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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)

OMB No 1545-0047 2008

			ue Service		► The organ	ızatıon may	have to u	se a copy of	f this return to	satisfy state report	ing require	ments	Ор	en to Public I	nspection	
		For the	2008 calend	dar year, d	or tax year be	ginning	8/0)1	, :	2008, and endir	ng 7,	/31		, 2009		
	В	Check if	applicable		1							D Emplo	yer Ident	ufication Number		
			ress change	Please use IRS label		EAST	OUAL	TY ED	UCATION	J		04-	3678	629		
		\vdash	ne change	or print or type.	DBA: YE							E Teleph				
		\vdash	al return	See	310 EAS	Y STRE	EET					•		-0986		
		\vdash		specific Instruc-	MOUNTAI	N VIEV	V, CA	94043				- 000	903	0300		
		\vdash	nination	tions										. 206	4 000	
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		Арр	lication pending	l	and address of pr		er					s a group retu Ill affiliates inc		<u> </u> ≓ ``	es X No	
					AS C ABO					1"1	1 ''	, attach a list		structions) Y	es No	
	<u>i </u>		exempt statu) ▼ (ins	ert no)	4	1947(a)(1) c	or 527						
	<u>J</u>				S-SV.COM						H(c) Group	p exemption r		<u> </u>		
	K	Type of organization Corporation Trust Association Other ► L Year of Formation M State of Summary											State of I	legal domicile		
	Pa															
	,	1 Briefly describe the organization's mission or most significant activities. OPERATION OF FLEMENTARY SCHOOL OFFERING PRESCHOOL THROUGH AGE TEN (5T														
	. 8	_ELEMENTARY_SCHOOL_OFFERING_PRESCHOOL_THROUGH_AGE_TEN_(5' EMPLOYS_OPEN_CLASSROOMS, LEARNING_THROUGH_PLAY, USING_M												<u>E_SCHOOL</u>		
	ä															
	le I									AND TAKII				_APPROAC	OT_H	
	် ဗိ		heck this bo							disposed of moi	re than 2	5% of its a				
	æ				bers of the g					lino 1h)			3		4	
	ies				nt voting mem eyees (Part V		-	ming boo	ıy (Fait Vi,	iiile iu)			5		<u>0</u> 0	
	Activities & Governance				eers (estimat								6		0	
	Act							III. line 12	Column (C)			7a		0.	
			-	s unrelated business revenue from Part VIII, line 12, column (C) ted business taxable income from Form 990-T, line 34								7b		0.		
												Prior Year		Current		
		8 Contributions and grants (Part VIII, line 1h)										50,		Current	229.	
=	ã.	9 Program service revenue (Part VIII, line 2g)										2,429,		2 86	0,781.	
2010	Revenue	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)											89.		8,888.	
	_				III, column (A			-	and 11e)				148.		$\frac{6,184}{}$.	
					nes 8 through					(), line 12)		2,490,			6,082.	
ണ ~	- 1	13 (rants and si	mılar amı	ounts paid (P	art IX, co	olumn (A), lines 1	-3)	•						
MAR		14 E	Benefits paid	to or for	members (Pa	art IX, co	lumn (A), line 4)								
					nsation, empl				lumn (A), I	ines 5-10)		1,856,	550.	2,26	1,549.	
SCANNED	ses				ng fees (Part					,						
쁫	be l				nses (Part IX	•	• • •			88,487.						
Z	Ä								ECEN	/FD		1 001 1	- 0 2	0.0	1 750	
×		17 (iner expens	es (Part I	IX, column (A), iines i	la-lid/	111-241)	(4)			1,061,			<u>1,752.</u>	
S	, [18 T	otai expense	es Add III	nes 13-17 (m	ust equa	Partix	ic plumn	(A), line 25			2,918,			3,301.	
	\rightarrow	19 F	evenue less	expense	s Subtract III	ne 18 fro	m line [<u>ਆ ""</u>	111 A D	2010		-427,	05.	-16	<u>7,219.</u>	
	200									[8]	Beg	inning of \		End of		
	Bala		otal assets (-	,		L	0(BDEN	117		894,			0,278.	
	Net Assets or Fund Balancos		otal liabilities	•	•					<u>VI</u>		3,384,2			7,036.	
			+		ances, Subtra	ct line 2	1 from li	ne 20		<u>.</u>		<u>2,489,</u>	539.	-2,65	<u>6,758.</u>	
	Ра	rt II	Signati	ure Blo	<u>ck</u>				 -							
			Under penaltie true, correct, a	s of perjury, and complete	I declare that I he Declaration of p	ave examin prep arer (at	ed this ret ber than of	urn, includin lficer) is bas	ig accompanyi sed on all infor	ng schedules and st mation of which prep	atements, a parer has ar	ind to the bes	t of my k	nowledge and be	lief, it is	
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	116	I C	Signature	'm	m Te	A750	- C				L	ate				
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	Pai	Ы			///				-	Date	1 :	Check if self-	[S	reparer's identifyii ee instructions)	ig number	
	Pre		Preparer's signature	To Take	DV G CIN	CDA		7		\$-9-	10	employed P	ᄖ	00545640		
	par	er's		WEN	-	CPA			-	7-7-	10		<u> </u>	00547643		
	Us	е	Firm's name (or yours if self		DY W. SU			- CMT -	100			_				
	On	ly	employed), address, and		O DE LA			STE 2	200					368424		
	Ma	. He - 17	ZIP + 4		TA CLARA		95054	-2 (<u> </u>		Phone no	(40		\neg	
					with the prepare									X Yes	No	
	DAA	· rorb	rivacy Act a	na raper	work Reduct	ION ACT N	iotice, s	ee tne se	parate insti	ructions.		TEEA0112	L 12/22	2/08 Form	990 (2008)	

