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EXTENDED TO NOVEMBER 15, 2017

Form **990**

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 **2016**

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

	AF	or the	2016 calendar year, or tax year beginning	and	enaing		
Ī	B C	heck if	C Name of organization			D Employer identific	ation number
]Addres	S CUTNINGE FOR A PRITON A PITTON	E ACTION			
		Name change				94-21	61304
		Initial	Number and street (or P.O box if mail is not deli	vered to street address)	Room/suite	E Telephone number	
		Final return/	17 WALTER U LUM PLACE	,			274-6760
		termin- ated	City or town, state or province, country, and	ZIP or foreign postal code		G Gross receipts \$	2,828,464.
		Ameno	DWI LIVINGIBGO, CV 341			H(a) Is this a group re-	turn
		Application pendin	I F Name and address of principal officer V ±±VV	CENT PAN		for subordinates?	Yes X No
_						H(b) Are all subordinates inc	luded ² Yes No
_	<u> </u>	ax-exe			or 527	1	ist (see instructions)
			e: WWW.CAASF.ORG	045		H(c) Group exemption	
			3. gamasaa, 1	sociation Other >	L Year	of formation: 1969 M	State of legal domicile: CA
L	Ра	rt I	Summary	CUIN	FCF FC	N A E E T D M A M T Y	TE ACMION
	ဗ	1	Briefly describe the organization's mission or most (CAA) IS A COMMUNITY BASEI	Significant activities CTIN	ODCANT	ZATTON THATA	CONDITON
	Activities & Governance		Check this box If the organization discor				
	Ver		Number of voting members of the governing body (sea or more	3	sets 8
	ဌ		Number of independent voting members of the governing body to	4	8		
	ع د		Total number of individuals employed in calendar y	• • • • • • • • • • • • • • • • • • • •		5	23
	ij		Total number of volunteers (estimate if necessary)	ou. 2010 (1 u.t 1, 1110 2u)		6	175
	€		Total unrelated business revenue from Part VIII, col	umn (C), line 12		7a	0.
	4		Net unrelated business taxable income from Form	• • •		7b	0.
୧ନ୍ତ				DECENEN		Prior Year	Current Year
GENVIED		8	Contributions and grants (Part VIII, line 1h)	ULULIATA	٦, ا	886,230.	1,299,586.
53	ž	9	Program service revenue (Part VIII, line 2g)	90	တို့	1,290,325.	1,501,527.
	Revenue	10	Investment income (Part VIII, column (A), lines 3, 4,	and 7d) NOV 1 5 2017)))))	51,764.	14,103.
	<u>-</u>	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c,	9c, 10c, and 11e)		39,497.	13,248.
<u> </u>		12	Total revenue - add lines 8 through 11 (must equal	Part VIII GolumniA June [2]5	7	2,267,816.	2,828,464.
30		13	Grants and similar amounts paid (Part IX, column (1), lines 13, 1011-10, 10, 10, 10, 10, 10, 10, 10, 10, 10,		0.	0.
\bigcirc			Benefits paid to or for members (Part IX, column (A		<u> </u>	0.	0.
	es		Salaries, other compensation, employee benefits (F	•	<u> </u>	1,203,518.	1,160,916.
(E)	Expenses		Professional fundraising fees (Part IX, column (A), li	4000	⊢	0.	0.
2017	X.		Total fundraising expenses (Part IX, column (D), line		<u>43.</u>	000 441	1 252 765
Z.			Other expenses (Part IX, column (A), lines 11a-11d,	·		999,441.	1,252,765. 2,413,681.
			Total expenses Add lines 13-17 (must equal Part I)		-	64,857.	414,783.
-	S	19	Revenue less expenses Subtract line 18 from line	12			
-	Net Assets or Fund Balances	-00	Tabel as about V lime 10)		"	eginning of Current Year 1,696,135.	End of Year 2,318,521.
	Asse Bala	20	Total assets (Part X, line 16) Total liabilities (Part X, line 26)			224,029.	431,632.
-	et/	21 22	Net assets or fund balances Subtract line 21 from	line 20	\vdash	1,472,106.	1,886,889.
i	Pa	rt II	Signature Block	III le 20			
1			Ities of perjury, I declare that I have examined this return,	including accompanying schedule	es and statem	nents, and to the best of my	knowledge and belief, it is
			t, and complete. Declaration of preparer (other than office				,
•					<u></u>	11.10	17
	Sıgı	1	Signature of officer			Date	
	Her		■ VINCENT PAN, EXECUTIVE	DIRECTOR			
			Type or print name and title				
•			Print/Type preparer's name	Preparer's signature		Date Check	PTIN
	Paid		ARTHUR LOUIE	747 Jone		10 - 20 - LT self-employe	
	•	arer	Firm's name LOUIE & WONG LLP			Firm's EIN	91-2007579
	Use	Only	Firm's address 425 WASHINGTON S				. 001 0000
				A 94111		Phone no.41	5-981-9999
	_		RS discuss this return with the preparer shown abo				X Yes No
	e220	01 11 1	1-16 I HA For Paperwork Reduction Act Notice	 see the senarate instruct 	ions.		Form 990 (2016)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	990 (2016) CHINESE FOR AFFIRMATIVE ACTION 94-2161304 Page	2
Pai	t III Statement of Program Service Accomplishments	_
	Check if Schedule O contains a response or note to any line in this Part III]
1	Briefly describe the organization's mission	_
	CHINESE FOR AFFIRMATIVE ACTION (CAA) IS A COMMUNITY-BASED CIVIL RIGHTS	
	ORGANIZATION THAT CONDUCTS COMMUNITY SERVICES, POLICY ADVOCACY, AND	_
	MOVEMENT BUILDING ACTIVITIES.	_
		_
2	Did the organization undertake any significant program services during the year which were not listed on the	_
	prior Form 990 or 990-EZ?)
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	2
	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	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported	
4a	(Code) (Expenses \$ 1,421,958 · Including grants of \$) (Revenue \$ 1,458,945 ·	
	LOCAL PROGRAM. CAA'S LOCAL PROGRAMMING NURTURES THE ABILITY OF	
	IMMIGRANTS TO PARTICIPATE FULLY IN CIVIC LIFE. THESE ACTIVITIES	
	INCLUDE LEADERSHIP DEVELOPMENT FOR MONOLINGUAL PUBLIC SCHOOL PARENTS,	
	EMPLOYMENT SERVICES FOR LIMITED-ENGLISH PROFICIENT NEWCOMERS, OUTREACH	
	FOR IMMIGRANT LEGAL SERVICES, AND COMMUNITY AND VOTER EDUCATION	
	UNDERSCORING ISSUES THAT IMPACT CAA'S CONSTITUENCY. IN ADDITION, CAA	
	LEADS ADVOCACY TO IMPROVE PUBLIC POLICY AND TO INFORM PUBLIC DISCOURSE	
	THROUGH ETHNIC AND MAINSTREAM MEDIA, AND ORGANIZES TO ENGAGE ELECTED	_
	AND GOVERNMENT OFFICIALS.	_
	·	_
		_
4b	(Code) (Expenses \$ 453,010 · Including grants of \$) (Revenue \$ 647,304 ·)
	ASIAN AMERICANS FOR CIVIL RIGHTS AND EQUALITY (AACRE, CAA CONTRIBUTES	_
	TO A BROADER PROGRESSIVE MOVEMENT FOR SOCIAL CHANGE, AACRE WORKS WITH	_
	EIGHT ADDITIONAL GROUPS: THE ALLIANCE OF SOUTH ASIANS TAKING ACTION,	_
	APEX EXPRESS, API EQUALITY - NORTHERN CA, ASIAN PRISONER SUPPORT	_
	COMMITTEE, HMONG INNOVATING POLITICS, HYPHEN MAGAZINE, THE NETWORK ON	_
	RELIGION AND JUSTICE, AND THE VISIBILITY PROJECT. THESE GROUPS SHARE	_
	ADMINISTRATIVE AND MOVEMENT BUILDING RESOURCES WITH CAA WHILE EXPLORING	<u> </u>
	AND DEEPENING THE CONNECTIONS THAT OUR COLLECTIVE MEMBERS, VOLUNTEERS,	
	AND STAFF HAVE WITH ONE ANOTHER.	
		_
	105 000	_
4c	(Code) (Expenses \$ 185,099 · including grants of \$) (Revenue \$) (Revenue \$)	_)
	CALIFORNIA API BUDGET PARTNERSHIP. INVOLVING API HUMAN SERVICE AND	_
	ADVOCACY ORGANIZATIONS FROM THE SAN FRANCISCO BAY AREA, CENTRAL VALLEY,	_
	LOS ANGELES, ORANGE COUNTY, AND SAN DIEGO, THE PARTNERSHIP CONDUCTS	_
	STATE LEGISLATIVE AND BUDGET ADVOCACY IN SACRAMENTO. THE PARTNERSHIP	
	IDENTIFIES AND SEEKS TO ADVANCE POLICIES AND PRIORITIES THAT IMPROVE	
	THE LIVES OF LOW-INCOME, IMMIGRANT, AND UNDERSERVED COMMUNITIES.	
		_
		_
		_
4d	Other program services (Describe in Schedule O)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ▶ 2,060,067.	_
	Form 990 (201	16)

