See a Social Security Number? Say Something!
Report Privacy Problems to https://public.resource.org/privacy
Or call the IRS Identity Theft Hotline at 1-800-908-4490
Form 990

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.

For the 2006 calendar year, or tax year beginning

A

Check if applicable:

B

Address change

C

Name of organization

D

Employer identification number

E

Telephone number

F

Accounting method:

G

Website: www.cpasf.org

H

$ and I are not applicable to section 527 organizations

J

Organization type (check only one)

K

Check here if the organization is not a 501(c)(3) supporting organization and its gross receipts are normally not more than $25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L

Gross receipts: Add lines 6b, 6c, 6d, and 10b to line 12

790,702

Part I

Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

1

Contributions, gifts, grants, and similar amounts received

1a

Contributions to donor advised funds

1b

448,536

1c

0

1d

329,275

1e

777,811

2

Program service revenue including government fees and contracts (from Part VII, line 93)

3

Membership dues and assessments

4

Interest on savings and temporary cash investments

5

Dividends and interest from securities

6

a

Gross rents

6a

0

6b

0

6c

0

6d

0

6e

0

6f

0

6g

0

6h

0

6i

0

6j

0

6k

0

6l

0

6m

0

6n

0

6o

0

6p

0

6q

0

6r

0

6s

0

6t

0

6u

0

6v

0

6w

0

6x

0

6y

0

6z

0

6

Net gain or (loss) Combine line 8c, columns (A) and (B)

8a

0

8b

0

8c

0

8d

0

8e

0

8f

0

8g

0

8h

0

8i

0

8j

0

8k

0

8l

0

8m

0

8n

0

8o

0

8p

0

8q

0

8r

0

8s

0

8t

0

8u

0

8v

0

8w

0

8x

0

8y

0

8z

0

8

0

9

Special events and activities (attach schedule) If any amount is from gaming, check here

9a

0

9b

0

9c

0

9d

0

9e

0

9f

0

9g

0

9h

0

9i

0

9j

0

9k

0

9l

0

9m

0

9n

0

9o

0

9p

0

9q

0

9r

0

9s

0

9t

0

9u

0

9v

0

9w

0

9x

0

9y

0

9z

0

9

0

10

Other revenue from fundraising efforts

10a

0

10b

0

10c

0

10d

0

10e

0

10f

0

10g

0

10h

0

10i

0

10j

0

10k

0

10l

0

10m

0

10n

0

10o

0

10p

0

10q

0

10r

0

10s

0

10t

0

10u

0

10v

0

10w

0

10x

0

10y

0

10z

0

10

0

11

Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10, and 11

12

4,789

13

500,894

14

149,417

15

22,999

16

0

17

673,310

18

117,392

19

328,677

20

21

446,069

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.
### Part II

**Statement of Functional Expenses**

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. *(See the instructions)*

<table>
<thead>
<tr>
<th>Description</th>
<th>(A) Total</th>
<th>(B) Program services</th>
<th>(C) Management and general</th>
<th>(D) Fundraising</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>22 a Grants paid from donor advised funds (attach schedule)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(cash $ ____________ noncash $ ____________)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>If this amount includes foreign grants, check here □</td>
<td>22a</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>**22 b Other grants and allocations (attach schedule) **</td>
<td>22b</td>
<td>53,734</td>
<td>53,734</td>
<td>0</td>
</tr>
<tr>
<td>(cash $ ____________ noncash $ ____________)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>If this amount includes foreign grants, check here □</td>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>23 Specific assistance to individuals (attach schedule)</strong></td>
<td>23</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>24 Benefits paid to or for members (attach schedule)</strong></td>
<td>24</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>25 a Compensation of current officers, directors,</strong></td>
<td>25a</td>
<td>133,435</td>
<td>77,064</td>
<td>52,477</td>
</tr>
<tr>
<td>key employees, etc. listed in Part V-A (attach schedule)</td>
<td></td>
<td></td>
<td></td>
<td>3,894</td>
</tr>
<tr>
<td><strong>25 b Compensation of former officers, directors,</strong></td>
<td>25b</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>key employees, etc. listed in Part V-B (attach schedule)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>25 c Compensation and other distributions, not included above,</strong></td>
<td>25c</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
| to disqualified persons (as defined under section 4958(f)(1) and persons **
| described in section 4958(c)(3)(B) (attach schedule)                       |           | 0                    | 0                         | 0              |
| **26 Salaries and wages of employees not included**                         | 26        | 289,311              | 245,986                   | 37,461         |
| on lines 25a, b, and c                                                      |           |                      |                           | 5,864          |
| **27 Pension plan contributions not included on**                           | 27        | 0                    | 0                         | 0              |
| lines 25a, b, and c                                                         |           |                      |                           |                |
| **28 Employee benefits not included on lines**                              | 28        | 23,723               | 18,032                    | 5,691          |
| 25a – 27                                                                    |           |                      |                           |                |
| **29 Payroll taxes**                                                        | 29        | 39,093               | 31,112                    | 7,454          |
| **30 Professional fundraising fees**                                        | 30        | 5,613                | 5,613                     | 0              |
| **31 Accounting fees**                                                      | 31        | 22,502               | 21,002                    | 1,500          |
| **32 Legal fees**                                                           | 32        | 0                    | 0                         | 0              |
| **33 Supplies**                                                             | 33        | 13,110               | 10,362                    | 2,117          |
| **34 Telephone**                                                            | 34        | 6,274                | 4,628                     | 1,535          |
| **35 Postage and shipping**                                                 | 35        | 2,282                | 1,277                     | 1,005          |
| **36 Occupancy**                                                            | 36        | 35,637               | 27,399                    | 7,476          |
| **37 Equipment rental and maintenance**                                     | 37        | 3,253                | 2,575                     | 635            |
| **38 Printing and publications**                                            | 38        | 1,998                | 1,399                     | 368            |
| **39 Travel**                                                               | 39        | 17,146               | 15,102                    | 1,960          |
| **40 Conferences, conventions, and meetings**                               | 40        | 0                    | 0                         | 0              |
| **41 Interest**                                                             | 41        | 0                    | 0                         | 0              |
| **42 Depreciation, depletion, etc (attach schedule) See Statement 2**      | 42        | 1,688                | 1,220                     | 376            |
| **43 Other expenses not covered above (itemize)**                           | 43        |                      |                           |                |
| a Insurance                                                                 | 43a       | 3,730                | 2,088                     | 1,522          |
| b Dues, license, service fees                                               | 43b       | 244                  | 0                         | 244            |
| c Other professional services                                               | 43c       | 12,731               | 5,037                     | 5,101          |
| d Staff development                                                         | 43d       | 5,298                | 1,851                     | 3,447          |
| e Advertising                                                               | 43e       | 848                  | 848                       | 0              |
| f Miscellaneous                                                             | 43f       | 1,340                | 1,030                     | 310            |
| g In kind service                                                           | 43g       | 300                  | 150                       | 150            |
| **44 Total functional expenses. Add lines 22a through 43g (Organizations **
| completing columns (B)-(D), carry these totals to lines 13-15)             | 44        | 673,310              | 500,894                   | 149,417        |
|                                                                                |           |                      |                           | 22,999         |

**Joint Costs.** Check □ if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? □ Yes X No

If "Yes," enter (i) the aggregate amount of these joint costs $ ____________, (ii) the amount allocated to Program services $ ____________, (iii) the amount allocated to Management and general $ ____________, and (iv) the amount allocated to Fundraising $ ____________.
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.