Form 990 (2008) PACIFIC EAST QUALITY EDUCATION	04-3678629 Page 2
Part III Statement of Program Service Accomplishments (see Instru	
1 , Briefly describe the organization's mission	
SEE SCHEDULE O	
	·
	,
2 Did the organization undertake any significant program services during the year which	were not listed on the prior
Form 990 or 990-EZ?	Yes X No
If 'Yes,' describe these new services on Schedule O	ics ito
•	s, any program services? Yes X No
3 Did the organization cease conducting, or make significant changes in how it conducts	s, any program services? Yes X No
If 'Yes,' describe these changes on Schedule O.	
4 Describe the exempt purpose achievements for each of the organization's three larges and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the an	t program services by expenses. Section 501(c)(3) nount of grants and allocations to others, the total
expenses, and revenue, if any, for each program service reported.	The state of the s
A (0) () () () () () () () () (\(\text{C}\) \(\delta\) \(\delta\
4a (Code) (Expenses \$ 2,430,378 including grants of \$	
OPERATION OF A PRIVATE PRE-SCHOOL AND ELEMENTARY SC	HOOL, OFFERING PRESCHOOL THROUGH
AGE TEN (5TH GRADE).	
DURING THE 2008-2009 SCHOOL YEAR 222 STUDENTS WERE	SERVED.
4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)
	·
4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)
	·
	
	·
	·
	·
4d Other program services. (Describe in Schedule O.)	
(Expenses \$ including grants of \$) (Revenue \$
4e Total program service expenses ► \$ 2,430,378. (Must equal Part I)	

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1_	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2_		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		Х
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9_		Х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	X	
14 a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15		Х
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		Х
	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I	17	Х	Х
18 19	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	18 19	Α.	Х
20	Did the organization report more than \$15,000 on Part VIII, line 9a. If Yes, complete Schedule G, Part III Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X
21	Did the organization operate one of more hospitals: If Yes, complete Schedule I, Parts I and II	21		X
	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		X
	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J	23		Х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No, 'go to question 25	24a		Х
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26	Х	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		Х
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Form 990 (2008) PACIFIC EAST QUALITY EDUCATION

Part IV Checklist of Required Schedules (continued)

			162	110
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee.			
i	a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV	28a		Х
ĺ	b Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV	28b		Х
•	c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If 'Yes,' complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	_	Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R , Part V , line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
BAA		Form	990 (2008

Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable 2 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 71 1b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? Х 1 c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 0 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by X За b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 3Ь 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? Х 4a **b** If 'Yes,' enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? X 5b c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5с 6a Did the organization solicit any contributions that were not tax deductible? X 6a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible? 6b Organizations that may receive deductible contributions under section 170(c). a Did the organization provide goods or services in exchange for any guid pro quo contribution of more than \$75? **7** a b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 82827 7с Х d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 f g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a b Did the organization make any distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter. 10a a Initiation fees and capital contributions included on Part VIII, line 12 b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter a Gross income from other members or shareholders. 11 a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11_b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a

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Form 990 (2008)

b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year

Part VI Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	ction A.	Governing Body and Management				
	For each '	'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, de , or changes in Schedule O See instructions.	escribe the circumstances,		Yes	No
1 8	a Enter the	number of voting members of the governing body	1a 4			
ı	b Enter the	number of voting members that are independent .	1b			
2	Did any of officer, dir	ficer, director, trustee, or key employee have a family relationship or a business related to the control of th	ationship with any other	2		х
3	Did the orgof of officers	ganization delegate control over management duties customarily performed by or un , directors or trustees, or key employees to a management company or other persor	der the direct supervision n?	3		_x_
4	Did the or	ganization make any significant changes to its organizational documents		4		Х
	since the p	prior Form 990 was filed?				
5	Did the or	ganization become aware during the year of a material diversion of the organization'	s assets?	5		X
6	Does the	organization have members or stockholders?		6		X
7:	a Does the o governing	organization have members, stockholders, or other persons who may elect one or m body?	ore members of the	7a		x
1	b Are any de	ecisions of the governing body subject to approval by members, stockholders, or oth	er persons?	7b		X
8	Did the org	ganization contemporaneously document the meetings held or written actions undert ng.	aken during the year by			
	a The gover	ning body?		8a		X
1	b Each com	mittee with authority to act on behalf of the governing body?		8Ь		X
9;	a Does the o	organization have local chapters, branches, or affiliates?		9a	_	<u>X</u>
ı		pes the organization have written policies and procedures governing the activities of hes to ensure their operations are consistent with those of the organization?	such chapters, affiliates,	9b		
10	Was a cop describe ii	by of the Form 990 provided to the organization's governing body before it was filed? In Schedule O the process, if any, the organization uses to review the Form 990	All organizations must EE SCHEDULE O	10	Х	
	organizatio	ny officer, director or trustee, or key employee listed in Part VII, Section A, who cani on's mailing address? <i>If 'Yes,' provide the names and addresses in Schedule O</i>	not be reached at the	11		_x_
Sec	ction B.	Policies				,
					Yes	No
12	a Does the o	organization have a written conflict of interest policy? If 'No,' go to line 13		12a	Х	
	to conflicts		•	12b		x
	Schedule	organization regularly and consistently monitor and enforce compliance with the polic O how this is done	cy? If 'Yes,' describe in	12c		X
		organization have a written whistleblower policy?		13		X
14	Does the	organization have a written document retention and destruction policy?		14		X
	persons, c	ocess for determining compensation of the following persons include a review and a comparability data, and contemporaneous substantiation of the deliberation and deci	oproval by independent sion.			
	_	ization's CEO, Executive Director, or top management official?		15a		X
ı		ers of key employees of the organization?		15b		X
	Describe t	he process in Schedule O. (see instructions)				
16		ganization invest in, contribute assets to, or participate in a joint venture or similar a ng the year?	rrangement with a taxable	16a		х
i	ın joint ver	as the organization adopted a written policy or procedure requiring the organization t nture arrangements under applicable federal tax law, and taken steps to safeguard t n respect to such arrangements?	o evaluate its participation he organization's exempt	16b		
Sec		Disclosures				
		ates with which a copy of this Form 990 is required to be filed CA				
18	Section 61 inspection	104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and Indicate how you make these available. Check all that apply	1 990-T (501(c)(3)s only) avai	lable	for pu	blic
	Own v	vebsite Another's website X Upon request				
19	Describe i statement	n Schedule O whether (and if so, how) the organization makes its governing docume s available to the public.	ents, conflict of interest polic	, and	fınan	cıal
	State the	name, physical address, and telephone number of the person who possesses the bo	oks and records of the organ	nızatıc	n.	
	► HVI20F	TSATSOS 310 EASY STREET MOUNTAIN VIEW CA 94043 866	5-903-0986			

