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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Do not enter Social Security numbers on this form as it may be made public.

Open to Public

Department of the Treasury ▶ Information about Form 990 and its instructions is at www.irs.gov/form990. Inspection and ending JUN 30, 2014 A For the 2013 calendar year, or tax year beginning JUL 1. 2013 Check if applicable C Name of organization D Employer identification number X Address change Wu Yee Children's Services]Name]change 94-2387002 Doing Business As Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Termin-ated 827 Broadway Street (415)391-4721 Amended return City or town, state or province, country, and ZIP or foreign postal code 12,614,383. G Gross receipts \$ Applica-tion pending San Francisco, CA 94133 H(a) Is this a group return Yes X No F Name and address of principal officer. Monica Walters for subordinates? same as C above ∫Yes L H(b) Are all subordinates included? I Tax-exempt status X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or If "No," attach a list (see instructions) J Website: ▶ www.wuyee.org **H(c)** Group exemption number ▶ K Form of organization: X Corporation Trust Association Other > L Year of formation: 1976 M State of legal domicile: CA Part I | Summary Briefly describe the organization's mission or most significant activities Founded in 1977 by social workers and parents concerned about the challenges facing by new 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 11 Number of independent voting members of the governing body (Part VI, line 1b) 4 140 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 6 100 6 Total number of volunteers (estimate if necessary) 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 10,898,662. 12,529,484. Contributions and grants (Part VIII, line 1h) 29,824. Program service revenue (Part VIII, line 2g) 41,214. 300. 196. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 134,540 21,<u>485.</u> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 ,063,326. 12,592,379. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 4.118.451 5,263,335. Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 134 269. 5,682, 745. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 16a Professional fundraising fees, (Part-IX,-column (A), line-1,1e) b Total fundraising expenses (Part IX; column (D), line 25) 65,039. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)
18 Total expenses Add lines 13-17 [(must]equal Fart IX column (A), line 25) 1,638,124 1,633,888. 10,890,844 12,579,968. Revenue less expenses! Subtract line 18 from line 12) 172,482. 12,411. Assets or Balances Beginning of Current Year End of Year 3,339,222 3,133,575. Total assets (Part X line-16) 303,691 085,633. Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 047,942 035,531 Part II | Signature Block t 🎮 ve examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is Under penalties of perjury, I declare that true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign John Uselman', Chief Financiah Officer Here Type or print name and title PTIN Date _Check Print/Type preparer's name signature P01775198 <u>Tonetta L. Conner, CPA</u> Paid self-employed <u>CPAs</u> 95-4557617 Firm's name | Harrington Group/ LÆ Firm's EIN Preparer Firm's address ≥ 234 East Colorado Blvd., Use Only

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Pasadena, CA 91/101

May the IRS discuss this return with the preparer shown above? (see instructions)

Form 990 (2013)

403-6801

X Yes

Phone no. (626)

<u>Form</u>	990 (2013) Wu Yee Children's Services	94-2387002	Page 2
Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		\mathbf{x}
1	Briefly describe the organization's mission		
•	Wu Yee creates opportunities for children to be healthy,	for famili	es
	to thrive, and for communities to be strong by providing		
	childcare services through our Early Head Start and Head		
	programs to 280 funded slots for children of low-income		
		Tamilies	
2	Did the organization undertake any significant program services during the year which were not listed on		X No
	the prior Form 990 or 990-EZ?	L Yes	LAL NO
	If "Yes," describe these new services on Schedule O.		(T227)
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	L Yes	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by expenses	3.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	rs, the total expenses,	and
	revenue, if any, for each program service reported.		
4a	(Code) (Expenses \$ 4,633,308. including grants of \$ 237,595.) (Revenue	e\$41,	214.)
	Wu Yee's Child Development program supports young children	en to reach	<u> </u>
	their potential by offering full-day and year-round high		
	subsidized child care services to children aged 0-5. Our		
	population is low-income and recent immigrant families w	who are work	ina
	in job training or in school and need child care. The pr		.1119
	designed to provide comprehensive child care services, t	o integrate	
	parent involvement, education, physical health, mental h	lealtn,	
	nutrition, special needs and social services to the fami	<u>lies that w</u>	<u>lu</u>
	Yee serves.		
	Wu Yee served 224 children in six child development cent		<u> </u>
	throughout the city of San Francisco; 26 children through	th the FCC	
4b	(Code) (Expenses \$4,501,359. including grants of \$3,847,258.) (Revenue))
	Wu Yee's Child Care Subsidies Program assists eligible 1	Low-income	
	families in San Francisco with child care case managemen	it, referral	.s
	and payments to child care providers. This is an essenti		
	allowing parents to work or attend vocational trainings		•
	children are enrolled in a high quality child care progr		
	Child Care Subsidies Program issued \$3,847,258 million i		
	cost reimbursements to 625 children through the City Fur		
	COSC ICIMBALSCRICTED CO 023 CHILATON CHICAGN ONO 0207 14.	ac program.	
			
	1 170 100		
4c	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\)
	Wu Yee's Child Care Provider Services Department provide		
	technical assistance and stipends for child care provide		
	Francisco in the various stages of their careers as well		.ng
	quality through the Family Child Care Quality Network (
	Yee's Provider Training programs partners with establish	<u>ned child ca</u>	ıre
	providers by		
	training them on latest child development topics, so that	at they can	
	maintain and achieve high quality practices in their fie		
	department also supports child care providers who are no		nild
	care field by assisting them through the application pro		
	their own child care business and by providing them with		
			1111
	development trainings. The program also conducts site v	TRICE CO CU	шта
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ 588,294. including grants of \$) (Revenue \$		
<u>4e</u>	Total program service expenses ► 11,642,373.		
		Form §	990 (2013)

