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Department of the Treasury Internal Revenue Service

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.

OMB No 1545-0047

Open to Public Inspection

AI	For the 2	2011 calendar year, or tax year beginning	and	l ending	_		
В	Check if applicable	C Name of organization ASIAN AMERICAN-PACIFIC	ISLANDERS IN		D Employer i	dentificati	ion number
Г	Address change	PHILANTHROPY INC.					,
	Name change	Doing Business As			 	4-315	0064
	retum Termin-	Number and street (or P 0 box if mail is not delived 211 SUTTER STREET	ered to street address)	Room/suite		number 415)	273-2760
	Amender return	City or town, state or country, and ZIP + 4			G Gross receipts	s	2,531,999.
	Applica-	SAN FRANCISCO, CA 9410			H(a) Is this a g	roup retur	'n
	pending	F Name and address of principal officer:PEGG	Y K. SAIKA		for affiliate	es?	Yes X No
		SAME AS ABOVE			H(b) Are all affili	ates include	ed? Yes No
7	Tax-exen	npt status: X 501(c)(3) 501(c) ()	(Insert no) 4947(a)(1)	or 527	If "No," at	tach a list	. (see instructions)
J	Website	► WWW.AAPIP.ORG			H(c) Group ex		
K	orm of o	rganization X Corporation Trust Ass	ociation Other ►	L Year			ate of legal domicile CA
		Summary				•	<u> </u>
		nefly describe the organization's mission or most s	ignificant activities NATI	ONAL N	MEMBERSHI	P AND)
Activities & Governance	P	HILANTHROPIC ADVOCACY ORG	ANIZATION DEDI	CATED	TO ADVAN	CING	
E	_	heck this box 🕨 🔲 if the organization discont					is.
Š	1	umber of voting members of the governing body (F				3	15
Ğ	1	umber of independent voting members of the gove				4	15
တ် ဟ	1	otal number of individuals employed in calendar ye				5	21
Ë		otal number of individuals employed in calendar ye	ai 2011 (rait V, iiile 2a)			6	150
⋛		otal number of volunteers (estimate affice assary) otal unrelated business revenue from Part Vilt, colu	(C) line 12			7a	0.
ĕ						7b	0.
	BIN	et unrelated business taxable income from Form 9 ၂ ဗို ۱ MAY ။ ၆ 2012			Deian Vaan	1/0	
		1 4 - 1	-SH		Prior Year 4,155,4	9.7	2,431,596.
e e	1	ontributions and grants (Part VIII, line 1h)] 5	_	4,133,4	0.	0.
Revenue	1	rogram service revenue (Part VIII rline 2g)		<u> </u>	27 2		
æ	1	vestment income (Part_VIII) column_(A), lines 3,44,			27,3		34,244.
		ther revenue (Part VIII, column (A), lines 5, 6d, 8c,		<u> </u>	4 100 6	0.	2,598.
	12 To	otal revenue - add lines 8 through 11 (must equal F	Part VIII, column (A), line 12)		4,182,8		2,468,438.
	13 G	rants and similar amounts paid (Part IX, column (A)), lines 1-3)	<u> </u>	1,413,5		317,596.
	14 B	enefits paid to or for members (Part IX, column (A),	, line 4)			0.	0.
es	15 S	alaries, other compensation, employee benefits (Pa	art IX, column (A), lines 5-10)	_	1,422,7		1,295,838.
Expenses	16a P	rofessional fundraising fees (Part IX, column (A), lin	ie 11e)			0.	0.
×	b Te	otal fundraising expenses (Part IX, column (D), line	25) 🕨	0.			
Ű	17 0	ther expenses (Part IX, column (A), lines 11a-11d,	11f-24e)		1,103,4	71.	1,019,475.
	18 To	otal expenses Add lines 13-17 (must equal Part IX	, column (A), line 25)		3,939,7		2,632,909.
	19 R	evenue less expenses. Subtract line 18 from line 1	2		243,0	89.	-164,471.
or				В	eginning of Curren	t Year	End of Year
sets	_20 T	otal assets (Part X, line 16)			4,169,3	60.	3,084,312.
ASS	21 T	otal liabilities (Part X, line 26)			1,058,1		142,236.
調	: —:	et assets or fund balances. Subtract line 21 from li	ine 20		3,111,2	33.	2,942,076.
P	art II	Signature/Block					· · · · · · · · · · · · · · · · · · ·
		es of perjury/I declare that I have examined this return, ii	ncluding accompanying schedul	es and staten	nents, and to the be	est of my kn	nowledge and belief, it is
		and complete Declaration of plenarer (other than officer					
		Joseph Hart			5		912
Sin	ın 🗐	Signature of officer			Date	1.0(-	
JI N	<u> </u>	PEGGY K. SAIKA, PRESIDE	nт				
ne		Type or print name and title	11.1				
	SCANNAGA B	· · · · · · · · · · · · · · · · · · ·	Dranararia cianatura	I	Date	Check	PTIN
Dai	,3 K	** * *	Preparer's signature	<u>. </u>	A. 3-13	ı	P00048258
rai	W F	RTHUR LOUIE irm's name LOUIE & WONG LLP	The same of the sa			self-employed	1-2007579
	`. -	405 0	יסבבת #פוסי		Firm's I	CIN > 3	1-2001313
USE	Only	Firm's address 425 WASHINGTON ST				/15	C_001 0000
		SAN FRANCISCO, CA			Phone	no 413	5-981-9999
<u>Ma</u>	y the IRS	S discuss this return with the preparer shown above			.		X Yes No
120	201 01 22	12 HA For Panerwork Reduction Act Notice	s can the congrete inctruct	ione			Form 990 (2011)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

<u> </u>	NO	<u> 1 1</u>	10	11	OI	MT.	1 1	'IL	LII	<u> </u>	ΝĊ	•																											
В	•	AA	ΡI	P	PR	JO.	71	DE	D	M	ΕM	iΒ	ER	<u>-</u> -	W.	IT	H	BI	EN	EF	'I'	TS	5	SÚC	СН	A	s	A	ŀ	[O]	ТV	ΗI	Ϋ́	JC	ЭB	L	IS	Т;	A
Qī	UΑ	RT	ER	LΥ	I	NF	'O	RM	A'	ΓI	ON	Ī	BU]	LL	E	rIl	N;	1	LE	ΑI	E.	RS	H]	ΙP	D	EV	E.	LO	P١	Œ	TV	Г	'OC)LI	(I	ГS	A	ND	
T	RA	IN	IN	GS	;	ΑN	ID	,	FU	JN	DE	D	El	DU	JC Z	AT.	10	N	В	R]	Ε.	FΙ	NC	SS	Α	ND	1	WO	RK	S	HO	PS	;]	ĺΝ	A	AP.	ÍΡ	'S	TEN
\overline{R}	EG	IO	NA	L	CH	ΑI	T.	ĒR	S	I	N	T	HE	U	JN.	IT	ED	5	ST	'n	'E	s.																	
																																							-

4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ 219,812 • including grants of \$) (Revenue \$)
40	Total program service expenses 2,295,549.		

Form 990 (2011) PHILANTHROPY
Part IV Checklist of Required Schedules

			res	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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Λ.	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	,		Х
4	public office? If "Yes," complete Schedule C, Part I	3		
*	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	4		х
5	during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	-		- ^-
•	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	-		
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "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, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			ļ
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
a	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	44.3		v
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		_ A
•	the organization's separate of consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	• • • •		
	Schedule D, Parts XI, XII, and XIII	12a	Х	
ь	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			١,,
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	40		_v
17	located outside the United States? If "Yes," complete Schedule F, Parts III and IV Did the experience report a total of more than \$15,000 of expenses for professional fundraising convices on Part IV.	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17	-	
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990 (2011)

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Form 990 (2011) PHILANTHROPY INC.