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Form 990 (2008)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) or more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

X Check this box if the organization did no	t compens	sate ar	ту о	ffice	r, d	irector	, tru	istee, or key employee) .	
(A)	(A) (B) (c)									(F)
Name and Title	Average hours per week			_	T T		,	Reportable	Reportable	Estimated
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W 2/1099 MISC)	Reportable compensation from related organizations (W 2/1099 MISC)	Estimated amount of other compensation from the organization
		dual t	tiona		mplo	st cor	"			and related organizations
		ruste	l trus		yee	mpen				
			tee			satec				
BETTY CHAN PO KING						_			·	
PRESIDENT	3			Х				0.	0.	0.
PAUL YIP WAN HUNG			•							
DIRECTOR	0	<u>X</u>						0.	0.	<u> </u>
GARY MORRISON SECRETARY	1			х	ĺ			0.	0.	0.
WINNIE YIP WING KAM				_^	 			0.	U.	
DIRECTOR	3	Х						0.	0.	0.
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(A)	(B) Average	Poer	tion (c)	hat a	nnlu)	(D)	(E)	(F)	
Name and Title	I house	-		Officer	_	Highest compensated employee	_	Reportable compensation from the organization (W 2/1099 MISC)	Reportable compensation from related organizations (W-2/1099 MISC)	Estima amount of compens from it organize and relations organize	sation he ation ated
									-		
					L.						
					_						
1 b Total							•	0.	0.	<u></u>	0.
2 Total number of individuals (including those in 1a) w organization ► 0	ho recei	ved	moi	re th	ian i	\$100	0,000) in reportable cor	mpensation from th	e	
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	dıvıdual		•		-		_	·	. ,	Ye 3	s No X
4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th individual	ortable an \$150	com),000	pen)? If	satio 'Ye	on a	ind (omp	othei lete	r compensation fro Schedule J for su	om ich	4	Х
5 Did any person listed on line 1a receive or accrue corendered to the organization? If 'Yes,' complete Sch	mpensa edule J	ition for s	fror such	m ar per	ny u rson	nrel	ated	organization for s	services	5	Х
Section B. Independent Contractors											
 Complete this table for your five highest compensate compensation from the organization. 	ed indep	ende	ent o	cont	ract	ors	that	received more that	an \$100,000 of		
(A) Name and business address	s							Description o	of Services	(C) Compensa	tion
	_										
2 Total number of independent contractors (including t	hoco :=	1\	,he	reco		1	ore #	nan \$100 000			
compensation from the organization > 0	nose in	1) W	110 1	ece	ive	11110	ne (I	ומוו שוטט,טטט וח	1		

<u> </u>		# Statement of the		-	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
	1.0	Federated campaigns	1 a			revenue		312, 313, 01 314
FE			1 b					
88		Membership dues	1 c					
AN,		Fundraising events.	<u> </u>					
유통		Related organizations	1 d					
SIS,	е	Government grants (contribution	ons) 1 e					
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS		All other contributions, gifts, g similar amounts not included a	above 1f	229.				
S S	_	Noncash contribus included in	ins ra-ri: 5_		229.			
	<u></u> n	Total. Add lines 1a-1f		Business Code				
3	2.	TUITION & REGIS	MOTTAGTS	Dusiness odd:	2,849,122.	2,849,122.		
₫		UNIFORM & ACTIV			11,659.	11,659.		
ᄬ	0			· -	11,035.	11,039.		
Ž.	2							
Z	a							
Ž.	e							
PROGRAM SERVICE REVENUE		All other program service	e revenue. [-	2 000 701		······································	
		Total. Add lines 2a-2f			2,860,781.			
	3	Investment income (incl other similar amounts)	udıng dıvıdends	, interest and	8,888.	8,888.		
	4	Income from investment	l of toy overnt	hand proceeds	0,000.	0,000.	- .	
	5		t of tax-exempt	bona proceeds				
	5	Royalties	(i) Real	(ii) Personal				
	6.3	Gross Rents	(1) 11001	(ii) t di Soniai				
		Less. rental expenses						
		Rental income or (loss)	 					
		Net rental income or (loss)				İ		
- 1		۱ .	(i) Securities	(ii) Other				
ł	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		assets other than inventory						
i	b	Less cost or other basis and sales expenses						
	_	· · · · · · · · · · · · · · · · · · ·		 				
		Gain or (loss)						f
		Net gain or (loss)						
ENUE	8a	Gross income from fund (not including \$						
OTHER REVE		of contributions reported		42.450				
8		See Part IV, line 18		43,458.				
티		Less. direct expenses	•	7,534.	25 024	35 034		
		Net income or (loss) from	_	vents	35,924.	35,924.	***************************************	
		Gross income from gam See Part IV, line 19		a				
- 1		Less direct expenses		b				
- 1	С	Net income or (loss) from	m gamıng actıvı	ties 📂				
	10 a	Gross sales of inventory and allowances		3,664.				
	b	Less. cost of goods sold	t t	b 1,383.				
	С	Net income or (loss) fro	m sales of invei	ntory >	2,281.	2,281.		<u>]</u>
		Miscellaneous Reven		Business Code				
	11 a	MISCELLANEOUS	INCOME		47,979.	47,979.		
	Ь				· <u>-</u>			
	С							
	d	All other revenue						
		Total. Add lines 11a-11d		▶	47,979.			
	12	Total Revenue. Add line 10c, and 11e	s 1h, 2g, 3, 4, 5	o, 6d, 7d, 8c, 9c, ▶	2,956,082.	2,955,853.	0.	0.