Form 990 (2016) CHINESE FOR AFFIRMATIVE ACTION
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	Х	
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		<u> </u>
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			
	similar amounts as defined in 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		х
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 endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
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			ļ
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			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	ļ	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			l
	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		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	446		x
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		73
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	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?			ļ —
	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
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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	1	ļ	
	or more? If "Yes," complete Scnedule 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			l
	foreign organization? 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 other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
47	•	- 	 	+
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			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	X
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	000	(2016)
		Forn		つついれん

Form 990 (2016) CHINESE FOR AFFIRMATIVE ACTION

Part IV Checklist of Required Schedules (continued)

			Yes	No
	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		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			٠,
	domestic 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 or for domestic individuals 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		Х
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
	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), 501(c)(4), and 501(c)(29) 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	ł		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			ŀ
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	ĺ		
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	ŀ		
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	Ì	١, .	
	instructions for applicable filing thresholds, conditions, and exceptions)	٠.		ء. ا
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	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		Х
С			İ	۱,,
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	77	Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			,
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	<u> </u>	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	<u> </u>	Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	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?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			Ĭ -
	Note. All Form 990 filers are required to complete Schedule O	38	X	<u> </u>
		Form	990	(2016

	990 (2016) CHINESE FOR AFFIRMATIVE ACTION 94-2161.	304	Pa	age 5					
Par									
	Check if Schedule O contains a response or note to any line in this Part V			<u> </u>					
			Yes	No					
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 56	1	J						
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 5	l							
С	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 23		}						
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)	-							
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		_ <u>X</u> _					
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b							
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	J	}						
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		<u>X</u>					
b	If "Yes," enter the name of the foreign country	i							
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	. 1	ļ						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X					
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5с							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	, }							
	any contributions that were not tax deductible as charitable contributions?	6a		<u>X</u>					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts								
	were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).		x						
а									
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х						
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required								
	to file Form 8282?	7c		<u> </u>					
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?	7f		X					
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X					
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		X					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			v					
	sponsoring organization have excess business holdings at any time during the year?	8		<u> </u>					
9	Sponsoring organizations maintaining donor advised funds.			v					
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		X					
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	96							
10	Section 501(c)(7) organizations. Enter	-							
а	Initiation fees and capital contributions included on Part VIII, line 12								
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-							
11	Section 501(c)(12) organizations. Enter:	-							
	Gross income from members or shareholders 11a								
b	Gross income from other sources (Do not net amounts due or paid to other sources against			ļ					
10-	amounts due or received from them) Costina 4047(-V4) non-prompt charitable trusts to the exceptation filing Form 900 in liquid Form 10412	120		-					
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes." enter the amount of tax-exempt interest received or accrued during the year	12a		 					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120	-	 					
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	 	 					
1.	Note. See the instructions for additional information the organization must report on Schedule O			l					
Ø	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			İ					
_		1	}						
	Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year?	14a	 -	X					
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a	<u> </u>						
	ii Tes, nas it nieu a Fonn 720 to report triese payments 7 1710, provide an explanation in Schedule O		990	(2016)					
		. 0111	. 555	(20.0)					

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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 or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
900	non A. doverning body and management		Yes	No
1.	Enter the number of voting members of the governing body at the end of the tax year 1a 8	Г	163	140
Ia	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.			
	Enter the number of voting members included in line 1a, above, who are independent 1b	ł		1
ь	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		
2	officer, director, trustee, or key employee?	2		х
2	Did the organization delegate control over management duties customarily performed by or under the direct supervision	-		 ^* -
3	of officers, directors, or trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
_	Did the organization have members of stockholders, or other persons who had the power to elect or appoint one or	-		 -
10	more members of the governing body?	7a		х
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	- -		 -
	persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	اٽ ا		
а	The governing body?	8a	X	l
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 reached 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 Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
_	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990		13.50	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	ļ
13	Did the organization have a written whistleblower policy?	13	Х	
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 approval by independent	,		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	İ		
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	Х	
	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 arrangement with a	j	İ	
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	'		1
	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 (Section 501(c)(3)s only)	availal	ole	
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finar	ncial	
	statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	JOHN FONG - 415-274-6750			
	17 WALTER U LUM PLACE, SAN FRANCISCO, CA 94108			

Form 990 (2016)	CHINESE					94-2161304	Page 7
Part VII Compensation	of Officers,	Direct	tors, Trus	tees, Ke	y Employees,	Highest Compensated	
Employees, ar	nd Independe	ent Co	ntractors				