Part IV Checklist of Required Schedules (continued)

		Form	990 (2011)
	Note. All Form 990 filers are required to complete Schedule O	38	X	
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	-	l <u>.</u> .	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
	If "Yes," complete Schedule R, Part V, line 2	36		<u>X</u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	00		v
••	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> X</u>
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			v
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	<u> </u>	X
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Λ.	-
34	Was the organization related to any tax-exempt or taxable entity?	0.4	х	
24	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	33		Х
22	Schedule N, Part II	32		
32		32		Х
20	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
J I	If "Yes," complete Schedule N, Part I	31		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30		
30	contributions? If "Yes," complete Schedule M	30		Х
29 20	Did the organization receive more than \$25,000 in non-cash contributions rife res, complete schedule in Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		- 23
20	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c		<u> X</u>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	20-		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		$\frac{x}{x}$
_	instructions for applicable filing thresholds, conditions, and exceptions):	00-		y
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
••	of any of these persons? If "Yes," complete Schedule L, Part III	27		<u>X</u>
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			v
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
07	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	26		Х
26	Schedule L, Part I	Z3D		
		25b		X
D	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
•	any tax-exempt bonds?	24c		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Schedule K. If "No", go to line 25	24a		Х
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	Schedule J	23		X
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
-	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the		162	NO
			Yes	No

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Par	rt V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0· if not applicable	33		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	_1c	X	
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	21		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<u> </u>	Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3ь	<u> </u>	<u> </u>
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)?	4a	ļ	X
þ	If "Yes," enter the name of the foreign country:			
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b_	 	Α.
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>	 	
ба	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization so			х
	any contributions that were not tax deductible? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		
D	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	00	ļ	<u></u>
a		ne payor? 7a	1	X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		1
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as requi	red? 7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 10	098-C? 7h	ļ	X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the	year? 8	<u>ļ</u> .	ļ,
9	Sponsoring organizations maintaining donor advised funds.			1
a	Did the organization make any taxable distributions under section 4966?	9a	 	-
_	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	 	
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
a	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	İ	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	ļ <u> </u>	
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	 	Х
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	1	

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response to any question in this Part VI					X
Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	15			
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	15	,		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other			
	officer, director, trustee, or key employee?			2		X_
3	Did the organization delegate control over management duties customarily performed by or under th	e direc	t supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?			3		<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 9	990 wa	s filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass	sets?		5		X
6	Did the organization have members or stockholders?			6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or			
	more members of the governing body?			7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	stockh	olders, or			
	persons other than the governing body?			7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by th	e following	1,7		
а	The governing body?	•	· ·	8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ched :	at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu	e Code.)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a	Х	
	If "Yes," did the organization have written policies and procedures governing the activities of such cl	hapter	s, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	·		10b	Х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	ly befo	re filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to con	flicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y					
	in Schedule O how this was done			12c	Х	ļ
13	Did the organization have a written whistleblower policy?			13	_ X	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approve	al by ır	dependent	""		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	Х]
b	Other officers or key employees of the organization			15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	vith a	1		
	taxable entity during the year?			16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua	ite its p	participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	nızatıo	n's			
	exempt status with respect to such arrangements?			16b	[
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶CA, MN, NY		•			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	Γ (Sect	ion 501(c)(3)s only)	availat	ole	
	for public inspection. Indicate how you made these available. Check all that apply.					
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co	onflict	of interest policy, ai	nd finar	ncial	
	statements available to the public during the tax year.					
20	State the name, physical address, and telephone number of the person who possesses the books a	nd rec	ords of the organiza	ation:	-	
	MARIA KONG - (415) 273-2760					
	211 SUTTER STREET, SUITE 600, SAN FRANCISCO, CA 9	410	8			

Form 990 (2011)

PHILANTHROPY INC.

94-3150064

Page 7

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

Check if Schedule O contains a response to any question in this Part VII

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

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

oxdot Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

- 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.

	week (describe hours for related organizations	or director					tee)	from	compensation from related	amount of other
	ın Schedule O)	¥8	Institutional frustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) RANDY CHUN	4 00								•	
BOARD CHAIR	4.00	X	-	X		╄	<u> </u>	0.	0.	0.
(2) JEFF KUMATAKA	4 00	١				1	1			
TREASURER	4.00	X	↓_	X		ــــــ	<u> </u>	0.	0.	0.
(3) VALERIE LEE	1 4 00	.,							_	_
VICE CHAIR	4.00	X		Х	<u> </u>	—		0.	0.	0.
(4) JUNE JEE	4 00			,,					_	_
SECRETARY	4.00	Х	\vdash	X	<u> </u>	—	├_	0.	0.	0.
(5) EDWIN ENG	2 00	٠,							0	
BOARD MEMBER	2.00	X	┼	-		—		0.	0.	0.
(6) JEANIE LEE BOEHMLER	2 00								0	
BOARD MEMBER	2.00	X	-	 		├	ļ	0.	0.	0.
(7) JACKIE LIAO	2 00	.,					İ		0	
BOARD MEMBER	2.00	X	-			₩	<u> </u>	0.	0.	0.
(8) SUK RHEE	2 00								0	
BOARD MEMBER	2.00	X	-	-		₩	⊢	0.	0.	0.
(9) LIANE WONG	2 00	١,			ļ				^	_
BOARD MEMBER	2.00	X	-			 	├	0.	0.	0.
(10) BEADSIE WOO	2 00	l.							^	_
BOARD MEMBER	2.00	X	-	-		┼	├	0.	0.	0.
(11) ALICE ITO	2 00	١.,						0.	0.	_
BOARD MEMBER	2.00	X	\vdash			\vdash	├	0.	0.	0.
(12) RYAN YAMAMOTO	2.00	$ _{\mathbf{x}}$						0.	0.	0.
BOARD MEMBER	2.00	╀	╁	 	┢	\vdash	┢	ļ	0.	0.
(13) MIKI AKIMOTO	2.00	x						0.	0.	0.
BOARD MEMBER	2.00	1	+	 		+				0.
(14) PEGGY K. SAIKA	40.00			Х				99,808.	0.	0.
PRESIDENT/EXECUTIVE DIRECT	1 40.00	\vdash	+		\vdash	+-	├	77,000.		
(15) MARIA KONG CFO/SENIOR DIRECTOR OF FINANCE & OPE	40.00			X				75,000.	0.	0.
CTO/ SENIOR DIRECTOR OF FINANCE & OPE	13.00			1				73,000.	0.	

	Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) A												
Part VII Section A. Officers, Directors,		mplo	yee			ligh	est	Compensated Employ	ees (continued)			_	
• •	Average hours per week	box, offic	not c unle	Posi heck ss pe	tion more rson i	than d s both	n an	Reportable compensation from	Reportable compensation from related		Estir amo ot	nated unt o her	f
	hours for related organizations in Schedule	Individual trustoe or directo	Institutional trustae	Officer	кеу етріоуве	Highest compensated employee	Former	organization	_)	fron organ and r	n the lization relate	on d
 .										_			_
												-	
										\downarrow			
											·		
1b Sub-total								174.808.	() -			0.
c Total from continuation sheets to Pad d Total (add lines 1b and 1c)						>		0. 174,808.	().			0.
2 Total number of individuals (including b compensation from the organization		nose	liste	ed at		e) wn	o re	eceived more than \$100	or reportable		- 1.		_
-			e, ke	ey en	nplo	yee,	or	highest compensated e	mployee on			es	
	•		-					·	the organization		4		Х
rendered to the organization? If "Yes,"	-				-		elat	ed organization or indivi	idual for services		5		X
	*	-d					4	had years and many the e	\$100,000 of				
the organization. Report compensation								n the organization's tax		ensau		·m ——	
	ess address	NC	ONI	E			_		services	Cor		ation	i
	···· »-												
Total number of independent contractor \$100,000 of compensation from the organization.		not lir	mite	d to	tho:	se lis	stec	d above) who received n	nore than	••••••	Friedware		
w 100,000 of compensation from the org	gaineauon P					-							

