.			16,184.			169.

328102  
05-01-03

(D) - Asset disposed

\* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction

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Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
73	W&J CONSTRUCTION	020104	SL	40.00	16	1,750.			1,750.			18.
74	R.P. COATING	020104	SL	40.00	16	3,816.			3,816.			39.
	* TOTAL 990 PAGE 2 DEPR					193,381.		0.	193,381.	37,507.	0.	14,352.

FORM 990	OTHER EXPENSES			STATEMENT	1
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING	
SUB-CONTRACTORS	436,099.	436,099.			
PROFESSIONAL FEES	14,221.	11,838.	2,383.		
INSURANCE	31,404.	24,181.	5,339.	1,884.	
STAFF DEVELOPMENT	21,053.	17,655.	3,398.		
OFFICE EXPENSE	46,297.	35,649.	7,870.	2,778.	
OTHER EXPENSES	44,167.	34,009.	7,508.	2,650.	
TOTAL TO FM 990, LN 43	593,241.	559,431.	26,498.	7,312.	

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT 2

DESCRIPTION OF PROGRAM SERVICE ONE

LINGUISTICALLY AND CULTURALLY APPROPRIATE SERVICES TO HIGH RISK ASIAN FAMILIES, INCLUDING HEALTH PSYCHO-SOCIAL ASSESMENT, COUNSELING REFERRALS, CHILD ABUSE AND DOMESTIC VIOLENCE PREVENTION AND OTHER FAMILY SUPPORT SERVICES.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE A		1,730,530.

FORM 990 NON-GOVERNMENT SECURITIES STATEMENT 3

SECURITY DESCRIPTION	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	OTHER SECURITIES	TOTAL NON-GOV'T SECURITIES
MARKETABLE SECURITIES	26,105.				26,105.
TO 990, LN 54 COL B	26,105.				26,105.

## FORM 990 DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 4

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
DESKS	200.	200.	0.
CONFERENCE TABLES	40.	40.	0.
COMPUTER TABLES	80.	80.	0.
CHAIRS	240.	240.	0.
FOLDING CHAIRS	10.	10.	0.
BLACK CABINET	50.	50.	0.
FILLING CABINET	200.	200.	0.
IBM WHEEWRIER	60.	60.	0.
SANYO MICROWAVES	40.	40.	0.
FAX MACHINES	651.	651.	0.
TELEPHONE	350.	350.	0.
ELECTRIC RANGE	373.	373.	0.
MICROWAVE	137.	137.	0.
BOOKCASES	150.	150.	0.
COMPUTER CART	76.	76.	0.
VERTICAL BLINDS	110.	110.	0.
METAL FOLDING CHAIRS	63.	63.	0.
FURNITURE	800.	800.	0.
COPIER CENTER	65.	65.	0.
CANON 710/730	542.	542.	0.
EQUIPMENT	1,001.	1,001.	0.
COMMUNICATION ENGINEERING	1,925.	1,925.	0.
CHILDREN CHAIRS	185.	185.	0.
FURNITURE	319.	319.	0.
FURNITURE	421.	421.	0.
OFFICE FURNITURE	1,792.	1,742.	50.
FURNITURE-DINNING TABLE	380.	370.	10.
REGRIGERATOR	483.	470.	13.
PHONE SYSTEM	3,718.	3,511.	207.
OFFICE FURNITURE/MISC. ITEMS	7,099.	6,705.	394.
VCR/DVD	216.	72.	144.
LASER PRINTER	1,298.	433.	865.
TELEPHONE SYSTEM	17,756.	888.	16,868.
STOVE	497.	166.	331.
A MONITOR AND A PROJECTOR	2,125.	708.	1,417.
SANTRON	1,381.	1,381.	0.
PANASONIC PRINTER	199.	199.	0.
HP PRINTER	293.	293.	0.
COMPAQ PRESERIO	1,145.	1,145.	0.
VOXON 14'	107.	107.	0.
HP COMPUTER PRINTER	2,473.	2,473.	0.
VEXONX	1,700.	1,700.	0.
IBM 433S-D	300.	300.	0.
IBM 466DX2-D	300.	300.	0.
IBM COMPUTER	300.	300.	0.
COMPUTER EQUIPMENT	838.	839.	<1.>