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

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

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

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

(A)	(B)	T ga	111126		C)	прс	1340	(D)	(E)	(F)
Name and Title	Average hours per	Position (do not check more than one box, unless person is both an						Reportable compensation	Reportable compensation	Estimated amount of
	week (list any	offic	officer and a dire			or/trus	tee)	from the	from related organizations	other compensation
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) RAYMOND SHEEN	2.00	=	=_	٥	<u> </u>	I = 6	Ψ.			
SECRETARY		x						0.	0.	0.
(2) CELIA LEE	2.00									
CHAIR PERSON		x				Ì		0.	0.	0.
(3) VICTORIA WONG	2.00									
TREASURER		X				L_		0.	0.	0.
(4) JEFF CHANG	2.00									
TRUSTEE		X		L				0.	0.	0.
(5) CHRISTOPHER JOSCON	2.00									
TRUSTEE		Х			ļ	<u> </u>	$ldsymbol{f eta}$	0.	0.	0.
(6) DANIEL LEE	2.00	ا _ ا			1	Ì	İ			
TRUSTEE		X	L	<u> </u>	<u> </u>	├-	┞-	0.	0.	0.
(7) LISA LEE	2.00	ا ۔۔ ا					ļ			
TRUSTEE		Х	ļ	<u> </u>	ļ	├-	_	0.	0.	0.
(8) GERMANIE Q WONG	2.00	ا , , ا		ļ	l	}				
TRUSTEE	40 00	X	 		 		├	0.	0.	0.
(9) JOHN FONG	40.00	-		x	ļ		ļ	97,579.	0.	0.
ASSOCIATE DIRECTOR	40.00	┼—	-	^		├-	├-	31,313.	· · · · · · · · · · · · · · · · · · ·	·
(10) VINCENT PAN EXECUTIVE DIRECTOR	40.00	{		x		ļ		100,458.	0.	0.
(11) CYNTHIA CHOI	40.00	\vdash			† –	T	Т		1	<u> </u>
STAFF			<u> </u>	X		_		82,262.	0.	0.
	<u> </u>	┨								
		<u> </u>		-	\vdash	\vdash	 			
		 	<u> </u>		<u> </u>		<u> </u>			
										
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	<u> </u>	Щ	<u>L</u> _		I	1			L	5 - 000 (0010

rai	VII Section A. Officers, Directors, Trus		olq	ees		_	ghe	st C	T					
	(A)	(B)			-	(C)			(D)	(E)			(F)	
	Name and title	Average	Position (do not check more than one box, unless person is both an						Reportable	Reportable	I			
		hours per week		cer ar					compensation from	compensation from related	I) †
		(list any	Stor						the	organization			ou ler pensa	tion
		hours for	or dire				ם	ĺ	organization	(W-2/1099-MIS			om the	
		related organizations)Stee 0	trustec			beusa		(W-2/1099-MISC)		ĺ	-	anızatı	
		below	inal tri	tonal		ploye	ye a	_			ļ		d relate Inizatio	
		line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Forme			i	orga	ii iiZalii	<i>J</i> 113
			一	 -	_		-							
			<u> </u>			i								
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		<u> </u>												
1b	Sub-total							▶	280,299.		0.			0.
С	Total from continuation sheets to Part V	II, Section A						▶	0.		0.			0.
d	Total (add lines 1b and 1c)							<u> </u>	280,299.		0.			0.
2	Total number of individuals (including but r	not limited to th	ose	liste	ed a	bov	e) w	ho r	eceived more than \$100	,000 of reportab	le			1
	compensation from the organization	-						_					Yes	No
3	Did the organization list any former officer,	director or tri	ısto	م لام	av er	mole	\\AA	or	highest compensated e	mnlovee on			103	
	line 1a? If "Yes," complete Schedule J for s			C, KC	.y C1	пріс	Јусс	, 01	riigiicat compensated c	inployee on		3		X
4	For any individual listed on line 1a, is the si			omp	ensa	atior	n an	d ot	her compensation from	the organization				
	and related organizations greater than \$15	0,000 <i>? lf "Yes,</i>	" cc	mpl	ete S	Sch	edul	e J	for such individual	J		4		X
5	Did any person listed on line 1a receive or							relat	ted organization or indiv	idual for services	3			
	rendered to the organization? If "Yes," com	nplete Schedul	e J	for s	uch	pers	son					5		<u>X</u>
	tion B. Independent Contractors		, -							4400 222 :	 		,	
1	Complete this table for your five highest countries organization. Report compensation for	•									npens	ation 1	rom	
	(A)	trie Caleridar y	ear	enai	ing v	VILII	Ot V	71(1)()	(B)	year.		((<u></u> -	
	Name and business	address	N	ONI	E			l	Description of s	services	c	ompe		n
											_			
											 			
		<u> </u>						-		·				
											[
2	Total number of independent contractors (including but r	ot li	mite	d to	tho	se l	ste	d above) who received r	nore than		٠,		
	\$100,000 of compensation from the organ	zation 🕨					0_				L	<u> </u>		
												Form	aga /	2016

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 Related or Unrelated Total revenue exempt function business sections 512 - 514 revenue revenue 1 a Federated campaigns 1a Membership dues 1b 142,890. Fundraising events 1c 1d d Related organizations e Government grants (contributions) 1e All other contributions, gifts, grants, and ,156,696 similar amounts not included above Noncash contributions included in lines 1a-1f \$ 299,586 Total. Add lines 1a-1f Business Code 900099 1,501,527.1,501,527. CONTRACTS All other program service revenue 1,501,527. Total. Add lines 2a-2f Investment income (including dividends, interest, and 14,103. 14,103. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties 5 (ı) Real (ii) Personal 6 a Gross rents b Less rental expenses Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of 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 \$ contributions reported on line 1c) See Part IV, line 18 **b** Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less' cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 13,248 13,248. OTHER INCOME 900099 11 a d All other revenue 13,248. Total, Add lines 11a-11d 828,464.1,514,775. 0. 14,103. Total revenue. See instructions. Form 990 (2016) Form 990 (2016) CHINESE FOR AFFIRMATIVE ACTION

Part IX Statement of Functional Expenses

Secti	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		this Part IX	731	
	not include amounts reported on lines 6b, Bb, 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 domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				•
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign	}		}	
	organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16		}	-	
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified			1	
	persons (as defined under section 4958(f)(1)) and			}	
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	965,073.	771,306.	89,518.	104,249.
8	Pension plan accruals and contributions (include			1	
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	124,612.	98,761.	11,950.	13,901.
10	Payroll taxes	71,231.	56,739.	6,695.	7,797.
11	Fees for services (non-employees)		}	}	
а	Management				
b	Legal	20,650.	20,650.		
C	Accounting	20,650.	20,030.		
	Lobbying		·		
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees Other (If line 11g amount exceeds 10% of line 25,				
g	column (A) amount, list line 11g expenses on Sch 0.)	j			
12	Advertising and promotion				
13	Office expenses	55,147.	54,071.	268.	808.
14	Information technology				
15	Royalties			·	
16	Occupancy	62,295.	61,325.		970.
17	Travel	20,236.	20,122.	70.	44.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	8,259.	8,182.		77.
20	Interest				
21	Payments to affiliates		· 		
22	Depreciation, depletion, and amortization	16,543.		16,543.	
23	Insurance	9,168.	9,168.		
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)				11
_	amount, list line 24e expenses on Schedule 0.) SUBCONTRACTORS	616,714.	616,714.	 	
a b	CONSULTANTS	269,972.	263,072.		6,900.
υ O	FEES & LICENSES	38,125.	29,203.	968.	7,954.
d	FOOD & CATERING	35,036.	18,831.	597.	15,608.
e e		100,620.	31,923.	30,682.	38,015.
25	Total functional expenses. Add lines 1 through 24e	2,413,681.	2,060,067.	157,291.	196,323.
26	Joint costs. Complete this line only if the organization	<u> </u>			
-0	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				