rai		Statement of Reve			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
fts, Grants r Amounts	С	Membership dues Fundraising events	1c	235,750.				
Contributions, Gifts, Grants and Other Similar Amounts	e f	Related organizations Government grants (contribut All other contributions, grfts, gran similar amounts not included abo Noncash contributions included in lines	its, and ve 1f 2,	195,846.				
a S		Total. Add lines 1a-1f			2,431,596.			
				Business Code				
g	2 a				ĺ	Ì		1
ره <u>≷</u> .	ь							
နှင့်	С		_ ,					
e a	d							
Program Service Revenue	e							
ፈ	f	All other program service reve	enue					
\bot	g	Total. Add lines 2a-2f						
	3	Investment income (including	dividends, intere	st, and				
		other similar amounts)		>	27,131.			27,131.
	4	Income from investment of ta	x-exempt bond p	roceeds >				
	5	Royalties						
			(i) Real	(II) Personal				
	6 a	Gross rents	2,598.					
	b	Less: rental expenses						
-	C	Rental income or (loss)	2,598.					
ĺ	d	Net rental income or (loss)		> _	2,598.			2,598.
	7 a	Gross amount from sales of	(i) Securities	(iı) Other				
i		assets other than inventory	70,674.					
	b	Less: cost or other basis						
		and sales expenses	63,561.					
	c	Gain or (loss)	7,113.					
	d	Net gain or (loss)		> _	7,113.	7,113.		
Other Revenue	8 a	Gross income from fundraisin including \$	•					
é		contributions reported on line	1c). See					
ē		Part IV, line 18	а					
동		Less: direct expenses	b					
		Net income or (loss) from fund		<u> </u>			·································	
	9 a	Gross income from gaming ac	ctivities. See					
		Part IV, line 19	a					
		Less: direct expenses	ь					
		Net income or (loss) from gan		<u> </u>				-ļ
	10 a	Gross sales of inventory, less	returns					
		and allowances	а					
		Less: cost of goods sold	b					
-	c	Net income or (loss) from sale		<u> </u>			······································	
-		Miscellaneous Revenu	Je	Business Code				
- 1	11 a							
	ь					· · · · · · · · · · · · · · · · · · ·	 	
	c	A.II						
	d	All other revenue						
		Total. Add lines 11a-11d			2,468,438.	7,113.	0	29,729.
132009 01-23-	12	Total revenue. See instructions	-		F1300430.	1,113.		Form 990 (2011)

Part X 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).

Do	Check if Schedule O contains a response not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and	217 506	215 506		
	organizations in the United States See Part IV, line 21	317,596.	317,596.	·············	·**** 111 - 112 112
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,		1		
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members			4-1	
5	Compensation of current officers, directors,	174 000	160 004	11 004	
	trustees, and key employees .	174,808.	162,884.	11,924.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	845,225.	787,569.	57,656.	
8	Pension plan accruals and contributions (include				
	section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	189,023.	164,235.	24,788.	
10	Payroll taxes	86,782.	75,402.	11,380.	
11	Fees for services (non-employees):				
а	Management				<u> </u>
b	Legal	9,255.	8,067.	1,188.	
С	Accounting	10,173.	8,867.	1,306.	
d	Lobbying			····	
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	339,433.	295,864.	43,569.	
12	Advertising and promotion				
13	Office expenses	7,240.	1,426.	5,814.	
14	Information technology				
15	Royalties				
16	Occupancy .	74,542.	5,968.	68,574.	
17	Travel	246,458.	243,516.	2,942.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	200,901.	198,502.	2,399.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	20,874.	1,306.	19,568.	
23	Insurance .	3,865.		3,865.	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	TELEPHONE	44,926.	15,949.	28,977.	
b	REPAIRS	26,522.	2,785.	23,737.	
С	BOARD EXPENSES	9,832.	1,836.	7,996.	
d	OTHER	9,637.	7.	9,630.	
e	All other expenses	15,817.	3,770.	12,047.	
25	Total functional expenses. Add lines 1 through 24e	2,632,909.	2,295,549.	337,360.	0
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	Check here Infollowing SOP 98-2 (ASC 958-720)				

Form 990 (2011)

Dart Y Balance Sheet

Pa	tΧ	Balance Sheet				
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		971,789.	1	760,592.
	2	Savings and temporary cash investments		780,844.	2	941,000.
	3	Pledges and grants receivable, net		2,322,950.	3	1,300,565.
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, directo	rs, trustees, key			
		employees, and highest compensated employees. C	omplete Part II			
		of Schedule L			5	
	6	Receivables from other disqualified persons (as defin	ed under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 5	01(c)(9) voluntary			
, 0		employees' beneficiary organizations (see instruction	s)		6	
Assets	7	Notes and loans receivable, net			7	
As	8	Inventories for sale or use			8_	
	9	Prepaid expenses and deferred charges		32,340.	9	28,676.
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D 10a		_		
	ь	Less: accumulated depreciation 10	136,462.	61,437.	10c	53,479.
	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		<u> </u>	13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line	34)	4,169,360.	16	3,084,312.
	17	Accounts payable and accrued expenses		100,151.	17	132,236.
	18	Grants payable		919,350.	18	10,000.
	19	Deferred revenue		38,626.	19	
	20	Tax-exempt bond liabilities			20	
es	21	Escrow or custodial account liability. Complete Part		· · · · · · · · · · · · · · · · · · ·	21	· · · · · · · · · · · · · · · · · · ·
Liabilities	22	Payables to current and former officers, directors, tru				
<u>ia</u> .	1	highest compensated employees, and disqualified po	ersons. Complete Part II			
_		of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated			23	
	24	Unsecured notes and loans payable to unrelated thir	•		24	
	25	Other liabilities (including federal income tax, payable				
		parties, and other liabilities not included on lines 17-2	4). Complete Part X of			
		Schedule D		1,058,127.	25	142,236.
	26	Total liabilities. Add lines 17 through 25	► X and complete	1,030,127.	26	142,230.
		Organizations that follow SFAS 117, check here	and complete			
Ses		lines 27 through 29, and lines 33 and 34.		617,653.	27	646,804.
<u>a</u>	27	Unrestricted net assets		2,493,580.	28	2,295,272.
8	28	Temporarily restricted net assets		2,473,300.	29	2,233,212.
Net Assets or Fund Balances	29	Permanently restricted net assets Organizations that do not follow SFAS 117, check	here ▶ □ and		28	
ι <u>τ</u>		-	nere P and			
Ş	20	Control stock or trust principal or current funds			30	
se	30	Capital stock or trust principal, or current funds	ent fund		31	
t As	31	Paid-in or capital surplus, or land, building, or equipm Retained earnings, endowment, accumulated incom-		<u> </u>	32	
Š	32	Total net assets or fund balances	e, or other fullus	3,111,233.	33	2,942,076.
	34	Total liabilities and net assets/fund balances		4,169,360.	34	3,084,312.
	J4	Total liabilities and fiet assets/fund balances		1,100,000.	J44	5,004,312.

Form **990** (2011)

ASIAN AMERICAN-PACIFIC ISLANDERS IN PHILANTHROPY INC. 94-3150064 Form 990 (2011) Part XI Reconciliation of Net Assets X Check if Schedule O contains a response to any question in this Part XI 2,468,438. 1 Total revenue (must equal Part VIII, column (A), line 12) 2,632,909. 2 2 Total expenses (must equal Part IX, column (A), line 25) -164,471.3 3 Revenue less expenses. Subtract line 2 from line 1 3,111,233. Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 -4,686.5 Other changes in net assets or fund balances (explain in Schedule O) 5 2,942,076. Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) 6 Part XII Financial Statements and Reporting \mathbf{X} Check if Schedule O contains a response to any question in this Part XII Yes No X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X b Were the organization's financial statements audited by an independent accountant? 2b c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, Х review, or compilation of its financial statements and selection of an independent accountant? 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:

Both consolidated and separate basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

3a

Х

X Separate basis

Act and OMB Circular A-133?

Consolidated basis

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

ASIAN AMERICAN-PACIFIC ISLANDERS IN PHILANTHROPY INC.