Form 990 (2013) Wu Yee Children's Services Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	_3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	sımılar amounts as defined ın Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
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		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	_8_		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			v
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	10		X
11		,		
_	as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
a	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		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
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
þ	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
a	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		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	170		43
13	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
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		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	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		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	990	(00.1.5)
		Form	uu(I)	いいしょう

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J .	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		<u> </u>
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			l
	of any of these persons? If "Yes," complete Schedule L, Part III	27	ļ	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	1		
	instructions for applicable filing thresholds, conditions, and exceptions).		ļ	
а		28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		<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,			37
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	 	<u>X</u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			3,5
	contributions? If "Yes," complete Schedule M	_30	-	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	١		37
	If "Yes," complete Schedule N, Part I	31	 	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	00		х
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			х
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> </u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	256		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	 	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	26		x
^~	If "Yes," complete Schedule R, Part V, line 2	36		 ^
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	37		x
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	3,		
38		38	х	
	Note. All Form 990 filers are required to complete Schedule O			(0040)

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

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 or note to any line in this Part VI					X		
Sec	tion A. Governing Body and Management							
		ı	44		Yes	No		
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		1				
	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.	l						
b	Enter the number of voting members included in line 1a, above, who are independent	_1b_	11	4				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip with	any other			3.7		
	officer, director, trustee, or key employee?			2		X		
3	Did the organization delegate control over management duties customarily performed by or under the	ne dire	ct supervision			7.7		
	of officers, directors, or trustees, or key employees to a management company or other person?		(1.10	3		<u>X</u>		
4	Did the organization make any significant changes to its governing documents since the prior Form		is filed?	4		X		
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5		X		
6	Did the organization have members or stockholders?			6		<u>X</u>		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or	7a		x		
	more members of the governing body?							
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockn	olders, or	l		37		
	persons other than the governing body?			7b		<u> </u>		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by tr	ie following:	_				
а	The governing body?			8a	X			
b	Each committee with authority to act on behalf of the governing body?			8b	X			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	acned	at the			V		
<u></u>	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		- 0- 4- 1	9		<u> </u>		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Fi	revenu	e Code.)		V	Na		
40-	Did the average translation have lead shorters broughes as offiliates?			10a	Yes	No X		
	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such control of the organization have written policies and procedures governing the activities of such control of the organization have written policies and procedures governing the activities of such control of the organization have written policies and procedures governing the activities of such control of the organization have written policies and procedures governing the activities of such control of the organization have written policies and procedures governing the activities of such control of the organization have written policies and procedures governing the activities of such control of the organization have written policies and procedures governing the activities of such control of the organization have written policies and procedures governing the activities of such control of the organization have written policies and procedures governing the activities of such control of the organization have written policies and procedures governing the activities of such control of the organization have been procedured by the organization of the organization of the organization of the organization have been procedured by the organization of the	hantar	e affiliatos	iua		-		
Б	and branches to ensure their operations are consistent with the organization's exempt purposes?	napici	s, armates,	10b				
110	And a second to a	dy hefo	re filing the form?	11a	Х			
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	ay boic	inc ming the form	112	4.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	x			
12a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to cor	iflicts?	12b	X			
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "			120				
·	in Schedule O how this was done	, oo, a	333.723	12c	х			
13	Did the organization have a written whistleblower policy?			13	X			
14	Did the organization have a written document retention and destruction policy?			14	X			
15	Did the process for determining compensation of the following persons include a review and approve	al by ii	ndependent					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official			15a	X			
b	Other officers or key employees of the organization			15b	X	Ι		
~	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					
_	taxable entity during the year?			16a		X		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ate its	participation					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organic							
	exempt status with respect to such arrangements?		***************************************	16b		<u> </u>		
Sec	tion C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed ▶CA							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Sec	tion 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 Other (explain	n ın Sc	hedule O)					
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, c	onflict	of interest policy, ai	nd finai	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			ation:	-			
	John Uselman - Wu Yee Children's Services - (415)		7504					
	827 Broadway Street San Francisco, CA 94133							

orm 990 (2013)	<u>Wu Yee</u>	Children's Services	94-2387002	Page 7

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

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

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

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

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

(A)	(B)	Docution						(D)	(E)	(F)	
Name and Title	Average		not c	heck	more	than		Reportable	Reportable	Estimated amount of	
	hours per					s bott		compensation	compensation		
	week							from the	from related organizations	other compensation	
	(list any hours for	direct	1					organization	(W-2/1099-MISC)	from the	
	related	3e or	ig i			nsate		(W-2/1099-MISC)	(** 2, 1000 1100)	organization	
	organizations	Individual trustee or director	Institutional trustee		Key emptoyee	ad m.c		,		and related	
	below	ıdual	台	ia.	l gg	est co	ıer			organizations	
	line)	혍	ııstı	Officer	Key	Highest compensated employee	Former				
(1) Debbie Chang	2.00								_	_	
President		X.	L	X		_		0.	0.	0.	
(2) Neill Tseng	2.00							_	_	_	
Vice President		X		X		_		0.	0.	0.	
(3) Mark Tao	2.00										
Treasurer		X		X		<u> </u>		0.	0.	0.	
(4) David Ziegler	2.00				İ	l				_	
Secretary		X	<u> </u>			<u> </u>		0.	0.	0 .	
(5) Cindy Tran	2.00								_	_	
Board Member		X						0.	0.	0 .	
(6) Denise McCarthy	2.00							_	_	_	
Board Member		X				ļ.,		0.	0.	0.	
(7) Gretchen Ames	2.00	j							_	_	
Board Member		X			ļ			0.	0.	0.	
(8) Henry Loh	2.00	ļ						_	_	_	
Board Member		X		<u> </u>	L			0.	0.	0.	
(9) Hui Ling Shi	2.00										
Board_Member		X	-	<u> </u>	<u> </u>	1	_	0.	_0.	0 .	
(10) Irene Wong	2.00		ļ	ļ							
Board Member		X	<u> </u>	<u> </u>	<u> </u>	_		0.	0.	0	
(11) Pattie Lew	2.00									_	
Board Member		X	<u> </u>		↓_			0.	0.	0	
(12) Monica Walters	40.00									44 054	
Chief Executive Officer		ļ	<u> </u>	X	-	ļ	_	130,739.	0.	14,874	
(13) John Uselman	40.00	1		1							
Chief Financial Officer		_	<u> </u>	X	<u> </u>	↓	_	96,721.	0.	5,803	
		-									
				-	\vdash	+					
		_	<u> </u>		<u> </u>		ļ				
]			
			\vdash	\vdash	\vdash						
		1		1	1	1	1		ł		

