

Form 990

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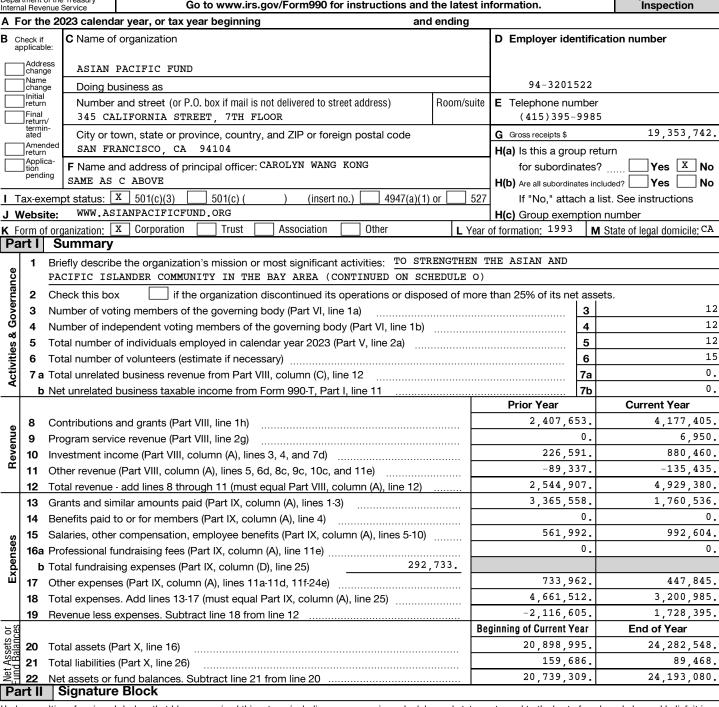
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Department of the Treasury

PUBLIC DISCLOSURE COPY Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information.



Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of off	ïcer				Date			
Here CAROLYN WANG KONG, EXECUTIVE DIRECTOR									
	Type or print na	ame and title							
	Print/Type prep	arer's name	Preparer's signature		Date		Check	PTIN	
Paid	BRIAN YACKE	R	BRIAN YACKER		11/12/24	1	it self-employed	P00401346	
Preparer	Firm's name	BAKER TILLY ADVISORY GROU	P, LP			Firm's	EIN 39-	0859910	
Use Only	Firm's address	18500 VON KARMAN AVE, 10T	H FLOOR						
		IRVINE, CA 92612			Phone	9 no.949.22	2.2999		
May the I	RS discuss this	return with the preparer shown abo	ve? See instructions					X Yes	No
I HA For	Paperwork Re	eduction Act Notice, see the separ	rate instructions.	332001 12-21-23				Form 99	0 (2023)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

OMB No. 1545-0047

Open to Public

	990 (2023) ASIAN PACIFIC FUND	94-3201522	Page 2
Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>	Х
1	Briefly describe the organization's mission:		
	TO STRENGTHEN THE ASIAN AND PACIFIC ISLANDER COMMUNITY IN THE BAY AREA		
	BY INCREASING PHILANTHROPY AND SUPPORTING THE ORGANIZATIONS THAT SERVE		
	OUR MOST VULNERABLE COMMUNITY MEMBERS.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	Yes	No X
	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? If "Yes," describe these changes on Schedule O.	Yes	No X
4	Describe the organization's program service accomplishments for each of its three largest program services, as m	neasured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others		
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$1,994,018. including grants of \$1,760,536.) (Revenue	e\$)
	GRANTS AND SCHOLARSHIPS TO NON-PROFIT ORGANIZATIONS SERVING THE BAY AREA'S MOST VULNERABLE ASIAN AND PACIFIC ISLANDERS - ASIAN PACIFIC FUND		
	DISTRIBUTED \$1,275,668.72 IN GRANTS TO ITS AFFILIATES. \$196,950 CAME		
	FROM DONOR ADVISED FUNDS TO A DIVERSE GROUP OF ASIAN ORGANIZATIONS IN		
	THE BAY AREA AND OTHER NON-PROFIT ORGANIZATIONS. THESE GRANTS SUPPORTED		
	CAPACITY BUILDING, LEADERSHIP DEVELOPMENT, CIVIC ENGAGEMENT,		
	FUNDRAISING, TECHNOLOGY AND INFRASTRUCTURE. THE FUND ALSO DISTRIBUTED		
	\$168,667 IN SCHOLARSHIPS TO 58 STUDENTS, ALL SUPPORTED BY INDIVIDUAL		
	DONORS.		
4b	(Code:) (Expenses \$	e \$)
	SERVICES FOR AFFILIATE ORGANIZATIONS - THIS INCLUDES HELPING 90+ SAN		
	FRANCISCO BAY AREA ORGANIZATIONS WITH TRAININGS, INFORMATION,		
	CONSULTATIONS, AND WORKSHOPS TO STRENGTHEN THEIR ORGANIZATIONAL		
	CAPACITY IN AREAS SUCH AS FUND DEVELOPMENT, DATA MANAGEMENT, PROGRAM		
	EXPANSION, AND SUCCESSION PLANNING. ALSO, THIS INCLUDES REGULAR OUTREACH TO POTENTIAL DONORS TO SHED LIGHT ON THE NEEDS OF OUR		
	AFFILIATE NONPROFIT ORGANIZATIONS.		
4c	(Code:) (Expenses \$221, 376. including grants of \$) (Revenue	 e \$	6,950.)
	API SUMMIT - THE EVENT BROUGHT TOGETHER 138 FOUNDATION, BUSINESS, MEDIA		
	AND GOVERNMENT LEADERS TO DISCUSS AND ADDRESS THE EMERGING NEEDS OF		
	ASIANS AND PACIFIC ISLANDERS IN THE BAY AREA.		
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ 28,630. including grants of \$) (Revenue \$)	
4e	Total program service expenses 2,474,448.	/	
		Form	990 (2023)
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Pa	rt 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? See instructions		Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in eff			
•	during the tax year? If "Yes," complete Schedule C, Part II			x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			<u> </u>
Ŭ	similar amounts as defined in Rev. Proc. 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			<u> </u>
0		art I 6	x	
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Pa			├──
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			x
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			x
-	Schedule D, Part III	8		
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 donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V		X	<u> </u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	,		
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D			
	Part VI	11a	Х	<u> </u>
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	<u>11b</u>		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	<u>11c</u>		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			X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	<u>11e</u>		X
f	5			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	<u>11f</u>	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12 a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional			X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	<u>14a</u>		X
b				
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	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
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. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	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			X
	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>			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		v	
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II		X 000	<u> </u>
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Form 990 (2023)

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Par	t IV Checklist of Required Schedules (continued)				
				Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individual	als 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 org				
20	and former officers, directors, trustees, key employees, and highest compensated employees? If " γ_e				
		s, complete	23	x	
24 2	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	\$100,000 as of the	25		
24a					
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24c		04-		x
	Schedule K. If "No," go to line 25a		24a		
	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	e 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				
	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				
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? //	"Yes," complete			
	Schedule L, Part I		25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any	current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%				
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II		26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trust	ee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member,	or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete S	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Sch	edule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):				
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contribut	or? If			
	"Yes," complete Schedule L, Part IV		28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		28b		X
с	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?	lf			
	"Yes," complete Schedule L, Part IV		28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedu	le M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	d conservation			
	contributions? If "Yes," complete Schedule M		30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Sched	ule 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 Regu	lations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		33		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		X
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	e 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	nization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 1	1b and 19?			
_	Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance		38	Х	
Par					
	Chaoli if Cahadula O contains a reasonance ar note to any line in this Bart V		<u></u>		
		1		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a 12			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portable gaming			
	(gambling) winnings to prize winners?		1c	Х	
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		(2023) ASIAN PACIFIC FUND Statements Decording Other IDS Filings and Tax Compliance		94-32015	22	F	⊃age 5
Par	ιv	Statements Regarding Other IRS Filings and Tax Compliance (continued)					
			ı I	1		Yes	No
2a		r the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		a 1			
		for the calendar year ending with or within the year covered by this return	2:	4	-	-	v
-		least one is reported on line 2a, did the organization file all required federal employment tax return			2b	+	X X
3a					3a		
		es," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule			3b		+
4a		ny time during the calendar year, did the organization have an interest in, or a signature or other a			1		x
h		ncial account in a foreign country (such as a bank account, securities account, or other financial a	icco	uni)?	<u>4a</u>		
b		es," enter the name of the foreign country					
50		instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		x
b		any taxable party notify the organization that it was or is a party to a prohibited tax shelter transac			5a 5b	-	x
		es" to line 5a or 5b, did the organization file Form 8886-T?			50 5c	-	+
		s the organization have annual gross receipts that are normally greater than \$100,000, and did the				-	+
ou		contributions that were not tax deductible as charitable contributions?			6a		x
h	-	es," did the organization include with every solicitation an express statement that such contributio				-	+
~		e not tax deductible?		0	6b		
7		anizations that may receive deductible contributions under section 170(c).					
	-	he organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vice	s provided to the pavor?	7a	х	
b					7b	Х	
		the organization sell, exchange, or otherwise dispose of tangible personal property for which it wa					
	to file	e Form 8282?		•	7c		x
d	lf "Ye	es," indicate the number of Forms 8282 filed during the year	70				
е		the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ontra	act?	7e		х
f	Did t	the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?		7f		X
g	If the	e organization received a contribution of qualified intellectual property, did the organization file Fo	orm 8	8899 as required?	7g		
h	If the	e organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	tion	file a Form 1098-C?	7h		
8	Spor	nsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	l by	the			
	spor	nsoring organization have excess business holdings at any time during the year?			8		X
9	Spor	nsoring organizations maintaining donor advised funds.					
а					9a		X
b					9b		X
10		tion 501(c)(7) organizations. Enter:		1			
а		ation fees and capital contributions included on Part VIII, line 12	10		-		
b		ss receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10	b	-		
11		tion 501(c)(12) organizations. Enter:		. 1			
		ss income from members or shareholders	11	a	-		
b		ss income from other sources. (Do not net amounts due or paid to other sources against					
100		unts due or received from them.) tion 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	10/		120		
		es," enter the amount of tax-exempt interest received or accrued during the year	102	1	12a		
13		tion 501(c)(29) qualified nonprofit health insurance issuers.			-		
a		e organization licensed to issue qualified health plans in more than one state?			13a	1	1
u		e: See the instructions for additional information the organization must report on Schedule O.					
b		or the amount of reserves the organization is required to maintain by the states in which the					
		nization is licensed to issue qualified health plans	13	b			
с		r the amount of reserves on hand	13				
14a			·	•	14a		X
		es," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul			14b		
15		e organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner					1
		ess parachute payment(s) during the year?			15		x
		es," see the instructions and file Form 4720, Schedule N.					
16		e organization an educational institution subject to the section 4968 excise tax on net investment	t inc	ome?	16		x
		es," complete Form 4720, Schedule O.					
17	Sect	tion 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any act	tivit	ies			
	that	would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
		es," complete Form 6069.					
332005	12-21	-23	_		For	m 990	(2023)

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Form	990 (2023) ASIAN PACIFIC FUND 94-3	3201522	I	-age 6
Par	t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, ar	nd for a "No	" respo	nse
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>		X
Sec	tion A. Governing Body and Management			_
		_	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	12		
	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 on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent	12		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
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?			x
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	1	X
b	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:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?		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 on Schedule O			X
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?	10;	а	X
b	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?	10	b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the fo	rm? 11 ;	a X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12:	a X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12	b X	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	120	c X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	, X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15	a X	
b	Other officers or key employees of the organization	15	b	X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16	a	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			
	exempt status with respect to such arrangements?	16	b	
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filedCA			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 50	01(c)(3)s only	y) availa	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest pol	icy, and fina	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			
	THE ORGANIZATION - (415)395-9985			
	345 CALIFORNIA STREET, 7TH FLOOR, SAN FRANCISCO, CA 94104			
332006) 12-21-23	Fo	rm 990	(2023)
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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest	Compensated	
·	Employees, and Independent Contractors		
	Check if Schedule O contains a response or note to any line in this Part VII		
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
	te this table for all persons required to be listed. Report compensation for the calendar year endi	5	,
 List al 	l of the organization's current officers, directors, trustees (whether individuals or organizations),	regardless of amount of compen-	sation.