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

Employer identification number 94-3150064

he organi	ization is not a	private foundation l	pecause it is: (For lines 1	through 1	11, check o	only one b	ox.)							
1 📙	A church, con	vention of churches	s, or association of churc	hes descr	nbed in se	ction 170	(b)(1)(A)(i)	•						
2	A school desc	cribed in section 17	0(b)(1)(A)(ii). (Attach Sch	nedule E.)										
3 🖳	A hospital or	a cooperative hospit	al service organization d	lescribed i	n section	170(b)(1)(A)(iii).							
4 📖	A medical res	earch organization of	perated in conjunction v	with a hos	pıtal descr	ibed in se	ction 170	(b)(1)(A)(iii). Enter t	he hospital	s name			
	city, and state													
5	An organization	on operated for the l	benefit of a college or un	iversity ov	vned or op	erated by	a governr	nental unit	describe	ed in				
		(b)(1)(A)(iv). (Comple												
6		=	ent or governmental unit											
7 X	An organization	on that normally rec	eives a substantial part o	of its supp	ort from a	governme	ntal unit o	r from the	general (public desci	ribed in			
	section 170(l	b)(1)(A)(vi). (Comple	te Part II.)											
8 🖳	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)													
9 📖	-	•	eives: (1) more than 33 1											
	activities relat	ted to its exempt fur	nctions - subject to certai	in exception	ons, and (2	2) no more	than 33 1	/3% of its	support	from gross	ınvestr	nent		
	ıncome and u	inrelated business ta	exable income (less secti	ion 511 ta	x) from bu	sinesses a	cquired b	y the orga	nization a	after June 3	0, 1975	.		
	See section 5	509(a)(2) . (Complete	Part III.)											
10 🖳	An organization organized and operated exclusively to test for public safety. See section 509(a)(4).													
11 📖	An organization	on organized and op	perated exclusively for th	e benefit d	of, to perfo	orm the fur	ctions of,	or to carry	out the	purposes o	f one o	r		
			itions described in section). See sec	tion 509(a	a)(3). Che	eck the box	that			
	describes the type of supporting organization and complete lines 11e through 11h.													
	a Type I b Type II c Type III · Functionally integrated d Type III · Other													
e 📖			t the organization is not											
		-	han one or more publicly						(a)(1) or	section 509	(a)(2).			
f	If the organiza	ation received a writ	ten determination from t	he IRS tha	at it is a Ty	pe I, Type	II, or Type	e III						
	supporting or	ganization, check th	is box											
9	Since August	17, 2006, has the o	rganization accepted an	y gift or co	ontribution	from any	of the follo	owing pers	ons?					
	(i) A persor	n who directly or ind	rectly controls, either ald	one or tog	ether with	persons d	lescribed i	n (II) and (I	ıı) below,		Yes	No		
	the gove	erning body of the si	upported organization?							11g(i)	\vdash			
	(ii) A famıly	member of a persor	n described in (i) above?							11g(ii)	\vdash			
	(iii) A 35% c	controlled entity of a	person described in (i) o	or (II) above	e?					11g(iii)				
h	Provide the fo	ollowing information	about the supported org	ganızatıoni	(s).									
	· · · · · · · · · · · · · · · · · · ·		7.00	1		ı 			1					
• •	of supported anization	(ii) EIN		(iv) Is the organization in col (i) listed in your governing document?				(vi) Is the organization in col (i) organized in the US?		(vii) Amount of support				
			(see instructions))	Yes	No	Yes	No	Yes	No					
	-									•				
			:											
		<u> </u>									· ·			
ratal														

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

94-3150064 Page 2

	(FOIII 990 01 990-EZ) 2011 1 H 1 H 1 H 1 H 1 H 1 H 1 H 1 H 1 H	
Part II	Support Schedule for Organizations Described in Section	ns 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support									
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total			
	Gifts, grants, contributions, and	, ,		• •	.,					
	membership fees received. (Do not									
	include any "unusual grants.")	1015754.	2091095.	4510432.	893,497.	2431596.	10942374.			
2	Tax revenues levied for the organ-	2020.020								
-	ization's benefit and either paid to									
	or expended on its behalf									
2	The value of services or facilities			-						
J	furnished by a governmental unit to						į			
	the organization without charge									
4		1015754.	2091095.	4510432.	893,497.	2431596	10942374.			
	Total. Add lines 1 through 3	1013/34.	2031033.	45104524	055/45/1	2431370.	10742374.			
Э	The portion of total contributions									
	by each person (other than a									
	governmental unit or publicly									
	supported organization) included									
	on line 1 that exceeds 2% of the									
	amount shown on line 11,						165 600			
	column (f)		1	·	· ## +		465,689.			
	Public support. Subtract line 5 from line 4						10476685.			
	ction B. Total Support						I			
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total			
7	Amounts from line 4	1015754.	2091095.	4510432.	893,497.	2431596.	10942374.			
8	Gross income from interest,									
	dividends, payments received on									
	securities loans, rents, royalties	04 252	100 007	152 027	27 200	20 720	415 202			
	and income from similar sources	94,252.	109,987.	153,927.	27,308.	29,729.	415,203.			
9	Net income from unrelated business									
	activities, whether or not the									
	business is regularly carried on									
10	Other income. Do not include gain									
	or loss from the sale of capital									
	assets (Explain in Part IV.)	986.					986.			
11	Total support. Add lines 7 through 10						11358563.			
12	Gross receipts from related activities,	, etc. (see instruction	ons)			12				
13	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)				
_	organization, check this box and stor	here		· . · · · · · · · · · · · · · · · · · ·	<u>. </u>		▶∟_			
Se	ction C. Computation of Publ	ic Support Pe	rcentage			· · · · · · · · · · · · · · · · · · ·				
14	Public support percentage for 2011 (line 6, column (f) di	ivided by line 11, o	olumn (f))		14	92.24 %			
	Public support percentage from 2010					15	89.31 %			
16a	33 1/3% support test - 2011. If the	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this be				
	stop here. The organization qualifies as a publicly supported organization									
b	33 1/3% support test - 2010. If the	organization did no	ot check a box on I	ine 13 or 16a, and	l line 15 is 33 1/3%	or more, check t	his box			
	and stop here. The organization qualifies as a publicly supported organization									
17a	17a 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,									
	and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization									
	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization									
t	b 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or									
	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the									
	organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization									
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17t	o, check this box a	ind see instruction	ns 🕨 🗀			
					0.1	-1-1- A (F 00)	000 EZ\ 0044			

Schedule A (Form 990 or 990-EZ) 2011

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 or if the organization failed to qualify under Part II. If the organization fails to

<u></u>	qualify under the tests listed be	elow, please com	plete Part II.)		-					
	ction A. Public Support		1	1						
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received. (Do not									
	include any "unusual grants.")	, <u></u>								
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose									
3	Gross receipts from activities that									
	are not an unrelated trade or bus-									
	iness under section 513									
4	Tax revenues levied for the organ-					· · · · · · · · · · · · · · · · · · ·				
	ization's benefit and either paid to or expended on its behalf									
5	The value of services or facilities									
	furnished by a governmental unit to									
	the organization without charge					1				
6	Total. Add lines 1 through 5									
	Amounts included on lines 1, 2, and				1					
	3 received from disqualified persons									
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year									
c	Add lines 7a and 7b									
	Public support (Subtract line 7c from line 6)			-		,				
	etion B. Total Support		<u> </u>	{	!	<u> </u>				
Cale	ndar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total			
9	Amounts from line 6									
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 10b, whether or not the business is regularly carried on									
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)									
13	Total support (Add lines 9, 10c, 11, and 12)									
14	First five years. If the Form 990 is for	the organization'	's first, second, thii	d, fourth, or fifth ta	ax year as a section	on 501(c)(3) organiz	ation,			
	check this box and stop here	-		<u> </u>			▶□			
Sec	ction C. Computation of Publi	c Support Pe	ercentage							
	Public support percentage for 2011 (li			column (f))		15	%			
16			· · ·			16	<u>/</u> %			
	ction D. Computation of Inves									
17	Investment income percentage for 20					17				
				ie 13, column (t))			%			
18	8 Investment income percentage from 2010 Schedule A, Part III, line 17 9a 33 1/3% support tests - 2011. 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									
198		-				•	/ Is not			
b	more than 33 1/3%, check this box ar 33 1/3% support tests - 2010. If the			· · · · · · · · · · · · · · · · · · ·	• • •		▶			
	line 18 is not more than 33 1/3%, che	ck this box and s	stop here. The orga	anization qualifies	as a publicly supp	orted organization	▶ 🗀			
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th	his box and see in	structions				

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions. 2011
Open to Public Inspection

OMB No 1545-0047

Name of the organization

ASIAN AMERICAN-PACIFIC ISLANDERS IN PHILANTHROPY INC.