Form 990 (2008) Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	344,342.	0.	269,342.	75,000.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	1,583,228.	1,397,997.	185,231.	
8	Pension plan contributions (include section 401(k) and section 403(b) employer				674
_	contributions)	16,850.	12,300.	3,876.	674.
9	Other employee benefits.	149,562.	109,443.	34,175.	5,944.
10	Payroll taxes	167,567.	122,324.	38,540.	6,703.
	Fees for services (non-employees)				
	a Management	20,106.		20,106.	
	o Legal c Accounting	25,444.		25,444.	
	Lobbying	25,444.		23,444.	
	Prof fundraising svcs. See Part IV, In 17				
	Investment management fees				
	other	6,580.	769.	5,811.	
	Advertising and promotion	0,300.	709.	J, 011.	
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	343,870.	343,870.		
17	Travel	27,622.	27,622.		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	27,022.	21, 022.		
19	Conferences, conventions, and meetings	323.	323.		
20	Interest	68,070.	68,070.		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	12,648.	6,425.	6,223.	
23	Insurance.				
24	covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)			: 	
	TEACHER AID EXPENSES	100,742.	100,742.		
	OUTSIDE LABOR	65,579.	65,579.		
	TUITION DISCOUNT	56,159.	56,159.		
	ADVERTISING & PROMOTIONS	28,239. 22,120.	28,239. 22,120.		
	All other expenses	84,250.	68,396.	15,688.	166.
	Total functional expenses. Add lines 1 through 24f	3,123,301.	2,430,378.	604,436.	88,487.
26			_,,,	55.7,156.	00/1011
BAA					Form 990 (2008)

		······································				T T	
					(A) Beginning of year		(B) End of year
	1	Cash non-interest-bearing			528,994.	1	475,632.
	2	Savings and temporary cash investments		İ		2	
	3	Pledges and grants receivable, net		Ì		3	
	4	Accounts receivable, net			209, 298.	4	43,584.
	5	Receivables from current and former officers, director or other related parties Complete Part II of Schedule	s, trust L	tees, key employees,		5	
	6	Receivables from other disqualified persons (as define	ed und	er section 4958(f)(1))			
		and persons described in section 4958(c)(3)(B). Comp	lete P	art II of Schedule L		6	
A S S E T S	7	Notes and loans receivable, net				7	
Ē	8	Inventories for sale or use				8	444.
Ś	9	Prepaid expenses and deferred charges			40,617.	9	40,788.
	10a	Land, buildings, and equipment, cost basis	10 a	156,171.			
	b	Less, accumulated depreciation. Complete Part VI of					
		Schedule D	10 b	97,841.	65,812.	10 c	58,330.
	11	Investments - publicly-traded securities				11	. == .
	12	Investments – other securities See Part IV, line 11		. [12	
	13	Investments – program-related See Part IV, line 11				13	
	14	Intangible assets				14	·······
	15	Other assets See Part IV, line 11			50 <u>,0</u> 00.	15	101,500.
	16	Total assets. Add lines 1 through 15 (must equal line	34)		894,721.	16	720,278.
	17	Accounts payable and accrued expenses			242,191.	17	279,570.
	18	Grants payable				18	
	19	Deferred revenue				19	
į	20	Tax-exempt bond liabilities		20			
Ŗ	21	Escrow account liability Complete Part IV of Schedule		21			
LIABILITI	22	Payables to current and former officers, directors, trus highest compensated employees, and disqualified per	key employees, Complete Part II				
I E S		of Schedule L			300,000.	22	300,000.
S	23	Secured mortgages and notes payable to unrelated th	ird par	ties	1,957,100.	23	1,957,100.
	24	Unsecured notes and loans payable			224 262	24	0.10. 0.66
	25	Other liabilities Complete Part X of Schedule D		}	884, 969.	25	840,366.
	26	Total liabilities. Add lines 17 through 25	₩	-dlate lines	3,384,260.	26	3,377,036.
E T		Organizations that follow SFAS 117, check here ► 27 through 29 and lines 33 and 34.	X ar	nd complete lines			
	27	Unrestricted net assets			-2,489,539.	27	-2,656,758.
ASSET.	28	Temporarily restricted net assets			2,409,559.	28	-2,030,730.
Ţ	29	Permanently restricted net assets		•		29	
P		Organizations that do not follow SFAS 117, check her	·ρ ▶	and complete			
		lines 30 through 34.	•				
P2C	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building, and equip	ment f	und		31	•
<u>Ļ</u>	32	Retained earnings, endowment, accumulated income,		t e		32	
B女し女文ひEの	33	Total net assets or fund balances.			-2,489,539.	33	-2,656,758.
E S	34	Total liabilities and net assets/fund balances		Ì	894,721.	34	720,278.
Pa	rt XI	Financial Statements and Reporting	·				
							Yes No
1	Acc	counting method used to prepare the Form 990	Cash	X Accrual	Other		
2	a We	re the organization's financial statements compiled or r	eviewe	ed by an independent ac	ccountant?		2a X
	b We	re the organization's financial statements audited by ar	ındep	endent accountant?			2b X
	c If 'Y	Yes' to 2a or 2b, does the organization have a committee	ee that	assumes responsibility	for oversight of the au-	dıt,	
_		new, or compilation of its financial statements and selec		•			2c X
3	a As Aud	a result of a federal award, was the organization requir dit Act and OMB Circular A-133?	red to i	undergo an audit or aud	lits as set forth in the S	ıngle	3a X
		Yes,' did the organization undergo the required audit or	audits	5?			3b A
BA							Form 990 (2008)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545 0047 2008