(A) Name and title	(B) Average hours per week	(do		(C Posi heck is ss pe	tion	than (one n an	(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estimated amount of other		
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS		fro orga and	pensation the anization related in its personal in its persona	n t
		-											
									<u>-</u>				
								:					
		<u> </u>											
		1											
		<u> </u>											
1b Sub-total							>	227,460.		0.	2(0,67	
 Total from continuation sheets to Part Total (add lines 1b and 1c) 	VII, Section A	٠						227,460.		0.	20	0,67	<u>0.</u>
Total number of individuals (including but	t not limited to th	nose	liste	ed al	bove	e) wh	10 r	• • • • • • • • • • • • • • • • • • • •	,000 of reportabl	е			
compensation from the organization												Yes	<u>1</u> No
3 Did the organization list any former office	er, director, or tri	uste	e, ke	y er	nplo	yee,	or	highest compensated e	mployee on				
line 1a? If "Yes," complete Schedule J fo	r such individual										3		X
4 For any individual listed on line 1a, is the and related organizations greater than \$									the organization		4		X
5 Did any person listed on line 1a receive									idual for services				
rendered to the organization? If "Yes," c	omplete Schedu	le J	for st	uch	pers	son					5		X
Section B. Independent Contractors 1 Complete this table for your five highest	compensated in	den	ende	ent c	onti	racto	rs t	that received more than	\$100.000 of com	pens	ation fi	rom	
the organization. Report compensation t													
(A) Name and busine	ess address						Į	(B) Description of s	services	С	(C omper) isation	
Bigbreak LLC							\dashv						
P.O. Box 288, San France		9	408	33				Food Service			22	4,57	0.
NA Commercial Maintenan 201 Peru Ave., San Fran	ce <u>cisco, C</u>	Δ	94	111	2		- 1	Janitorial s for all site			12	6,82	6.
ZUI FELU AVE., Dan Flan	<u> </u>		<u>, z.</u>				İ					_, 02	
							_						
O Tatal number of independent and independent	o (moludina hista	204 1		d +-	+h -	ec l		d above) who received =	nore than				
2 Total number of independent contractor \$100,000 of compensation from the org		iot li	minte	u 10	1110	2	51 5 (above, who received h	IOIG MIAIT				

Wu Yee Children's Services Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D)
Revenue excluded from tax under sections 512 - 514 (C) Unrelated (B) Related or Total revenue exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a b Membership dues 1b 38,736 c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e 12,195,788 f All other contributions, gifts, grants, and similar amounts not included above 1f 294,960 g Noncash contributions included in lines 1a-1f \$_ h Total. Add lines 1a-1f 12 529 484 **Business Code** 900099 41,214 Program Service Revenue 2 a Family fees 41,214 f All other program service revenue g Total. Add lines 2a-2f 41,214 Investment income (including dividends, interest, and other similar amounts) 196, Income from investment of tax-exempt bond proceeds 4 Royalties 5 (i) Real (II) Personal 6 a Gross rents **b** Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ 38,736, of contributions reported on line 1c) See Part IV, line 18 22,004 а 22,004 **b** Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 а **b** Less: direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances а b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a Miscellaneous income 900099 21 485 21,485, b d All other revenue e Total. Add lines 11a-11d 21.485

592.379

Total revenue See instructions.

21,681

Form 990 (2013) Wu Yee Children's Services 94-2387002 Page 10
Part IX | Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns All oth	er organizations must co	mplete column (A).	
	Check if Schedule O contains a respon				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22	5,263,335.	5,263,335.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,			274 277	
	trustees, and key employees	274,277.		274,277.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	4 050 453	2 700 670	222 051	20 024
7	Other salaries and wages	4,050,453.	3,788,678.	232,951.	28,824.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	002 107	056 205	110 000	0 022
9	Other employee benefits	983,187.	856,295.	118,860.	8,032.
10	Payroll taxes	374,828.	321,028.	52,952.	848.
11	Fees for services (non-employees).				
а	Management	3,763.	2,194.	1,227.	342.
b	Legal	44,134.	25,730.	14,388.	4,016.
	Accounting .	44,134.	25,730.	14,300.	4,010.
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees Other (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch 0.)	274,334.	253,706.	20,256.	372.
12	Advertising and promotion	13,593.	7,925.	4,431.	1,237.
13	Office expenses	304,714.	288,598.	14,551.	1,565.
14	Information technology	43,737.	40,019.	3,718.	
15	Royalties	, , , , , , , , , , , , , , , , , , , ,			
16	Occupancy	687,152.	633,545.	49,980.	3,627.
17	Travel	32,236.	29,347.	2,847.	42.
18	Payments of travel or entertainment expenses				- / - /
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	13,461.	9,026.	4,407.	28.
20	Interest	11,353.	6,619.	3,701.	1,033.
21	Payments to affiliates .				
22	Depreciation, depletion, and amortization	17,608.		17,608.	
23	Insurance	55,509.	32,362.	18,096.	5,051.
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	All other expenses	75,254.	43,960.	24,612.	6,682.
b		20,340.	18,610.	1,730.	
С	Licenses, permits and t	19,857.	11,577.	6,473.	1,807.
d		16,843.	9,819.	5,491.	1,533.
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	12,579,968.	11,642,373.	872,556.	65,039.
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 If following SOP 98-2 (ASC 958-720)		<u></u>		F 000 (0010)