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

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

(A)	(B)	(B) (C)						(D)	(E)	(F)
Name and title	Average	Position (do not check more than one					ane	Reportable	Estimated	
	hours per	box	, unle	ss pe	rson i	s both	n an	compensation	compensation	amount of
	week		cer ar I	nd a d I	lirecto	or/trus T	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	96			ated		organization	(W-2/1099-MISC/	from the
	related organizations	ustee	trust		66	bens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	lual tr	tional		nploy	st con	_	1099-1120)		organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) CAROLYN WANG KONG	40.00				×	1 - 0	ш.			
PRESIDENT & EXECUTIVE DIRECTOR		1		x				271,000.	0.	0.
(2) GURPREET TUNG	40.00									
DIRECTOR OF DEVELOPMENT					х			152,224.	0.	0.
(3) MARYANN TREBLE	40.00									
DIRECTOR OF FINANCE & OPERATIONS				х				73,908.	0.	0.
(4) TOM COLE	1.50									
CHAIR		Х		х				٥.	0.	0.
(5) NELSON ISHIYAMA	1.50									
TREASURER		Х		х				0.	0.	0.
(6) EMERALD YEH	1.50									
SECRETARY		Х		х				0.	0.	0.
(7) NEEL CHATTERJEE	0.50									
DIRECTOR		Х						0.	0.	0.
(8) STEVE CHEN	0.50									
DIRECTOR		Х						0.	0.	0.
(9) KATHY CHOU	0.50									
DIRECTOR		Х						0.	0.	0.
(10) PETER CHUNG	0.50									
DIRECTOR		Х						0.	0.	0.
(11) JAN KANG	0.50									
DIRECTOR		Х						0.	0.	0.
(12) ROSALYN CHEN	0.50									
DIRECTOR		Х						0.	0.	0.
(13) MARGARET LAPIZ	0.50									
DIRECTOR		Х						0.	0.	0.
(14) MICHELE LAU	0.50									
DIRECTOR		Х						0.	0.	0.
(15) RAJ MATHAI	0.50									
DIRECTOR		х						0.	0.	0.
										— 000 (2222)

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332007 12-21-23

Form 990 (2023)

15151112 144198 180424

Form	990 (2023) ASIAN PACIFIC	E FUND								94-32	0152	2	Pa	age 8
Pa	t VII Section A. Officers, Directors, Trust	tees, Key Emp	oloy	ees,	anc	l Hig	ghes	st C	ompensated Employee	s (continued)				
	(A) Name and title	(B) Average hours per week	box offic	not c , unle:	Pos theck i ss per nd a di	more rson i	than o s both	n an	(D) Reportable compensation from	(E) Reportable compensatio from related	in I	an	(F) stimate nount other	of
		(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organization (W-2/1099-MIS 1099-NEC)	SC/	fr org an	pensa om the anizat d relate anizatie	e ion ed
	Subtotal						I		497,132.		0.			0.
С	Total from continuation sheets to Part VII								0.		٥.			٥.
d	Total (add lines 1b and 1c)								497,132.		٥.			0.
2	Total number of individuals (including but no compensation from the organization	ot limited to th	ose	liste	ed ab	ove) wh	o re	eceived more than \$100,	000 of reportable	;			2
	· · ·												Yes	No
3	Did the organization list any former officer,													
4	line 1a? If "Yes," complete Schedule J for su For any individual listed on line 1a, is the su	uch individual				 tion			or componentian from t			3		X
4	and related organizations greater than \$150											4	x	
5	Did any person listed on line 1a receive or a													
	rendered to the organization? If "Yes," com	plete Schedule	e J fo	or sı	ıch ı	oers	on .				<u></u>	5		Х
	tion B. Independent Contractors									100.000 (
1	Complete this table for your five highest cor the organization. Report compensation for t										ensat	ion tro	om	
	(A)	,			<u> </u>				(B)			(0)	
	Name and business	address	NO	NE				_	Description of s	ervices	C	ompe	nsatio	n
								_						
2	Total number of independent contractors (in \$100,000 of compensation from the organiz	•	ot lin	nited	d to t		se lis 0	ted	above) who received mo	ore than				
		.ution								I		Form	990 (2	2023)

	<u>1 990 (</u>		C FUND				94-320152	2 Page 9
Pa	rt VII	Statement of Revenue						
		Check if Schedule O contains a	response c	or note to any line	<u>e in this Part VIII</u> (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a b c d e	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions)	1a 1b 1c 1d 1e	452,331.				
Contributior and Other S	f g h	All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-1f Total. Add lines 1a-1f	1f 1g \$		4,177,405.			
Service inue	2a b c	API SUMMIT		Business Code 900099	6,950.			6,950.
Program Service Revenue	d e f q	All other program service revenue Total. Add lines 2a-2f			6,950.			
	3	Investment income (including divider other similar amounts) Income from investment of tax-exem	nds, interes pt bond pr	st, and	826,287.			826,287.
		Gross rents 6a 6b 6b) Real	(ii) Personal				
		(, ,	ecurities	(ii) Other				
Revenue	с	Less: cost or other basis 7b 14,2 and sales expenses 7c 7c Net gain or (loss)	54,173.		54,173.			54,173.
Other		Gross income from fundraising events (n including \$452,331. contributions reported on line 1c). Se Part IV, line 18 Less: direct expenses	of ee 8a	35,500. 170,935.				
	с 9 а		y events . See 9a		-135,435.			-135,435.
	с 10 а	Net income or (loss) from gaming ac Gross sales of inventory, less returns and allowances Less: cost of goods sold	tivities s 10a					
neous	<u>с</u>	Net income or (loss) from sales of inv	ventory	Business Code				
Miscellaneous Revenue	d e	All other revenue						
33200	12 9 12-21-	Total revenue. See instructions			4,929,380.	0.	0.	751,975. Form 990 (2023)

	990 (2023) ASIAN PACIFIC FUN			94-320	1522 Page 1 (
	rt IX Statement of Functional Expense				
Secti	ion 501(c)(3) and 501(c)(4) organizations must comp				
	Check if Schedule O contains a respons	se or note to any line in t (A)	his Part IX	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	1,591,869.	1,591,869.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	168,667.	168,667.		
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	497,132.	213,415.	88,910.	194,807
6	Compensation not included above to disqualified				
	persons (as defined under section $4958(f)(1)$) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	377,616.	306,103.	70,445.	1,068
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	19,418.	11,328.	3,970.	4,120
9	Other employee benefits	32,961.	19,228.	6,739.	6,994
10	Payroll taxes	65,477.	38,737.	12,902.	13,838
11	Fees for services (nonemployees):				
а	Management				
b	Legal	1,025.	350.	675.	
С	Accounting	87,714.		87,714.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	66,659.		66,659.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)	54,180.	680.	29,200.	24,300
12	Advertising and promotion	2,060.	300.	1,760.	
13	Office expenses	52,455.	13,323.	32,806.	6,326
14	Information technology	13,753.	8,088.	2,723.	2,942
15	Royalties				
16	Occupancy	18,748.	11,026.	3,712.	4,010
17	Travel	131,432.	84,462.	15,142.	31,828
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	7,659.		7,659.	
23	Insurance	7,765.	4,616.	1,470.	1,679
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	EQUIP. RENTAL/MAINT.	3,837.	2,256.	760.	821
b	MISCELLANEOUS	558.		558.	

3,200,985.

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c d

25

26

e All other expenses

Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization

reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here _______ if following SOP 98-2 (ASC 958-720)

> 10 2023.05000 ASIAN PACIFIC FUND

2,474,448.

433,804.

180424_1

292,733.

15151112 144198 180424

180424_1

					Beginning of year		End of year
-	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			805,342.	2	745,369
		Pledges and grants receivable, net			202,519.	3	52,900
		Accounts receivable, net	,	4	,		
	5	Loans and other receivables from any current or					
`	0	trustee, key employee, creator or founder, subst					
						5	
	6	controlled entity or family member of any of the	-	(as defined		5	
	6	Loans and other receivables from other disquali	•			6	
-	-	under section 4958(f)(1)), and persons described				6	
		Notes and loans receivable, net				7	
		Inventories for sale or use			16 124	8	0.750
		Prepaid expenses and deferred charges			16,134.	9	9,758
10	0a	Land, buildings, and equipment: cost or other		FF 000			
		basis. Complete Part VI of Schedule D		55,289.	0.04.0		40.005
	b	Less: accumulated depreciation		42,204.	9,910.		13,085
1		Investments - publicly traded securities			19,858,653.	11	23,459,480
12	2	Investments - other securities. See Part IV, line -				12	
13	3	Investments - program-related. See Part IV, line	11			13	
14	4	Intangible assets		L		14	
15	5	Other assets. See Part IV, line 11		L	6,437.	15	1,956
16	6	Total assets. Add lines 1 through 15 (must equ	al line 33) .		20,898,995.	16	24,282,548
17	7	Accounts payable and accrued expenses		L	84,686.	17	88,468
18	8	Grants payable			75,000.	18	1,000
19	9	Deferred revenue		19			
20		Tax-exempt bond liabilities		20			
2		Escrow or custodial account liability. Complete		21			
22	2	Loans and other payables to any current or form					
		trustee, key employee, creator or founder, subst	antial contril	outor, or 35%			
		controlled entity or family member of any of the	e persons			22	
23	3	Secured mortgages and notes payable to unrela	ted third par	ties		23	
24	4	Unsecured notes and loans payable to unrelated	d third partie	s		24	
25	5	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines					
		of Schedule D	-			25	
26	6	Total Relative Astal Research Addition			159,686.	26	89,468
		Organizations that follow FASB ASC 958, che		X			
		and complete lines 27, 28, 32, and 33.		_			
27	7	Net assets without donor restrictions			8,229,133.	27	9,051,153
28		Net assets with donor restrictions			12,510,176.	28	15,141,927
``	-	Organizations that do not follow FASB ASC 9			, , -		,
		and complete lines 29 through 33.					
29	9	Capital stock or trust principal, or current funds				29	
30		Paid-in or capital surplus, or land, building, or ed				30	
3		Retained earnings, endowment, accumulated in				31	
					20,739,309.	32	24,193,080
27 28 30 31 32		Total net assets or fund balances			20,898,995.		24,282,548
33	۲	Total liabilities and net assets/fund balances			20,090,990.	33	Form 990 (202

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ASIAN PACIFIC FUND

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

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(B) End of year

(A) Beginning of year

 Form 990 (2023)
 2

 Part X
 Balance Sheet

Form	990 (2023) ASIAN PACIFIC FUND	94-3201522	2	Pa	_{ge} 12
	rt 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	4,	929,	380.
2	Total expenses (must equal Part IX, column (A), line 25)	2	З,	200,	985.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,	728,	395.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	20,	739,	309.
5	Net unrealized gains (losses) on investments	5	1,	725,	376.
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 on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	24,	193,	080.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
		r		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Э.			
2a			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	ona			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	dule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		(0000)

Form **990** (2023)

Department of the Treasury

(Form 990)

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.