Open to Public Inspection

Name of the organization PACIFIC EAST QUALITY EDUCATION Employer identification number DBA: YEW CHUNG INTERNATIONAL SCHOOL 04-3678629 Part | Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is. (Please check only one organization.) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 2 3 A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) A medical research organization operated in conjunction with a hospital described in section 170(bX1)(A)(iii) Enter the hospital's 4 name, city, and state. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives. (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts 9 from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h. 11 Type III- Other Type II Type III — Functionally integrated d By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) below, the governing body of the supported organization? 11 g (i) a family member of a person described in (i) above? 11 g (ii) 11 g (iii) a 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the organizations the organization supports h (i) Name of Supported (ii) EIN (iii) Type of organization (v) Did you notify (vi) Is the (vii) Amount of Support organization in col (i) organized in the US? Organization (described on lines 1.9 above or IRC section nization in col the organization in col (i) of (i) listed in your governing document? (see instructions)) your support? Yes No Yes Yes No No

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule A (Form 990 or 990-EZ) 2008

6	Fublic support. Subtract line 5 from line 4								
Sec	tion B. Total Support								
	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 200)8	(f) Tota	al
7	Amounts from line 4							_	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources								
9	Net income form unrelated business activities, whether or not the business is regularly carried on								
10	Other income Do not include gain or loss form the sale of capital assets (Explain in Part IV)								
11	Total support. Add lines 7 through 10								
12	Gross receipts from related activ	ities, etc. (see ins	tructions)				12		
13	First five years. If the Form 990 organization, check this box and		tion's first, secon	d, third, fourth, oi	fifth tax year as	a section 50)1(c)(3)	ı	► □
Sec	tion C. Computation of Pu	ıblic Support l	Percentage						
14	Public support percentage for 20	08 (line 6, column	(f) divided by line	e 11, column (f)			14		<u>%</u>
15	Public support percentage for 20	07 Schedule A, P	art IV-A, line 26f				15		%
16 a	a 33-1/3 support test — 2008. If the and stop here. The organization				he line 14 is 33-1	/3 % or mor	e, ched	ck this box	-
t	33-1/3 support test — 2007. If the and stop here. The organization	e organization did qualifies as a pub	not check a box o licly supported or	on line 13, or 16a, ganization	and line 15 is 33-	1/3% or mo	re, che	ck this box	-
17 a	a 10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a	nd-circumstances	s' test, check this t	oox and stop here	. Explain in	Part IV	√ how	-
t	o 10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-a	nd-circumstances	s' test, check this t	oox and stop here	. Explain in	Part IV	5 is 10% / how the	► □
	Private foundation. If the organiz	zation did not che	ck a box on line,	13, 16a, 1 <u>6</u> b, 17a,	or 17b, check this	s box and s	ee instr	ructions	>
BAA	i				S	chedule A (Form 9	90 or 990-E	Z) 2008
			TEEA0402L	. 12/17/08					

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support **(b)** 2005 Calendar year (or fiscal yr beginning in)▶ (a) 2004 (c) 2006 (d) 2007 (e) 2008 (f) Total Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.') Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1-5 7a Amounts included on lines 1. 2, 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support (c) 2006 Calendar year (or fiscal yr beginning in) (a) 2004 **(b)** 2005 (d) 2007 (e) 2008 (f) Total 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included inline 10b. whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 13 Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) 15 % 16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g. 16 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) 17 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 18 % 19a 33-1/3 support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33-1/3 support tests - 2007. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A	(Form 990 d	or 990-EZ	2008	PACIFIC	EAST	QUALITY	EDUCATION	ON 04-36	78629 Page 4
Part IV	Supplem	ental In	format	ion. Compl	ete thi	s part to p	provide the	explanation required by	Part II, line 10;
	Part II, lır	ne 17a	or 17b;	or Part III,	line 12	2. Provide	any other	<u>ON</u> 04-36 explanation required by additional information. (see instructions)
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SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545 0047 2008

Department of the Treasury Internal Revenue Service Attach to Form 990. To be completed by organizations that answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Name of the organization Employer Identification number PACIFIC EAST QUALITY EDUCATION 04-3678629 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?? Part II | Conservation Easements Complete if the organization answered 'Yes' to Form 990 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year 2a a Total number of conservation easements 2b b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easement it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)? No Yes In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art. historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990. Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items. a Revenues included in Form 990, Part VIII, line 1