Form 990 (2013)
Part X Balance Sheet

art X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	170,833.	_ 1	532,301
2	Savings and temporary cash investments	458,188.	2	122,662
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	1,644,538.	4	1,447,973
5	Loans and other receivables from current and former officers, directors,	•		
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			-
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
,	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	76,159.	9	94,912
1 .	Land, buildings, and equipment: cost or other			
.00	basis. Complete Part VI of Schedule D 10a 1,842,044.			
k		948,235.	10c	891,971
11	Investments - publicly traded securities	310,2331	11	0,527,57,5
12	Investments - other securities. See Part IV, line 11		12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets See Part IV, line 11	41,269.	15	43,750
16	Total assets. Add lines 1 through 15 (must equal line 34)	3,339,222.	16	3,133,575
17	Accounts payable and accrued expenses	834,134.	17	869,998
18	Grants payable		18	<u> </u>
19	Deferred revenue	46,459.	19	109,828
20	Tax-exempt bond liabilities	10,1051	20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	Loans and other payables to current and former officers, directors, trustees,			
	key employees, highest compensated employees, and disqualified persons			
22	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties	276,235.	23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X of			
	Schedule D	146,863.	25	105,807
26	Total liabilities. Add lines 17 through 25	1,303,691.	26	1,085,633
1	Organizations that follow SFAS 117 (ASC 958), check here ► X and			· · · -
,	complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	1,961,342.	27	1,978,720
28	Temporanly restricted net assets	74,189.	28	69,222
29	Permanently restricted net assets		29	
5	Organizations that do not follow SFAS 117 (ASC 958), check here ▶			
	and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	-
27 28 29 30 31 32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	2,035,531.	33	2,047,942
		3,339,222.		3,133,575

·orm	990 (2013) Wu Yee Children's Services	94-	<u>- 430 /</u>	<u> </u>	Pa	<u>ge 12</u>
	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>, 59</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2	12			68.
3	Revenue less expenses. Subtract line 2 from line 1	3				<u>11.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2	<u>,03</u>	<u>5,5</u>	<u>31.</u>
5	Net unrealized gains (losses) on investments	_ 5				
6	Donated services and use of facilities	6				
7	Investment expenses .	7				
8	Prior period adjustments .	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	2	<u>,04</u>	<u>7,9</u>	42.
Pa	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					ᆜ
			1		Yes	No
1	Accounting method used to prepare the Form 990:					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0				
2a				2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	-
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	,			1
	consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt	,			
	review, or compilation of its financial statements and selection of an independent accountant?			2c_	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dıt			
	Act and OMB Circular A-133?			3a	<u>X</u>	-
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ired au	dıt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b_	X	<u> </u>
				Form	990	(2013)

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number 94-2387002 Wu Yee Children's Services Reason for Public Charity Status (All organizations must complete this part) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives. (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. d Type III - Non-functionally integrated c ____ Type III - Functionally integrated b Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes No the governing body of the supported organization? 11g(i) A family member of a person described in (i) above? 11g(iı) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). h (vi) Is the (iv) Is the organization (v) Did you notify the (i) Name of supported (vii) Amount of monetary (ii) EIN (iii) Type of organization organization in col. in col. (i) listed in your organization in col. (described on lines 1-9) organization (i) organized in the support governing document? (i) of your support? above or IRC section (see instructions))

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

Schedule A (Form 990 or 990-EZ) 2013

<u>Total</u>

Schedule A (Form 990 or 990-EZ) 2013 Wu Yee Children's Services 94-23870
| Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) 94-2387002 Page 2

(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	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not			j			
	include any "unusual grants.")	14,205,711.	13,604,368,	13,706,159.	10,898,662.	12,529,484.	64,944,384.
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities	,					
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	14,205,711,	13,604,368.	13,706,159.	10,898,662.	12,529,484.	64,944,384.
5	The portion of total contributions	1					
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						4,925,516,
	Public support. Subtract line 5 from line 4						60 018 868.
Sec	ction B. Total Support				···	· 	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	14,205,711.	13,604,368,	13,706,159.	10,898,662.	12,529,484,	64,944,384,
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	2,936.	572.	590.	300.	196.	4,594.
9	Net income from unrelated business		j				
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital				404 = 40	04 405	404 045
	assets (Explain in Part IV.)	111,017.	75,175.	79,630.	134,540.	21,485.	421,847.
	Total support. Add lines 7 through 10						65,370,825,
12	Gross receipts from related activities,					12	116,743.
13	•		first, second, thir	d, fourth, or fifth ta	x year as a section	n 501(c)(3)	
<u></u>	organization, check this box and stor		roontago				
	ction C. Computation of Publ			-1(0)		-	91.81 %
	Public support percentage for 2013 (olumn (f))	•	14	
	Public support percentage from 2012				14 - 22 1/20/	15	
16a	33 1/3% support test - 2013. If the				14 IS 33 1/3% OF IT	iore, crieck this bo	x and ►X
	stop here. The organization qualifies				lung 15 in 22 1/20/	or more, shock th	
t	33 1/3% support test - 2012. If the				IIIIe 15 IS 33 17370	or more, check ii	IIS DOX
	and stop here. The organization qual 10% -facts-and-circumstances tes				12 162 2 165	and line 14 is 100/	or more
17a							
	and if the organization meets the "fact					t iv now the organ	nzation _
	meets the "facts-and-circumstances"					17a and line 15 in	10% or
t	 10% -facts-and-circumstances tes more, and if the organization meets the 						
	more, and if the organization meets to organization meets the "facts-and-cire						`
40	Private foundation, if the organization						
<u> 18</u>	Private foundation, it the organization	on did not check a	DOX OF HITE 13, 10	a, 100, 17 a, 01 17 L		dule A (Form 990	