Employer identification number 94-3150064

Par	Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 6.	•
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	4	
2	Aggregate contributions to (during year)	9,684.	
3	Aggregate grants from (during year)	26,733.	
4	Aggregate value at end of year	33,755.	
5	Did the organization inform all donors and donor advisors in		inds
-	are the organization's property, subject to the organization's	_	X Yes No
6	Did the organization inform all grantees, donors, and donor a	_	·-
•	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?	or define advisor, or for any other purpose conne	X Yes No
Par		ganization answered "Yes" to Form 990, Part IV	
1	Purpose(s) of conservation easements held by the organizat		
•	Preservation of land for public use (e.g., recreation or e		ally important land area
	Protection of natural habitat	Preservation of a certified	•
	Preservation of open space	1 reservation of a certified i	nistone structure
2	Complete lines 2a through 2d if the organization held a quality	find appearation contribution in the form of a	concentation concentration the last
-	day of the tax year.	ned conservation contribution in the form of a c	conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	• •	20
•	listed in the National Register	and of 17700, and not on a matoric structure	2d
3	Number of conservation easements modified, transferred, re	leased extinguished or terminated by the orga	
•	year	icased, extinguished, or terminated by the orga	anization during the tax
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements i	- · ·	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above		
•	and section 170(h)(4)(B)(ii)?	To satisfy the requirements of social from the	Yes No
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expense state	
•	include, if applicable, the text of the footnote to the organization		
	conservation easements.		igameanon o accounting for
Par	III Organizations Maintaining Collections o	f Art, Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue statement :	and balance sheet works of art.
	historical treasures, or other similar assets held for public ext		
	the text of the footnote to its financial statements that descri		
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement and	balance sheet works of art. historical
	treasures, or other similar assets held for public exhibition, e		•
	relating to these items	,	,,
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financial dain	
	the following amounts required to be reported under SFAS 1	•	•
а	Revenues included in Form 990, Part VIII, line 1		▶ \$
	Assets included in Form 990, Part X		▶ \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)		dule D (Form 990) 2011 PHILANT								<u>94-31</u>	50064	Page 2
Check all that apply):												
a Public exhibition d	3		on, and othe	er record	ls, chec	k any of the	following the	at are a s	ignificant i	use of its	collection	items
b Scholarly research e Other Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. Provide a description of the organization solicit or receive donations of srf, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization collection? Yes No												
c	а			d	닏	Loan or exc	hange progr	ams				
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 air, historical treasures, or other smilar assets 10 be sold to raise funds rather than to be maintained as part of the organization's collection? 12 Part WI Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XV. 1b If 'Yes,' explain the arrangement in Part XIV and complete the following table: 1	b	Scholarly research		е		Other						
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be solid to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an apart, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Is Is the organization and intermediary for contributions or other assets not included on Form 990, Part X and complete the following table:	C	-										
To be sold to raise funds rather than to be maintained as part of the organization's collection?	4									se in Par	t XIV.	
Secrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? 1b If "Yes," explain the arrangement in Part XIV and complete the following table: 1c Admount	5							ner sımıla	r assets			
reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, frustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIV and complete the following table: C Beginning balance d Additions during the year 1 Ending balance 2 Distributions 1 Ending balance 2 Distributions 2 Distributions 3 Beginning of year balance 4 Octributions 4 Octributions 5 Octributions 6 Other expenditures for facilities and programs 1 Administrative expenses 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: 8 Board designated or quase-endowment												No_
on Form 990, Part X?	Pa			. Comple	ete if the	e organizatio	on answered	"Yes" to	Form 990	, Part IV,	ine 9, or	
on Form 990, Part X?	1a	Is the organization an agent, trustee, custod	an or other	Intermed	lary for	contribution	s or other as	ssets not	included			
b If "Yes," explain the arrangement in Part XIV and complete the following table: Amount							10 01 011101 0				Ves	□ No
Additions during the year 1 d 1 d	ь	•	and comple	te the fo	llowing	table:					03	
c Beginning balance d Additions during the year 1 Ending balance 2 Distributions during the year 1 Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21? 2 Did the organization include an amount on Form 990, Part X, line 21? 3 Did the organization include an amount on Form 990, Part X, line 21? 4 Describe in Part X Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10. 1 Beginning of year balance 6 Contributions 7 Net investment earnings, gains, and losses 9 Grants or scholarships 9 Contributions 1 Administrative expenditures for facilities and programs 1 Administrative expenses 9 End of year balance 9 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	_					(45)07					Amount	
Additions during the year 1	c	Reginning balance							10		Amount	
Ending balance Stributions during the year Finding balance Stributions during the year Stributions during the year Stributions during the year Stributions					•							
1 1 1 1 1 1 1 1 1 1					-							
2a Did the organization include an amount on Form 990, Part X, line 21? Yes No b If Yes, explain the arrangement in Part XIV.	_											
Book If 'Yes,' explain the arrangement in Part XIV.	_		orm 990 Pa	rt X line	212				_ ''		Voc	No
Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Segment					٠						J 162	140
Contributions Contribution				ation an	swered	"Yes" to Fo	rm 990 Part	IV line 1	in	* .		
1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶	, , ,	7								eare hack	(a) Four	veare back
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	1a	Beginning of year balance	To Comon	t your		nor year	(C) THO YES	13 Dack	(d) Tilles y	cars back	(e) i oui	Jears Dack
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b if *Yes* to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other 189,941. 136,462. 53,479.	_											
d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment ▶	-			+				-				
e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment % b Permanent endowment % c Temporarily restricted endowment % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b if 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Describe in Part XIV the intended uses of the organization's endowment funds. Describe in Part XIV the intended uses of the organization's endowment funds. Describe in Part XIV the intended uses of the organization's endowment funds. Describe in Part XIV the intended uses of the organization's endowment funds. C(c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment d Equipment e Other	_			+								
and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	_	·										
f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment ▶	·	· · · · · · · · · · · · · · · · · · ·										
g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶	f						-	-		-		
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment		·									1 11	
a Board designated or quasi-endowment b Permanent endowment c Temporarily restricted endowment math percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations iii related organizations b if 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Describe in Part XIV the intended uses of the organization's endowment funds. 1a Land b Buildings c Leasehold improvements d Equipment e Other 189,941. 136,462. 53,479.	_	·	rent year en	d balanc	o (lino 1	a column (c)) hold oo:					***************************************
b Permanent endowment		_	ent year en	U Dalaric		y, coluitiii (a	a)) neiu as.					
Temporarily restricted endowment ▶		· · · · · · · · · · · · · · · · · · ·			_′0							
The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) b Buildings c Leasehold improvements d Equipment e Other 189,941. 136,462. 53,479.	_			%								
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(ii) unrelated organizations (iii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment e Other 189,941. 136,462. 53,479.	-		331011 01 1110	Organiza	ation the	at are neid a	ilo administ	sied ioi t	ne organiz	alion	r,	Voc. No.
(ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment e Other 189,941. 136,462. 53,479.		•										162 140
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) basis (other) (c) Accumulated depreciation (d) Book value basis (other) tal Land b Buildings c Leasehold improvements d Equipment e Other 189,941. 136,462. 53,479.		-										
Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d) Book value (e) Buildings (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (e) Buildings (f) Book value	ь		s listed as re	aured o	n Sched	dule R2						
Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment e Other 1. Land, Buildings, and Equipment. See Form 990, Part X, line 10. (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d) Book value 1. Accumulated depreciation 1. Accum		-		•							30	
Description of property (a) Cost or other basis (investment) 1a Land b Buildings c Leasehold improvements d Equipment e Other (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 189,941. 136,462. 53,479.		***************************************										
basis (investment) basis (other) depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other 189,941. 136,462. 53,479.		······································					or other	(c) A	ccumulate	d	(d) Book	value
1a Land		becompact of property	1							`	(a) DOOK	value
b Buildings c Leasehold improvements d Equipment e Other 189,941. 136,462. 53,479.	1a	Land		,			,/					
c Leasehold improvements d Equipment e Other 189,941. 136,462. 53,479.	_											
d Equipment e Other 189,941. 136,462. 53,479.	'n	•						_		+		
e Other 189,941. 136,462. 53,479.	ď	•										
						18	9,941.		136.46	52.	5 7	.479
			qual Form 9	90, Part	X, colur			<u> </u>				

Schedule D (Form 990) 2011

PHILANTHROPY INC. Schedule D (Form 990) 2011 94-3150064 Page 3 Part VIII Investments - Other Securities. See Form 990, Part X, line 12 (a) Description of security or category (c) Method of valuation: (b) Book value (including name of security) Cost or end-of-year market value (1) Financial derivatives (2) Closely-held equity interests Other (A) (B) (C) (D) (E) (F) (G) (H) **(I)** Total. (Col (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments - Program Related. See Form 990, Part X, line 13 (c) Method of valuation: (b) Book value (a) Description of investment type Cost or end-of-year market value (1) (2) (3)(4) (5) (6) (7) (8) (9) (10)Total. (Col (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3)(4) (5) (6)(7)(8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. See Form 990, Part X, line 25. (a) Description of liability (b) Book value (1) Federal income taxes (2)(3) (4) (5) (6) (7) (8) (9) (10)Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

FIN 48 (ASC 740) Footnote in Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under 2. FIN 48 (ASC 740)

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.
Attach to Form 990. See separate instructions.