OMB No. 1545-0047
2023
Open to Public

Interna	I Reve	nue Service		Go to www.irs.gov/	Form990 for instruction	ns and the	latest inf	ormation.		Insp	pection
Name of the organization			ion	Emple						ver identification number	
		D		PACIFIC FUND						94-32015	22
Pa					(All organizations must c			ee instructior	IS.		
	organ			,	For lines 1 through 12, c		,				
1		A church, co	nvention of ch	urches, or associatio	on of churches described	in sectio	n 170(b)(1	I)(A)(i).			
2		A school des	cribed in sect i	ion 170(b)(1)(A)(ii). (Attach Schedule E (Forn	ו 990).)					
3		A hospital or	a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	ii).			
4		A medical res	search organiz	ation operated in co	njunction with a hospital	described	in sectio	n 170(b)(1)(A	.)(iii). Enter	the hospita	al's name,
		city, and stat	:e:								
5		An organizat	ion operated fo	or the benefit of a co	llege or university owned	l or operat	ed by a go	overnmental u	nit describe	ed in	
		section 170	(b)(1)(A)(iv). (C	Complete Part II.)							
6		A federal, sta	ate, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).			
7	X	An organizat	ion that norma	Ily receives a substa	ntial part of its support fi	om a gove	ernmental	unit or from tl	he general p	ublic desc	ribed in
		section 170(b)(1)(A)(vi). (C	omplete Part II.)							
8		A community	/ trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)					
9		An agricultur	al research org	ganization described	in section 170(b)(1)(A)(ix) operate	ed in conju	inction with a	land-grant	college	
		or university	or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	, and state of	the college	or	
		university:	-				-		-		
10		An organizati	ion that norma	Ily receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membersh	nip fees, and	l gross rec	eipts from
					t to certain exceptions; a						
					(less section 511 tax) fro						
				mplete Part III.)	,			,	5		
11					ively to test for public sa	fetv. See	section 50)9(a)(4).			
12		-	-	-	vely for the benefit of, to	•			arry out the	ourposes o	of one or
		-	-	-	d in section 509(a)(1) o	-			-	-	
				•	f supporting organizatior						
а		-	-	• •	upervised, or controlled				-	aivina	
				-	gularly appoint or elect a	• • • •	-				
			-	complete Part IV, Se						pporting	
b		¬ ~		-	or controlled in connect	ion with it	s sunnorte	ed organizatio	n(s) by hav	ina	
~	L			-	anization vested in the sa			-		-	
			-	t complete Part IV,					ge the capp	ontou	
с		¬ -		-	g organization operated	in connect	tion with	and functiona	llv integrate	d with	
U			-	• •). You must complete I				ily integrate	u with,	
d		_			orting organization oper				rtad argani-	ation(a)	
u			-	• •					•	• • •	
			-		ation generally must sat	-		-	ו מוז מנופרונוע	eness	
		7			nplete Part IV, Sections						
е			•		written determination fro			турет, туре	п, туре ш		
	E at	-			nally integrated supporti	ng organiz	ation.				
			of supported of	about the supporte	d organization(a)						
<u> </u>		(i) Name of supp	<u> </u>	(ii) EIN	(iii) Type of organization	(iv) Is the orga	anization listed	(v) Amount o	f monetarv	(vi) Amo	ount of other
		organizatior		(,	(described on lines 1-10	in your govern	ng document?	support (see i	,		e instructions
					above (see instructions))	Yes	No				
Tota	I										

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94-3201522

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.)

<u>5e</u>	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1,359,198.	1,700,931.	15,062,655.	2,407,653.	4,177,405.	24,707,842.
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						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	1,359,198.	1,700,931.	15,062,655.	2,407,653.	4,177,405.	24,707,842.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						2,163,494.
	Public support. Subtract line 5 from line 4.						22,544,348.
Se	ction B. Total Support	,					
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	1,359,198.	1,700,931.	15,062,655.	2,407,653.	4,177,405.	24,707,842.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources \dots	372,412.	268,390.	426,772.	518,062.	826,287.	2,411,923.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)		1,450.	2,500.	50.		4,000.
11	Total support. Add lines 7 through 10						27,123,765.
	Gross receipts from related activities,		,			12	6,950.
13	First 5 years. If the Form 990 is for the	ne organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 5	01(c)(3)	
_	organization, check this box and stop						
	ction C. Computation of Publi						
	Public support percentage for 2023 (I					14	83.12 %
	Public support percentage from 2022					15	87.29 %
16a	a 33 1/3% support test - 2023. If the o				4 is 33 1/3% or m	ore, check this box	
-	stop here. The organization qualifies		0				
k	o 33 1/3% support test - 2022. If the o	-			line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test	-					
	and if the organization meets the fact				•	VI how the organiz	ation
	meets the facts-and-circumstances te	-					
k	o 10% -facts-and-circumstances test	-					0% or
	more, and if the organization meets th						
	organization meets the facts-and-circu		•				
18	Private foundation. If the organization	<u>in did not check a b</u>	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box ar		(Form 990) 2023

Schedule A (Form 990) 2023

332022 12-21-23

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.)

Section A. Public Support			-	-		
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	3 (f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus- iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge					-	<u> </u>
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support	-	•	•	•	•	
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	3 (f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for t	he organization's fi	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) orgar	nization,
check this box and stop here						
Section C. Computation of Publ		-	(f\)		45	
15 Public support percentage for 2023					15	<u>%</u>
16 Public support percentage from 202: Section D. Computation of Inve					16	%
17 Investment income percentage for 2	023 (line 10c, colu	mn (f), divided by	line 13, column (f))		17	%
18 Investment income percentage from	2022 Schedule A,	Part III, line 17			18	%
19a 33 1/3% support tests - 2023. If the	e organization did r	not check the box	on line 14, and lin	e 15 is more than	33 1/3%, and I	ine 17 is not
more than 33 1/3%, check this box a	and stop here. The	organization qua	lifies as a publicly	supported organiz	ation	
b 33 1/3% support tests - 2022. If the	e organization did r	not check a box o	n line 14 or line 19	a, and line 16 is m	ore than 33 1/	3%, and
line 18 is not more than 33 1/3%, ch	eck this box and s f	t op here. The orga	anization qualifies	as a publicly supp	orted organiza	ition
20 Private foundation. If the organizati	on did not check a	box on line 14, 19	a, or 19b, check t	his box and see in	structions	
332023 12-21-23					Sched	dule A (Form 990) 2023
		15	5			

1

2

Yes No

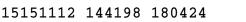
Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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 (as 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).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*
- **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 on 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 on 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 line 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.)

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3a 3b 3c 4a 4b 4c 5a 5b <u>5c</u> 6 7 8 9a 9b 9c 10a 10b Schedule A (Form 990) 2023

I GI				
			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 on lines 11b and			
	11c below, the governing body of a supported organization?	11a	┼──┤	
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	44.		
Sac	_{detail in} Part VI. tion B. Type I Supporting Organizations	11c		
500			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>	1	Tes	INC
2	Did the organization operate for the benefit of any supported organization other than the supported	-		
-	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	N
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1 a b	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions The organization satisfied the Activities Test. Complete line 2 below. 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 governmental entity (see in	nstructior	ıs).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	N
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			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, 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 reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
-	trustees of each of the supported organizations? If "Voe" or "No" provide details in Part VI	3a		

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

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ASIAN PACIFIC FUND Schedule A (Form 990) 2023 Part IV Supporting Organizations (continued)

trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.

3a 3b

Schedule A (Form 990) 2023

Sche	edule A (Form 990) 2023 ASIAN PACIFIC FUND			94-3201522	Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	Orga	nizations		
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust or	n Nov. 20, 1970 (<i>explain in</i>	Part VI). See instru	uctions.
	All other Type III non-functionally integrated supporting organizations must c		,		
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current (optiona	
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				
	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 (optiona	
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
a	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
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):				
_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 0.015 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 0.035.	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 Ye	ear
1	Adjusted net income for prior year (from Section A, line 8, column A)	1			
2	Enter 0.85 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-functionally	integra	ted Type III supporting org	anization (see	
	instructions).				

Schedule A (Form 990) 2023

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Sche	dule A (Form 990) 2023 ASIAN PACIFIC FUND				94-3201522	Page 7
Par		a)(3) Supporting Orga	nizations (continu	ed)		
Secti	on D - Distributions		1		Current Y	ear
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported				
	organizations, in excess of income from activity			2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	6	3		
4	Amounts paid to acquire exempt-use assets			4		
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5		
6	Other distributions (<i>describe in</i> Part VI). See instructions.			6		
_7	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which the	e organization is responsive				
	(provide details in Part VI). See instructions.			8		
9	Distributable amount for 2023 from Section C, line 6			9		
10	Line 8 amount divided by line 9 amount	~	(11)	10		
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023	S	(iii) Distributa Amount for	
1	Distributable amount for 2023 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2023 (reason-					
	able cause required - explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2023					
<u>a</u>	From 2018					
b	From 2019					
C	From 2020					
	From 2021					
	From 2022					
	Total of lines 3a through 3e					
	Applied to underdistributions of prior years					
	Applied to 2023 distributable amount					
i	Carryover from 2018 not applied (see instructions)					
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2023 from Section D,					
	line 7: \$					
	Applied to underdistributions of prior years					
	Applied to 2023 distributable amount Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2023, if					
5	any. Subtract lines 3g and 4a from line 2. For result greater					
	than zero, explain in Part VI. See instructions.					
6	Remaining underdistributions for 2023. Subtract lines 3h					
Ū	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2024. Add lines 3j					
-	and 4c.					
8	Breakdown of line 7:					
a	Excess from 2019					
	Excess from 2020					
c	Excess from 2021					
d	Excess from 2022					
е	Excess from 2023					

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023 ASIAN PACIFIC FUND	94-3201522	Page 8
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a of Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part IV, Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part IV, Part IV, Section D, line 1; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part IV,	1 and 2; Part IV, Section V, Section B, line 1e; Pa	ı C, ırt V,
Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional (See instructions.)	onal information.	
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:		
OTHER INCOME		
2020 AMOUNT: \$ 1,450.		
2021 AMOUNT: \$ 2,500.		
2022 AMOUNT: \$ 50.		
332028 12-21-23	Schedule A (Form 9	990) 2023

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Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2023

Employer identification number

94-3201522

ASIAN PACIFIC FUND

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(³) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

Schedule B

Department of the Treasury

Organization type (check one):

Internal Revenue Service Name of the organization

(Form 990)

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in t

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

	B (Form 990) (2023)		Page 2
Name of o	rganization		Employer identification number
ASIAN PA	ACIFIC FUND		94-3201522
Part I	Contributors (see instructions). Use duplicate copies of Part I if add	itional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) Is Type of contribution
1		\$1,874,	224. Person X Payroll Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) Is Type of contribution
2		\$160,	000. Person X Payroll Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) Is Type of contribution
3		\$150,	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) Is Type of contribution
4		\$120,	000. Person X Payroll Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) Is Type of contribution
5		\$105,	229. Person X Noncash Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) Is Type of contribution
6		\$105,	000. X Payroll Noncash (Complete Part II for noncash contributions.) Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023)

	3 (Form 990) (2023)	I_	Page 2
Name of o	rganization	Em	ployer identification number
ASIAN PA	CIFIC FUND		94-3201522
Part I	Contributors (see instructions). Use duplicate copies of Part I if a	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$102,500	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$100,945	Person Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$100,000	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2023)

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	B (Form 990) (2023)			Page
Name of o	organization		Employ	er identification number
ASIAN PA	ACIFIC FUND		94-	-3201522
Part II	Noncash Property (see instructions). Use duplicate copies of Part	II if additional space is neede	d.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
	STOCK			
8				
		\$100	,945.	12/31/23
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
		—		
		¢		
323453 12-26	l 6-23	\$! ;	

Schedule I	B (Form 990) (2023)			Page 4
Name of o	organization		Employer ider	ntification number
	ACIFIC FUND		94-3201	522
Part III	from any one contributor. Complete columns (a)	through (e) and the following line entr	For organizations	
	completing Part III, enter the total of exclusively religious, or Use duplicate copies of Part III if additional s	haritable, etc., contributions of \$1,000 or le	ss for the year. (Enter this info. once.)	
(a) No. from				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how	gift is held
			[
		(e) Transfer of gift		
	Transferee's name, address, a	ad 7 ID + 4	Relationship of transferor to trans	force
(a) No. from	(b) Purpose of gift	(a) Use of gift	(d) Description of how	aift is hold
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how	
		(e) Transfer of gift		
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to trans	feree
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how	gift is held
Part I				
		(e) Transfer of gift		
		(e) transfer of gift		
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to trans	feree
(-) No				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how	gift is held
<u> </u>				
			[
		(e) Transfer of gift		
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to trans	feree

Schedule B (Form 990) (2023)

SCHEDULE [)
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Department of the Treasury

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. Go to www.irs.gov/Form990 for instructions and the latest information.