(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 qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and					-	
	membership fees received. (Do not						
	include any "unusual grants.")		_				
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, 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-				ļ		
	iness under section 513						
4	Tax revenues levied for the organ-						
-	ization's benefit and either paid to						
	or expended on its behalf				1		1
5	The value of services or facilities				<u> </u>		
5	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 5						
7 8	Amounts included on lines 1, 2, and 3 received from disqualified persons						
	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						
	Add lines 7a and 7b						·
	Public support (Subtract line 7c from line 6) ction B. Total Support	<u> </u>	<u> </u>	L	<u></u>	1	
_	· · ··	() 2000	41,0040	4.10044	4.0.0010	4-1-0010	(O Tabal
	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
-	Amounts from line 6 Gross income from interest,						
108	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources				 	· · · · · · · · · · · · · · · · · · ·	
ì	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	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					ļ	
12	Other income. Do not include gain or loss from the sale of capital						,
	assets (Explain in Part IV)						<u> </u>
13	Total support. (Add lines 9, 10c, 11, and 12)						<u></u>
14	First five years. If the Form 990 is fo	r the organization's	s first, second, thii	d, fourth, or fifth t	ax year as a section	on 501(c)(3) organi:	zation,
	check this box and stop here						
	ction C. Computation of Publ					 	
	Public support percentage for 2013 (•		column (f))		15	%
	Public support percentage from 2012					16	%
	ction D. Computation of Inve					TT	
	Investment income percentage for 20			ne 13, column (f))		17	%
	Investment income percentage from					18	%
19	a 33 1/3% support tests - 2013. If the						17 is not
	more than 33 1/3%, check this box a	•	•	•			▶∟∟
ı	o 33 1/3% support tests - 2012. If the	organization did r	not check a box or	line 14 or line 19	a, and line 16 is m	ore than 33 1/3%,	and
	line 18 is not more than 33 1/3%, che		-				▶Щ
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check t	his box and see in	structions	_

Schedule A	(Form 990 or 990-EZ) 2013 Wu Yee Childre	en s Services	94-2387002	2 Page 4
Part IV	(Form 990 or 990-EZ) 2013 Wu Yee Childre Supplemental Information. Provide the explanation of the explanatio	nations required by Part II, line 10), Part II, line 17a or 17b; and Part III, line	e 12
	Also complete this part for any additional information.		,	
	, and the same part of the same same same same same same same sam			
				
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	· · · · · · · · · · · · · · · · · · ·		v	
		•		
			 	
	· •• · · · · · · · · · · · · · · · · ·			
				
			 	
				
				

SCHEDULE D

Department of the Treasury

Internal Revenue Service

(Form 990)

Supplemental Financial Statements

➤ 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.

➤ Attach to Form 990.
➤ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

2013
Open to Public Inspection

Name of the organization

Wu Yee Children's Services

Employer identification number 94-2387002

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 2 Aggregate grants from (during year) 3 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Part II Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of an historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a 2b Total acreage restricted by conservation easements 2c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear > Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) _ Yes and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items. a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Sche		<u>Children's</u>							87002	
Par	t III Organizations Maintaining C	collections of A	rt, Hist	torical Tre	easures, c	or Other	Simila	r Asse	ts(continu	ed)
3	Using the organization's acquisition, accessi	on, and other record	is, check	k any of the	following tha	t are a sig	nıfıcant u	use of its	collection i	tems
	(check all that apply)									
а	Public exhibition	d	· 🖳	Loan or exc	hange progra	ams				
b	Scholarly research	е	, [Other						
¢	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how th	ney further th	he organizati	on's exem	pt purpo	se in Parl	t XIII.	
5	During the year, did the organization solicit o	r receive donations	of art, hı	storical trea	sures, or oth	er sımılar a	issets		_	
	to be sold to raise funds rather than to be ma								Yes	No_
Par	t IV Escrow and Custodial Arran		ete if the	organizatio	n answered	"Yes" to F	orm 990,	, Part IV, I	ıne 9, or	
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for	contribution	is or other as	sets not ir	ncluded	_	7	
	on Form 990, Part X?						-	<u> </u>	Yes	L No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing t	table [.]						
									Amount	
C	Beginning balance						1c			
d	Additions during the year				•		1d			
е	Distributions during the year						1e			
f	Ending balance						1f	·		
	Did the organization include an amount on F							i	Yes	∐ No
	If "Yes," explain the arrangement in Part XIII.									Ш
Par	t V Endowment Funds. Complete	f the organization ar	nswered_	"Yes" to Fo						
		(a) Current year	(b) P	rior year	(c) Two year	rs back (c	i) Three y	ears back	(e) Four y	ears back
1a	Beginning of year balance								<u> </u>	
b	Contributions								 	
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance	L	l						1	
2	Provide the estimated percentage of the cur		ce (line 1	g, column (a	a)) held as:					
а	Board designated or quasi-endowment		%							
b	Permanent endowment >	%								
С	Temporarily restricted endowment	%								
	The percentages in lines 2a, 2b, and 2c shou	· ·								
За	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	ind administe	ered for the	e organiz	ation	_	
	by:									es No
	(i) unrelated organizations .								3a(i)	
	(ii) related organizations .								3a(ii)	-
ь	If "Yes" to 3a(II), are the related organization	•		•					3b	
4	Describe in Part XIII the intended uses of the		owment	<u>funds</u>						
Pa	rt VI Land, Buildings, and Equipn						4.0			
	Complete if the organization answere	· ·								
	Description of property	(a) Cost or o		1	or other		cumulate	ed	(d) Book	value
		basis (investi	inent)		(other)	aepi	eciation		205	000
	Land		-		5,000.		17 0	7.4		,000.
b	Buildings				8,300.		17,9°			<u>,326.</u>
С	Leasehold improvements				9,332.		20,6			<u>,710.</u>
	Equipment				7,652.		93,7		27	<u>,935.</u>
	Other				<u>.7,760.</u>	l	<u>17,7</u>	<u> </u>	001	0.
<u>Tota</u>	i. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	t X, colui	<u>mn (B), line 1</u>	10(c).)				891	<u>,971.</u>

1. (a) Description of liability (b) Book value

(1) Federal income taxes

(2) Due to government 105,807.