Pai	t X	Balance Sheet					
		Check if Schedule O contains a response or not	te to any line	in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			254,633.	1	390,193.
	2	Savings and temporary cash investments		[499,566.	2	299,978.
	3	Pledges and grants receivable, net		f		3	188,823.
	4	Accounts receivable, net		4	207,221.		
	5	Loans and other receivables from current and fo					
		trustees, key employees, and highest compensations	j	ſ			
		Part II of Schedule L		1		5	
	6	Loans and other receivables from other disquali	fied persons	(as defined under			
Ì		section 4958(f)(1)), persons described in section			ļ	l	
		employers and sponsoring organizations of sect	j	ļ			
S.		employees' beneficiary organizations (see instr)	i i		6		
Assets	7	Notes and loans receivable, net	{		7		
Ä	8	Inventories for sale or use			8		
	9	Prepaid expenses and deferred charges		[27,501.	9	52,593.
	10a	Land, buildings, and equipment cost or other	1 1				
		basis Complete Part VI of Schedule D	10a	1,607,305.	ł	- 1	
	b	Less accumulated depreciation	105	627,592.	211,488.	10c	979,713.
	11	Investments - publicly traded securities		ļ	260,319.	11	200,000.
	12	Investments - other securities See Part IV, line		12			
	13	Investments - program-related See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11		442,628.	15	0.	
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)		1,696,135.	16	2,318,521.
	17	Accounts payable and accrued expenses		224,029.	17	431,632.	
	18	Grants payable		18			
	19	Deferred revenue	}		19		
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete				21	
es	22	Loans and other payables to current and former			-		`
Liabilities		key employees, highest compensated employee	es, and disqu	ialified persons	r		*
Lial		Complete Part II of Schedule L				22	<u></u>
	23	Secured mortgages and notes payable to unreli	· ·			23 24	
	24	Unsecured notes and loans payable to unrelate Other habilities (including federal income tax, pa			 	24	
	25	parties, and other liabilities not included on lines	•	1			
	1	Schedule D	3 17-24) 001	ipiete i art x oi	1	25	
	26	Total liabilities. Add lines 17 through 25		į	224,029.	26	431,632.
	20	Organizations that follow SFAS 117 (ASC 958	8), check her	e X and			
Ś	}	complete lines 27 through 29, and lines 33 ar				` .	}
JCe	27	Unrestricted net assets			589,889.	27	1,309,761.
ala	28	Temporarily restricted net assets			682,217.	28	377,128.
d B	29	Permanently restricted net assets			200,000.	29	200,000.
Ë	l	Organizations that do not follow SFAS 117 (A	ASC 958), ch	eck here 🕨 🗔	, ,		
ŏ	(and complete lines 30 through 34.				1	Í
sts	30	Capital stock or trust principal, or current funds	S		<u> </u>	30	
SSE	31	Paid-in or capital surplus, or land, building, or ed	d		31		
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in				32	
ž	33	Total net assets or fund balances			1,472,106.	33	1,886,889.
	34	Total liabilities and net assets/fund balances			1,696,135.	34	2,318,521.
				- — — 			Form 990 (2016)

Form	990 (2016) CHINESE FOR AFFIRMATIVE ACTION	94-	<u> 2161304</u>	Pa	ge 12
Pai	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	2,82	8,4	64.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,41		
3	Revenue less expenses Subtract line 2 from line 1	3			83.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,47	2,1	06.
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,		4 00		
	column (B))	10	1,88	6,8	89.
Pai	t XII Financial Statements and Reporting				X
	Check if Schedule O contains a response or note to any line in this Part XII			Ι.,	No.
	Accounting method used to prepare the Form 990		r	Yes	NO
1					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			х
2a	, , , ,		2a	-	1
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a]	, ,
	separate basis, consolidated basis, or both		l		-
	Separate basis Consolidated basis Both consolidated and separate basis			x	
b	Were the organization's financial statements audited by an independent accountant?		2b	1-2	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,	-	İ	
	consolidated basis, or both X Separate basis Consolidated basis Both consolidated and separate basis			ļ	1
		فالمنتمين			`
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,	2c	x	1
	review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Sch	مطینام ۸			
٥.	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si		_		
за		ngle Auc	" За		X
_	Act and OMB Circular A-133? If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required.	ured and		 	+
O	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	meu auu	"" 3b		
	or addits, explain why in Schedule O and describe any steps taken to undergo such addits			990	(2016)
			1.011	, 550	(2010)

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.

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

OMB No 1545-0047

2016
Open to Public

Inspection

Employer identification number Name of the organization CHINESE FOR AFFIRMATIVE ACTION 94-2161304 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 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 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) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions) Enter the name, city, and state of the college or university An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 10 l 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). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or 12 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) Is the organization listed (iii) Type of organization (v) Amount of monetary (vi) Amount of other (i) Name of supported (ii) EIN iñ vaur aovernina document (described on lines 1-10 support (see instructions) support (see instructions) organization Yes above (see instructions))

Schedule A (Form 990 or 990-EZ) 2016 CHINESE FOR AFFIRMATIVE ACTION 94-2161304 Page 2

Part II Support Schedule for Organizations Described in Sections 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) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not	ł į					
	ınclude any "unusual grants ")	750,720.	1107126.	1257001.	886,230.	1299586.	5300663.
2	Tax revenues levied for the organ-					-	
	ization's benefit and either paid to	}					
	or expended on its behalf						
3	The value of services or facilities	!				1	
	furnished by a governmental unit to						
	the organization without charge					· · · · · · · · · · · · · · · · · · ·	
4	Total. Add lines 1 through 3	750,720.	1107126.	1257001.	886,230.	1299586.	5300663.
5	The portion of total contributions						
	by each person (other than a	j .			~	-	
	governmental unit or publicly			_ ,			
	supported organization) included	' '		1			
	on line 1 that exceeds 2% of the		-		İ		
	amount shown on line 11,				1	``	
	column (f)	L			-	,	
	Public support. Subtract line 5 from line 4		<u></u>	<u> </u>	<u> </u>	<u> </u>	5300663.
	ction B. Total Support			 			
	endar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	750,720.	1107126.	1257001.	886,230.	1299586.	5300663.
8	Gross income from interest,				}		ļ
	dividends, payments received on	}				}	
	securities loans, rents, royalties	20 257	25 772	67 705	E1 764	14 102	170 700
	and income from similar sources	20,357.	25,773.	67,705.	51,764.	14,103.	179,702.
9	Net income from unrelated business	ł		}	}	ł	
	activities, whether or not the	}	į	Í	l	}	}
	business is regularly carried on			 		 	
10	Other income Do not include gain	}		}	}	ł	
	or loss from the sale of capital	10 513	17 005	11 464	20 407	12 240	101 707
	assets (Explain in Part VI)	19,513.	17,985.	11,464.	39,497.	13,248.	101,707. 5582072.
	Total support. Add lines 7 through 10	L		<u> </u>	-	 	3364074.
12	Gross receipts from related activities	•				12	
13	First five years. If the Form 990 is fo	=	s first, second, thii	d, fourth, or fifth t	ax year as a section	on 501(c)(3)	
50	organization, check this box and storection C. Computation of Pub	o nere lic Support Pe	rcentage				
				notume (ft)		14	94.96 %
	Public support percentage for 2016 (column (I))			
	Public support percentage from 2015				14 : 22 1/20/ 25	15	
168	a 33 1/3% support test - 2016. If the	•			14 18 33 1/3% 01 1	nore, check this b	ox and ▶\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	stop here. The organization qualifies 33 1/3% support test - 2015. If the		-		d line 15 in 22 1/20	4 or more shock t	
					1 III le 13 is 33 1/3/	o or more, check t	I IIS DOX
47.	and stop here. The organization qua a 10% -facts-and-circumstances tes	• -			a 12 16a or 16h	and line 14 is 1004	or more
177	and if the organization meets the "fac	-	•				
	-					iit vi now the orga	I IIZation
	meets the "facts-and-circumstances"	=			=	17a and line 15 in	10% or
1	 10% -facts-and-circumstances tes more, and if the organization meets t 	•	-				
	organization meets the "facts-and-cir						~ □
10	Private foundation. If the organization		-	•			
18	Frivate foundation. If the organization	on did not check a	DOX OF HIR 13, 10	,a, 100, 17a, 01 17			0 or 990-EZ\ 2016