Internal Revenue Service Go to www.irs.g

ASIAN PACIFIC FUND

Employer identification number

9	4 –	32	201	52	2

Par			lar Funds or Ac	counts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	(a) Donor advised fur	nds (I	b) Funds and other accounts
4	Total number at and of year		12	
1 2	Total number at end of year Aggregate value of contributions to (during year)		327,276.	
2	Aggregate value of grants from (during year)		196,950.	
4	Aggregate value at end of year		774,087.	
5	Did the organization inform all donors and donor advisors in w			
J	are the organization's property, subject to the organization's e	-		
6	Did the organization inform all grantees, donors, and donor ad			
Ū	for charitable purposes and not for the benefit of the donor or			
	impermissible private benefit?	, ,	• •	
Par				
1	Purpose(s) of conservation easements held by the organization		, ,	
•	Preservation of land for public use (for example, recreati		eservation of a histo	rically important land area
	Protection of natural habitat	·		fied historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution	in the form of a cor	nservation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	<u> </u>			2b
с	Number of conservation easements on a certified historic strue			2c
d	Number of conservation easements included on line 2c acquir			
	on a historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele			
	year	, 3	, 3	3
4	Number of states where property subject to conservation ease	ement is located		
5	Does the organization have a written policy regarding the period		handling of	
	violations, and enforcement of the conservation easements it l		.	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h			
7	Amount of expenses incurred in monitoring, inspecting, handli	ng of violations, and enforci	ng conservation eas	ements during the year
8	Does each conservation easement reported on line 2d above s	satisfy the requirements of s	ection 170(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			YesNo
9	In Part XIII, describe how the organization reports conservation	n easements in its revenue a	and expense stateme	ent and
	balance sheet, and include, if applicable, the text of the footnot	ote to the organization's fina	ncial statements tha	t describes the
D	organization's accounting for conservation easements.			
Par	t III Organizations Maintaining Collections of		res, or Other Si	milar Assets.
	Complete if the organization answered "Yes" on Form			
1 a	If the organization elected, as permitted under FASB ASC 958	•		
	of art, historical treasures, or other similar assets held for publ			ce of public
	service, provide in Part XIII the text of the footnote to its finance			
b	If the organization elected, as permitted under FASB ASC 958	, to report in its revenue stat	tement and balance	sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or rese	earch in furtherance	of public service,
	provide the following amounts relating to these items.			
	(i) Revenue included on Form 990, Part VIII, line 1			
2	If the organization received or held works of art, historical trea			provide
	the following amounts required to be reported under FASB AS	-		
	Revenue included on Form 990, Part VIII, line 1			
	Assets included in Form 990, Part X			
	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.		Schedule D (Form 990) 2023
332051	09-28-23	26		
		26		

Sche	dule D (Form 990) 2023 ASIAN PACIF					94-320		<u> </u>	age 2
Par	t III Organizations Maintaining Co	ollections of Art	, Historical Tre	easures, or Othe	er Simila	r Assets	contin	nued)	
3	Using the organization's acquisition, accession	on, and other records	s, check any of the	following that make	significant	use of its			
	collection items (check all that apply).								
а	Public exhibition	d	Loan or exc	change program					
b	Scholarly research	е	Other						
с	Preservation for future generations								
4	Provide a description of the organization's co	llections and explain	how they further t	he organization's exe	empt purpo	ose in Part	XIII.		
5	During the year, did the organization solicit or				ir assets		_		_
	to be sold to raise funds rather than to be ma						Yes		No
Par	TIV Escrow and Custodial Arrang		e if the organizatio	n answered "Yes" or	Form 990	, Part IV, li	ne 9, or		
	reported an amount on Form 990, Par								
1a	Is the organization an agent, trustee, custodia						-		-
	on Form 990, Part X?					L	Yes		No
b	If "Yes," explain the arrangement in Part XIII a	and complete the foll	owing table:			1			
							Amoun	t	
	Beginning balance								
	Additions during the year								
-	Distributions during the year								
f	Ending balance				1 f				7
	Did the organization include an amount on Fo				IIIty ?	L	Yes		_ No
Par	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds Complete if				10	<u></u>	<u></u>		<u></u>
		(a) Current year	(b) Prior year	(c) Two years back		years back	(e) Fou	vears	back
1a	Beginning of year balance	11,369,982.	14,076,968.			911,067.		,464,	
b	Contributions	2,510,103.	9,310.			374,886.			750.
c c	Net investment earnings, gains, and losses	2,037,018.	-2,163,374.	,		256,480.	1	,961,	
d	Grants or scholarships	, , , .	, ,		, í	,	· · · · ·		
	Other expenditures for facilities								
Ū	and programs	569,993.	552,922.	534,612.	4	182,259.		477,	521.
f	Administrative expenses	,	,	,		49,937.			466.
g	End of year balance	15,347,110.	11,369,982.	14,076,968.	13,0)10,237.	11	,911,	067.
2	Provide the estimated percentage of the curre	ent year end balance	(line 1g, column (a	a)) held as:					
а	Board designated or quasi-endowment	16.2900	%	,,					
b	Permanent endowment 73.1330	%	_						
с	Term endowment 10.5770	%							
	The percentages on lines 2a, 2b, and 2c shou	ıld equal 100%.							
3a	Are there endowment funds not in the posses		tion that are held a	nd administered for t	he				
	organization by:							Yes	No
	(i) Unrelated organizations?						3a(i)		х
	(ii) Related organizations?						3a(ii)		х
b	If "Yes" on line 3a(ii), are the related organizat	tions listed as require	ed on Schedule R?				3b		
4	Describe in Part XIII the intended uses of the		vment funds.						
Par	t VI Land, Buildings, and Equipme								
	Complete if the organization answered	I "Yes" on Form 990	, Part IV, line 11a. S	See Form 990, Part X	, line 10.				
	Description of property	(a) Cost or of	. ,		Accumulat		(d) Boo	k valu	е
		basis (investm	nent) basis	(other) d	epreciatior	ו			
	Land								
	Buildings								
	Leasehold improvements								
	Equipment			55,289.	42	,204.		13,	085.
	Other							1.2	005
Tota	I. Add lines 1a through 1e. <i>(Column (d) must ed</i>	qual Form 990, Part X	K <u>, line 10c, column</u>	(<u>B)</u>)					085.
						Schedule	D (Forn	n 990)	2023

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	of coourity or cotogory (and the		11b. See Form 990, Part X, line 12.	and of yoor market yelve
	Of Security or Category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	enu-or-year market value
Financial de				
	l equity interests			
Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G) (U)				
art VIII Inv	ust equal Form 990, Part X, line 12, col. (B)) vestments - Program Related.			
	mplete if the organization answered "Yes" of a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	and of year market value
		(b) DOOR VAILE	(c) we not of valuation. Cost of e	and of yoar market value
(1) (2)				
(2)				
(3)				
(4) (5)				
(5)				
(6) (7)				
(7) (8)				
(9)				
(3)				
	ust aqual Form 000 Part V line 12 col. (P))			
al. (Col. (b) mu	ust equal Form 990, Part X, line 13, col. (B))			
al. (Col. (b) mi art IX Ot	her Assets	n Form 990. Part IV. line	11d. See Form 990. Part X. line 15.	
al. (Col. (b) mi art IX Ot	ther Assets mplete if the organization answered "Yes" or		11d. See Form 990, Part X, line 15.	(b) Book value
al. (Col. (b) mi art IX Ot Co	ther Assets mplete if the organization answered "Yes" or	n Form 990, Part IV, line rescription	11d. See Form 990, Part X, line 15.	(b) Book value
al. (Col. (b) mu art IX Ot Co (1)	ther Assets mplete if the organization answered "Yes" or		11d. See Form 990, Part X, line 15.	(b) Book value
al. (Col. (b) mu art IX Ot Co (1) (2)	ther Assets mplete if the organization answered "Yes" or		11d. See Form 990, Part X, line 15.	(b) Book value
al. (Col. (b) mu art IX Ot Co (1) (2) (3)	ther Assets mplete if the organization answered "Yes" or		11d. See Form 990, Part X, line 15.	(b) Book value
II. (Col. (b) mi art IX Ot Co (1) (2) (3) (4)	ther Assets mplete if the organization answered "Yes" or		11d. See Form 990, Part X, line 15.	(b) Book value
al. (Col. (b) mi art IX Ot Co (1) (2) (3) (4) (5)	ther Assets mplete if the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization and the orga		11d. See Form 990, Part X, line 15.	(b) Book value
al. (Col. (b) mi art IX Ot Co (1) (2) (3) (4) (5) (6)	ther Assets mplete if the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization and the orga		11d. See Form 990, Part X, line 15.	(b) Book value
al. (Col. (b) mi art IX Ot Co (1) (2) (3) (4) (5) (6) (7)	ther Assets mplete if the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization and the orga		11d. See Form 990, Part X, line 15.	(b) Book value
al. (Col. (b) mu art IX Ot Co (1) (2) (3) (4) (5) (6) (7) (8)	ther Assets mplete if the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization and the orga		11d. See Form 990, Part X, line 15.	(b) Book value
al. (Col. (b) mu art IX Ot Co (1) (2) (3) (4) (5) (6) (7) (8) (9)	ther Assets mplete if the organization answered "Yes" o (a) D	escription		(b) Book value
al. (Col. (b) mi art IX Ot Co (1) (2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (ther Assets mplete if the organization answered "Yes" o (a) D (b) must equal Form 990, Part X, line 15, col.	escription		(b) Book value
al. (Col. (b) mi art IX Ot Co (1) (2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (art X Ot	ther Assets mplete if the organization answered "Yes" or (a) D (b) must equal Form 990, Part X, line 15, col. (b) must equal Form 990, Part X, line 15, col.	escription (B))		
al. (Col. (b) mi art IX Ot Co (1) (2) (3) (4) (5) (6) (7) (8) (9) al. (Column (art X Ot	ther Assets mplete if the organization answered "Yes" or (a) D (b) must equal Form 990, Part X, line 15, col. ther Liabilities mplete if the organization answered "Yes" or	escription (B))		25.
al. (Col. (b) mi art IX Ot Co (1) (2) (3) (4) (5) (6) (7) (8) (9) (al. (Column (art X Ot Co	ther Assets mplete if the organization answered "Yes" or (a) D (b) must equal Form 990, Part X, line 15, col. ther Liabilities mplete if the organization answered "Yes" or (a) Description of liability	escription (B))		
Al. (Col. (b) mi art IX Ot Co Co (1) (2) (3) (4) (5) (6) (7) (8) (9) al. (Column (art X Ot Co (1) Federal	ther Assets mplete if the organization answered "Yes" or (a) D (b) must equal Form 990, Part X, line 15, col. ther Liabilities mplete if the organization answered "Yes" or	escription (B))		25.
al. (Col. (b) mi art IX Ot Co (1) (2) (3) (4) (5) (6) (7) (8) (9) (8) (9) (9) (al. (Column (al. (Column (al. (Column (Co (1) Federal (2)	ther Assets mplete if the organization answered "Yes" or (a) D (b) must equal Form 990, Part X, line 15, col. ther Liabilities mplete if the organization answered "Yes" or (a) Description of liability	escription (B))		25.
al. (Col. (b) mi art IX Ot Co (1) (2) (3) (4) (5) (6) (7) (8) (9) (3) (1) Federal (2) (3)	ther Assets mplete if the organization answered "Yes" or (a) D (b) must equal Form 990, Part X, line 15, col. ther Liabilities mplete if the organization answered "Yes" or (a) Description of liability	escription (B))		25.
al. (Col. (b) mi art IX Ot Co (1) (2) (3) (4) (5) (6) (7) (8) (9) (3) (2) (3) (4) (2) (3) (4)	ther Assets mplete if the organization answered "Yes" or (a) D (b) must equal Form 990, Part X, line 15, col. ther Liabilities mplete if the organization answered "Yes" or (a) Description of liability	escription (B))		25.
al. (Col. (b) mi art IX Ot Co (1) (2) (3) (4) (5) (6) (7) (8) (9) (3) (4) (5) (1) Federal (2) (3) (4) (5)	ther Assets mplete if the organization answered "Yes" or (a) D (b) must equal Form 990, Part X, line 15, col. ther Liabilities mplete if the organization answered "Yes" or (a) Description of liability	escription (B))		25.
al. (Col. (b) mi art IX Ot Co (1) (2) (3) (4) (5) (6) (7) (8) (9) al. (Column (6) (7) (8) (9) (1) Federal (2) (3) (4) (5) (6)	ther Assets mplete if the organization answered "Yes" or (a) D (b) must equal Form 990, Part X, line 15, col. ther Liabilities mplete if the organization answered "Yes" or (a) Description of liability	escription (B))		25.
al. (Col. (b) mi art IX Ot Co (1) (2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (6) (1) Federal (2) (3) (4) (5) (6) (7)	ther Assets mplete if the organization answered "Yes" or (a) D (b) must equal Form 990, Part X, line 15, col. ther Liabilities mplete if the organization answered "Yes" or (a) Description of liability	escription (B))		25.
al. (Col. (b) mi art IX Ot Co (1) (2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (art X Ot Co (1) Federal (2) (3) (4) (5)	ther Assets mplete if the organization answered "Yes" or (a) D (b) must equal Form 990, Part X, line 15, col. ther Liabilities mplete if the organization answered "Yes" or (a) Description of liability	escription (B))		25.