What is the organization's primary exempt purpose? ▶ to empower the Chinese community in San Francisco.

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others).

| Program Service Expenses (Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts, but optional for others) |
|---|---|
| a See Statement 3 | |

| (Grants and allocations $ ) If this amount includes foreign grants, check here ▶ | 500,894 |
| b | |
| (Grants and allocations $ ) If this amount includes foreign grants, check here ▶ | |
| c | |
| (Grants and allocations $ ) If this amount includes foreign grants, check here ▶ | |
| d | |
| (Grants and allocations $ ) If this amount includes foreign grants, check here ▶ | |
| e Other program services (attach schedule) (Grants and allocations $ ) If this amount includes foreign grants, check here ▶ | 0 |
| f Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶ | 500,894 |

Form 990 (2006)
### Balance Sheets (See the instructions)

<table>
<thead>
<tr>
<th>Note</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>45</td>
<td>Cash—non-interest-bearing</td>
<td>102,177</td>
</tr>
<tr>
<td>46</td>
<td>Savings and temporary cash investments</td>
<td>61,481</td>
</tr>
<tr>
<td>47</td>
<td>Accounts receivable</td>
<td>47a 43,047</td>
</tr>
<tr>
<td></td>
<td>Less: allowance for doubtful accounts</td>
<td>47c 43,027</td>
</tr>
<tr>
<td>48</td>
<td>Pledges receivable</td>
<td>48a 0</td>
</tr>
<tr>
<td></td>
<td>Less: allowance for doubtful accounts</td>
<td>48c 0</td>
</tr>
<tr>
<td>49</td>
<td>Grants receivable</td>
<td>208,463</td>
</tr>
<tr>
<td>50</td>
<td>Receivables from current and former officers, directors, trustees, and key employees (attach schedule)</td>
<td>0 50a 0</td>
</tr>
<tr>
<td></td>
<td>Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)</td>
<td>50b</td>
</tr>
<tr>
<td>51</td>
<td>Other notes and loans receivable (attach schedule)</td>
<td>51a 0</td>
</tr>
<tr>
<td></td>
<td>Less: allowance for doubtful accounts</td>
<td>51b 0</td>
</tr>
<tr>
<td>52</td>
<td>Inventories for sale or use</td>
<td>52</td>
</tr>
<tr>
<td>53</td>
<td>Prepaid expenses and deferred charges</td>
<td>5,665 53</td>
</tr>
<tr>
<td>54</td>
<td>Investments—publicly-traded securities</td>
<td>54a 0</td>
</tr>
<tr>
<td></td>
<td>Investments—other securities (attach schedule)</td>
<td>54b 0</td>
</tr>
<tr>
<td>55</td>
<td>Investments—land, buildings, and equipment basis</td>
<td>55a 55b 0 55c</td>
</tr>
<tr>
<td></td>
<td>Less: accumulated depreciation (attach schedule)</td>
<td>55b 0</td>
</tr>
<tr>
<td>56</td>
<td>Investments—other (attach schedule)</td>
<td>56</td>
</tr>
<tr>
<td>57</td>
<td>Land, buildings, and equipment basis</td>
<td>57a 16,051 57b 10,300</td>
</tr>
<tr>
<td></td>
<td>Less: accumulated depreciation (attach schedule)</td>
<td>See Statement 2 57c 7,439</td>
</tr>
<tr>
<td>58</td>
<td>Other assets, including program-related investments (describe Deposits)</td>
<td>0 58 4,831</td>
</tr>
<tr>
<td>59</td>
<td>Total assets (must equal line 74). Add lines 45 through 58</td>
<td>385,475 59 493,496</td>
</tr>
<tr>
<td>60</td>
<td>Accounts payable and accrued expenses</td>
<td>56,798 60</td>
</tr>
<tr>
<td>61</td>
<td>Grants payable</td>
<td>61</td>
</tr>
<tr>
<td>62</td>
<td>Deferred revenue</td>
<td>62</td>
</tr>
<tr>
<td>63</td>
<td>Loans from officers, directors, trustees, and key employees (attach schedule)</td>
<td>0 63</td>
</tr>
<tr>
<td>64</td>
<td>Tax-exempt bond liabilities (attach schedule)</td>
<td>0 64a 0</td>
</tr>
<tr>
<td></td>
<td>Mortgages and other notes payable (attach schedule)</td>
<td>0 64b</td>
</tr>
<tr>
<td>65</td>
<td>Other liabilities (describe Deposits)</td>
<td>0 65</td>
</tr>
<tr>
<td>66</td>
<td>Total liabilities. Add lines 60 through 65</td>
<td>56,798 66 52,056</td>
</tr>
</tbody>
</table>

**Organizations that follow SFAS 117, check here □ and complete lines 67 through 69 and lines 73 and 74.**

| 67   | Unrestricted | 171,775 67 85,763 |
| 68   | Temporarily restricted | 156,902 68 355,677 |
| 69   | Permanently restricted | 69 |

**Organizations that do not follow SFAS 117, check here □ 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   | Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21) | 328,677 73 441,440 |
| 74   | Total liabilities and net assets/fund balances. Add lines 66 and 73 | 385,475 74 493,496 |
Part IV-A  Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions)

| a | Total revenue, gains, and other support per audited financial statements | N/A |
| b | Amounts included on line a but not on Part I, line 12: |
| b1 | Net unrealized gains on investments |
| b2 | Donated services and use of facilities |
| b3 | Recoveries of prior year grants |
| b4 | Other (specify): |
| c | Subtract line b from line a |
| d | Amounts included on Part I, line 12, but not on line a: |
| d1 | Investment expenses not included on Part I, line 6b |
| d2 | Other (specify): |
| e | Total revenue (Part I, line 12). Add lines c and d |