Schedule A (Form 990 or 990 EZ) 2016 CHINESE FOR AFFIRMATIVE ACTION Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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)

Sec	tion A. Public Support	elow, please com	piete i art ii j				
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Gifts, grants, contributions, and	__\					
	membership fees received (Do not	1					
i	include any "unusual grants ")	<u> </u>					
2	Gross receipts from admissions,	 					
	merchandise sold or services per- formed, or facilities furnished in	1					
	any activity that is related to the	İ				İ	
	organization's tax-exempt purpose	<u> </u>					
3	Gross receipts from activities that	1					
	are not an unrelated trade or bus-	I					
- 1	iness under section 513						
4	Tax revenues levied for the organ-	Į					
- 1	zation's benefit and either paid to						
4	or expended on its behalf					ļ	
5	The value of services or facilities						
	furnished by a governmental unit to	I					
•	the organization without charge					 	
	Total. Add lines 1 through 5					ļ	
	Amounts included on lines 1, 2, and	I				ł	
	3 received from disqualified persons						
-	Amounts included on lines 2 and 3 received from other than disqualified persons that	I					
	exceed the greater of \$5,000 or 1% of the	I					
	amount on line 13 for the year						
	Add lines 7a and 7b					<u> </u>	
	Public support. (Subtract line 7c from line 6.)		<u> </u>		,	<u> </u>	
	tion B. Total Support		1 "		(1) 0045	T () 5045	T (0.7.1.
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 6			<u> </u>	 	 	+
	Gross income from interest, dividends, payments received on	I	•	1			
	securities loans, rents, royalties	į	1				
	and income from similar sources		-		-		
-	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975	1					
						<u> </u>	
	Add lines 10a and 10b Net income from unrelated business						
	activities not included in line 10b,					İ	
	whether or not the business is	I					
	regularly carried on Other income Do not include gain				 		
	or loss from the sale of capital			į			
	assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12)	<u> </u>					
	First five years. If the Form 990 is for	r the organization'	e first second thu	rd fourth or fifth t	av vear as a secti	on 501(c)(3) ord	anization
	check this box and stop here	the organization :	s mst, second, tim	ra, iourtii, or intii t	ax year as a secu	on sor(c)(s) org	artization,
	tion C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2016 (l			column (fl)		15	%
	Public support percentage from 2015			(7)		16	%
	tion D. Computation of Inves						
	Investment income percentage for 20					17	%
	Investment income percentage from			, (1))		18	%
	33 1/3% support tests - 2016. If the			on line 14, and lin	e 15 is more than	L	
	more than 33 1/3%, check this box a	-					▶ □
	33 1/3% support tests - 2015. If the		-				% , and
	line 18 is not more than 33 1/3%, che						
	Private foundation. If the organization						

Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?
 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

ا	Yes	No
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3b		
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9a	} _	
	}	
9b	├	├
9c		1
30	 	
	1	1
10a		
3744	1	
10b	1	1

Sche	dule A (Form 990 or 990 EZ) 2016 CHINESE FOR AFFIRMATIVE ACTION 9	4-216130	4 Pa	age 5
Pai	t IV Supporting Organizations _(continued)			
	· · · · · · · · · · · · · · · · · · ·	,	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	} _		
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	1	}	
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	<u> </u>	L
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	}		
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	Ì		
	tax year? If *No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	1]	
	controlled the organization's activities If the organization had more than one supported organization,	1		
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported		, ;	
_	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	<u> </u>	 	<u> </u>
2	Did the organization operate for the benefit of any supported organization other than the supported		j '	' *
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	l		'
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		1	}
800	supervised, or controlled the supporting organization	2	li	L
Sec	tion C. Type II Supporting Organizations		1 1/	
4	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	<u> </u>	Yes	No
1	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	}	1	•
	or management of the supporting organization was vested in the same persons that controlled or managed			1
	the supported organization(s)	1	1	ł
Sec	tion D. All Type III Supporting Organizations	 _	L	L
360	tion b. All Type in oupporting organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	[163	140
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax		ł	ł
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	1		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	ł	1
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		 	1
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	ļ	1	}
	the organization maintained a close and continuous working relationship with the supported organization(s)	2	•	1
3	By reason of the relationship described in (2), did the organization's supported organizations have a	- -	\vdash	
·	significant voice in the organization's investment policies and in directing the use of the organization's	1	1	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	}	ł	}
	supported organizations played in this regard	3	}	ļ
Sec	tion E. Type III Functionally Integrated Supporting Organizations			L
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instru	ctions).		
а	The organization satisfied the Activities Test Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity	(see instruction	s)	
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	\ -		
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	ł	İ	
	those supported organizations and explain how these activities directly furthered their exempt purposes,	}	1	
	how the organization was responsive to those supported organizations, and how the organization determined	\· .	į.	
	that these activities constituted substantially all of its activities	2a	<u></u>	1
ь	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			.
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	1	1	
	reasons for the organization's position that its supported organization(s) would have engaged in these	}	1	1
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
a		}		1 .
	trustees of each of the supported organizations? Provide details in Part VI.	3a	<u> </u>	<u>L</u>
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			1
_	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		
		(Form 990 or 9	100 E3	1 0016

	dule A (Form 990 or 990-EZ) 2016 CHINESE FOR AFFIRMATIVE			94-2161304 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting			 _
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust o	n Nov. 20, 1970 (explain ir	n Part VI) S ee instructions. Al
	other Type III non-functionally integrated supporting organizations must co	mplete S	Sections A through E	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or))		1
	maintenance of property held for production of income (see instructions)	6		_
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see		- ,	
	instructions for short tax year or assets held for part of year)			<u> </u>
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		<u> </u>
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other	'	*	
	factors (explain in detail in Part VI)			<u> </u>
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,	- [
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8	· · · · · · · · · · · · · · · · · · ·	
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		`
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		,
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functiona	ily integr	ated Type III supporting of	rganization (see

Schedule A (Form 990 or 990-EZ) 2016

instructions)