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

Schedule D (Form 990) 2023

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X

Sche	edule D (Form 990) 2023 ASIAN PACIFIC FUND			94-3201522	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Stateme	nts With F	Revenue per Re	turn	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a				
1	Total revenue, gains, and other support per audited financial statements			1	6,588,097.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	1,725,376.		
b	Donated services and use of facilities	2b			
с	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)				
е				2e	1,725,376.
3	Subtract line 2e from line 1			3	4,862,721.
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	66,659.		
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b			4c	66,659.
5	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990. Part I. line 12.</i>)			5	4,929,380.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	ents With	Expenses per F	Return	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a				
1	Total expenses and losses per audited financial statements			1	3,134,326.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments				
с	• · · · ·				
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	3,134,326.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	66,659.		
b	Other (Describe in Part XIII.)	4b			
	Add lines 4a and 4b			4c	66,659.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)			5	3,200,985.
Pa	rt XIII Supplemental Information				
Prov	ide the descriptions required for Part II, lines 3, 5, and 9: Part III, lines 1a and 4: Part	IV. lines 1b a	and 2b: Part V. line 4	: Part X, line 2:	Part XI.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4:

THE ENDOWMENT FUNDS WERE SET UP TO PROVIDE A PERMANENT SOURCE OF INCOME TO

SUPPORT THE FUND'S WORK - FOR GENERAL OPERATIONS AND PROGRAM OPERATING

COSTS, AWARDS AND SCHOLARSHIPS TO SUPPORT HIGHER EDUCATION FOR QUALIFIED

STUDENTS OR INDIVIDUALS, OR GRANTS IN SUPPORT OF OTHER NON-PROFIT

ORGANIZATION'S GOALS.

PART X, LINE 2:

THE FUND IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF

THE INTERNAL REVENUE CODE AND FROM CALIFORNIA FRANCHISE TAXES UNDER

SECTION 23701D OF THE REVENUE AND TAXATION CODE. IN ADDITION, THE FUND

QUALIFIES FOR THE CHARITABLE CONTRIBUTION DEDUCTION UNDER SECTION

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Schedule D (Form 990) 2023

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Part XIII Supplemental Information (continued)

170(B)(1)(A) AND HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A

PRIVATE FOUNDATION UNDER SECTION 509(A). HOWEVER, INCOME FROM ACTIVITIES

NOT RELATED TO THE FUND'S TAX-EXEMPT PURPOSE MAY BE SUBJECT TO TAXATION AS

UNRELATED BUSINESS INCOME.

EACH YEAR, MANAGEMENT CONSIDERS WHETHER THE FUND HAS ANY UNCERTAIN TAX

POSITIONS THAT REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS, INCLUDING

WHETHER THE FUND HAS ENGAGED IN ANY ACTIVITIES THAT COULD AFFECT THE

FUND'S INCOME TAX STATUS OR RESULT IN TAXABLE INCOME. MANAGEMENT BELIEVES

THAT ANY POSITIONS THE FUND HAS TAKEN ARE SUPPORTED BY SUBSTANTIAL

AUTHORITY AND WOULD MORE LIKELY THAN NOT BE SUSTAINED UPON EXAMINATION BY

THE APPLICABLE TAXING AUTHORITY. MANAGEMENT HAS DETERMINED THAT THE FUND

DOES NOT HAVE ANY MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE

RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

Schedule D (Form 990) 2023

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SCHEDULE G	Suppleme	ntal Information Regarding	Fund	Iraisi	ng or Gaming A	ctivit	ties	OMB No. 1545-0047			
(Form 990)	Complete if the	2023									
Department of the Treasury	U	organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ.									
Internal Revenue Service	Go t	Open to Public Inspection									
Name of the organization											
Part I Fundrais							94-3201				
Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.											
 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations b Internet and email solicitations f Solicitation of government grants c Phone solicitations g Special fundraising events d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. 											
(i) Name and addres or entity (func		(ii) Activity		Did raiser ustody itrol of utions?	(iv) Gross receipts from activity	ots (v) Amount paid to (or retained by) fundraiser listed in col. (i)					
			Yes	No							
Total											
		n is registered or licensed to solicit o		utions	or has been notified	it is e	kempt from	registration			

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

Schedule G (Form 990) 2023

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94-3201522 Page **2**

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

e			(a) Event #1 ANNUAL GALA (event type)	(b) Event #2 (event type)	(c) Other events NONE (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1	Gross receipts	487,831.			487,831.
	2	Less: Contributions	452,331.			452,331.
	3 Gross income (line 1 minus line 2)		35,500.			35,500.
	4	Cash prizes				
Direct Expenses	5	Noncash prizes				
	6	Rent/facility costs	22,163.			22,163.
	7	Food and beverages	97,914.			97,914.
ē	8	Entertainment	5,000.			5,000.
	9	Other direct expenses	45,858.			45,858.
	10	Direct expense summary. Add lines 4 through	h 9 in column (d)			170,935.
	11	Net income summary. Subtract line 10 from I	ine 3, column (d)			-135,435.

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than

\$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Reve	1 Gross revenue				
s	2 Cash prizes				
Direct Expenses	3 Noncash prizes				
irect E)	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes % No	└── Yes % └── No	└── Yes % └── No	
	7 Direct expense summary. Add lines 2 through	5 in column (d)			
	8 Net gaming income summary. Subtract line 7	from line 1, column (d)			
9	Enter the state(s) in which the organization conduc	cts gaming activities:			
а	Is the organization licensed to conduct gaming act				Yes No
b	If "No," explain:				
10a	Were any of the organization's gaming licenses rev	voked, suspended, or te	rminated during the tax	year?	Yes No
b	If "Yes," explain:				

332082 09-13-23

Schedule G (Form 990) 2023

Sch	nedule G (Form 990) 2023	ASIAN PACIFIC FUND 9	4-32015	22	Page 3
		ming activities with nonmembers?		Yes	No
	Is the organization a grantor, bene	ficiary or trustee of a trust, or a member of a partnership or other entity formed		_	
	to administer charitable gaming?		🗆] Yes	No No
13	Indicate the percentage of gaming	g activity conducted in:			
â	a The organization's facility		13 a	<u>ц</u>	%
k	An outside facility		13 b		%
14	Enter the name and address of th	e person who prepares the organization's gaming/special events books and records:			
	Name				
15a		tract with a third party from whom the organization receives gaming revenue?		Yes	No
Ľ		ing revenue received by the organization \$ and the amoun	L		
	of gaming revenue retained by the If "Yes," enter name and address				
Ľ	in res, entername and address	or the third party.			
	Name				
	Address				
	Address				
16	Gaming manager information:				
	Name				
	Gaming manager compensation	\$			
	Description of services provided				
	Diversiter (affiner				
	Director/officer	Employee Independent contractor			
17	Mandatory distributions:				
â	a Is the organization required under	state law to make charitable distributions from the gaming proceeds to		,	
	retain the state gaming license?		L	Yes	No No
k		required under state law to be distributed to other exempt organizations or spent in th	э		
Da	organization's own exempt activit				01 401
Fd		mation. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and applicable. Also provide any additional information. See instructions.	l Part III, li	nes 9,	9b, 10b,
	100, 100, 10, 410 110, 40				
3320	83 09-13-23	Sc	hedule G	(Form	990) 2023
		33			,

Schedule G	(Form 990)	ASIAN	PACIFIC FUND	94-3201522	Page 4
Part IV	(Form 990) 2 Supplemental Inform	ation	(continued)		
_					

Schedule G (Form 990)

332084 04-01-23

SCHEDULE I (Form 990)	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.							
Department of the Treasury			Attach to Form	n 990.			Open to Public Inspection	
Internal Revenue Service Go to www.irs.gov/Form990 for the latest information.								
Name of the organization ASIAN PACIFIC	FUND						Employer identification number 94-3201522	
Part I General Information on Grants a	and Assistance							
 Does the organization maintain records criteria used to award the grants or assi Describe in Part IV the organization's pr Part II Grants and Other Assistance to 	stance? ocedures for monit	oring the use of grant	funds in the United	l States.			X Yes No	
	-				anization answered f	es on form 990, fan		
recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 1 (a) Name and address of organization or government (b) EIN (c) IRC section (if applicable) (d) Amount of cash grant (e) Amount of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) (g) Description of noncash assistance (h)							(h) Purpose of grant or assistance	
AABA LAW FOUNDATION PO BOX 387 SAN FRANCISCO, CA 94104	94-3159500	501(C)(3)	10,000.	0.			JUSTICE GRANT	
AAPI MONTCLAIR 30 NORMAN ROAD					2023 GIVE IN MAY AWARD			
MONTCLAIR, NJ 07043 ANGEL ISLAND IMMIGRATION STATION FOUNDATION - 870 MARKET STREET, SUITE 901 - SAN FRANCISCO, CA 94102	87-3232252 94-2909759		12,000.	0.			RESILIENCY & RECOVERY GRANT	
APA FAMILY SUPPORT SERVICES 10 NOTTINGHAM PLACE SAN FRANCISCO, CA 94133	94-3164091	501(C)(3)	15,153.	0.			MING YI FOUNDATION GRANT	
ASIAN AMERICAN PROFESSIONAL ASSOCIATION - 360 E. 2ND ST, STE 800 - LOS ANGELES, CA 90012	33-1065327	501(C)(3)	6,000.	0.			2023 GIVE IN MAY AWARD	
ASIAN AMERICANS ADVANCING JUSTICE - ASIAN LAW CAUCUS - 55 COLUMBUS AVENUE - SAN FRANCISCO, CA 94111	94-2176139	501(C)(3)	15,000.	0.			HMB GRANT	
2 Enter total number of section 501(c)(3) a	and government org	ganizations listed in th	e line 1 table					
3 Enter total number of other organization	is listed in the line	1 table					0.	