2011 Open to Public

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization ASIAN AMERICAN-PACIFIC ISLANDERS IN

Employer identification number

PHILANTHROPY INC.

94-3150064

Pa	rt I General Infoi to Form 990, Par		ctivities Ou	tside the United States. Comp	lete if the organization answered	"Yes"
1			n maintain recor	ds to substantiate the amount of its gr	ants and other assistance	
•	=	-		the selection criteria used to award the		Yes No
2	For grantmakers. Desc United States.	ribe in Part V the	e organization's	procedures for monitoring the use of it	s grants and other assistance or	utside the
3	Activities per Region. (Ti	he following Part	I, line 3 table ca	an be duplicated if additional space is	needed.)	
	(a) Region	(b) Number of offices in the region		(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
EASI	T ASIA AND THE				AAPIP'S VIETNAM INVOLVEMENT AND ENGAGEMENT TOUR (VIET)	
PACI	FIC	0	2	PROGRAM SERVICE	FELLOWS PROGRAM SENT	132,940.
3 a	Sub-total	0	2			132,940.
b	Total from continuation sheets to Part I	0	0			0.
C	Totals (add lines 3a					
	and 3b)	<u> </u>				132,940.
ΙНΑ	For Paperwork Reduct	tion Act Notice.	see the Instruc	tions for Form 990.	Schedule F	(Form 990) 2011

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

SEE PART V FOR COLUMN (E) DESCRIPTIONS

Schedule F (Form 990) 201

PHILANTHROPY INC.

Schedule F (Form 990) 2011

Part # Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed.

Page 2

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(i) Method of valuation (book, FMV, appraisal, other)					
(h) Description of non-cash assistance					
(g) Amount of non-cash assistance					xempt by
(f) Manner of cash disbursement					recognized as tax-e
(e) Amount of cash grant					foreign country,
(d) Purpose of grant					Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter
(c) Region					is listed above that are related a section
(b) IRS code section and EIN (if applicable)					recipient organization he grantee or counse
1 (a) Name of organization					2 Enter total number of I the IRS, or for which the

Schedule F (Form 990) 2011

3 Enter total number of other organizations or entitles

25

PHILANTHROPY INC.

Schedule F (Form 990) 2011

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Page 3

94-3150064

Part III can be duplicated if additional space is needed.

• •					
(h) Method of valuation (book, FMV, appraisal, other)	·				
(g) Description of non-cash assistance					
(f) Amount of non-cash assistance					
(e) Manner of cash disbursement					
(d) Amount of cash grant					
c) Number of recipients					
(b) Region					
(a) Type of grant or assistance (b) Region					

Schedule F (Form 990) 2011

94-3150064 PHILANTHROPY Schedule F (Form 990) 2011 Part IV **Foreign Forms** 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Yes X No Corporation (see Instructions for Form 926) 2 Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With Yes X No a U.S. Owner (see Instructions for Forms 3520 and 3520-A) Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Yes X No Certain Foreign Corporations. (see Instructions for Form 5471) 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. Yes X No (see Instructions for Form 8621) 5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Yes X No. Foreign Partnerships. (see Instructions for Form 8865) Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions

Schedule F (Form 990) 2011

Yes X No

for Form 5713)

PHILANTHROPY INC. 94-3150064 Schedule F (Form 990) 2011 Page 5 Part V Supplemental Information Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method: amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. SCHEDULE F, PART I, LINE 2: GRANTS ARE APPROVED BY THE BOARD TO ENSURE THAT THEY (1) ARE IN FURTHERANCE OF PURPOSES CONSISTENT WITH APPIP'S CHARITABLE PURPOSES, (2) ARE PURSUANT TO AN APPROPRIATE GRANT AGREEMENT, (3) WILL NOT JEOPARDIZE AAPIP'S 501(C)(3) STATUS, AND (4) DO NOT INVOLVE A PROHIBITED CONFLICT OF INTEREST FOR AN AAPIP DIRECTOR OR OFFICER. PART I, LINE 3, COLUMN (E): REGION: EAST ASIA AND THE PACIFIC (E) SPECIFIC TYPES OF SERVICES IN REGION: AAPIP'S VIETNAM INVOLVEMENT AND ENGAGEMENT TOUR (VIET) FELLOWS PROGRAM SENT YOUNG VIETNAMESE AMERICANS AS FELLOWS TO PARTICIPATE IN SERVICE AND LEADERSHIP DEVELOPMENT POSITIONS AT NGOS IN VIETNAM AROUND ENVIRONMENTAL AND HEALTH ISSUES.

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection

PHILANTHROPY INC.

General Information on Grants and Assistance

Parti

OMB No 1545-0047

Employer identification number 94-3150064 Open to Public Inspection Governments, and Individuals in the United States ▶ Attach to Form 990. ASIAN AMERICAN-PACIFIC ISLANDERS IN

X Yes		(h) Purpose of grant or assistance				29.	Schedule I (Form 990) (2011)
×	IV, line 21, for a sded					A A	Schedule I
	fes" to Form 990, Part additional space is nee	(g) Description of non-cash assistance					
	janization answered "\ can be duplicated if	(f) Method of valuation (book, FMV, appraisal, other)					
d States	complete if the org	(e) Amount of non-cash assistance	0				
funds in the Uniter	e United States. C	(d) Amount of cash grant	302,429.			sted in the line 1 table	
oring the use of grant	Organizations in the	(c) IRC section if applicable				l suoi:	ions for Form 990.
tance?	Sovernments and Sovernments	(b) EIN				nd government or	see the Instruct
criteria used to award the grants or assistance? Oescribe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	###	1 (a) Name and address of organization crash or government or government (b) EIN (c) IRC section (d) Amount of cash grant or government (d) Method of valuation (book, non-cash assistance assistance other)	SEE ATTACHMENT			2 Enter total number of section 501(c)(3) and government organizations 13 Enter total number of other organizations listed in the line 1 table	1 4

PHILANTHROPY INC.

Schedule I (Form 990) (2011)

Part III

Page 2

94-3150064

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. CONDUCTED OVER SITE VISITS AND EXAMINING THE INTERIM AND FINAL NARRATIVE PART I, LINE 2: THE PROCEDURE OF MONITORING GRANT FUNDS IS (d) Amount of non-cash assistance (c) Amount of cash grant AND FINANCIAL REPORTS PROVIDED BY THE GRANTEES. (b) Number of recipients (a) Type of grant or assistance SCHEDULE I, Part IV

Schedule I (Form 990) (2011)

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Name of the organization

ASIAN AMERICAN-PACIFIC ISLANDERS IN PHILANTHROPY INC.

Employer identification number 94-3150064

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
PHILANTHROPY AND ASIAN AMERICAN PACIFIC ISLANDER (AAPI) COMMUNITIES.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
C. AAPIP PROVIDED ADDITIONAL OPPORTUNITY INVESTMENT GRANTS TO AAPI
LGBTQ COMMUNITY ORGANIZATIONS IN THE UNITED STATES AS PART OF THE QUEER
JUSTICE FUND.
D. AAPIP CONDUCTED A NATIONAL BRIEFING IN 12 CITIES BASED ON OUR
PUBLISHED REPORT, GROWING OPPORTUNITIES, REVEALING SIGNIFICANT FUNDING
DISPARITIES TO AAPI COMMUNITIES IN SEVERAL AREAS AND ISSUES A CALL TO
ACTION FOR THE PHILANTHROPY FIELD TO REDUCE THESE GAPS.
FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS BOARD MEMBERS
WHO SHALL BE ELECTED AS NECESSARY DURING THE ANNUAL MEETING OF THE MEMBERS
OR BY WRITTEN BALLOT.