(3)

(4)

(5)

(6)

(7)

(8)

(9)

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ 105,807.

^{2.} Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

Schedule D (Form 990) 2013

Part XI Reconciliation of Revenue per Audited Financial Sta		94-238/002 Page 4			
Complete if the organization answered "Yes" to Form 990, Part IV, line	-	ietam.			
	5 12a.	1 12,614,383.			
 Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: 		1 12,014,303.			
a Net unrealized gains on investments	2a				
b Donated services and use of facilities	2b	1			
c Recoveries of prior year grants	2c	1			
d Other (Describe in Part XIII.)	2d 22,004.	.]			
e Add lines 2a through 2d		2e 22,004.			
3 Subtract line 2e from line 1		3 12,592,379.			
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	4			
b Other (Describe in Part XIII)	4b	4			
c Add lines 4a and 4b		4c 0.			
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5 12,592,379.			
Part XII Reconciliation of Expenses per Audited Financial Sta		neturn.			
Complete if the organization answered "Yes" to Form 990, Part IV, line	e 12a	1 12,601,972.			
1 Total expenses and losses per audited financial statements		1 12,601,972.			
2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	2a				
a Donated services and use of facilitiesb Prior year adjustments	2b	1 1			
c Other losses	2c	-			
d Other (Describe in Part XIII)	2d 22,004.	.]			
e Add lines 2a through 2d		2e 22,004.			
3 Subtract line 2e from line 1		3 12,579,968.			
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:					
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	_			
b Other (Describe in Part XIII.)	4b	<u> </u>			
c Add lines 4a and 4b		4c 0.			
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	3.)	5 12,579,968.			
Part XIII Supplemental Information.					
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4		4; Part X, line 2; Part XI,			
lines 2d and 4b; and Part XII, lines 2d and 4b Also complete this part to provide an	ny additional information				
Part X, Line 2:					
raic x, nine z.					
Explanation: Wu Yee is exempt from taxati	on under Internal F	Revenue Code			
and a second sec					
Section 501(c)(3) and California Revenue	and Taxation Code S	Section 23701d.			
Generally accepted accounting principles	<u>provide accounting</u>	<u>and disclosure</u>			
		1.34			
guidance about positions taken by an orga	<u>nization in its tax</u>	c returns that			
the second secon		iana and			
might be uncertain. Management has consid	ered its tax positi	lons and			
haldana that all of the moditions token	hu Wu Yoo in their	fodoral and			
believes that all of the positions taken by Wu Yee in their federal and					
state exempt organization tax returns are more likely than not to be					
state exempt organization tax returns are	more rixery chair i	100 00 20			
sustained upon examination. Wu Yee's retu	rns are subject to	examination by			
DEPTHENENT OFFICE PROPERTY THE TOO D TOO					
federal and state taxing authorities, gen	erally for three an	nd four years,			
respectively, after they are filed.					
332054 09-25-13		Schedule D (Form 990) 2013			

Schedule D (Form 990) 2013 Wu Yee Children's Services	94-2387002 Page 5
Schedule D (Form 990) 2013 Wu Yee Children's Services Part XIII Supplemental Information (continued)	· - <u></u>
Part XI, Line 2d - Other Adjustments:	
1420 / 12110	
Special events expenses	22,004.
Part XII, Line 2d - Other Adjustments:	
1410 1111 1110 114 001101 114 001101	
Special events expenses	22,004.
	——————————————————————————————————————
	

SCHEDULE G

Department of the Treasury

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

➤ Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2013

Internal Revenue Service

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form 990.

Open To Public Inspection

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 17. Form 18. Indicate whether the organization raised funds through any of the following activities. Check all that apply. A	4 – 2387 Form 990-EZ	
required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations e Solicitation of non-government grants	Form 990-EZ	filers are not
a Mail solicitations e Solicitation of non-government grants		
b Internet and email solicitations c Phone solicitations d In-person solicitations d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundamental compensated at least \$5,000 by the organization	Yes	□ No pe
(i) Name and address of individual or entity (fundraiser) (ii) Activity or entity (fundraiser) (iv) Gross receipts to (or respect to (or resp	nount paid retained by) ndraiser I in col. (i)	(vi) Amount paid to (or retained by) organization
Yes No		
		<u> </u>
	•••	
Total •		
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is ex or licensing	empt from re	gistration
	- -	
	· -	

Scho Pa		le G (Form 990 or 990-EZ) 2013 Wu Yee II Fundraising Events. Complete if the of fundraising event contributions and growth states.	ne organization answered	d "Yes" to Form 990, Par	IV, line 18, or reported	
Φ		of fundraising event contributions and gr	(a) Event #1 Butterfly Social (event type)	(b) Event #2	(c) Other events None (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1	Gross receipts	60,740.			60,740.
	2	Less: Contributions	38,736.			38,736.
	3	Gross income (line 1 minus line 2)	22,004.		· ·	22,004.
	4	Cash prizes				
တ္	5	Noncash prizes			.	
xpense	6	Rent/facility costs			·	
Direct Expenses	7	Food and beverages				
۵	8 9 10	Entertainment Other direct expenses Direct expense summary. Add lines 4 throug	22,004. h 9 in column (d)		•	22,004. 22,004.
Pa	11 rt		line 3, column (d) answered "Yes" to Form	ı 990, Part IV, line 19, or r	eported more than	0.
Revenue		\$15,000 on Form 990-EZ, line 6a	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col (c))
- Re	1	Gross revenue				
ses	2	Cash prizes .				
Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs			-	
	5	Other direct expenses	Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No	No No	
	7	Direct expense summary. Add lines 2 throug	h 5 in column (d)		•	
	8	Net gaming income summary. Subtract line	7 from line 1, column (d)			
	ı İs	iter the state(s) in which the organization operate organization licensed to operate gaming a 'No," explain	ctivities in each of these			Yes X No
		ere any of the organization's gaming licenses i "Yes," explain			year?	Yes X No
	_					