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

Schedule I (Form 990) ASIAN PACIFIC FUND

ASIAN IMMIGRANT WOMEN ADVOCATES ASIAN IMMIGRANT WOMEN ADVOCATES ASIAN IMMIGRANT WOMEN ADVOCATES ASIAN REFUGES UNITED (FISCALLY SPONSORE DEV CHINESE FOR AFIRMATIVE ACTION) - 17 WALTER U. LUM PLACE - SAN FRANCISCO, CA 94-2161304 501(C)(3) 8,000. 0. ASIAN WOMEN'S SHELFER 3543 - 18TH STREET #19 SAN FRANCISCO, CA 94110 94-3030212 501(C)(3) 40,531. 0. ASION FORMER AMERICANS, INC 32585 CONCORD DR - MADISON HEIGHTS, MI 48071 38-2809409 501(C)(3) 12,000. 0. HEIGHTS, MI 48071 38-2809409 501(C)(3) 12,000. 0. ASIONSORED BY ASIAN PACIFIC ENVIRONMENTAL - 1238 HARRISON ST - OAKLAND, CA 94612 94-3261846 501(C)(3) 27,000. 0. AVUBANDO LATINOS A SONAR P.O. BOX 961 EL GRANADA, CA 94018 46-2464722 501(C)(3) 15,000. 0. HIM GRANT CENTER FOR ASIAN AMERICAN MEDIA 15 NUNTH STREET STE 350 RESILIENCY & RECOVE RESILIENCY & RECOVE RESILIEN	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SUITE 300 - SAN JOSE _ CA 95128 94-2292491 501(C)(3) 16,022. 0. FENCENT GRANT NSIAN GIRLS IGNITE (FISCALLY SPONSORE DE YTE HE HADANOU COLLECTIVE) - 3264 LARIMER ST - A7-560556 501(C)(3) 8,000. 0. 2023 GIVE IN MAY AW ASIAN IMMIGRANT WOMEN ADVOCATES SIO - 59H ST, STE. 301 94-2977655 501(C)(3) 26,014. 0. BRNAT ASIAN REPUGEES UNITED (FISCALLY SPONSORE DE Y CHINESE FOR ASIAN REPUGEES UNITED (FISCALLY SPONSORE DE Y CHINESE FOR ASIAN REPUGESC UNITED (FISCALLY SPONSORE DE Y CHINESE FOR ASIAN REPUGESC UNITED (FISCALLY SPONSORE DE Y CHINESE FOR ASIAN MOMEN'S SHELTER SIGS - 18H STREET #19 SAN FRANCISCO, CA 94-2161304 501(C)(3) 8,000. 0. 2023 GIVE IN MAY AW ASIAN MENN'S SHELTER SIGS - 18H STREET #19 SAN FRANCISCO, CA 94110 94-3030212 501(C)(3) 40,531. 0. DRANT ASSOCIATION OF CHINESE AMERICANS, INC 32565 CONCORD DE - NADISON HERGITE, MI 46071 38-2809409 501(C)(3) 12,000. 0. P023 GIVE IN MAY AW AYPAL: BUILDING AFI COMMUNITY (FISCALLY SPONSORED EY A SIAN PACIFIC ENVIRONMENTAL - 1238 94-3261846 501(C)(3) 27,000. 0. BESILIENCY & RECOVE GRANT ANUDANDO LATINOS A SONAR P.O. BOX 951 LE GRANADA, CA 94018 46-2464722 501(C)(3) 15,000. 0. EBSILIENCY & RECOVE GRANT	ASIAN AMERICANS FOR COMMUNITY							
SUITE 300 - SAN JOSE _ CA 95128 94-2292491 501(C)(3) 16,022. 0. FENCENT GRANT NSIAN GIRLS IGNITE (FISCALLY SPONSORE DE YTE HE HADANOU COLLECTIVE) - 3264 LARIMER ST - A7-560556 501(C)(3) 8,000. 0. 2023 GIVE IN MAY AW ASIAN IMMIGRANT WOMEN ADVOCATES SIO - 59H ST, STE. 301 94-2977655 501(C)(3) 26,014. 0. BRNAT ASIAN REPUGEES UNITED (FISCALLY SPONSORE DE Y CHINESE FOR ASIAN REPUGEES UNITED (FISCALLY SPONSORE DE Y CHINESE FOR ASIAN REPUGESC UNITED (FISCALLY SPONSORE DE Y CHINESE FOR ASIAN REPUGESC UNITED (FISCALLY SPONSORE DE Y CHINESE FOR ASIAN MOMEN'S SHELTER SIGS - 18H STREET #19 SAN FRANCISCO, CA 94-2161304 501(C)(3) 8,000. 0. 2023 GIVE IN MAY AW ASIAN MENN'S SHELTER SIGS - 18H STREET #19 SAN FRANCISCO, CA 94110 94-3030212 501(C)(3) 40,531. 0. DRANT ASSOCIATION OF CHINESE AMERICANS, INC 32565 CONCORD DE - NADISON HERGITE, MI 46071 38-2809409 501(C)(3) 12,000. 0. P023 GIVE IN MAY AW AYPAL: BUILDING AFI COMMUNITY (FISCALLY SPONSORED EY A SIAN PACIFIC ENVIRONMENTAL - 1238 94-3261846 501(C)(3) 27,000. 0. BESILIENCY & RECOVE GRANT ANUDANDO LATINOS A SONAR P.O. BOX 951 LE GRANADA, CA 94018 46-2464722 501(C)(3) 15,000. 0. EBSILIENCY & RECOVE GRANT								
ASIAN GIRLS IGNITE (FISCALLY SPONSORED BY THE HADANOU COLLECTIVE) - 3264 LARIMER ST - DENVER, CO 80205 47-5606566 501(C)(3) 8,000. 0. ASIAN IMMIGRANT WOMEN ADVOCATES 310 - 9TH ST., STE. 301 ASIAN RAFUGEES UNITED (FISCALLY SPONSORED BY CHIMESE FOR ARIAN RAFUGEES UNITED (FISCALLY SPONSORED BY CHIMESE FOR ARIAN CA 94607 94-2977665 501(C)(3) 26,014. 0. BRANT ASIAN RAFUGEES UNITED (FISCALLY SPONSORED BY CHIMESE FOR ARIAN CA 94607 94-2977665 501(C)(3) 8,000. 0. 2023 GIVE IN MAY AW ASIAN RAFUGEES UNITED (FISCALLY SPONSORED BY CHIMESE FOR ARIAN CA 94607 94-2161304 501(C)(3) 8,000. 0. 2023 GIVE IN MAY AW ASIAN WOMEN'S SHELTER 3543 - 13TH STREET 415 SSAN FRANCISCO, CA 94110 94-3030212 501(C)(3) 40,531. 0. ASSOCIATION OF CHIMESE AMERICANS, INC 32545 CONCORD DR - MADISON 38-2809409 501(C)(3) 12,000. 0. 2023 GIVE IN MAY AW ANTPAL: BUILDING AFI COMMUNITY PACIFIC ENVIRONMENTAL - 1238 HARRISON ST - OAKLAND, CA 94012 46-2464722 501(C)(3) 15,000. 0. ENTER GRANT ASTOR ASINA AMERICAN MEDIA 46-2464722 501(C)(3) 15,000. 0. ENTER FOR ASIAN AM		94-2292491	501(C)(3)	16,022.	0.			TENCENT GRANT
collective) - 3264 LARIMER ST - DERVER, co 80205 47-560568 501(C)(3) 8,000. 0. 2023 GIVE IN MAY AW ASIAN INMIGRANT WOMEN ADVOCATES 310 - 0TH ST., STE. 301 94-2977665 501(C)(3) 26,014. 0. RESILIENCY & RECOVE RANT SALAND, C.A 94007 94-2977665 501(C)(3) 26,014. 0. RESILIENCY & RECOVE SRANT SPONSORED BY CHINESE FOR ARIAN REPUGRES UNITED (FISCALLY SPONSORED BY CHINESE FOR ASIAN MOMEN'S SHELTER 3543 - 18TH STREET #19 94-2161304 501(C)(3) 8,000. 0. 2023 GIVE IN MAY AW ASIAN MOMEN'S SHELTER 3543 - 18TH STREET #19 94-3030212 501(C)(3) 40,531. 0. RESILIENCY & RECOVE RESILIENCY & RECOVE SAN FRANCISCO, CA 94110 94-3030212 501(C)(3) 12,000. 0. 2023 GIVE IN MAY AW ASSOCIATION OF CHINESE AMERICANS, INC., - 3255 CONCORD DR - MADISON HEIGHTS, MI 48071 38-2809409 501(C)(3) 12,000. 0. 2023 GIVE IN MAY AW AVEANCE EVURONMENTAL - 1238 HARRISON ST - OAKLAND, CA 94612 94-3261846 501(C)(3) 27,000. 0. RESILIENCY & RECOVE BRANT FAY AVUDANDO LATINOS A SONAR P.O. BOX 961 LLG GRANDA, CA 94018 46-2464722 501(C)(3) 15,000. 0. HMB GRANT CEENTER FOR ASIAN AMERICAN MEDIA 145 NUNTH STREET STE 350 RESILIENCY & RECOVE RESILIENCY & RECOVE RESILIENCY & RECOVE RESILIENCY & RECOVE				,				
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LUM PLACE - SAN FRANCISCO, CA 94-2161304 501(C)(3) 8,000. 0. 2023 GIVE IN MAY AW ASIAN WOMEN'S SHELTER 3543 - 18TH STREET #19 SAN FRANCISCO, CA 94110 94-3030212 501(C)(3) 40,531. 0. RESILIENCY & RECOVE SAN FRANCISCO, CA 94110 94-3030212 501(C)(3) 40,531. 0. 2023 GIVE IN MAY AW ASSOCIATION OF CHINESE AMERICANS, INC 32585 CONCORD DR - MADISON HEIGHTS, MI 48071 38-2809409 501(C)(3) 12,000. 0. 2023 GIVE IN MAY AW ATPAL: BUILDING API COMMUNITY (PISCALLY SPONSORED BY ASIAN PACIFIC ENVIRONMENTAL - 1238 HARRISON ST - OAKLAND, CA 94612 94-3261846 501(C)(3) 27,000. 0. RESILIENCY & RECOVE SRANT PAY AYUDANDO LATINOS A SONAR P.O. BOX 961 EL GRANADA, CA 94018 46-2464722 501(C)(3) 15,000. 0. RESILIENCY & RECOVE SERIE FOR ASIAN AMERICAN MEDIA 145 NINTH STREET STE 350								
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3543 - 18TH STREET #19 94-3030212 501(C)(3) 40,531. 0. RESILIENCY & RECOVE GRANT ASSOCIATION OF CHINESE AMERICANS, INC 32585 CONCORD DR - MADISON HEIGHTS, MI 48071 38-2809409 501(C)(3) 12,000. 0. 2023 GIVE IN MAY AW AYPAL: BUILDING API COMMUNITY (FISCALLY SPONSORED BY ASIAN PACIFIC ENVIRONMENTAL - 1238 HARRISON ST - OAKLAND, CA 94612 94-3261846 501(C)(3) 27,000. 0. RESILIENCY & RECOVE GRANT PAY AYUDANDO LATINOS A SONAR P.O. BOX 961 EL GRANADA, CA 94018 46-2464722 501(C)(3) 15,000. 0. HMB GRANT CENTER FOR ASIAN AMERICAN MEDIA 145 NINTH STREET STE 350 46-2464722 501(C)(3) 15,000. 0. RESILIENCY & RECOVE				,				
SAN FRANCISCO, CA 9411094-3030212501(C)(3)40,531.0.GRANTASSOCIATION OF CHINESE AMERICANS, INC 32585 CONCORD DR - MADISON HEIGHTS, MI 4807138-2809409501(C)(3)12,000.0.2023 GIVE IN MAY AWAYPAL: BUILDING API COMMUNITY (FISCALLY SPONSORED BY ASIAN PACIFIC ENVIRONMENTAL - 1238 HARRISON ST - OAKLAND, CA 9461294-3261846501(C)(3)27,000.0.2023 GIVE IN MAY AWAYUDANDO LATINOS A SONAR P.O. BOX 961 EL GRANADA, CA 9401846-2464722501(C)(3)15,000.0.MMB GRANTCENTER FOR ASIAN AMERICAN MEDIA 145 NINTH STREET STE 35046-2464722501(C)(3)15,000.0.MRB GRANT	ASIAN WOMEN'S SHELTER							
ASSOCIATION OF CHINESE AMERICANS, INC 32585 CONCORD DR - MADISON HEIGHTS, MI 48071 38-2809409 501(C)(3) 12,000. 0. 2023 GIVE IN MAY AW AYPAL: BUILDING API COMMUNITY (FISCALLY SPONSORED BY ASIAN PACIFIC ENVIRONMENTAL - 1238 HARRISON ST - OAKLAND, CA 94612 94-3261846 501(C)(3) 27,000. 0. C. ASIANPACENVNETWK AYUDANDO LATINOS A SONAR P.O. BOX 961 EL GRANADA, CA 94018 46-2464722 501(C)(3) 15,000. 0. HMB GRANT CENTER FOR ASIAN AMERICAN MEDIA 145 NINTH STREET STE 350 RESILIENCY & RECOVE	3543 - 18TH STREET #19							RESILIENCY & RECOVERY
ASSOCIATION OF CHINESE AMERICANS, INC 32585 CONCORD DR - MADISON HEIGHTS, MI 48071 38-2809409 501(C)(3) 12,000. 0. 2023 GIVE IN MAY AW AYPAL: BUILDING API COMMUNITY (FISCALLY SPONSORED BY ASIAN PACIFIC ENVIRONMENTAL - 1238 HARRISON ST - OAKLAND, CA 94612 94-3261846 501(C)(3) 27,000. 0. C. ASIANPACENVNETWK AYUDANDO LATINOS A SONAR P.O. BOX 961 EL GRANADA, CA 94018 46-2464722 501(C)(3) 15,000. 0. HMB GRANT CENTER FOR ASIAN AMERICAN MEDIA 145 NINTH STREET STE 350 RESILIENCY & RECOVE	SAN FRANCISCO, CA 94110	94-3030212	501(C)(3)	40,531.	0.			GRANT
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AYPAL: BUILDING API COMMUNITY (FISCALLY SPONSORED BY ASIAN PACIFIC ENVIRONMENTAL - 1238 HARRISON ST - OAKLAND, CA 94612 94-3261846 501(C)(3) 27,000. 0. C.	INC 32585 CONCORD DR - MADISON							
(FISCALLY SPONSORED BY ASIAN PACIFIC ENVIRONMENTAL - 1238 HARRISON ST - OAKLAND, CA 9461294-3261846501(C)(3)27,000.0.RESILIENCY & RECOVE GRANT PAY ASIANPACENVNETWKAYUDANDO LATINOS A SONAR P.O. BOX 961 EL GRANADA, CA 9401846-2464722501(C)(3)15,000.0.HMB GRANTCENTER FOR ASIAN AMERICAN MEDIA 145 NINTH STREET STE 35046-246472501(C)(3)15,000.0.RESILIENCY & RECOVE RESILIENCY & RECOVE	HEIGHTS, MI 48071	38-2809409	501(C)(3)	12,000.	0.			2023 GIVE IN MAY AWARD
PACIFIC ENVIRONMENTAL - 1238 HARRISON ST - OAKLAND, CA 94612 94-3261846 501(C)(3) 27,000. 0. C. GRANT PAY ASIANPACENVNETWK ASIANPACENVNETWK ASIANPACENVNETWK ASIANPACENVNETWK ASIANPACENVNETWK ASIANPACENVNETWK 46-2464722 501(C)(3) 15,000. 0. C. HMB GRANT CENTER FOR ASIAN AMERICAN MEDIA 145 NINTH STREET STE 350	AYPAL: BUILDING API COMMUNITY			,				
HARRISON ST - OAKLAND, CA 94612 94-3261846 501(C)(3) 27,000. 0. ASIANPACENVNETWK AYUDANDO LATINOS A SONAR P.O. BOX 961 EL GRANADA, CA 94018 46-2464722 501(C)(3) 15,000. 0. HMB GRANT CENTER FOR ASIAN AMERICAN MEDIA 145 NINTH STREET STE 350 RESILIENCY & RECOVER	(FISCALLY SPONSORED BY ASIAN							RESILIENCY & RECOVERY
HARRISON ST - OAKLAND, CA 94612 94-3261846 501(C)(3) 27,000. 0. ASIANPACENVNETWK AYUDANDO LATINOS A SONAR P.O. BOX 961 EL GRANADA, CA 94018 46-2464722 501(C)(3) 15,000. 0. HMB GRANT CENTER FOR ASIAN AMERICAN MEDIA 145 NINTH STREET STE 350 RESILIENCY & RECOVER								GRANT PAY
AYUDANDO LATINOS A SONAR P.O. BOX 961 EL GRANADA, CA 94018 46-2464722 501(C)(3) 15,000. 0. HMB GRANT CENTER FOR ASIAN AMERICAN MEDIA 145 NINTH STREET STE 350 RESILIENCY & RECOVE		94-3261846	501(C)(3)	27,000.	0.			ASIANPACENVNETWK
P.O. BOX 961 EL GRANADA, CA 94018 46-2464722 501(C)(3) 15,000. 0. HMB GRANT CENTER FOR ASIAN AMERICAN MEDIA 145 NINTH STREET STE 350 RESILIENCY & RECOVER	,			, ,				
P.O. BOX 961 EL GRANADA, CA 94018 46-2464722 501(C)(3) 15,000. 0. HMB GRANT CENTER FOR ASIAN AMERICAN MEDIA 145 NINTH STREET STE 350 RESILIENCY & RECOVER	AYUDANDO LATINOS A SONAR							
EL GRANADA, CA 94018 46-2464722 501(C)(3) 15,000. 0. HMB GRANT CENTER FOR ASIAN AMERICAN MEDIA 145 NINTH STREET STE 350 RESILIENCY & RECOVER								
CENTER FOR ASIAN AMERICAN MEDIA 145 NINTH STREET STE 350 RESILIENCY & RECOVE		46-2464722	501(C)(3)	15 000.	0.			HMB GRANT
145 NINTH STREET STE 350 RESILIENCY & RECOVE			, ,		•			
145 NINTH STREET STE 350 RESILIENCY & RECOVE	CENTER FOR ASIAN AMERICAN MEDIA							
								RESILIENCY & RECOVERY
	SAN FRANCISCO, CA 94103	94-2801493	501(C)(3)	28,046.	0.			GRANT