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

b Assets included in Form 990, Part X

Schedule **D** (Form 990) 2008

Schedule D (Form 990) 2008 PACIFIC EAST QUALITY EDUCATION 04-367							Page 2	
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)								
3 Using the organization's accession that apply)	and other records,			gnificant use of its collec	ction iter	ns (che	ck all	
a Public exhibition			r exchange programs					
b Scholarly research		e U Other						
c Preservation for future general								
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.								
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No								
Part IV Trust, Escrow and Cus IV, line 9, or reported a	stodial Arrange	ments Comple orm 990, Part	ete if organization	answered 'Yes' to	Form	990, 1	⊃art	
1 a Is the organization an agent, truste included on Form 990, Part X?	ee, custodian, or oth	ier intermediary f	or contributions or othe	er assets not	Yes	[No	
b If 'Yes,' explain the arrangement in	n Part XIV and comp	olete the following	g table.					
					Amoun	t		
c Beginning balance				1 c				
d Additions during the year			•	1 d	_			
e Distributions during the year			•	1 e				
f Ending balance .				11		_		
2a Did the organization include an am	ount on Form 990,	Part X, line 21?			Yes		No	
b If 'Yes,' explain the arrangement in	n Part XIV.					_	_	
Part V Endowment Funds Con	nplete if organiz	zation answer	ed 'Yes' to Form 9	990, Part IV, line 10).			
	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e)	our year	s back	
1 a Beginning of year balance								
b Contributions								
c Investment earnings or losses					1			
d Grants or scholarships					1		***************************************	
e Other expenditures for facilities and programs								
f Administrative expenses	• •							
g End of year balance								
2 Provide the estimated percentage	of the year end bala	ince held as.						
a Board designated or quasi-endown	nent ►	%						
b Permanent endowment ►								
c Term endowment ►	<u> </u>							
3a Are there endowment funds not in organization by	the possession of the	ne organization th	nat are held and admin	istered for the	ſ	Yes	No	
(i) unrelated organizations					3a(i)	103	110	
(ii) related organizations					3a(ii)		-	
b If 'Yes' to 3a(ii), are the related org	nanizations listed as	required on Sch	edule R?		3b			
4 Describe in Part XIV the intended to	•				30			
Part VI Investments-Land, Bu				Cline 10				
Description of investment		t or other basis	(b) Cost or other	(c) Depreciation	(d) F	Book Va	alue	
·		vestment)	basis (other)	(c) Depreciation	(u) :			
1 a Land								
b Buildings								
c Leasehold improvements			52,004.	9,009.		_	<u>, 995.</u>	
d Equipment			59,782.	50,505.			<u>,277.</u>	
e Other			44,385.	38,327.			<u>,058.</u>	
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c)) 58,330.								

Part VII Investments—Other Securities See F	orm 990, Part X, lir	ne 12. N/A	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuate Cost or end-of-year mark	
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
Total (Column (b) should equal Form 990 Part X, col (B) line 12.)	<u> </u>		
Part VIII Investments—Program Related (See	Form 990, Part X, I	ine 13) N/A	
(a) Description of investment type	(b) Book value	(c) Method of valuati	on
	-	Cost or end-of-year mark	et value
			·
		<u> </u>	
		·····	
Total Column (b)(should equal Form 990, Part X, Col. (B) line 13.)			
Part IX Other Assets (See Form 990, Part X,	line 15)	1	
	scription		(b) Book value
DEPOPSIT-RENT			101,500.
	·····		
Total. Column (b) Total (should equal Form 990, Part X, col			101,500.
Part X Other Liabilities (See Form 990, Part	X, line 25)		
(a) Description of Liability	(b) Amount		
Federal Income Taxes			
TUITION FEE IN ADVANCE	840,36	6.	
Total. Column (b) Total (should equal Form 990, Part X, col. (B) line 25)	► 840,36	6.	
In Part XIV, provide the text of the footnote to the organizat			for uncertain tay
positions under FIN 48.	ion a manda statement	s that reports the organization's hability	ioi uncertain tax

Schedule D (Form 990) 2008 PACIFIC EAST QUALITY EDUCATION

04-3678629

Page 3

Sche	edule D (Form 990) 2008 PACIFIC EAST QUALITY EDUCATION	04-36°	78629	_ Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		N/A	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			
2	Total expenses (Form 990, Part IX, column (A), line 25)			
3	Excess or (deficit) for the year. Subtract line 2 from line 1			
4	Net unrealized gains (losses) on investments			
5	Donated services and use of facilities			
6	Investment expenses			
7	Prior period adjustments			
8	Other (Describe in Part XIV).			
9	Total adjustments (net). Add lines 4-8			
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9			
Pai	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	Retur	n N/A	
1	Total revenue, gains, and other support per audited financial statements	1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains on investments 2a			
t	Donated services and use of facilities 2b	7		
c	: Recoveries of prior year grants 2c	7		
c	Other (Describe in Part XIV).	7		
e	Add lines 2a through 2d		1	
	Subtract line 2e from line 1	3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.			
	Investments expenses not included on Form 990, Part VIII, line 7b			
	Other (Describe in Part XIV).	7		
	Add lines 4a and 4b	4c		
	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5		
	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Re		N/A	
	Total expenses and losses per audited financial statements	1	11,711	<u> </u>
	Amounts included on line 1 but not on Form 990, Part IX, line 25.	<u> </u>		
	Donated services and use of facilities			
	Prior year adjustments 2b	ᅴ :		
	: Losses reported on Form 990, Part IX, line 25.	-		
	I Other (Describe in Part XIV).	\dashv		
	Add lines 2a through 2d		1	
	Subtract line 2e from line 1	3		
	Amounts included on Form 990, Part IX, line 25, but not on line 1:	-	 	
	o Other (Describe in Part XIV). 4a 4b	- !		
	Add lines 4a and 4b	ا ا		
_	Total expenses Add lines 3 and 4c (This should equal Form 990, Part I, line 18.)	4c		
	t XIV Supplemental Information			
Com line 4	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b.	, lines 1	b and 2b, Par	rt V,
	·			
	·		. – – – – –	
			· 	
			. – – – – –	
			· 	

Schedule D (Form 990) 2008 Part XIV Supplemental Information (continued)	Page 5
Part XIV Supplemental Information (continued)	
	-
	
	- -
•	
	-
	

SCHEDULE E (Form 990 or 990-EZ)

Schools

OMB No 1545 0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

➤ To be completed by organizations that answer 'Yes' to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.
➤ Attach to Form 990 or Form 990-EZ.