Sch	edule G (Form 990 or 990 EZ) 2013 Wu Yee Children's Services 94-	<u>-2387002</u>	Page 3
11	Does the organization operate gaming activities with nonmembers?	Yes	X No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed	_	
	to administer charitable gaming?	, ☐ Yes	X No
13	Indicate the percentage of gaming activity operated in:		
а	The organization's facility	. 13a	<u>%</u>
b	An outside facility	13b	<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name ► John Uselman		
	Address ► 717 California Street Fl. 1 - San Francisco, CA 94108	······································	
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	X No
b	o If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount		
	of gaming revenue retained by the third party > \$		
c	e If "Yes," enter name and address of the third party:		
	Name	_	
	Address >		
16	Gaming manager information:		
	Name N. Tohn Haolman		
	Name ▶ John Uselman		
	Gaming manager compensation ▶ \$0 .		
	Description of services provided		
			
	X Director/officer Employee Independent contractor		
17	Mandatory distributions.		
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
٠	retain the state gaming license?	Yes	X No
ŀ	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
_	organization's own exempt activities during the tax year > \$		
Pa	art IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part II	I, lines 9, 9b, 10	b, 15b,
	15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).		
		<u> </u>	
		-	
		-	
		-	
		-	

SCHEDULE 1 (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. ▶ Attach to Form 990.

Open to Public

Inspection

OMB No 1545-0047

Name of the organization		-					Employer identification number
╟	Idren's	Services				:	34-238/002
Part I General Information on Grants and Assistance	id Assistance					4 2 2 2 3 4 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
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	substantiate the	s amount of the grants	or assistance, the	grantees eligibility	/ ror tne grants or ass	istance, and the selecti	\ \frac{1}{2}
critena used to award the grants or assistance?	tance?		•	,			A Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	cedures for moni	toring the use of grant	funds in the Unite	d States.			
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	sovernments an	d Organizations in the	e United States. C	complete if the orga	anization answered "\	res" to Form 990, Part I	V, line 21, for any
recipient that received more than \$5,000. Part II can be duplicated	5,000 Part II can	be duplicated if addit	if additional space is needed.	Jed.	(f) Method of		
(a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(n) Purpose or grant or assistance
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	nd government or	ganizations listed in the	ne line 1 table				
3 Enter total number of other organizations listed in the line 1 table	listed in the line	1 table					A
LHA For Paperwork Reduction Act Notice, see the Instructions for Form	see the Instruct	ions for Form 990.					Schedule I (Form 990) (2013)

94-2387002 Schedule | (Form 990) (2013) Wu Yee Children's Services

Part III 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 Schedule I (Form 990) (2013)

Page 2

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Food Program	120	966,336,	0		
Child Care Subsidy Payments	192	4,296,999,	0		
Part IV Supplemental Information. Provide the information required in	quired in Part I, lin	e 2, Part III, column	Part I, line 2, Part III, column (b), and any other additional information	dditional information	
Part I, Line 2:					
Explanation: All grants are assigned	Ø	que contra	unique contract number.	All expenses	
pertaining to that contract is coded		is number	to this number in our accounting	ounting	
package (MIP). On a monthly basis,	, we compare	are actual	expenses	to the	
allowed line item budget amounts.					

Our grants and contracts are also subject to inspection (program part) and

state and audit of the financial part by the various funders (federal,

local governments).

SCHEDULE 0 (Form 990 or 990-EZ)

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.

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

332211 09-04-13

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Wu Yee Children's Services

Inspection Employer identification number

94-2387002

Form 990, Part I, Line 1, Description of Organization Mission:
immigrants in Chinatown, Wu Yee Children's Services (Wu Yee) has grown
to a city-scale agency serving diverse families throughout San
Francisco, and is now the city's largest provider of Early Head Start.
Wu Yee delivers a comprehensive range of Child Development, Family, and
Provider Services - including Early Head Start, Head Start, and State
Preschool programs, the Joy Lok Family Resource Center, Single Stop
benefits assistance, child care Resource and Referrals, child care
subsidies, child care provider training, a food program for child care
providers, and the Family Child Care Quality Network (FCCQN).
The phrase "wu yee" means "protector of children" in Cantonese, and
children are at the heart of everything we do. Wu Yee's mission is to
create opportunities for children to be healthy, for families to thrive
and for communities to be strong.
Form 990, Part III, Line 1, Description of Organization Mission:
serving a total of 335 children of low-income families.
Form 990, Part III, Line 4a, Program Service Accomplishments:
program, and 65 home-based.
Form 990, Part III, Line 4c, Program Service Accomplishments:
care microenterprises ensuring that high-quality and nutritious meals
are being served through the Child Care Provider Food Program. 848 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2013)