Schedule I (Form 990) ASIAN PACIFIC Part II Continuation of Grants and Other A		mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990). Pa		94-3201522 Page
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHARITY CULTURAL SERVICES CENTER 731 COMMERCIAL ST. SAN FRANCISCO, CA 94108	94-2922453	501(C)(3)	25,150.	0.			RESILIENCY & RECOVERY GRANT
CHINESE FOR AFFIRMATIVE ACTION 17 WALTER U. LUM PLACE SAN FRANCISCO, CA 94108	94-2161304	501(C)(3)	15,000.	0.			HMB GRANT
CHINESE NEWCOMERS SERVICE CENTER 777 STOCKTON ST # 104 SAN FRANCISCO, CA 94108	13-4148824		25,186.	0.			RESILIENCY & RECOVERY GRANT
CHINESE PROGRESSIVE ASSOCIATION 1042 GRANT AVE 5TH FL SAN FRANCISCO, CA 94133	23-7404756	501(C)(3)	30,125.	0.			RESILIENCY & RECOVERY GRANT
COMMUNITY HEALTH FOR ASIAN AMERICANS - 1141 HARBOR BAY PKWY, SUITE 103 - ALAMEDA, CA 94502-2219	94-3237212	501(C)(3)	45,000.	0.			RESILIENCY & RECOVERY GRANT
COMMUNITY YOUTH CENTER OF SAN FRANCISCO – 1038 POST STREET – SAN FRANCISCO, CA 94109	94-1728818	501(C)(3)	50,217.	0.			HMB GRANT
DONALDINA CAMERON HOUSE 920 SACRAMENTO ST. SAN FRANCISCO, CA 94108	94-1618605	501(C)(3)	25,394.	0.			RESILIENCY & RECOVERY GRANT
FAMILY BRIDGES, INC. 168 - 11TH ST. OAKLAND, CA 94607	94-1725018	501(C)(3)	35,000.	0.			SAKAI GRANT
FILIPINO ADVOCATES FOR JUSTICE 310 - 8TH STREET, SUITE 309 OAKLAND, CA 94607	94-2218907	501(C)(3)	45,082.	0.			RESILIENCY & RECOVERY GRANT

Schedule I (Form 990) ASIAN PACIFIC Part II Continuation of Grants and Other A		mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990). Pa		94-3201522 Pag
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FILIPINO BAR ASSOCIATION OF							
NORTHERN CALIFORNIA - 268 BUSH							
ST., #2928 - SAN FRANCISCO, CA							
94104	47-2926743	501(C)(3)	10,000.	Ο.			GRANT
FILIPINO COMMUNITY CENTER SAN							
FRANCISCO (FISCALLY SPONSORED BY							RESILIENCY & RECOVERY
FILIPINO-AMERICAN - 4681 MISSION							GRANT (PAY FILIP AM DEV
STREET - SAN FRANCISCO, CA 94112	94-3300090	501(C)(3)	25,000.	Ο.			FDN)
FIRST VOICE, INC							
43 PARSONS STREET							RESILIENCY & RECOVERY
SAN FRANCISCO, CA 94118	94-3276737	501(C)(3)	25,000.	0.			GRANT
				••			
FRIENDS OF CHILDREN WITH SPECIAL							
NEEDS - 2300 PERALTA BLVD -							RESILIENCY & RECOVERY
FREMONT, CA 94536	77-0446853	501(0)(3)	48,298.	0.			GRANT
TREMONT, CA 94930	77 0440055	501(0)(3)	40,250.	0.			GRANT
GUM MOON RESIDENCE HALL							
940 WASHINGTON ST							RESILIENCY & RECOVERY
	94-1156357	501(0)(2)	25 074	0.			GRANT
SAN FRANCISCO, CA 94108	94-1156557	501(C)(3)	25,074.	0.			GRANT
UENDE OF HODE ACTAN AMERICAN							
HEART OF HOPE ASIAN AMERICAN							
HOSPICE CARE - 1879 LUNDY AVE STE	45 5300300	501 (2) (2)	05.000	0			RESILIENCY & RECOVERY
223 - SAN JOSE, CA 95131	45-5309302	501(C)(3)	25,000.	0.			GRANT
HELPING HANDS EAST BAY							
2447 SANTA CLARA AVE STE 201							RESILIENCY & RECOVERY
ALAMEDA, CA 94501	47-5078371	501(C)(3)	30,110.	0.			GRANT
INNOVATIVE SPACE FOR ASIAN							
AMERICAN CHRISTIANITY - 4706 VIA							
COLINA UNIT 780 - LOS ANGELES, CA							
90042	87-0771098	501(C)(3)	12,000.	0.			2023 GIVE IN MAY AWARD
INTERNATIONAL CHILDREN ASSISTANCE							
NETWORK - 532 VALLEY WAY -							RESILIENCY & RECOVERY
MILPITAS, CA 95035	77-0541211	501(C)(3)	25,000.	Ο.			GRANT

Schedule I (Form 990) ASIAN PACIFIC						. д Ш \	94-3201522 Page
Part II Continuation of Grants and Other A (a) Name and address of organization or government	(b) EIN	(c) IRC section (c) if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JAPANESE COMMUNITY YOUTH COUNCIL 2012 PINE ST. SAN FRANCISCO, CA 94115	23-7092514	501(C)(3)	25,881.	0.			RESILIENCY & RECOVERY GRANT
J-SEI, INC. 1285 66TH ST EMERYVILLE, CA 94608	94-2496799	501(C)(3)	37,315.	0.			RESILIENCY & RECOVERY GRANT
KHMER GIRLS IN ACTION PO BOX 90757 LONG BEACH, CA 90809	27-3087079	501(C)(3)	7,000.	0.			2023 GIVE IN MAY AWARD
KNITS AND KITS PO BOX 336605 LAS VEGAS, NV 89033	47-1932885	501(C)(3)	8,000.	0.			2023 GIVE IN MAY AWARD
KOREAN AMERICAN COMMUNITY SERVICES 136 BURTON AVE SAN JOSE, CA 95112	94-2659848	501(C)(3)	33,000.	0.			RESILIENCY & RECOVERY GRANT
KOREAN COMMUNITY CENTER OF THE EAST BAY - 101 CALLAN AVE, SUITE 400 - SAN LEANDRO, CA 94577	94-2503925	501(C)(3)	57,210.	0.			RESILIENCY & RECOVERY GRANT
LAOTIAN AMERICAN NATIONAL ALLIANCE 1612 K STREET, NW SUITE 600 WASHINGTON , DC 20006	35-2260474	501(C)(3)	9,000.	0.			2023 GIVE IN MAY AWARD
LAS VEGAS OKINAWAN CLUB 5240 SOUTH DECATUR BOULEVARD LAS VEGAS, NV 89118	87-4824783	501(C)(3)	12,000.	0.			2023 GIVE IN MAY AWARD
LAVENDER PHOENIX (FISCALLY SPONSORED BY CHINESE FOR AFFIRMATIVE ACTION) - 17 WALTER U. LUM PLACE - SAN FRANCISCO, CA	94-2161304	501(C)(3)	25,000.	0.			RESILIENCY & RECOVERY GRANT (PAY CHINESE4AFFIRMACT

Schedule I (Form 990) ASIAN PACIFIC FUND Part II Continuation of Grants and Other Assista 94-3201522 Page 1

Part II Continuation of Grants and Other				vernments (Sche	edule I (FOITI 990), Fa		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEADERSHIP EDUCATION FOR ASIAN							
PACIFICS - 327 E. 2ND STREET,							
SUITE 226 - LOS ANGELES, CA 90012	95-3879677	501(C)(3)	8,000.	0.			2023 GIVE IN MAY AWARD
LINCOLN HEIGHTS TUTORIAL PROGRAM							
2618 WORKMAN ST., RM. 13							
LOS ANGELES, CA 90031	13-4148824	501(C)(3)	8,000.	0.			2023 GIVE IN MAY AWARD
MAITRI							
P.O BOX 697							RESILIENCY & RECOVERY
SANTA CLARA, CA 95052	94-3132087	501(C)(3)	25,000.	0.			GRANT
SANTA CLARA, CA 95052	94-5152007	501(0)(3)	25,000.	υ.			GRANI
MUSLIM AMERICAN LEADERSHIP							
ALLIANCE - 47 WEST DIVISION ST.							
#159 - CHICAGO, IL 60610	47-3812096	501(C)(3)	39,000.	Ο.			GRANT
,,							
NARIKA							
PO BOX 1708							
FREMONT, CA 94538	94-3162871	501(C)(3)	55,046.	0.			STEPHEN HUAHN FUND
NIHONMACHI LITTLE FRIENDS							
1830 SUTTER STREET							RESILIENCY & RECOVERY
SAN FRANCISCO, CA 94115	94-2325686	501(C)(3)	25,036.	Ο.			GRANT
			,				
NORTHEAST MEDICAL SERVICES							
1520 STOCKTON ST.							
SAN FRANCISCO, CA 94133	94-1722562	501(C)(3)	5,070.	Ο.			2023 GIVE IN MAY AWARD
PROJECT BY PROJECT							
P.O. BOX 7093							
NEW YORK, NY 10116	13-4072850	501(C)(3)	12,000.	٥.			2023 GIVE IN MAY AWARD
REGIONAL PACIFIC ISLANDER							
TASKFORCE (FISCALLY SPONSORED BY							
SAN FRANCISCO PUBLIC - 1 HALLIDIE							RESILIENCY & RECOVERY
PLAZA, SUITE 808 - SAN FRANCISCO,	94-3117093	501(C)(3)	25,000.	Ο.			GRANT