Name of the organization Employer identification number PACIFIC EAST QUALITY EDUCATION 04-3678629 YES NO 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? Х 1 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? 2 X 3 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 had 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 3 X RACIALLY NONDISCRIMINATORY POLICY OF SCHOOL IS MENTIONED IN ATTACHMENT TO FORM 1023 FILED WITH THE IRS, IN ALL ITS BROCHURES, CATALOGUES, DURING OPEN HOUSES AND REGISTRATION PERIODS Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? Х 4a b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4ь Х c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? X 4c X d Copies of all material used by the organization or on its behalf to solicit contributions? 4d If you answered 'No,' to any of the above, please explain (If you need more space, attach a separate statement) SEE SUPPLEMENTAL Does the organization discriminate by race in any way with respect to Х a Students' rights or privileges? 5a b Admissions policies? Х 5b c Employment of faculty or administrative staff? X 5 c d Scholarships or other financial assistance? Х 5d e Educational policies? X 5e f Use of facilities? Х 5f g Athletic programs? X 5g X h Other extracurricular activities? 5h If you answered 'Yes,' to any of the above, please explain. (If you need more space, attach a separate statement.) 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a Х b Has the organization's right to such aid ever been revoked or suspended? 6Ь If you answered 'Yes,' to either line 6a or line b, please explain using an attached statement. 7 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

2008 ·

SCHEDULE E - SUPPLEMENTAL INFORMATION

PAGE 2

PACIFIC EAST QUALITY EDUCATION DBA: YEW CHUNG INTERNATIONAL SCHOOL

04-3678629

SCHEDULE E, LINE 4	
EXPLANATION OF RECORDS A	AND MATERIALS NOT MAINTAINED

THE CURRENT STAFF CONSIST OF OF A WELL DIVERSIFIED ETHNIC GROUP. THERE ARE NO QUESTIONS REFERRING TO RACE ON OUR EMPLOYMENT APPLICATION FORMS.

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545 0047 2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Must be completed by organizations that answer 'Yes' to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

Name of the organization PACIFIC EAST QUALITY EDUCATION Employer identification number DBA: YEW CHUNG INTERNATIONAL SCHOOL 04-3678629 Part I Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Solicitation of non-government grants Email solicitations Solicitation of government grants Phone solicitations Special fundraising events In-person solicitations 2a Did the organization have written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes X No b If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990EZ filers are not required to complete this table. (v) Amount paid to (III) Did fundraiser (ii) Activity (or retained by) (vi) Amount paid to (i) Name of individual (iv) Gross receipts or entity (fundraiser) have custody or control from activity fundraiser listed in (or retained by) of contributions? col (i) organization Yes No 0. Total List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

		G (Form 990 or 990-EZ) 2008 PACIFIC			04-36	
Par	<u>t II </u>	Fundraising Events. Complete it reported more than \$15,000 on F	the organization a	answered 'Yes' to F	Form 990, Part IV,	line 18, or
		reported more than \$15,000 on F	(a) Event #1 NEW YEAR PARTY	(b) Event #2	(c) Other Events	(d) Total Events (Add col. (a) through col. (c))
D			(event type)	(event type)	(total number)	Coi. (c))
#CZ#<#	1	Gross receipts	43,458.			43,458.
Ē	2	Less. Charitable contributions				
	3	Gross revenue (line 1 minus line 2)	43,458.			43,458.
6	4	Cash prizes				
D-RECT	5	Non-cash prizes .				
	6	Rent/facility costs			,	
EXPEZSES	7	Other direct expenses	7,534.			_7,534.
S		Direct expense summary. Add lines 4- th Net income summary. Combine lines 3 ar	•		>	7,534. 35,924.
Par		Gaming. Complete if the organiz		es' to Form 990. Pa	art IV. line 19. or re	
		\$15,000 on Form 990-EZ, line 6a				
かい とうしょう			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))
E U	1	Gross revenue				
E	2	Cash prizes				
D-RECT	3	Non-cash prizes				
C S T E S	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes% No	Yes% No	Yes% No	
	7	Direct expense summary. Add lines 2 thro	ough 5 in column (d)		•	
	8	Net gaming income summary. Combine li	nes 1 and 7 in column	(d)	<u> </u>	
		r the state(s) in which the organization ope				YES NO
		e organization licensed to operate gaming o,' Explain.	activities in each of the	ese states?		9a
		e any of the organization's gaming licenses	s revoked, suspended o	or terminated during the	tax year?	 10a

11 Does the organization operate gaming activities with nonmembers?

11

Schedule G (Form 990 or 990-EZ) 2008 PACIFIC EAST QUALITY EDUCATION 04	-3678629	Р	age 3
13 Indicate the percentage of gaming activity operated in:	ŧ		
a The organization's facility	8		
b An outside facility	8		
14 Provide the name and address of the person who prepares the organization's gaming/special events books and	records.		
Name •			
	į		
Address. ►			
15a Does the organization have a contact with a third party from whom the organization receives gaming revenue?	15a		
b If 'Yes,' enter the amount of gaming revenue received by the organization \$ and the ar	nount		
of gaming revenue retained by the third party \$	[
c If 'Yes,' enter name and address			
Name. ►			
Address. •			
16 Gaming manager information			
Name			
Gaming manager compensation ► \$			
Description of services provided.			
Director/officer Employee Independent contractor			
17 Mandatory distributions			
a is the organization required under state law to make charitable distributions from the gaming proceeds to retain	the		
state gaming license?	17a		
b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in	the		
organization's own exempt activities during the tax year. ▶ \$			

BAA

TEEA3703L 07/18/08

Schedule **G** (Form 990 or 990-EZ) 2008

SCHEDULE L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545 0047 2008

Department of the Treasury

► Attach to Form 990 or Form 990-EZ.
► To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Open to Public