Schedule A (Form 990 or 990-EZ) 2016 CHINESE FOR AFFIRMATIVE ACTION 94-2161304 Page 7 Part V | Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) **Current Year** Section D - Distributions Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI) See instructions 6 Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions Distributable amount for 2016 from Section C, line 6 Line 8 amount divided by Line 9 amount (i) (iii) Underdistributions Distributable **Excess Distributions** Pre-2016 Amount for 2016 Section E - Distribution Allocations (see instructions) Distributable amount for 2016 from Section C, line 6 Underdistributions, if any, for years prior to 2016 (reasonable cause required explain in Part VI) See instructions Excess distributions carryover, if any, to 2016 а b c From 2013 d From 2014 e From 2015 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2016 distributable amount i Carryover from 2011 not applied (see instructions) Remainder Subtract lines 3g, 3h, and 3i from 3f Distributions for 2016 from Section D, a Applied to underdistributions of prior years **b** Applied to 2016 distributable amount c Remainder Subtract lines 4a and 4b from 4 Remaining underdistributions for years prior to 2016, if any Subtract lines 3g and 4a from line 2 For result greater than zero, explain in Part VI See instructions 6 Remaining underdistributions for 2016 Subtract lines 3h and 4b from line 1 For result greater than zero, explain in Part VI See instructions Excess distributions carryover to 2017. Add lines 3] and 4c 8 Breakdown of line 7 b Excess from 2013 c Excess from 2014 d Excess from 2015

e Excess from 2016

Part VI	Supplemental Informate Part IV, Section A, lines 1, 2, 3 line 1; Part IV, Section D, lines Section D, lines 5, 6, and 8, an See instructions)	ion. Provide the explar b, 3c, 4b, 4c, 5a, 6, 9a, 9 2 and 3, Part IV, Section	nations required by 9b, 9c, 11a, 11b, ar n E, lines 1c, 2a, 2b	Part II, line 10, Par nd 11c, Part IV, Sec , 3a, and 3b, Part V	t II, fine 17a or 17b, F stion B, lines 1 and 2 I, line 1, Part V, Sect	!, Part IV, Section C, ion B, line 1e, Part V.
PART II	, LINE 10 - OT	HER INCOME			·	··
NATURE	& SOURCE	2016	2015	2014	2013	2012
OTHER C	ONTRUBITIONS	\$13,248	\$39,497	\$11,464	\$17,985	\$19,513
		·····				

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

QU 10
Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A. Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

•	Section 501(c)(4), (5), or (6) organiza	tions Complete Part III			
	ne of organization			Emplo	oyer identification number
		FOR AFFIRMATIVE			94-2161304
Pa	art I-A Complete if the org	ganization is exempt und	der section 501(c)	or is a section 527 o	rganization.
	Provide a description of the organia	•	cal campaign activities	ın Part IV ►\$	
	Volunteer hours for political campa			Ť	
	voice.	.56		•	
Pε	art I-B Complete if the org	ganization is exempt und	der section 501(c)	(3).	
1	Enter the amount of any excise tax			▶ \$	0.
2	Enter the amount of any excise tax	incurred by organization manag	ers under section 495	5 ▶\$	0.
3	If the organization incurred a section	n 4955 tax, did it file Form 4720) for this year?		Yes No
48	Was a correction made?				Yes No
	olf "Yes," describe in Part IV				
Pa	art I-C Complete if the org	ganization is exempt und	der section 501(c)		c)(3).
1	Enter the amount directly expended	d by the filing organization for se	ection 527 exempt fund	ction activities > \$	
2	Enter the amount of the filing organ	nization's funds contributed to o	ther organizations for s		
	exempt function activities			▶\$	
3	Total exempt function expenditures	s Add lines 1 and 2 Enter here	and on Form 1120-POL		
	line 17b			▶\$	
	Did the filing organization file Form				Yes No
5	Enter the names, addresses and er made payments. For each organization		•	•	
	contributions received that were pr	•			•
	political action committee (PAC) If	• •			are cognogator fame of a
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(a) Name	(b) Address	(C) LIN	filing organization's	contributions received and
				funds If none, enter -0-	promptly and directly
					delivered to a separate political organization
					If none, enter -0
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For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2016

LHA

Schedule C (Form 990 or 990-EZ) 2016 (Part II-A Complete if the organization)	CHINESE I	FOR exem	AFFIRMATIVI pt under section	E ACTION 1 501(c)(3) and fil	94-2 ed Form 5768 (el	161304 Page 2 ection under
section 501(h)).			·			
				Part IV each affiliated	group member's nam	e, address, EIN,
expenses, and share		, ,	•			
Limit	s on Lobbying I	Expend	"Ilmited control" pro litures ts paid or incurred.)	visions apply	(a) Filing organization's totals	(b) Affiliated group totals
					842.	
1a Total lobbying expenditures to influ			•		33,010.	
 b Total lobbying expenditures to influ c Total lobbying expenditures (add lir 	-	е вобу	(direct lobbying)		33,852.	
, , ,	•				- 33,032.	
d Other exempt purpose expenditure		nd 1d)			33,852.	
e Total exempt purpose expenditures f Lobbying nontaxable amount Ente			following table in both	columne	6,770.	·
If the amount on line 1e, column (a) or			ing nontaxable amo			
			e amount on line 1e	June is.	-	
Not over \$500,000			plus 15% of the exce	200 Byor \$500 000		-
Over \$500,000 but not over \$1,000						,
Over \$1,000,000 but not over \$1,50			plus 10% of the exces			
Over \$1,500,000 but not over \$17,0				ss over \$1,500,000	-1	
Over \$17,000,000	1 21	,000,00				
g Grassroots nontaxable amount (ent	ter 25% of line 1	n			1,693.	
h Subtract line 1g from line 1a If zero					0.	
i Subtract line 1f from line 1c If zero					27,082.	
i If there is an amount other than zer			e 1) did the organiza	ition file Form 4720		
reporting section 4911 tax for this y			.o .,, a.eeg		[Yes X No
(Some organizations th	4-Yea at made a sect	ion 501	aging Period Under I(h) election do not l e instructions for lin	have to complete all	of the five columns b	
	Lobbying I	Expend	litures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2013		(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount	253,5	26.	260,166.	260,148.	6,770.	780,610.
b Lobbying ceiling amount (150% of line 2a, column(e))	_ ·			···	-	1,170,915.
c Total lobbying expenditures	18,1	02.	2,928.	13,635.	33,852.	68,517.
d Grassroots nontaxable amount	63,3	82.	65,042.	65,037.	1,693.	195,154.
e Grassroots ceiling amount						
(150% of line 2d, column (e))	<u> </u>			<u> </u>		292,731.
f Grassroots lobbying expenditures			1,597.	1,491.	842.	3,930.

Schedule C (Form 990 or 990-EZ) 2016 CHINESE FOR AFFIRMATIVE ACTION 94-216130 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	or each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
	e lobbying activity	Yes	No	Amo	ount	
1	During the year, did the filing organization attempt to influence foreign, national, state or					
	local legislation, including any attempt to influence public opinion on a legislative matter					
_	or referendum, through the use of		1			
	Volunteers?					
c	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?	ļ <u></u>	L			
f	Grants to other organizations for lobbying purposes?			·- ·-		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	ļ				
i	Other activities?					
j	Total Add lines 1c through 1i					
2 a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	<u> </u>	ļ		<u> </u>	
	If "Yes," enter the amount of any tax incurred under section 4912		- '			
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				·	
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? t III-A Complete if the organization is exempt under section 501(c)(4), sect	ion 501(c)	(5), or se	ction		
	501(c)(6).			_ _		
				Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?		1			
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		_2			
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from t III-B Complete if the organization is exempt under section 501(c)(4), sect					
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	d "No," O 		t III-A, lir	ne 3, is	
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures).	icai				
_	expenses for which the section 527(f) tax was paid).		2-	i		
	Current year		2a			
	Carryover from last year		2b		-	
_	Total		2c 3			
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex-	vcess	ا ا			
4	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and		1			
	expenditure next year?	political	4			
_	Taxable amount of lobbying and political expenditures (see instructions)		5			
	t IV Supplemental Information					
	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grounds)	in list\ Dart	II.A lines 1	and 2 (see		
	actions), and Part II-B, line 1. Also, complete this part for any additional information	1p 113ty, 1 art	177, 11103 1	and 2 (300		
mstr	actions), and Fart ind, line 1. Also, complete this part for any additional information					
				 -		
			· · · · · · · · · · · · · · · · · · ·			
		 				