Part IV-B  Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

| a | Total expenses and losses per audited financial statements | N/A |
| b | Amounts included on line a but not on Part I, line 17. |
| b1 | Donated services and use of facilities |
| b2 | Prior year adjustments reported on Part I, line 20 |
| b3 | Losses reported on Part I, line 20 |
| b4 | Other (specify): |
| c | Subtract line b from line a |
| d | Amounts included on Part I, line 17, but not on line a: |
| d1 | Investment expenses not included on Part I, line 6b |
| d2 | Other (specify): |
| e | Total expenses (Part I, line 17). Add lines c and d |

Part V-A  Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated. (See the instructions)

<table>
<thead>
<tr>
<th>(A) Name and address</th>
<th>(B) Title and average hours per week devoted to position</th>
<th>(C) Compensation (If not paid, enter 0–)</th>
<th>(D) Contributions to employee benefit plans &amp; deferred compensation plans</th>
<th>(E) Expense account and other allowances</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name: Gordon Mar</td>
<td>SW 1042 Grant Ave. City San Francisco ST CA ZIP 94133</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Title Co Director</td>
<td>Hr/WK 40</td>
<td>62,500</td>
<td>7,196</td>
</tr>
<tr>
<td>Name: Sarah He</td>
<td>SW 1042 Grant Ave. City San Francisco ST CA ZIP 94133</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Title Co-Director</td>
<td>Hr/WK 40</td>
<td>60,000</td>
<td>3,727</td>
</tr>
<tr>
<td>Name: Board of Directors</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>See Statement 4</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Title</td>
<td>Hr/WK 0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Name: N/A</td>
<td>ST ZIP</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Title</td>
<td>Hr/WK 0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Name: N/A</td>
<td>ST ZIP</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Title</td>
<td>Hr/WK 0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Name: N/A</td>
<td>ST ZIP</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Title</td>
<td>Hr/WK 0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Name: N/A</td>
<td>ST ZIP</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Title</td>
<td>Hr/WK 0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Name: N/A</td>
<td>ST ZIP</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Title</td>
<td>Hr/WK 0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Name: N/A</td>
<td>ST ZIP</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Title</td>
<td>Hr/WK 0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
### Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)

<table>
<thead>
<tr>
<th>No.</th>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>75</td>
<td>Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings</td>
<td></td>
<td>g</td>
</tr>
<tr>
<td>75a</td>
<td>Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If &quot;Yes,&quot; attach a statement that identifies the individuals and explains the relationship(s)</td>
<td>75b</td>
<td>x</td>
</tr>
<tr>
<td>75c</td>
<td>Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of &quot;related organization.&quot;</td>
<td>75d</td>
<td>x</td>
</tr>
<tr>
<td>75e</td>
<td>Does the organization have a written conflict of interest policy?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions)

<table>
<thead>
<tr>
<th>Name N/A</th>
<th>Address</th>
<th>Loans and Advances</th>
<th>Compensation (if not paid, enter &quot;0&quot;)</th>
<th>Contributions to employee benefit plans &amp; deferred compensation plans</th>
<th>Expense account and other allowances</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Str</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>City</td>
<td>ZIP</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Str</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>City</td>
<td>ZIP</td>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td>Str</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>City</td>
<td>ZIP</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>Str</td>
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<tr>
<td></td>
<td>City</td>
<td>ZIP</td>
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</tr>
<tr>
<td></td>
<td>Str</td>
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<td></td>
<td>City</td>
<td>ZIP</td>
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<td></td>
</tr>
<tr>
<td></td>
<td>Str</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>City</td>
<td>ZIP</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part VI Other Information (See the instructions.)