FORM 990, PART VI, SECTION A, LINE 7A: ALL MEMBERS SHALL HAVE THE RIGHT TO VOTE, AS SET FORTH IN BYLAWS ON THE ELECTION OF DIRECTORS, THE DISPOSITION OF ALL OR SUBSTANTIALLY ALL OF THE CORPORATION'S ASSETS, ON ANY MERGER AND ITS PRINCIPAL TERMS AND ANY AMENDMENT OF THOSE TERMS, AND ON ANY ELECTION TO DISSOLVE THE CORPORATION.

FORM 990, PART VI, SECTION B, LINE 11: A DRAFT FORM 990 - RETURN OF

ORGANIZATION EXEMPT FROM INCOME TAX IS REVIEWED BY THE EXECUTIVE DIRECTOR

AND TREASURER. THEREAFTER THE DRAFT FORM 990 WAS PRESENTED TO ALL BOARD

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2011)

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01-23-12

MEMBERS FOUR WEEKS IN ADVANCE OF FILING AND EACH DIRECTOR ON BOARD WILL
REVIEW AND CONSIDER THE DRAFT APPROXIMATELY FOUR WEEKS IN ADVANCE OF
FILING. WITHIN ONE WEEK OF RECEIPT OF THE DRAFT FORM 990, DIRECTORS SHALL
SUBMIT THEIR COMMENTS AND CONCERNS, IF ANY, TO THE ASSOCIATE DIRECTOR AND
THE PRESIDENT OF WHOM MAY ADDRESS THE COMMENTS AND CONCERNS, CONSULTING
WITH AAPIP'S LEGAL COUNSEL AND THE ACCOUNTING FIRM PREPARING THE FORM, AS
NECESSARY. DIRECTORS SHALL IDENTIFY AND SUBMIT ANY CRITICAL CONCERNS TO THE
ASSOCIATE DIRECTOR, THE PRESIDENT AND THE BOARD CHAIR. CRITICAL CONCERNS
SHALL BE RESOLVED JOINTLY BY THE PRESIDENT AND CHAIR OR BY THE EXECUTIVE
COMMITTEE OF THE BOARD, AND RESOLUTION OF SUCH CONCERNS SHALL BE
COMMUNICATED WITH THE DIRECTOR RAISING THE CONCERN AND THE BOARD, IF DEEMED
NECESSARY BY THE PRESIDENT AND CHAIR.

A COPY OF THE FILED FORM 990 SHALL BE DISTRIBUTED TO THE ENTIRE BOARD

APPROXIMATELY ONE WEEK AFTER FILING, TOGETHER WITH A NOTE IDENTIFYING ANY

MATERIAL AND SUBSTANTIAL CHANGES FROM THE DRAFT VERSIONS DISTRIBUTED

EARLIER.

FORM 990, PART VI, SECTION B, LINE 12C: EACH OFFICER, DIRECTOR AND KEY

EMPLOYEE SHALL ANNUALLY COMPLETE THE DISCLOSURE FORM AND TIMELY UPDATE THE

PRESIDENT AND CHAIR OF ANY CHANGES DURING THE CURRENT YEAR.

FORM 990, PART VI, SECTION B, LINE 15: 1. THE AUTHORIZED BODY TO DECIDE ON THE MATTER SHALL NOT INCLUDE ANY INDIVIDUAL WHO HAS A CONFLICT OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENT.

- 2. PRIOR TO MAKING ITS DECISION ON THE TOTAL COMPENSATION PACKAGE, THE
 AUTHORIZED BODY SHALL OBTAIN AND RELY UPON APPROPRIATE DATA AS TO
 COMPARABILITY.
- 3. THE AUTHORIZED BODY SHALL ADEQUATELY AND TIMELY DOCUMENT THE BASIS FOR

 132212
 Schedule O (Form 990 or 990-EZ) (2011)

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization ASIAN AMERICAN-PACIFIC ISLANDERS IN PHILANTHROPY INC.	Employer identification number 94-3150064
ITS DETERMINATION THAT THE AUTHORIZED TOTAL COMPENSA	TION FOR THE EXECUTIVE
IS JUST AND REASONABLE CONCURRENTLY WITH MAKING SUCH	DETERMINATION. THIS
MAY BE ACCOMPLISHED IN PART BY INCLUDING WITH THE MI	NUTES THE COMPARABILITY
DATA OBTAINED AND RELIED UPON BY THE AUTHORIZED BODY	AT THE MEETING IN
WHICH THE DETERMINATION WAS MADE.	
FORM 990, PART VI, SECTION C, LINE 18: THE FORM 990	- RETURN OF
ORGANIZATION EXEMPT FROM INCOME TAX IS AVAILABLE FOR	PUBLIC INSPECTION UPON
REQUEST, AND WILL PROVIDE COPIES TO ANYONE REQUESTIN	G ONE OF THESE FORMS IN
WRITING.	
FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOC	UMENTS, CONFLICT OF
INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILA	BLE UPON REQUEST.
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:	
NET UNREALIZED LOSSES ON INVESTMENTS:	-4,686.
FORM 990, PART XII, LINE 2C	
THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.	
	

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ▶ Attach to Form 990.

▶ See separate instructions.

2011 . Open to Public Inspection

OMB No 1545-0047

Employer identification number 94-3150064

IN ASIAN AMERICAN-PACIFIC ISLANDERS PHILANTHROPY INC. Name of the organization

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Part #

Direct controlling Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) End-of-year assets Total income ত Legal domicile (state or foreign country) Primary activity Name, address, and EIN of disregarded entity Part #

(g) Section 512(b)(13) controlled Ŷ × entity? Yes Direct controlling entity AAPIP status (if section Public charity 501(c)(3)) 509A1 Exempt Code section 9 501C3 Legal domicile (state or foreign country) SUPPORTING ORGANIZATION OF Primary activity AAPIP NGEC PROGRAM 9 BUILDING RESPONSIVE INFRASTRUCTURE TO DEVELOP GLOBAL EQUITY - 51-0641014 Name, address, and EIN of related organization

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

132161 01-23-12 LHA

Schedule R (Form 990) 2011

Schedule R (Form 990) 2011 PHILANTHROPY INC.

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Part III

Page 2

94-3150064

(4)	General or Perc managing owr partner?			d one or more related	(g) (h) Share of Percentage end-of-year ownership			
9	Code amour 20 of 8 K-1 (Fo	1		ne 34 because it had	Share of total Sincome enc			
(6)	of Dispr year ate all ts Yes			5 Form 990, Part IV, II	Type of entity (C corp. S corp. or trust)			
£	Share of total income			on answered "Yes" to	(d) Direct controlling entity			
(ā)	Predominant income (related, unrelated, excluded from tax under sections 512-514)			olete if the organizatic	(c) Legal domicile (state or foreign country)			
5	trolling y			ration or Trust (Compear.)	(b) Primary activity			
3	Legal domicile (state or foreign			as a Corpor				
3	Primary activity			anizations Taxable a	7			
(a)	Name, address, and EIN of related organization			Part ty Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	(a) Name, address, and EiN of related organization			

ASIAN AMERICAN-PACIFIC ISLANDERS IN PHILANTHROPY INC.