COMPUTERS	1,212.	1,212.	0.
COMPUTER	1,575.	1,575.	0.
DELL COMPUTER	2,667.	2,519.	148.
DELL COMPUTER	541.	406.	135.
COMPUTER AND PRINTER	489.	292.	197.
DELL COMPUTER	6,810.	2,270.	4,540.
DIGITAL CAMERA	825.	275.	550.
COMPUTER	2,025.	675.	1,350.
5 COMPUTERS	3,827.	213.	3,614.
CHINATOWN OFFICE	4,450.	4,450.	0.
ALARM SYSTEM	550.	550.	0.
W&J CONSTRUCTION	10,000.	1,003.	8,997.
W&J CONSTRUCTION	12,000.	1,204.	10,796.
W&J CONSTRUCTION	10,000.	1,003.	8,997.
MAI MAI HO REIMBURSEMENT	1,767.	177.	1,590.
MAI MAI HO REIMBURSEMENT	888.	89.	799.
MAI MAI HO REIMBURSEMENT	358.	36.	322.
MAI MAI HO REIMBURSEMENT	130.	13.	117.
W&J CONSTRUCTION	2,130.	213.	1,917.
W&J CONSTRUCTION	4,999.	502.	4,497.
W&J CONSTRUCTION	3,500.	262.	3,238.
W&J CONSTRUCTION	6,000.	63.	5,937.
W&J CONSTRUCTION	25,000.	260.	24,740.
W&J CONSTRUCTION	15,000.	156.	14,844.
W&J CONSTRUCTION	2,400.	25.	2,375.
W&J CONSTRUCTION	16,184.	169.	16,015.
W&J CONSTRUCTION	1,750.	18.	1,732.
R.P. COATING	3,816.	39.	3,777.
TOTAL TO FORM 990, PART IV, LN 57	193,381.	51,859.	141,522.

FORM 990	OTHER REVENUE NOT INCLUDED ON FORM 990	STATEMENT	5
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DESCRIPTION	AMOUNT
IN-KIND DONATION	181,758.
UNREALIZED GAINS	3,179.
TOTAL TO FORM 990, PART IV-A	184,937.

FORM 990	OTHER EXPENSES NOT INCLUDED ON FORM 990	STATEMENT	6
DESCRIPTION		AMOUNT	
IN-KIND DONATION		181,758.	
TOTAL TO FORM 990, PART IV-B		181,758.	

FORM 990	PART V - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES	STATEMENT	7
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NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
JOHN AFFELDT 1001 POTRERO AVENUE, MS6-E SAN FRANCISCO, CA 94110	PRESIDENT 5	0.	0.	0.
JANE CHESSON 1001 POTRERO AVENUE, MS6-E SAN FRANCISCO, CA 94110	DIRECTOR 1	0.	0.	0.
ROSE CHUNG 1001 POTRERO AVENUE, MS6-E SAN FRANCISCO, CA 94110	VICE PRESIDENT 5	0.	0.	0.
DAISY LEI 1001 POTRERO AVENUE, MS6-E SAN FRANCISCO, CA 94110	DIRECTOR 1	0.	0.	0.
STACIE MA'S 1001 POTRERO AVENUE, MS6-E SAN FRANCISCO, CA 94110	DIRECTOR 1	0.	0.	0.
DAVID MARTZ 1001 POTRERO AVENUE, MS6-E SAN FRANCISCO, CA 94110	SECRETARY 5	0.	0.	0.
CANDICE WONG 1001 POTRERO AVENUE, MS6-E SAN FRANCISCO, CA 94110	DIRECTOR 1	0.	0.	0.
CEPHAS WONG 1001 POTRERO AVENUE, MS6-E SAN FRANCISCO, CA 94110	DIRECTOR 1	0.	0.	0.

HOY WONG  
1001 POTRERO AVENUE, MS6-E  
SAN FRANCISCO, CA 94110

DIRECTOR

1

0.

0.

0.

MAI MAI HO  
1001 POTRERO AVENUE, MS6-E  
SAN FRANCISCO, CA 94110

EXECUTIVE DIRECTOR

40

34,658.

0.

0.

TOTALS INCLUDED ON FORM 990, PART V

34,658.

0.

0.

SCHEDULE A

OTHER INCOME

STATEMENT 8

DESCRIPTION	2002 AMOUNT	2001 AMOUNT	2000 AMOUNT	1999 AMOUNT
OTHER INCOME	1,345.	0.	0.	0.
TOTAL TO SCHEDULE A, LINE 22	1,345.	0.	0.	0.