<table>
<thead>
<tr>
<th>No.</th>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>76</td>
<td>Did the organization make a change in its activities or methods of conducting activities? If &quot;Yes,&quot; attach a detailed statement of each change</td>
<td>76</td>
<td>x</td>
</tr>
<tr>
<td>77</td>
<td>Were any changes made in the organizing or governing documents but not reported to the IRS? If &quot;Yes,&quot; attach a corrected copy of the changes</td>
<td>77</td>
<td>x</td>
</tr>
<tr>
<td>78 a</td>
<td>Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?</td>
<td>78a</td>
<td>x</td>
</tr>
<tr>
<td>80 a</td>
<td>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?</td>
<td>80a</td>
<td>x</td>
</tr>
<tr>
<td>81 a</td>
<td>Enter direct and indirect political expenditures (See line 81 instructions)</td>
<td>81a</td>
<td>0</td>
</tr>
<tr>
<td>81 b</td>
<td>Did the organization file Form 1120-POL for this year?</td>
<td>81b</td>
<td>x</td>
</tr>
<tr>
<td>Part VI</td>
<td>Other Information (continued)</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>---------</td>
<td>-------------------------------</td>
<td>-----</td>
<td>----</td>
</tr>
<tr>
<td>82a</td>
<td>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?</td>
<td>82a</td>
<td>x</td>
</tr>
<tr>
<td>b</td>
<td>If &quot;Yes,&quot; 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.)</td>
<td>82b</td>
<td>N/A</td>
</tr>
<tr>
<td>83a</td>
<td>Did the organization comply with the public inspection requirements for returns and exemption applications?</td>
<td>83a</td>
<td>x</td>
</tr>
<tr>
<td>b</td>
<td>Did the organization comply with the disclosure requirements relating to quid pro quo contributions?</td>
<td>83b</td>
<td>x</td>
</tr>
<tr>
<td>84a</td>
<td>Did the organization solicit any contributions or gifts that were not tax deductible?</td>
<td>84a</td>
<td>x</td>
</tr>
<tr>
<td>b</td>
<td>If &quot;Yes,&quot; did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</td>
<td>84b</td>
<td>N/A</td>
</tr>
<tr>
<td>85</td>
<td>501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?</td>
<td>85a</td>
<td>N/A</td>
</tr>
<tr>
<td>b</td>
<td>Did the organization make only in-house lobbying expenditures of $2,000 or less?</td>
<td>85b</td>
<td>N/A</td>
</tr>
<tr>
<td>c</td>
<td>Dues, assessments, and similar amounts from members</td>
<td>85c</td>
<td>N/A</td>
</tr>
<tr>
<td>d</td>
<td>Section 162(e) lobbying and political expenditures</td>
<td>85d</td>
<td>N/A</td>
</tr>
<tr>
<td>e</td>
<td>Aggregate nondeductable amount of section 6033(e)(1)(A) dues notices</td>
<td>85e</td>
<td>N/A</td>
</tr>
<tr>
<td>f</td>
<td>Taxable amount of lobbying and political expenditures (line 85d less 85e)</td>
<td>85f</td>
<td>N/A</td>
</tr>
<tr>
<td>g</td>
<td>Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?</td>
<td>85g</td>
<td>N/A</td>
</tr>
<tr>
<td>h</td>
<td>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?</td>
<td>85h</td>
<td>N/A</td>
</tr>
<tr>
<td>86</td>
<td>501(c)(7) orgs. Enter: a initiation fees and capital contributions included on line 12</td>
<td>86a</td>
<td>N/A</td>
</tr>
<tr>
<td>b</td>
<td>Gross receipts, included on line 12, for public use of club facilities</td>
<td>86b</td>
<td>N/A</td>
</tr>
<tr>
<td>87</td>
<td>501(c)(12) orgs. Enter: a Gross income from members or shareholders</td>
<td>87a</td>
<td>N/A</td>
</tr>
<tr>
<td>b</td>
<td>Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)</td>
<td>87b</td>
<td>N/A</td>
</tr>
<tr>
<td>88a</td>
<td>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 &quot;Yes,&quot; complete Part IX.</td>
<td>88a</td>
<td>x</td>
</tr>
<tr>
<td>b</td>
<td>At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If &quot;Yes,&quot; complete Part XI.</td>
<td>88b</td>
<td>x</td>
</tr>
<tr>
<td>89a</td>
<td>501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911</td>
<td>89a</td>
<td>0</td>
</tr>
<tr>
<td>b</td>
<td>501(c)(3) and 501(c)(4) orgs. 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 &quot;Yes,&quot; attach a statement explaining each transaction</td>
<td>89b</td>
<td>x</td>
</tr>
<tr>
<td>c</td>
<td>Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958</td>
<td>89c</td>
<td>0</td>
</tr>
<tr>
<td>d</td>
<td>Enter: Amount of tax on line 89c, above, reimbursed by the organization</td>
<td>89d</td>
<td>0</td>
</tr>
<tr>
<td>e</td>
<td>All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?</td>
<td>89e</td>
<td>x</td>
</tr>
<tr>
<td>f</td>
<td>All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?</td>
<td>89f</td>
<td>x</td>
</tr>
<tr>
<td>g</td>
<td>For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?</td>
<td>89g</td>
<td>x</td>
</tr>
<tr>
<td>90a</td>
<td>List the states with which a copy of this return is filed</td>
<td>90a</td>
<td>CA</td>
</tr>
<tr>
<td>b</td>
<td>Number of employees employed in the pay period that includes March 12, 2006 (See instructions.)</td>
<td>90b</td>
<td>6</td>
</tr>
<tr>
<td>91a</td>
<td>The books are in care of</td>
<td>91a</td>
<td>1042 Grant Street, City San Francisco, CA, ZIP + 4</td>
</tr>
<tr>
<td>b</td>
<td>Telepone no</td>
<td>91b</td>
<td>415-391-6866</td>
</tr>
<tr>
<td>c</td>
<td>Located at</td>
<td>91c</td>
<td>94133</td>
</tr>
<tr>
<td>d</td>
<td>At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?</td>
<td>91d</td>
<td>x</td>
</tr>
<tr>
<td>e</td>
<td>If &quot;Yes,&quot; enter the name of the foreign country</td>
<td>91e</td>
<td>N/A</td>
</tr>
</tbody>
</table>

See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.
Part VI Other Information (continued)

91c At any time during the calendar year, did the organization maintain an office outside of the United States?
Yes ☑ No ☐

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

Note: Enter gross amounts unless otherwise indicated.

<table>
<thead>
<tr>
<th>Description</th>
<th>Business code</th>
<th>Amount</th>
<th>Exclusion code</th>
<th>Exempt function income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program service revenue.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Workshop fee</td>
<td></td>
<td>2,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Translation work</td>
<td></td>
<td>2,910</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Medicare/Medicaid payments</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Fees and contracts from government agencies</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>94 Membership dues and assessments</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>95 Interest on savings and temporary cash investments</td>
<td>14</td>
<td>3,192</td>
<td></td>
<td></td>
</tr>
<tr>
<td>96 Dividends and interest from securities</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>97 Net rental income or (loss) from real estate</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a debt-financed property</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b not debt-financed property</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>98 Net rental income or (loss) from personal property</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>99 Other investment income</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>100 Gain or (loss) from sales of assets other than inventory</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>101 Net income or (loss) from special events</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>102 Gross profit or (loss) from sales of inventory</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>103 Other revenue a Miscellaneous</td>
<td></td>
<td>4,789</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td></td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>e</td>
<td></td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>104 Subtotal (add columns (B), (D), and (E))</td>
<td></td>
<td>7,981</td>
<td>4,910</td>
<td></td>
</tr>
<tr>
<td>105 Total (add line 104, columns (B), (D), and (E))</td>
<td></td>
<td>12,891</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See 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)

93a Fees received in exchange for workshops offered.
93b Fees received in exchange for translation work.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions)

<table>
<thead>
<tr>
<th>Name, address, and EIN of corporation, partnership, or disregarded entity</th>
<th>Percentage of ownership interest</th>
<th>Nature of activities</th>
<th>Total income</th>
<th>End-of-year assets</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>%</td>
<td></td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>%</td>
<td></td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>%</td>
<td></td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See 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).
## Part XI

**Information Regarding Transfers To and From Controlled Entities.** Complete only if the organization is a controlling organization as defined in section 512(b)(13).

### 106

Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If “Yes,” complete the schedule below for each controlled entity.

<table>
<thead>
<tr>
<th>(A) Name, address, of each controlled entity</th>
<th>(B) Employer Identification Number</th>
<th>(C) Description of transfer</th>
<th>(D) Amount of transfer</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Totals**

<table>
<thead>
<tr>
<th>(A) Name, address, of each controlled entity</th>
<th>(B) Employer Identification Number</th>
<th>(C) Description of transfer</th>
<th>(D) Amount of transfer</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 107

Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If “Yes,” complete the schedule below for each controlled entity.