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

Open to Public

Inspection

Name of the organization Employer identification number CHINESE FOR AFFIRMATIVE ACTION 94-2161304 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) 4 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 No impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure □ 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 Held at the End of the Tax Year day of the tax year. a Total number of conservation easements 2a 2b b Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) d 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 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, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, 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) 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on 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) Revenue included on 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 Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

		FOR AFFIR								Page 2
Pai	t III Organizations Maintaining C	ollections of A	rt, His	torical Tr	easures, c	or Othe	er Simil	ar Asse	ts(continu	ıed)
3	Using the organization's acquisition, accessi	on, and other record	ds, checi	k any of the	following tha	t are a s	ignificant	use of its	collection	rtems
	(check all that apply)									
а	Public exhibition	d		Loan or exc	hange progra	ams				
b	Scholarly research	e		Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how th	ney further t	he organizati	on's exe	mpt purp	ose in Par	t XIII	
5	During the year, did the organization solicit of	r receive donations	of art, hi	storical trea	sures, or oth	er sımıla	r assets	,	- ,	
	to be sold to raise funds rather than to be ma								Yes	<u> </u>
Par	t IV Escrow and Custodial Arran	-	ete if the	organizatio	n answered '	'Yes" on	Form 99	0, Part IV,	line 9, or	
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contribution	s or other as	sets not	included	· -	٦	
	on Form 990, Part X?							L	J Yes	L No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing 1	table				·		
								ļ	Amount	
	Beginning balance						1c	<u></u>		
	Additions during the year		,				1d	 		
_	Distributions during the year						1e			
f	Ending balance	000 D-+V b	01 5				1 <u>f</u>		TV	T 1
	Did the organization include an amount on F						-	L	」 Yes	⊢ No
Pai	If "Yes," explain the arrangement in Part XIII t V Endowment Funds. Complete i									<u> </u>
1 41	Endownient ands. Complete				(c) Two year	$\overline{}$		years back	(a) Four	years back
1.	Beginning of year balance	(a) Current year	(0)	Prior year	(C) I WO YOU	3 buck	(d) Tilled	yours back	(e) roui	ycars back
1a h	Contributions				 					
0					 				<u> </u>	
ن	Net investment earnings, gains, and losses Grants or scholarships				 				 	
d	Other expenditures for facilities		 		 				 	
E	and programs					1			ļ	
f	Administrative expenses								 	
, g	End of year balance		<u> </u>						 	
2	Provide the estimated percentage of the cur	rent year end balanc	ce (line 1	a. column (a)) held as				<u></u>	
a	Board designated or quasi-endowment	one your one building	%	9,	-,,					
	Permanent endowment	%								
	Temporarily restricted endowment									
•	The percentages on lines 2a, 2b, and 2c sho									
За	Are there endowment funds not in the posse		ation the	at are held a	and administe	ered for t	the organ	ızatıon		
	by	_								Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(iı)	
b	If "Yes" on line 3a(ii), are the related organiza	ations listed as requi	red on S	Schedule R?	,				3b	
4	Describe in Part XIII the intended uses of the		owment	funds						
Pa	t VI Land, Buildings, and Equipn	nent.								
	Complete if the organization answere	d "Yes" on Form 99	0, Part I	V, line 11a	See Form 990	O, Part X	, line 10.			
	Description of property	(a) Cost or o			t or other		ccumulat	L L	(d) Book	value
		basis (investi	ment)		(other)		preciation	1		
1a	Land	<u> </u>			9,731.		<u> </u>			731.
b	Buildings	<u> </u>		57	4,636.		547,5	24.	2	7,112.
C	Leasehold improvements	ļ		<u> </u>	0000	<u> </u>	40-			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	Equipment	ļ			30,820.		40,5			259.
	Other	!			2,118.	L	39,5	00/-		2,611.
Tota	l. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, colui	mn (B), line	10c)				97	713.

Schedule D (Form 990) 2016

	dule D (Form 990) 2016 CHINESE FOR AFFIRMATIVE		94-21	.61304 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Sta	tements With Revenue	e per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a		
1	Total revenue, gains, and other support per audited financial statements		1	2,828,464.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	2,828,464.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1 1	
b	Other (Describe in Part XIII)	4b		
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	2,828,464.
	t XII Reconciliation of Expenses per Audited Financial Sta			
	Complete if the organization answered "Yes" on Form 990, Part IV, line	·		•
		6 12a		2,413,681.
1	Total expenses and losses per audited financial statements		1	2,413,001.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 - 1	1 1	
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	2,413,681.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		1 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
ь	·	4b		
	Other (Describe in Part XIII) Add lines 4a and 4b		4c	0.
	Other (Describe in Part XIII) Add lines 4a and 4b	4b	4c 5	0. 2,413,681.
c 5	Other (Describe in Part XIII) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	4b		
5 Pai	Other (Describe in Part XIII) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 TXIII Supplemental Information.	4b 3)	5	2,413,681.
5 Pai	Other (Describe in Part XIII) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4	4b 3) 4, Part IV, lines 1b and 2b, Pa	5	2,413,681.
5 Pai	Other (Describe in Part XIII) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 TXIII Supplemental Information.	4b 3) 4, Part IV, lines 1b and 2b, Pa	5	2,413,681.
5 Pai	Other (Describe in Part XIII) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4	4b 3) 4, Part IV, lines 1b and 2b, Pa	5	2,413,681.
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5 Pai	Other (Describe in Part XIII) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4	4b 3) 4, Part IV, lines 1b and 2b, Pa	5	2,413,681.
5 Pai	Other (Describe in Part XIII) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4	4b 3) 4, Part IV, lines 1b and 2b, Pa	5	2,413,681.
5 Pai	Other (Describe in Part XIII) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4	4b 3) 4, Part IV, lines 1b and 2b, Pa	5	2,413,681.
5 Pai	Other (Describe in Part XIII) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4	4b 3) 4, Part IV, lines 1b and 2b, Pa	5	2,413,681.
5 Pai	Other (Describe in Part XIII) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4	4b 3) 4, Part IV, lines 1b and 2b, Pa	5	2,413,681.
5 Pai	Other (Describe in Part XIII) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4	4b 3) 4, Part IV, lines 1b and 2b, Pa	5	2,413,681.
5 Pai	Other (Describe in Part XIII) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4	4b 3) 4, Part IV, lines 1b and 2b, Pa	5	2,413,681.
5 Pai	Other (Describe in Part XIII) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4	4b 3) 4, Part IV, lines 1b and 2b, Pa	5	2,413,681.
5 Pai	Other (Describe in Part XIII) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4	4b 3) 4, Part IV, lines 1b and 2b, Pa	5	2,413,681.
5 Pai	Other (Describe in Part XIII) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4	4b 3) 4, Part IV, lines 1b and 2b, Pa	5	2,413,681.
5 Pai	Other (Describe in Part XIII) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4	4b 3) 4, Part IV, lines 1b and 2b, Pa	5	2,413,681.
5 Pai	Other (Describe in Part XIII) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4	4b 3) 4, Part IV, lines 1b and 2b, Pa	5	2,413,681.
5 Pai	Other (Describe in Part XIII) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4	4b 3) 4, Part IV, lines 1b and 2b, Pa	5	2,413,681.
5 Pai	Other (Describe in Part XIII) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4	4b 3) 4, Part IV, lines 1b and 2b, Pa	5	2,413,681.
5 Pai	Other (Describe in Part XIII) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4	4b 3) 4, Part IV, lines 1b and 2b, Pa	5	2,413,681.
5 Pai	Other (Describe in Part XIII) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4	4b 3) 4, Part IV, lines 1b and 2b, Pa	5	2,413,681.
5 Pai Provi	Other (Describe in Part XIII) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 t XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4	4b 3) 4, Part IV, lines 1b and 2b, Pa	5	2,413,681.