Schedule I (Form 990) ASIAN PACIFIC FUND Part II Continuation of Grants and Other Assista 94-3201522 Page 1

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RICHMOND DISTRICT NEIGHBORHOOD							DEGITITENOV & DEGOVEDV
CENTER - 741 30TH AVENUE - SAN	94-2684271	501(C)(3)	25 000	0.			RESILIENCY & RECOVERY GRANT
FRANCISCO, CA 94121	94-2084271	501(C)(3)	25,000.	0.			GRANI
SAN FRANCISCO STATE UNIVERSITY							
FOUNDATION - 1600 HOLLOWAY AVE,							GRANT - MENTAL HEALTH
ADM 153 - SAN FRANCISCO, CA 94132	26-1169717	501(C)(3)	10,000.	0.			EVENT SPONSORSHIP
SANTA CLARA COUNTY ASIAN LAW							
ALLIANCE - 991 W HEDDING ST #202 -							
SAN JOSE, CA 95126	94-2439581	501(C)(3)	15,150.	0.			TENCENT GRANT
SEEDING CHANGE (FISCALLY SPONSORED							
BY CENTER FOR EMPOWERED POLITICS							RESILIENCY & RECOVERY
EDUCATION FU - 1042 GRANT AVE, STE	45 2004124	E01(0)(2)	25 000	0			GRANT (PAY
5 - SAN FRANCISCO, CA 94133	45-3084134	501(C)(3)	25,000.	0.			CTR4EMPPOLEDUFN
SELF-HELP FOR THE ELDERLY							
731 SANSOME STREET, STE 100							
SAN FRANCISCO, CA 94111	94-1750717	501(C)(3)	30,000.	0.			TENCENT GRANT
			,				
SF HEP B FREE - BAY AREA							
101 GROVE STREET #406							RESILIENCY & RECOVERY
SAN FRANCISCO, CA 94102	94-3255070	501(C)(3)	25,000.	0.			GRANT
SOUTHEAST ASIAN DEVELOPMENT CENTER							
166 EDDY ST.			05.450				RESILIENCY & RECOVERY
SAN FRANCISCO, CA 94102	94-2532304	501(C)(3)	25,150.	0.			GRANT
THE BAY SCHOOL OF SAN FRANCISCO							
35 KEYES AVENUE THE PRESIDIO							
SAN FRANCISCO, CA 94129	94-3266229	501(C)(3)	35,200.	0.			GRANT
				```			
UNITED CAMBODIAN COMMUNITY							
2201 E. ANAHEIM ST., STE. 200							
LONG BEACH, CA 90814	95-3442295	501(C)(3)	12,000.	Ο.			2023 GIVE IN MAY AWARI

Schedule I (Form 990) ASIAN PACIFIC FUND . .

94-3201522 Page 1

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VIETNAMESE AMERICAN COMMUNITY							
CENTER OF THE EAST BAY - 198 E.							
14TH STREET - SAN LEANDRO, CA							RESILIENCY & RECOVERY
94577	20-5358946	501(C)(3)	45,106.	0.			GRANT
VIETNAMESE VOLUNTARY FOUNDATION							
(VIVO) - 2296 QUIMBY RD - SAN JOSE							RESILIENCY & RECOVERY
, CA 95122	94-2764504	501(C)(3)	25,000.	0.			GRANT
WAH MEI SCHOOL							
1400 JUDAH ST							RESILIENCY & RECOVERY
SAN FRANCISCO, CA 94122	23-7321428	501(C)(3)	25,031.	0.			GRANT
YU-AI KAI							
588 N FOURTH STREET							RESILIENCY & RECOVERY
SAN JOSE, CA 95112	94-2427398	501(C)(3)	25,091.	0.			GRANT
	51 212,550	501(0/(5/					

Schedule I (Form 990) 2023

Page 2

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
CHOLARSHIP AWARDS	58	168,667.	0.		

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

FOR APF PROGRAM GRANTS, GRANTEE ORGANIZATIONS ARE REQUIRED TO SUBMIT

REPORTS ON HOW THE FUNDS WERE UTILIZED. FOR RENEWABLE SCHOLARSHIP GRANTS,

STUDENTS ARE REQUIRED TO FORWARD THEIR TRANSCRIPTS AND SEND UPDATE

LETTERS/REPORTS ON THEIR SCHOOL EXPERIENCE.

SC	HEDULE J	OMB No. 1545-0047			47	
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		20	23	2
		Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		20)
	tment of the Treasury	Attach to Form 990.		Open to Inspe		IC
	al Revenue Service le of the organizatior	Go to www.irs.gov/Form990 for instructions and the latest information.	Employer id	-		mber
	ie er ine erganization	ASIAN PACIFIC FUND		01522		
Pa	rt I Question	s Regarding Compensation				
					Yes	No
1a	Check the appropri	ate box(es) if the organization provided any of the following to or for a person listed on Form	990,			
		line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or c		nal use			
	Travel for com	panions Payments for business use of personal re	sidence			
	Tax indemnific	ation and gross-up payments Health or social club dues or initiation fee	S			
	Discretionary s	spending account Personal services (such as maid, chauffer	ur, chef)			
b	•	on line 1a are checked, did the organization follow a written policy regarding payment or				
-		rovision of all of the expenses described above? If "No," complete Part III to explain		<u>1b</u>		
2	-	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2		
2	Indianta which if ar	of the following the experimetion used to establish the companyation of the experimetion?				
3		ny, of the following the organization used to establish the compensation of the organization's				
		ector. Check all that apply. Do not check any boxes for methods used by a related organizati ation of the CEO/Executive Director, but explain in Part III.				
	Compensation					
	·	ompensation consultant Compensation survey or study				
		ther organizations X Approval by the board or compensation of	ommittee			
			Johnmittee			
4	During the year, did	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
	organization or a re					
а	Receive a severanc	e payment or change-of-control payment?		. 4a		х
b	Participate in or rec	eive payment from a supplemental nonqualified retirement plan?		4b		Х
с	Participate in or rec	eive payment from an equity-based compensation arrangement?		4c		х
	If "Yes" to any of lin	nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	on			
	contingent on the re			_		v
						X
b		ation?		. <u>5b</u>		X
~		or 5b, describe in Part III.				
6		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation of a complexity of the section	bn			
	contingent on the n			60		x
a h		ation2		. <u>6a</u> 6b		x
u		ation?		. 00		
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	2			
'		the solution and the organization provide any noninxed payments the solution provide any noninxed payments the solution of the solution provide any noninxed payments the solution of the solution provide any noninxed payments the solution of the solution provide any noninxed payments the solution of the solution provide any noninxed payments the solution of the solution provide any noninxed payments the solution of the solution provide any noninxed payments the solution of the solution provide any noninxed payments the solution of the solution provide any noninxed payments the solution of the solutio		7		x
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the		·· '		
5				8		x
9		id the organization also follow the rebuttable presumption procedure described in				
-	Regulations section			. 9		
For		on Act Notice, see the Instructions for Form 990.		ile J (Forr	n 990)) 2023

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Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) CAROLYN WANG KONG	(i)	246,000.	25,000.	0.	0.	0.	271,000.	0.	
PRESIDENT & EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) GURPREET TUNG	(i)	144,996.	7,228.	0.	0.	0.	152,224.	0.	
DIRECTOR OF DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	<u>(ii)</u>								
	(i)								
	(ii)								
	(i)								
	<u>(ii)</u>								
	(i)								
	<u>(ii)</u>								
	(i)								
	(ii)								
	(i) (ii)								
	(i) (ii)								
	(i)								
	(i) (ii)								
	(i)								
	(i) (ii)								
	(i)								
	(ii)								

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

23

Department of the Treasury Internal Revenue Service

Devit

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection Employer identification number

20

Name of the organization

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- 1

ASIAN PACIFIC FUND

94-3201522

Pa	TT Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu		•	s
1	Art - Works of art			, j j				
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	х	4	102,518.	FMV			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()							
28	Other ()			<u> </u>				
29	Number of Forms 8283 received by the organiz		•					
	for which the organization completed Form 828	3, Part V, D	onee Acknowledg	ement 29				
							Yes	No
30a	During the year, did the organization receive by	contributio	n any property rep	orted in Part I, lines 1 throug	gh 28, that it			
	must hold for at least 3 years from the date of t							
	exempt purposes for the entire holding period?					30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p		•	•	tions?	31	х	
32a	Does the organization hire or use third parties of	or related or	ganizations to solid	cit, process, or sell noncash				
	contributions?					32a		Х
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in co	olumn (c) for	a type of property	r for which column (a) is che	cked,			
	describe in Part II.							

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

Schedule M (Form 990) 2023

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Schedule M	M (Form 990) 2023 ASIAN PACIFIC FUND	94-3201522	Page 2
Part II	Supplemental Information. Provide the information required by Part I, lines 30b is reporting in Part I, column (b), the number of contributions, the number of items receive this part for any additional information.	, 32b, and 33, and whether the organiz red, or a combination of both. Also cor	zation nplete
CHEDULE	M, PART I, COLUMN (B):		
HE NUMBI	ER OF CONTRIBUTIONS IS REPORTED.		
		0.1 1. 1. 1 . (7)	
32142 09-11-		Schedule M (For	m 990) 202
	48		

2023.05000 ASIAN PACIFIC FUND

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization

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 Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



Employer identification number 94-3201522

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

ASIAN PACIFIC FUND

BY INCREASING PHILANTHROPY AND SUPPORTING THE ORGANIZATIONS THAT SERVE

OUR MOST VULNERABLE COMMUNITY MEMBERS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

VARIOUS COMMUNITY EDUCATION PROGRAMS

EXPENSES \$ 28,630. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION B, LINE 11B:

PRIOR TO FILING, THE RETURN IS SENT ELECTRONICALLY TO THE ENTIRE BOARD OF

DIRECTORS WITH A DEADLINE TO RESPOND WITH QUESTIONS OR COMMENTS.

FORM 990, PART VI, SECTION B, LINE 12C:

WE REGULARLY MONITOR AND ENFORCE COMPLIANCE WITH OUR CONFLICT OF INTEREST

POLICY AT THE ANNUAL RETREAT OF THE BOARD OF DIRECTORS, EACH DIRECTOR IS

ASKED TO REVIEW AND SIGN A PERSONAL STATEMENT. THE RESPONSES ARE REVIEWED.

NO DIRECTOR HAS YET REPORTED A CONFLICT OF INTEREST. IF ONE WERE NOTED,

THIS WOULD BE DISCUSSED WITH THAT INDIVIDUAL DIRECTOR, DISCLOSED TO THE

CHAIRMAN AND STEPS TAKEN TO ELIMINATE THE CONFLICT FORTHWITH THE SIGNED

STATEMENTS ARE RETAINED AS PART OF CORPORATE RECORDS.

FORM 990, PART VI, SECTION B, LINE 15A:

AN ANNUAL PERFORMANCE REVIEW FOR THE PRESIDENT/EXECUTIVE DIRECTOR IS

CREATED THAT INCLUDES FEEDBACK FROM ALL BOARD MEMBERS AND STAFF. ANY

CHANGES IN COMPENSATION INCLUDE A CONSIDER ACTION OF COMPARABLES AND THE

ANNUAL PERFORMANCE REVIEW.

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

Schedule O (Form 990) 2023

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Name of the organization

ASIAN PACIFIC FUND

Page 2 Employer identification number 94-3201522

FORM 990, PART VI, SECTION C, LINE 19:

GOVERNING DOCUMENTS AND THE CONFLICT OF INTEREST POLICY ARE MADE AVAILABLE

UPON REQUEST. A SUMMARY OF THE FINANCIAL STATEMENT IS POSTED ON-LINE ON THE

ORGANIZATION'S WEBSITE.

FORM 990, PART XII, LINE 2C:

THE ORGANIZATION DID NOT CHANGE ITS OVERSIGHT PROCESS OR SELECTION

PROCESS DURING THE TAX YEAR.

Schedule O (Form 990) 2023

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