<table>
<thead>
<tr>
<th>(A) Name, address, of each controlled entity</th>
<th>(B) Employer Identification Number</th>
<th>(C) Description of transfer</th>
<th>(D) Amount of transfer</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Totals**

<table>
<thead>
<tr>
<th>(A) Name, address, of each controlled entity</th>
<th>(B) Employer Identification Number</th>
<th>(C) Description of transfer</th>
<th>(D) Amount of transfer</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 108

Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

<table>
<thead>
<tr>
<th>(A) Name, address, of each controlled entity</th>
<th>(B) Employer Identification Number</th>
<th>(C) Description of transfer</th>
<th>(D) Amount of transfer</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Please Sign Here**

Signature of officer: [Signature]

Type or print name and title: [Name]

Date: [Date]

**Preparer’s Signature**

Firm’s name (or yours if self-employed), address, and ZIP + 4: [Name, Address]

EIN: [EIN]

Phone no: [Phone number]

Preparer’s SSN or PTIN (See Gen. Inst. X): [SSN or PTIN]
### Part I
**Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**

(See page 2 of the instructions. List each one. If there are none, enter "None.")

<table>
<thead>
<tr>
<th>Name and address of each employee paid more than $50,000</th>
<th>Title and average hours per week devoted to position</th>
<th>Compensation</th>
<th>Contributions to employee benefit plans &amp; deferred compensation</th>
<th>Expense account and other allowances</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total number of other employees paid over $50,000: **0**

### Part II-A
**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")

<table>
<thead>
<tr>
<th>Name and address of each independent contractor paid more than $50,000</th>
<th>Type of service</th>
<th>Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total number of others receiving over $50,000 for professional services: **0**

### Part II-B
**Compensation of the Five Highest Paid Independent Contractors for Other Services**

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

<table>
<thead>
<tr>
<th>Name and address of each independent contractor paid more than $50,000</th>
<th>Type of service</th>
<th>Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total number of other contractors receiving over $50,000 for other services: **0**

---

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.
### Part III Statements About Activities (See page 2 of the instructions.)

1. 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)  
   
<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>x</td>
<td></td>
</tr>
</tbody>
</table>

   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.

2. 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.)
   
   a. Sale, exchange, or leasing of property?  
      | 2a | X |
   
   b. Lending of money or other extension of credit?  
      | 2b | X |
   
   c. Furnishing of goods, services, or facilities?  
      | 2c | X |
   
   d. Payment of compensation (or payment or reimbursement of expenses if more than $1,000)? See 990, Part V-A  
      | 2d | X |
   
   e. Transfer of any part of its income or assets?  
      | 2e | X |

3. a. Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments) See Statement 1  
      | 3a | X |
   
   b. Did the organization have a section 403(b) annuity plan for its employees?  
      | 3b | X |
   
   c. Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement  
      | 3c | X |
   
   d. Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?  
      | 3d | X |

4. a. Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g  
      | 4a | X |
   
   b. Did the organization make any taxable distributions under section 4966?  
      | 4b | X |
   
   c. Did the organization make a distribution to a donor, donor advisor, or related person?  
      | 4c | X |
   
   d. Enter the total number of donor advised funds owned at the end of the tax year  
      |   | 0 |
   
   e. Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year  
      |   | 0 |
   
   f. Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts  
      |   | 0 |
   
   g. Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year  
      |   | 0 |
**Part IV  Reason for Non-Private Foundation Status** (See pages 4 through 7 of the instructions)

I certify that 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)(vi) Enter the hospital's name, city, and state  ▶ … … . . . . . . . . Country

10 □ An organization operated for the benefit of a college or university owned or operated by a governmental unit  Section 170(b)(1)(A)(vii) (Also complete the Support Schedule in Part IV-A)

11a X □ 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)(viii) (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 otherwise meets the requirements of section 509(a)(3) Check the box that describes the type of supporting organization

□ Type I  □ Type II  □ Type III-Functionally Integrated  □ Type III-Other

---

Provide the following information about the supported organizations. (See page 7 of the instructions)

<table>
<thead>
<tr>
<th>(a) Name(s) of supported organization(s)</th>
<th>(b) Employer identification number (EIN)</th>
<th>(c) Type of organization (described in lines 5 through 12 above or IRC section)</th>
<th>(d) Is the supported organization listed in the supporting organization's governing documents?</th>
<th>(e) Amount of support</th>
</tr>
</thead>
<tbody>
<tr>
<td>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</td>
<td>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</td>
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<td>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</td>
<td>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</td>
<td>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</td>
</tr>
<tr>
<td>Total ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</td>
<td>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</td>
<td>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</td>
<td>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</td>
<td>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</td>
</tr>
</tbody>
</table>

14 □ An organization organized and operated to test for public safety  Section 509(a)(4). (See page 7 of the instructions)
<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning)</th>
<th>(a) 2005</th>
<th>(b) 2004</th>
<th>(c) 2003</th>
<th>(d) 2002</th>
<th>(e) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 Gifts, grants, and contributions received (Do not include unusual grants See line 28 )</td>
<td>341,988</td>
<td>403,680</td>
<td>457,998</td>
<td>200,989</td>
<td>1,404,655</td>
</tr>
<tr>
<td>16 Membership fees received</td>
<td>2,086</td>
<td>5,523</td>
<td>7,609</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td>226,746</td>
<td>137,101</td>
<td>2,481</td>
<td>137,906</td>
<td>504,234</td>
</tr>
<tr>
<td>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</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19 Net income from unrelated business activities not included in line 18</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets</td>
<td>1,983</td>
<td>2,191</td>
<td>19,317</td>
<td>5,608</td>
<td>29,099</td>
</tr>
<tr>
<td>23 Total of lines 15 through 22</td>
<td>570,717</td>
<td>542,972</td>
<td>481,882</td>
<td>350,026</td>
<td>1,945,597</td>
</tr>
<tr>
<td>24 Line 23 minus line 17</td>
<td>343,971</td>
<td>405,871</td>
<td>479,401</td>
<td>212,120</td>
<td>1,441,363</td>
</tr>
<tr>
<td>25 Enter 1% of line 23</td>
<td>5,707</td>
<td>5,430</td>
<td>4,819</td>
<td>3,500</td>
<td>3,500</td>
</tr>
</tbody>
</table>

26 Organizations described on lines 10 or 11: a Enter 2% of amount in ## |

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 2002 through 2005 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts |

c Total support for section 509(a)(1) test: Enter line 24, column (e) |

d Add amounts from column (e) for lines 18 and 19 |

22 29,099 26b 650,865 |

e Public support (line 26c minus line 26d total) |

f Public support percentage (line 26e numerator) divided by line 26c (denominator) |

26f 52 82% |

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 |


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 11b, 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 |


c Add amounts from column (e) for lines 15 |

17 15 16 |

d Add line 27a total and line 27b total |

20 21 |

e Public support (line 27c total minus line 27d total) |

f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) (27f) |

g Public support percentage (line 27e numerator) divided by line 27f (denominator) |