Internal Revenue Service	1	or Fo	rm 9	90-EZ, Par	t V, line 38a oi	r 40b.				ŀ	insp	ection	
		QUALITY EDUCATION NG INTERNATIONAL SCHOOL Employer identification number 04-3678629											
Part I Excess	Benefit Transactions pleted by organizations th	s (section	n 50	01(c)(3)	and section	501(c) Line 25a	(4) organiz	ation	s on	lv).	/, lıne	40b.	
											.,	(c) Corrected?	
1 ((a) Name of disqualified person			(b) Description of transaction						Yes	No		
			\perp	<u>.</u>									
			_										
			+								_		
2 Enter the amount section 4958	t of tax imposed on the or	ganization	mar	nagers or d	isqualified per	rsons dur	ing the year u	nder	► \$				
	t of tax, if any, on line 2, a				organization				▶ \$				
	o and/or From Interest ompleted by organizatione 38a.				'Yes' on F	orm 990	0, Part IV, I	line 2	26 or	Forr	n 99()-EZ,	
(a) Name of interest	ted person and purpose	(b) Loan to o the organiza	r from ation?	n (c) princi	Original pal amount	(d) Balance due		(e) In default?		by bo	proved pard or nittee?	(g) Written agreement?	
			rom					Yes	No	Yes	No	Yes	No
BETTY PO KING	CHAN WORKING CAI	1 1			222 222		222 222		ļ	<u> </u>	ļ		
VEG GALL TARLE	EDUCATION CO ITI		X NC	CADTUA	300,000.	300,000.		<u> </u>	X	X		Х	
YEW WAH INT L	EDUCATION CO LTI	1	NG X	CAPITA		1,957,100.			X	X		Х	
	· · · · · · · · · · · · · · · · · · ·	<u> </u>	^	1,	957,100.	1,	937,100.		 ^	_^	1	^	
											 -		
Total		·		.'	▶ \$	2,	257,100.						
Part III Grants of To be co	or Assistance Benefi ompleted by organiza	itting Intations that	ere: at a	sted Per nswered	sons. 'Yes' on F	orm 99(), Part IV, I	line 2	27.				
(a) Name of I	nterested person	(b) R	elatior	nship between the organ	interested person	and	(c) An	nount of	grant o	r type o	of assist	ance	
	· · · · · · · · · · · · · · · · · · ·							-					_
					·								
						- -					_		
							_						
Part IV Busines	s Transactions Invo	Iving Intations the	ere:	sted Per	sons. 'Yes' on F	orm 99(∟), Part IV, ∣	line 2	 28a, 2	28b,	or 28	3c.	
(a) Name of I	interested person	interested	elationship between sted person and the organization		· · · · · · · · · · · · · · · · · · ·		(d) Desc	(d) Description of transaction				(e) Sha organiz reven	ation's
												Yes	No
						_							
		_									_		
		-		·			-				-		
		ı					1					i l	1

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545 0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Name of the organization PACIFIC EAST QUALITY EDUCATION DBA: YEW CHUNG INTERNATIONAL SCHOOL	Employer identification number 04-3678629						
FORM 990, PART III, LINE 1 - ORGANIZATION MISSION							
OPERATION OF A PRIVATE PRE-SCHOOL AND ELEMENTARY SCHOOL OFFERIM	IG PRESCHOOL THROUGH						
AGE TEN (5TH GRADE). THE SCHOOL EMPLOYS OPEN CLASSROOMS, LEARNING THROUGH PLAY,							
USING MUSIC FOR THE DEVELOPMENT OF INTELLIGENCE, MULTIPLE INTELLIGENCE LEARNING AND							
TAKING AN INDIVIDUAL APPROACH TO THE HOLISTIC DEVELOPMENT OF THE CHILD. THE							
TAXPAYER PROVIDES A UNIQUE CURRICULUM THAT INTEGRATES THE BEST	ELEMENTS OF EASTERN						
AND WESTERN EDUCATIONAL TRADITIONS AND PRACTICES.	· -						
FORM 990, PART VI, LINE 10 - FORM 990 REVIEW PROCESS	. 						
DRAFT TAX RETURN ARE REVIEWED BY LOCAL REGIONAL OFFICER AND STA	FF OF HONG KONG						
OFFICE FOR RELATED PARTY TRANSACTIONS. CORRECTIONS ARE MADE BE	FORE THE RETURN						
IS_FINALIZED.	·						
	·						
	·						
	·						
	·						
	·						
	· 						
	·						
	·						
	·						

(Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545 1709

Department of the Treasury Internal Revenue Service

File a separate application for each return. If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box. If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns. Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs gov/efile and click on e-file for Charities & Nonprofits Name of Exempt Organization Employer identification number Type or PACIFIC EAST QUALITY EDUCATION print DBA: YEW CHUNG INTERNATIONAL SCHOOL 04-3678629 File by the due date for filing your return See Number, street, and room or suite number. If a P.O. box, see instructions 310 EASY STREET instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions MOUNTAIN VIEW, CA 94043 Check type of return to be filed (file a separate application for each return) X Form 990 Form 990-T (corporation) Form 4720 Form 990-BL Form 990-T (section 401(a) or 408(a) trust) Form 5227 Form 990-EZ Form 990-T (trust other than above) Form 6069 Form 990-PF Form 1041-A Form 8870 The books are in the care of ► HATSUE TSATSOS Telephone No. ► 866-903-0986 FAX No. ► 650-903-0976 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) If this is for the whole group, check this box 🕨 🗍 . If it is for part of the group, check this box 🕨 🔲 and attach a list with the names and EINs of all members the extension will cover 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time 3/15 , 20 10 , to file the exempt organization return for the organization named above. The extension is for the organization's return for calendar year 20 ____ or \overline{X} tax year beginning 8/01 , 20 08 , and ending 7/31 , 20 09 . 2 If this tax year is for less than 12 months, check reason. | Initial 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 3a \$ 0. b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments 3Ы\$ 0. made include any prior year overpayment allowed as a credit c 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). 0. See instructions 3c|\$ Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

payment instructions.

Form 8868 (Rev. 4-2009)