Name of the organization Wu Yee Children's Services	Employer identification number 94-2387002			
children were served. Through our federally funded Child				
Food Program, we support 132 family child care micro-ente	rprises by			
providing \$1,178,482 in reimbursements for qualifying meals/snacks.				
Additionally, we provide yearly training to provide prope				
food handling, USDA food pyramid guidelines, ensuring goo				
activity, and age appropriate meals and food options for				
accivity, and ago appropriate means and opening to				
Form 990, Part III, Line 4d, Other Program Services:				
Joy Lok Family Resource Center provides services for pare	nts and			
caregivers of children ages 0-18 that will help build sup	portive			
communities, promote education, self-sufficiency, and leadership				
amongst families and to collaborate with community resources outside				
and within Chinatown. This is all done through family and parenting				
workshops on child development issues and support groups	which allow			
parents and caregivers to talk in a caring environment wh	ile also			
encouraging participants to mentor one another. Wu Yee pr	ovided			
services 167 parents and 63 children.				
Expenses \$ 331,209. including grants of \$ 0. Revenue	\$ 0.			
Wu Yee's Child Resource & Referral program is a city-wide	support			
service for families, child care providers and local communities in				
finding, planning for and providing affordable, high-quality child				
care. It also provides training on quality child care and	early			
childhood topics to parents and child care providers. Wu				
assistance to 1,183 families looking for child care.				
Expenses \$ 257,085. including grants of \$ 0. Revenue	\$ 0.			

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization Wu Yee Children's Services	Employer identification number 94-2387002
Explanation: The Form 990 was reviewed by the Chief Finan	cial Officer. In
addition, a copy of the tax return was sent to the Board	for review before
filing with the IRS.	
Form 990, Part VI, Section B, Line 12c:	
Explanation: Board Members review the Conflict of Interes	t Policy, sign and
state they have no conflict of interest upon joining the	Board. If any
conflict of interest should present itself, they will rec	use themselves
from voting. Employees review the Conflict of Interest Po	licy as contained
in the Personnel Manual and upon hire, they sign receipt	and agreement.
These policies are reviewed annually by the Board.	
Form 990, Part VI, Section B, Line 15:	
Explanation: The organization uses comparability data and	annual reviews in
determining compensation for its Executive Director, top	management
officials and key employees.	
Form 990, Part VI, Section C, Line 19:	
Explanation: The organization makes its governing documen	ts, conflict of
interest policy, financial statements and Form 990 availa	able to the public
upon request.	
	

Form **8868**

(Rev January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

OMB No 1545-1709

 $\triangleright [X]$

	are filing for an Additional (Not Automatic) 3-Month Ex			· ·			
	complete Part II unless you have already been granted		•	-			
	nic filing (e-file). You can electronically file Form 8868 if y						
	to file Form 990-T), or an additional (not automatic) 3-mo		•		•		
	o file any of the forms listed in Part I or Part II with the exc						
	Benefit Contracts, which must be sent to the IRS in pap		(see instructions). For more details of	n the elec	tronic filing of this	torm,	
Part	wirs goviefile and click on e-file for Charities & Nonprofits Automatic 3-Month Extension of Time		submit original (no copies ne	eded)			
	ration required to file Form 990-T and requesting an autor						
Part I or		natic offic	onth extension check this box and t	complete			
	corporations (including 1120-C filers), partnerships, REM	IICs and t	niets must use Form 7004 to reques	t an evten	sion of time	- 📖	
to file income tay mturns					Enter filer's identifying number		
Type or	Name of exempt organization or other filer, see instru		Employer identification number (EIN) or				
print	- The state of the			Linployer	acitinoation nan	1001 (2114) 01	
Pille	Wu Yee Children's Services				94-2387002		
File by the	Number street and some providers (f. D.O.) have account with the			Social security number (SSN)			
due date fo filing your	□ 827 Broadway Street				Cooking Hamber (Corty		
return See instruction	-			***************************************			
		San Francisco, CA 94133					
	Dai: 124:102500 Oi: 5:2203	 					
Enter th	e Return code for the return that this application is for (file	e a separa	te application for each return)			0 1	
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			رعبي	
Application		Return	Application			Return	
ls For		Code				Code	
Form 990 or Form 990-EZ		01	Form 990-T (corporation)			07	
Form 990-BL		02	Form 1041-A			08	
Form 4720 (individual)		03	Form 4720 (other than individual)			09	
Form 990-PF		04	Form 5227		<u>. </u>	10	
Form 990-T (sec 401(a) or 408(a) trust)		05	Form 6069				
Form 990-T (trust other than above)		06	Form 8870	n 8870			
	John Uselman -	Wu Y	ee Children's Serv	ices			
• The l	books are in the care of > 827 Broadway S	treet	 San Francisco, 	CA 94	133		
Telep	hone No. ► <u>(415) 230-7504</u>		Fax No. ▶ <u>(415) 543</u> -	1618			
If the	organization does not have an office or place of business	s in the Ur	nited States, check this box		•	▶ □	
If this	is for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN) I	f this is foi	r the whole group,	check this	
box 🕨	. If it is for part of the group, check this box	and atta	ach a list with the names and EINs of	all memb	ers the extension	ıs for	
1 1	equest an automatic 3-month (6 months for a corporation	required	to file Form 990-T) extension of time	untıl			
February 15, 2015, to file the exempt organization return for the organization named above. The extension							
is	s for the organization's return for:						
	calendar year or						
	▶ X tax year beginning <u>JUL 1, 2013</u> , and ending <u>JUN 30, 2014</u>						
2 lf	the tax year entered in line 1 is for less than 12 months, o	heck reas	on Initial return	Fınal retur	n		
	Change in accounting period			1			
	this application is for Forms 990-BL, 990-PF, 990-T, 4720	, or 6069,	enter the tentative tax, less any				
	nonrefundable credits. See instructions.			3a	\$	0.	
	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and				_		
_	timated tax payments made. Include any prior year overp			3b	\$	0.	
	alance due. Subtract line 3b from line 3a Include your pa	•	·			^	
	using EFTPS (Electronic Federal Tax Payment System)			3c	\$	0.	
Caution	. If you are going to make an electronic funds withdrawal	ı (dırect de	bit) with this Form 8868, see Form 8	453-EO ar	na Form 8879-EO	ror payment	

instructions