27g 0 00% |

h Investment income percentage (line 16, column (e) numerator) divided by line 27f (denominator) |

27h 0 00% |

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, 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.
### Part V Private School Questionnaire (See page 9 of the instructions)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; please describe, if &quot;No,&quot; please explain. (If you need more space, attach a separate statement.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>32. Does the organization maintain the following:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Records indicating the racial composition of the student body, faculty, and administrative staff?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Copies of all material used by the organization or on its behalf to solicit contributions?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If you answered &quot;No&quot; to any of the above, please explain. (If you need more space, attach a separate statement.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>33. Does the organization discriminate by race in any way with respect to:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Students' rights or privileges?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Admissions policies?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Employment of faculty or administrative staff?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Scholarships or other financial assistance?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. Educational policies?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. Use of facilities?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. Athletic programs?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>h. Other extracurricular activities?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If you answered &quot;Yes&quot; to any of the above, please explain. (If you need more space, attach a separate statement.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>34. a. Does the organization receive any financial aid or assistance from a governmental agency?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Has the organization's right to such aid ever been revoked or suspended?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If you answered &quot;Yes&quot; to either 34a or b, please explain using an attached statement</td>
<td></td>
<td></td>
</tr>
<tr>
<td>35. Does the organization certify that it has complied with the applicable requirements of sections 401 through 405 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If &quot;No,&quot; attach an explanation</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part VI-A  Lobbying Expenditures by Electing Public Charities

(See page 10 of the instructions.)

(To be completed ONLY by an eligible organization that filed Form 5768)

Check ▶ a ☐ if the organization belongs to an affiliated group

Check ▶ b ☐ if you checked "a" and "limited control" provisions apply.

#### Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred)

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Affiliated group totals</th>
<th>To be completed for all electing organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>36</td>
<td>Total lobbying expenditures to influence public opinion (grassroots lobbying)</td>
<td>36 0 479</td>
<td></td>
</tr>
<tr>
<td>37</td>
<td>Total lobbying expenditures to influence a legislative body (direct lobbying)</td>
<td>37 0 0</td>
<td></td>
</tr>
<tr>
<td>38</td>
<td>Total lobbying expenditures (add lines 36 and 37)</td>
<td>38 0 479</td>
<td></td>
</tr>
<tr>
<td>39</td>
<td>Other exempt purpose expenditures</td>
<td>39 0 672,831</td>
<td></td>
</tr>
<tr>
<td>40</td>
<td>Total exempt purpose expenditures (add lines 38 and 39)</td>
<td>40 0 673,310</td>
<td></td>
</tr>
<tr>
<td>41</td>
<td>Lobbying nontaxable amount Enter the amount from the following table—</td>
<td>41 0 125,997</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If the amount on line 40 is—</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>The lobbying nontaxable amount is—</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Not over $500,000</td>
<td>20% of the amount on line 40</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Over $500,000 but not over $1,000,000</td>
<td>$100,000 plus 15% of the excess over $500,000</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Over $1,000,000 but not over $1,500,000</td>
<td>$175,000 plus 10% of the excess over $1,000,000</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Over $1,500,000 but not over $17,000,000</td>
<td>$225,000 plus 5% of the excess over $1,500,000</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Over $17,000,000</td>
<td>$1,000,000</td>
<td></td>
</tr>
<tr>
<td>42</td>
<td>Grassroots nontaxable amount (enter 25% of line 41)</td>
<td>42 0 31,499</td>
<td></td>
</tr>
<tr>
<td>43</td>
<td>Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36</td>
<td>43 0 0</td>
<td></td>
</tr>
<tr>
<td>44</td>
<td>Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38</td>
<td>44 0 0</td>
<td></td>
</tr>
</tbody>
</table>

**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 13 of the instructions.)

#### Lobbying Expenditures During 4-Year Averaging Period

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>2006</th>
<th>2005</th>
<th>2004</th>
<th>2003</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>45</td>
<td>Lobbying nontaxable amount</td>
<td>125,997</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>46</td>
<td>Lobbying ceiling amount (150% of line 45(e))</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>47</td>
<td>Total lobbying expenditures</td>
<td>479</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>48</td>
<td>Grassroots nontaxable amount</td>
<td>31,499</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>49</td>
<td>Grassroots ceiling amount (150% of line 48(e))</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>50</td>
<td>Grassroots lobbying expenditures</td>
<td>479</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

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

(For reporting only by organizations that did not complete Part VI-A) (See page 13 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:

- [ ] Volunteers
- [ ] Paid staff or management (Include compensation in expenses reported on lines c through h.)
- [ ] Media advertisements
- [ ] Mailings to members, legislators, or the public
- [ ] Publications, or published or broadcast statements
- [ ] Grants to other organizations for lobbying purposes
- [ ] Direct contact with legislators, their staffs, government officials, or a legislative body
- [ ] Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- [ ] Total lobbying expenditures (Add lines c through h.)

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

---

Schedule A (Form 990 or 990-EZ) 2006
Part VII  Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 13 of the instructions)

51  Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

- a  Transfers from the reporting organization to a noncharitable exempt organization of
  - (i) Cash
  - (ii) Other assets

- b  Other transactions
  - (i) Sales or exchanges of assets with a noncharitable exempt organization
  - (ii) Purchases of assets from a noncharitable exempt organization
  - (iii) Rental of facilities, equipment, or other assets
  - (iv) Reimbursement arrangements
  - (v) Loans or loan guarantees
  - (vi) Performance of services or membership or fundraising solicitations

- c  Sharing of facilities, equipment, mailing lists, other assets, or paid employees

- d  If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

<table>
<thead>
<tr>
<th>(a) Line no</th>
<th>(b) Amount involved</th>
<th>(c) Name of noncharitable exempt organization</th>
<th>(d) Description of transfers, transactions, and sharing arrangements</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>

52  a  Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

- b  If "Yes," complete the following schedule

<table>
<thead>
<tr>
<th>(a) Name of organization</th>
<th>(b) Type of organization</th>
<th>(c) Description of relationship</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

Schedule A (Form 990 or 990-EZ) 2006
Chinese Progressive Association  
23-7404756  
Year Ended December 31, 2006  