Page 3

94-3150064

Schedule R (Form 990) 2011

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				×	Yes No	. F
1 During the tax year, did the organization engage in any of the following transactions	s with one or more re	transactions with one or more related organizations listed in Parts II-IV?	In Parts II-IV?		_	1
a Receipt of (i) interest (ii) annuties (iii) royalties or (iv) rent from a controlled entity				1 9	×	ı
b Giff, grant, or capital contribution to related organization(s)				1b	×	1
c Gift, grant, or capital contribution from related organization(s)				10	×	1
				1d	X	
				<u>-</u>	×	ł
						E
f Sale of assets to related organization(s)				=	×	1
g Purchase of assets from related organization(s)				19	×	4
h Exchange of assets with related organization(s)				£	×	1
i Lease of facılıtıes, equipment, or other assets to related organization(s)				=	×	ı
j Lease of facilities, equipment, or other assets from related organization(s)				ı,	×	ı
k Performance of services or membership or fundraising solicitations for related organization(s)	ınızation(s)			¥	×	- 1
I Performance of services or membership or fundraising solicitations by related organization(s)	ınızatıon(s)			=	×	ı
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	on(s)			٤	×	1
n Sharing of paid employees with related organization(s)				=	×	ı
 Reimbursement paid to related organization(s) for expenses 				10	×	1
p Reimbursement paid by related organization(s) for expenses		•		10	X	ŧ
q Other transfer of cash or property to related organization(s)				5	×	1
r Other transfer of cash or property from related organization(s)				-	×	1
2 If the answer to any of the above is "Yes," see the instructions for information on w	who must complete the	is line, including covered	mation on who must complete this line, including covered relationships and transaction thresholds.			1
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved			1
(1)						
						!
(2)		ļ				ı
<u> </u>						
(4)						1 1
(5)						ı
(9)						
132163 01-23-12	36		Schedul	Schedule R (Form 990) 2011	90) 2011	ı –

94-3150064

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ASIAN AMERICAN-PACIFIC ISLANDERS IN

Schedule R (Form 990) 2011 PHILANTHROPY INC.

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue)

Doproportional Code V-UBI General or Percentage amount in box 20 managing ownership of Schedule K-1 partner? of Schedule K-1 Ves No (Form 1065) Yes No 3 \equiv Ξ end-of-year assets Share of Share of total income (e)
Are all
partners sec
501(c)(3)
orgs? Predominant income parties so (related, unrelated, ours ours verluded from tax under section 512-514) Yes No that was not a related organization. See instructions regarding exclusion for certain investment partnerships. ত্ত (state or foreign country) Legal domicile Primary activity Name, address, and EIN of entity

Schedule R (Form 990) 2011

ASIAN AMERICAN-PACIFIC ISLANDERS IN 94-3150064 Page 5 Schedule R (Form 990) 2011 PHIL Part VII Supplemental Information PHILANTHROPY INC. Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Name and address of process	Taxpayer ID # of Recipient	IRS Code section applies to non-profit organization (501c3, 501c4, 501c5, 501c6, etc)	Purpose of Grant		Amount of Cash Given	Manner of Cash Disbursement	Amount of Non-Cash Green	Description of Non-Cash	Valuation Method if Non- Cash (FMV, book, appraisal, other)
Name and address of recipient Muslims for Progressive Values (MPV) c/o Ani	поарын	30100, 30100, 610)	- I diposo di Giali		2011 011011	Diabaracinoni	Non-Ousir Civen	11011-04311	05.0.7
Zonneveld, PO Box 434, Los Angeles CA 90078	26-1125983	501c3	Opportunity Investment	5	5,000 00	Check			
Asian & Pacific Islander Wellness Center, 730 Polk			LGBT Youth- White House						
Street, Floor 4, San Francisco CA 94109	94-3096901	501c3	Event	\$	10,000 00	Check			
National Queer Asian Pacific Islander Alliance 730 Polk Street, San Francisco, CA 94109	94-3096901	501c3	Opportunity Investment - flights to 2011 conference	\$	9,921 11	Check			
Chinese for Affirmative Action, 17 Walter U. Lum Place, San Francisco, CA 94108	94-2161304	501c3	LGBTQ AAPI Institute/NQAPIA - attendance at NGLTF's	5	10,000 00	Check			
Somali Community Services, 586 N First Street,	34-2101304	30163	- attendance at Nozin	•	10,000 00	Cilcux			
Suite 212, San Jose, CA 95112	76-0813300	501c3	Capacity Building	s	10,000 00	Check			
Afghan Coalition, 39155 Liberty St., D-460, Fremont			. , .		·				
CA 94538	94-3398311	501c3	Capacity Building	\$	10,000 00	Check			
Dotores Street Community Services, 938 Valencia									
St , San Francisco, CA 94110	94-2919302	501c3	Capacity Building	\$	10,000 00	Check			
Chinese for Affirmative Action, 17 Walter U Lum				_					
Place, San Francisco, CA 94108	94-2161304	501c3	Capacity Building	\$	10,000 00	Check			
Arab American Cultural Center, 3968 Twilight Drive, San Jose CA 95124		501c3	Capacity Building	s	10,000 00	Charl			
Arab Film Festival, Inc., 333 Valencia Street, San	77-0215375	30103	Capacity Building	•	10,000 00	CHECK			
Francisco, CA 94103	20-1476047	501c3	Capacity Building	\$	10,000 00	Check			
Council on American-Islamic Relations, 3000 Scott	20-147-0047	00.00	copacity committee	٠	,	0			
Blvd , Suite 101, Santa Clara, CA 95054	77-0411194	501c3	Capacity Building	\$	25,000 00	Check			
Islamic Cultural Center of Northern California, 1433									
Madison Street, Oakland, CA 94612	94-3068250	501c3	Capacity Building	\$	10,000 00	Check			
Islamic Networks Group, Santana Towers, 3031									
Tisch Way, Suite 950, San Jose, CA 95128	77-0412815	501c3	Capacity Building	\$	10,000 00				
Nanka, PO Box 14014, Berkeley CA 94712	94-3162871	501c3	Capacity Building	\$	10,000 00	Check			
Ornid Advocates for Human Rights, Inc., 2425	00.0000004	501c3	Capacity Building	s	10 000 00	Charl			
Channing Way #320, Berkeley, CA 94704 SEMAH Inc., 39675 Cedar Blvd., Suite 140, Newark	80-0382064	30163	Capacity Building	•	10,000 00	CHECK			
CA 94539	20-5050436	501c3	Capacity Building	s	10,000 00	Check			
The Sikh Coalition, 40 Exchange Place Suite 728,	25 5555 155			•	.0,000 00				
New York, NY 10005	22-3834037	501c3	Capacity Building	\$	25,000 00	Check			
Zawaya, 311 W 41st Ave , San Mateo, CA 94403	68-0532370	501c3	Capacity Building	\$	1,000 00	Check			
3rd I South Asian Independent Film, 992 Valencia	00 0002070	00.00		•	.,				
Street, San Francisco, CA 94110	13-4258004	501c3	Capacity Building	\$	10,000 00	Check			
Tides Center									
PO Box 29198 San Francisco, CA 94129	94-3213100	501c3	Capacity Building	\$	25,000 00	Check			
Arab Cultural & Community Center									
2 Plaza Street, San Francisco, CA 94116	23-7334585	501c3	Capacity Building	\$	10,000 00	Check			
The San Francisco Foundation			0 0	_		a			
225 Bush St , Ste 500 San Francisco, CA 94104	01-0679337	501c3	Lunar Giving Circle	\$	5,043 75	Check			
Ta'leef Collective 43170 Osgood Road, Fremont, CA 94539	72-1528691	501c3	General Support	s	6,667 00	Check	*		
Rahima International Foundation	72-1320091	30100	General Support	•	0,007 00	Cilean			
2302 Calle Del Mundo, Santa Clara, CA 95054	77-0442850	501c3	General Support	s	6,667 00	Check			
NISA North-American Islamic Shelter					-,-				
1000 San Antonio Road, Palo Alto, CA 94303	26-0906163	501c3	General Support	\$	6,667 00	Check			
12 MetroTech Center, 26th Floor, Brooklyn,NY									
11201	23-7252609	501c3	Asian Women Giving Circle	\$	12,500 00	Check			
The Boston Foundation	04.2404024	501-2	Coffee Corela match	s	7 710 00	Chack			
75 Arlington St., 10th Floor, Boston, MA 02116	04-2104021	501c3	Saffron Circle match	•	7,710 00	CHECK			
3540 Wilshire Blvd Suite 920, Los Angeles, CA 90010	23-7151484	501c3	Match for CA Dream Circle	\$	10,750 00	Check			
The Philadelphia Foundation					,				
1234 Market St., Suite 1800, Philadelphia, PA	23-1581832	501c3	Asian Mosaic Fund	\$	5,503 00	Check			

\$ 302,428 86