SCHEDULE M (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990.

Information about Schedule M (Form 990) and its instructions is at www irs.gov/form990.

Employer identification number

CHINESE FOR AFFIRMATIVE ACTION 94-2161304 Part I Types of Property (a) (b) (c) (d) Noncash contribution Number of Check if Method of determining contributions or applicable amounts reported on noncash contribution amounts tems contributed Form 990, Part VIII, line 1g Art - Works of art Art - Historical treasures Art · Fractional interests 3 Books and publications 5 Clothing and household goods Cars and other vehicles 6 Boats and planes 8 Intellectual property $\overline{\mathbf{x}}$ 47,411.STOCK CLOSING VALUE 9 Securities - Publicly traded 10 Securities - Closely held stock Securities - Partnership, LLC, or 11 trust interests 12 Securities - Miscellaneous 13 Qualified conservation contribution -Historic structures Qualified conservation contribution - Other 14 Real estate - Residential 15 Real estate - Commercial 16 Real estate - Other 17 Collectibles 18 X 62. 19 Food inventory Drugs and medical supplies 20 21 Taxidermy 22 Historical artifacts Scientific specimens 23 24 Archeological artifacts (GIFT CERTIFIC) 16 1,725. 25 Other GIANT TICKETS X 152. Other 26 27 Other 28 Other Number of Forms 8283 received by the organization during the tax year for contributions 29 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for X exempt purposes for the entire holding period? 30a b If "Yes," describe the arrangement in Part II X Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash Х contributions? 32a b If "Yes," describe in Part II If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, 33

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) (2016)

Schedule M	(Form 990) (2016) CH	TMESE LOP	C ALLIKWATIA	E ACTION		94-2161304	Page 2
Part II	Supplemental Info is reporting in Part I, co this part for any addition	ormation. Proviumn (b), the numinal information	ide the information requiber of contributions, th	uired by Part I, lines 3 ie number of items re	30b, 32b, and 33, a ceived, or a combir	nd whether the organi nation of both Also co	zation mplete
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Schedule M (Form 990) (2016)

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.

OMB No 1545-0047 U76 Open to Public

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 Inspection Name of the organization Employer identification number CHINESE FOR AFFIRMATIVE ACTION 94-2161304 FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: COMMUNITY SERVICE, POLICY ADVOCACY, AND MOVEMENT BUILDING ACTIVITES FORM 990 PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION API EQUALITY - NORTHERN CALIFORNIA CAA IS THE FISCAL SPONSOR FOR API EQUALITY NORTHERN CALIFORNIA. API EOUALITY IS COMMITTED TO WORKING WITHIN THE APT COMMUNITY FOR FAIR TREATMENT AND ACCEPTANCE OF LESBIAN , GAY , BISEXUAL AND TRANSGENDER (LGBT) PEOPLE. API EQUALITY ENGAGES IN PUBLIC EDUCATION, COMMUNITY ORGANIZING, AND LEGAL LEGISTLATIVE ADVOCACY. API EQUALITY'S GOALS ARE TWOFOLD : TO REDUCE AND ELIMINATE PREJUDICE AND OPPRESSION BASED ON GENDER AND/OR SEXUAL ORIENTATION IN THE DIVERSE ETHNIC COMMUNITIES OF THE API POPULACE; AND TO COMBAT AND ELIMINATE RACIAL-BASED OR XENOPHOBIC PREJUDICE AND OPPRESSION IN THE LGBTQ COMMUNITY FORM 990, PART VI, SECTION B, LINE 11B: SEE SCHEDULE O FORM 990, PART VI, SECTION B, LINE 12C:

SEE SCHEDUELE O

FORM 990 PART VI, LINE 15A- COMPENSATION REVIEW & APPROVAL PROCESS

THE EXECUTIVE COMMITTEE MAKES THE RECOMMENDATION FOR THE EXECUTIVE

DIRECTOR SALARY TO THE FULL BOARD OF DIRECTORS FOR APPROVAL. THE

DECISION IS BASED ON THE PERFORMANCE REVIEW OF THE EXECUTIVE DIRECTOR,

THE BOARD'S EXTENSIVE KNOWLEDGE AND EXPERIENCE WITH EXECUTIVE

COMPENSATION AT SIMILAR ORGANIZATIONS, COMPENSATION LEVELS OF PAST

EXECUTIVE DIRECTORS, AND COMPENSATION LEVELS OF OTHER STAFF.

ACCURATE FILING, A LIVE SIGNATURE BY THE EXECUTIVE DIRECTOR INDICATING

HIS/HER APPROVAL FOR FILING IS REQUIRED ON THE FORM 990 BEFORE

FORM 990, PART VI, LINE 15B-COMPENSATION REVIEW -OFFICERS & KEY EMPLOYEES

THE EXECUTIVE DIRECTOR DETERMINED AND APPROVED THE SALARY OF THE CHIEF

FINANCIAL OFFICER. THE DECISION IS BASED ON A PERFORMANCE REVIEW OF THE

CHIEF FINANCIAL OFFICER AND COMPENSATION LEVELS OF THE OTHER STAFF.

SUBMISSION

*Schedule O (Form 990 or 990-EZ) (2016)	Page 2
Name of the organization CHINESE FOR AFFIRMATIVE ACTION	Employer identification number 94-2161304
FORM 990, PART VI, LINE 19- OTHER ORGANIZATION DOCUMENTS PU	BLICLY AVAILABLE
THE ORGANIZATION'S GOVERNING DOCUMENTS, POLICIES AND FINAN	CIAL
STATEMENTS ARE MADE AVAILABLE UPON REQUEST.	
FORM 990, PART VI, LINE 12C- MONITORING AND ENFORECEMENT	OF CONFLICTS
ALL STAFF ARE TRAINED ON THE RECORD/DOCUMENT RETENTION, C	CONFLICT OF
INTEREST AND WHISTLEBLOWER PROTECTION POLICIES AS PART OF	INITIAL STAFF
ORIENTATION AND ANNUALLY AT STAFF MEETINGS. BOARD AND STA	AFF COMPLETE
THE CONFLICT OF INTEREST DISCLOSURES ON AN ANNUAL BASIS. IMPLEMENTATION	
OF POLICIES IS MONITORED BY SENIOR MANAGEMENT AND THE ADMINISTRATION	
AND FINANCE MANAGER. THE EXECUTIVE DIRECTOR WORKS WITH THE BOARD CHAIR	
ON THE ANNUAL FILING OF CONFLICT OF INTEREST. THE WHISTLE	EBLOWER
PROTECTION POLICY IS POSTED PROMINENTLY FOR ALL STAFF, PF	ROPER
IMPLEMENTAION IS SUPERVISED BY SENIOR MANAGEMENT SHOULD T	THE NEED ARISE.
	
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