Statement 1  
Form 990, Part II  
Line 22b  
Grants and Allocations  

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lisa Chu</td>
<td>1327 Brussels St</td>
<td>$3,000</td>
</tr>
<tr>
<td></td>
<td>San Francisco, CA 94134</td>
<td></td>
</tr>
<tr>
<td>Natalie Gee</td>
<td>130 Goettingen St</td>
<td>$1,500</td>
</tr>
<tr>
<td></td>
<td>San Francisco, CA 94134</td>
<td></td>
</tr>
<tr>
<td>Yuk Ming Tang</td>
<td>2419 47th Ave</td>
<td>$3,000</td>
</tr>
<tr>
<td></td>
<td>San Francisco, CA 94116</td>
<td></td>
</tr>
<tr>
<td>Hui Rong Yu</td>
<td>15 Tracy PL</td>
<td>$3,000</td>
</tr>
<tr>
<td></td>
<td>San Francisco, CA 94133</td>
<td></td>
</tr>
</tbody>
</table>
Chinese Progressive Association
23-7404756
Year Ended December 31, 2006

Statement 1 Continued
Form 990, Part II
Line 22b
Grants and Allocations Criteria

CPA Scholarship selection process:

Outreach materials for the program, such as brochures, fliers, and applications are distributed widely to CPA’s membership, allied organizations, and community. We also post fliers at schools and some of our alumni will provide presentation at their schools as part of outreach. For those interested, they fill out the attached application. Program coordinator along with a few youth leaders read applications, conducted interviews with the applicants, and out of the applicants, four are selected for the year long program.
Common Roots Youth Organizer Program Application

Thank you for your interest in the Common Roots Youth Organizer Program. Please take the time to fill out this form so that we can get to know you better.

Name: ___________________________  Today's Date: ___________________________

Languages I Speak (please mark skill level):

☐ Cantonese (A Little / Some / Fluently)  ☐ English (A Little / Some / Fluently)

☐ Mandarin (A Little / Some / Fluently)  ☐ Others (______________________)

Languages I Read/Write (please mark skill level):

☐ Chinese (A Little / Some / Fluently)

☐ English (A Little / Some / Fluently)

☐ Others (______________________)

Contact Information

Mailing Address: ________________________________________________________________

City: ___________________________ State: _____ Zip Code: _______________________

Home Phone: ____________________ Cell Phone: _________________________________

Email: __________________________ MSN/AIM: _________________________________

About Me

Birthday (Month/Day/Year): _____ / _____ / ______

Race/Ethnicity: ________________________ Gender: __________

School I attend: _____________________ Grade: __________

Short Answer Questions

1. What attracted you to the Youth Organizer Program? How did you hear of us?
   青少年領袖計劃有甚麼吸引你的地方？你是從何得知這項計劃的？

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

Please Return to Youth Empowerment Coordinator (Eric) by:
   1042 Grant Ave. 5th Floor
   San Francisco, CA 94133

Tel: (415) 391.6986 x 303  Email: eric@cpasf.org
   http://www.cpasf.org
2. Do you participate in community activities, clubs, sports, church activities, volunteer programs, and youth groups? If yes, please list them.
你有參與過任何公共活動嗎？ (像社團活動, 運動隊, 教會, 義工計劃, 青少年團體) 如果有, 請列出來。

3. Please describe your family background and how it has influenced your views about making a change in your community to better the environment for yourself and your family? How has this influenced your interest in community organizing?
請微略介紹一下你的家庭背景及它如何影響你對社區環境的看法？及如何促使你對組織社區產生興趣？

4. How comfortable do you feel talking to your friends, family, neighbors, and people on the street that live in your community about your work and/or any issues or concerns?
你覺得應怎樣向你的朋友, 家人, 鄰居或住在你社區的人談關於你工作的情況呢?

5. What are your future goals and how do you think this program can help you further them?
你的未來展望是甚麼, 你認為這個計劃如何幫助你實現你的目標呢?

6. Are you willing and able to volunteer extra time for Common Roots and other CPA activities?
你願意為同根組織和華人進步會活動義務工作嗎?

7. Are you able to attend overnight trips?  Y  N

8. Please check your calendar. Will you be able to take Common Roots trips from Apr 6-8?  Y  N

9. Will you be able to take a trip from Jun 24 - July 1?  Y  N

Thank you, you’re all done! Please return to CPA (1042 Grant Ave, 5th Floor, San Francisco)
Tel: (415) 391.6966 x 303   Email: eric@cpasf.org
Chinese Progressive Association  
23-7404756  
Year Ended December 31, 2006

**Statement 2**  
Part II, Line 42  
Part IV, Line 57b  
Fixed Asset Schedule

<table>
<thead>
<tr>
<th>Descriptions</th>
<th>Date Acquired</th>
<th>Method</th>
<th>Cost</th>
<th>12/31/2005</th>
<th>Dep Exp</th>
<th>ACC Dep</th>
<th>NBV</th>
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</thead>
<tbody>
<tr>
<td>Furniture &amp; Fixture 1</td>
<td>07/01/98</td>
<td>S/L5</td>
<td>610</td>
<td></td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Fixture (Window Blind)</td>
<td>08/25/03</td>
<td>SL/10</td>
<td>2,056</td>
<td>1,438</td>
<td>206</td>
<td>824</td>
<td>1,232</td>
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<tr>
<td>Leasehold Improvement 1</td>
<td>02/26/03</td>
<td>SL/10</td>
<td>6,500</td>
<td>4,550</td>
<td>650</td>
<td>2,600</td>
<td>3,900</td>
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<tr>
<td>Computer 1</td>
<td>07/01/98</td>
<td>S/L5</td>
<td>399</td>
<td></td>
<td>-</td>
<td>-</td>
<td>-</td>
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<tr>
<td>Equipment 1</td>
<td>07/01/98</td>
<td>S/L5</td>
<td>4,715</td>
<td></td>
<td>-</td>
<td>-</td>
<td>-</td>
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<tr>
<td>Software 1</td>
<td>07/01/98</td>
<td>S/L5</td>
<td>480</td>
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<td>-</td>
<td>-</td>
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<tr>
<td>Computer2</td>
<td>07/01/99</td>
<td>S/L5</td>
<td>2,856</td>
<td></td>
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<tr>
<td>Equipment 2</td>
<td>01/01/00</td>
<td>S/L5</td>
<td>481</td>
<td></td>
<td>-</td>
<td>-</td>
<td>-</td>
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<tr>
<td>Computer 3</td>
<td>02/22/02</td>
<td>S/L5</td>
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<td>211</td>
<td>1,029</td>
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<tr>
<td>Printer 1</td>
<td>06/24/02</td>
<td>S/L5</td>
<td>449</td>
<td>123</td>
<td>90</td>
<td>416</td>
<td>33</td>
</tr>
<tr>
<td>TV 1</td>
<td>07/02/02</td>
<td>S/L5</td>
<td>338</td>
<td>109</td>
<td>68</td>
<td>297</td>
<td>41</td>
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<tr>
<td>Phone Equipment</td>
<td>12/04/02</td>
<td>S/L5</td>
<td>1,413</td>
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<td>283</td>
<td>1,167</td>
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<tr>
<td>Copier</td>
<td>08/25/03</td>
<td>S/L5</td>
<td>901</td>
<td>451</td>
<td>180</td>
<td>630</td>
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<tr>
<td>Furniture &amp; Fixture 2</td>
<td>07/01/96</td>
<td>S/L5</td>
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<td>-</td>
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<tr>
<td>Computer 4</td>
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<td>3,251</td>
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<td>-</td>
</tr>
<tr>
<td>Equipment 3</td>
<td>07/01/96</td>
<td>S/L5</td>
<td>3,251</td>
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<td>-</td>
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</tr>
<tr>
<td>Software 2</td>
<td>07/01/96</td>
<td>S/L5</td>
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<td>-</td>
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<td>Computer 5</td>
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<td>-</td>
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<td>-</td>
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<tr>
<td><strong>Total</strong></td>
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<td>37,540</td>
<td>7,439</td>
<td>1,688</td>
<td>10,299</td>
<td>5,751</td>
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</tbody>
</table>

**Disposed 12/31/2004**  
**Adjusted Total**  
(21,489)  
16,051  
7,440  
1,688  
10,299  
5,752
Chinese Progressive Association
23-7404756
Year Ended December 31, 2006

Statement 3
Form 990
Part III
Statement of Program Service Accomplishments

Chinese Progressive Association (CPA) provided outreach and case management services to over 300 very low income immigrant families residing in Single Room Occupancy (SRO) hotels. They provided fire safety and prevention education to over 2,000 very low-income tenants residing in SRO hotels. CPA also supported over 300 laid-off workers to fight for their back wages and negotiate a severance pay agreement totaling over $700,000. CPA provided structured leadership development and civic participation training of 30 immigrant Chinese and Latino youth and 30 immigrant Chinese adults. CPA also continues to work with the San Francisco Labor Council, Chinese for Affirmative Action, and City College of San Francisco with a vocational retraining program tailored to the needs of the laid-off garment workers. CPA also continue to provide environmental health and justice education to our members living in the Southeastern part of San Francisco.
Chinese Progressive Association  
23-7404756  
Year Ended December 31, 2006

Statement 4  
Form 990  
Part V  
List of Officers, Directors, Trustee, and Key Employees

Leon Chow, Chair  
Raymond Fong  
Mele Lau Smith  
Steven Yip  
Betty Chan  
  
Tam Tau Lee  
Fiona Liang  
Jannie Tam  
David Wu  
Jonathan Oau

All Directors and officers serve approximately 3-5 hours per month without compensation.

The address for all officers and directors is:  
1042 Grant Street, 5th Floor  
San Francisco, CA 94133
Form 8868 (Rev 12-2006)

- If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II and check this box ▶ [X]
Note. Only Complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)

Part I Additional (not automatic) 3-Month Extension of Time. You must file original and one copy.

<table>
<thead>
<tr>
<th>Type of print</th>
<th>Name of Exempt/Organization</th>
<th>Employer Identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Chinese Progressive Association</td>
<td>23-7404756</td>
</tr>
<tr>
<td></td>
<td>1042 Grant Avenue, 5th Floor</td>
<td></td>
</tr>
<tr>
<td></td>
<td>San Francisco, CA 94108</td>
<td></td>
</tr>
</tbody>
</table>

Check type of return to be filed (File a separate application for each return)

- [X] Form 990
- Form 990-BL
- Form 990-EZ
- Form 990-T (sec. 401(a) or 408(a) trust)
- Form 990-T (trust other than above)
- Form 1041-A
- Form 4720
- Form 5227
- Form 6069
- Form 8870

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of ▶ The organization
- Telephone No. ▶ 415-391-6986
- FAX No. ▶ 415-391-6987
- If the organization does not have an office or place of business in the United States, check this box ▶
- If this is for a Group Return, enter the organization’s four digit Group Exemption Number (GEN) ▶

4 I request an additional 3-month extension of time until 11/15/2007
5 For calendar year 2006... and ending...
6 If this tax year is for less than 12 months, check reason ▶ Initial return ▶ Final return ▶ Change in accounting period
7 State in detail why you need the extension. More time is requested to acquire all information needed to complete and file an accurate return.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.
8b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.
8c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTB coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See Instructions.

Signature ▶ Crosby & Kaneda ▶ Certified Public Accountant ▶ Date ▶ 8-10-07

Notice to Applicant. (To Be Completed by the IRS)

- We have approved this application. Please attach this form to the organization’s return.
- We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization’s return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization’s return.
- We have not approved this application. After considering the reasons stated in Item 7, we cannot grant your request for an extension of time to file. We are not granting a 10-day grace period.
- We cannot consider this application because it was filed after the extended due date of the return for which an extension was requested.
- Other ▶

Director ▶ Date ▶

Alternate Mailing Address. Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above.

<table>
<thead>
<tr>
<th>Name</th>
<th>Crosby &amp; Kaneda, CPAs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number</td>
<td>1611 Telegraph Ave. Ste 318</td>
</tr>
<tr>
<td>City or town</td>
<td>Oakland, CA 94612</td>
</tr>
</tbody>
</table>

Form 8868 (Rev 12-2006)
Application for Extension of Time To File an Exempt Organization Return

Section 501(c)(3) corporations required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only.

File by the due date for filing your return.

Check type of return to be filed (file a separate application for each return).

- Form 990
- Form 990-3T (corporation)
- Form 990-3 BL
- Form 990-3 T (sec 401(a) or 408(a) trust)
- Form 990-3 EZ
- Form 990-3 T (trust other than above)
- Form 990-3 PF
- Form 1041-A

The books are in the care of the organization.

Telephone No: 415-391-8886
FAX No: 

If the organization does not have an office or place of business in the United States, check this box.

If this is for a Group Return, enter the organization’s four digit Group Exemption Number (GEN) and attach a list with the names and EINs of all members the extension will cover.

1. I request an automatic 3-month extension of time to file Form 990-T extension of time until 8/15/2007 to file the exempt organization return for the organization named above. The extension is for the organization’s return for calendar year 2006, or tax year beginning and ending.

2. If this tax year is for less than 12 months, check reason: Initial return, Final return, Change in accounting period.

3a. If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax less any nonrefundable credits. See instructions.

3b. If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.

3c. Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

Caution, if you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

OMB No 1545-1709

Form 8868 (Rev 12-2006)