

National Asian Pacific Center on Aging

ANNUAL REPORT 2012-2013



Table of Contents

- Our Work at a Glance 4

- Addressing Economic Security 8
 - SENIOR COMMUNITY SERVICE EMPLOYMENT PROGRAM (SCSEP) 8
 - SENIOR ENVIRONMENTAL EMPLOYMENT (SEE) PROGRAM 10
 - AGRICULTURE CONSERVATION EXPERIENCED SERVICES (ACES) 10

- Addressing Health and Well-being 12
 - HEALTHY AGING / NATIONAL RESOURCE CONSORTIUM
ON RACIAL AND ETHNIC MINORITY SENIORS 12
 - NAPCA HELPLINE 13

- Addressing Language Access 14

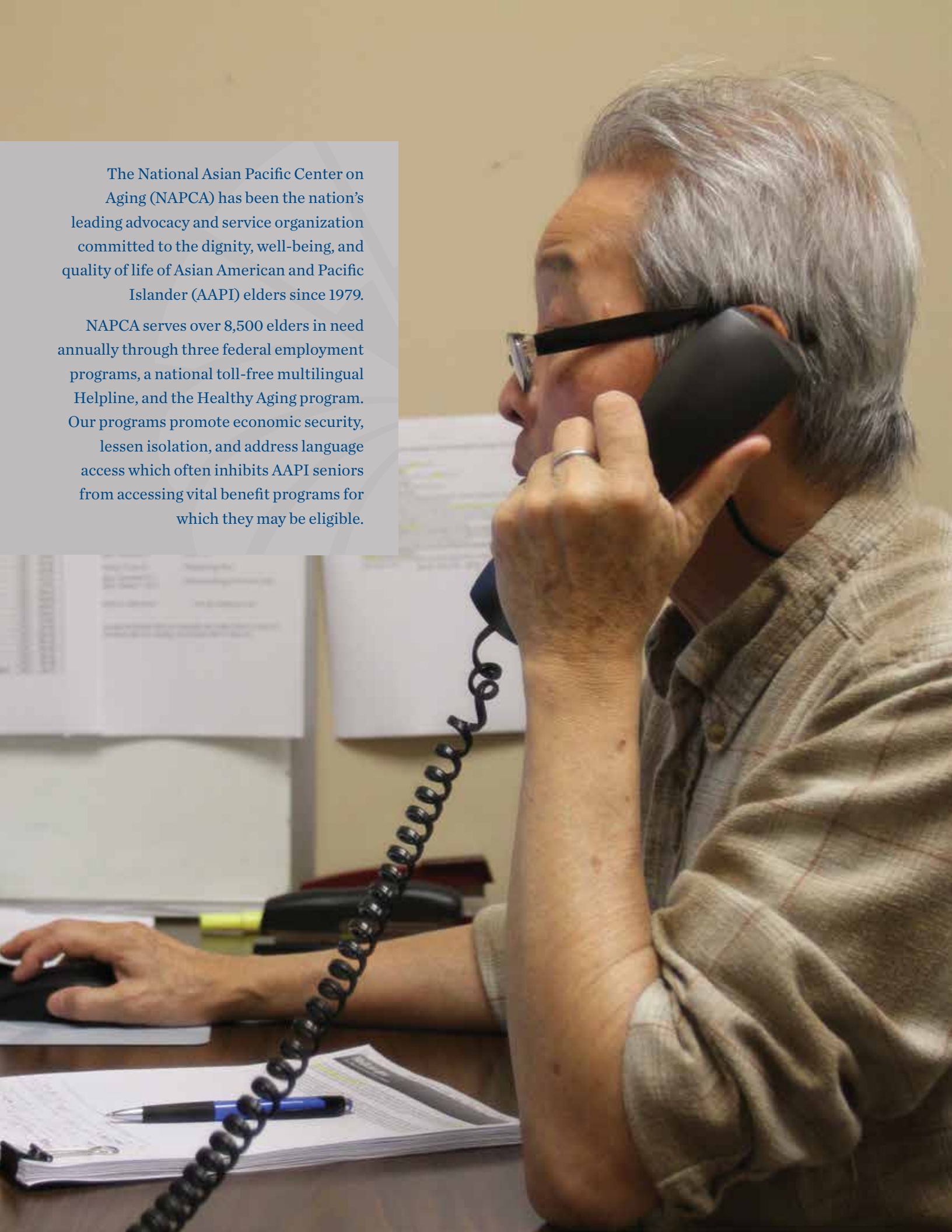
- Informing the Community 15

- Financials 16

- Supporters 17

The National Asian Pacific Center on Aging (NAPCA) has been the nation's leading advocacy and service organization committed to the dignity, well-being, and quality of life of Asian American and Pacific Islander (AAPI) elders since 1979.

NAPCA serves over 8,500 elders in need annually through three federal employment programs, a national toll-free multilingual Helpline, and the Healthy Aging program. Our programs promote economic security, lessen isolation, and address language access which often inhibits AAPI seniors from accessing vital benefit programs for which they may be eligible.



CHRISTINE I. TAKADA
President and CEO

BOARD OF DIRECTORS

HON. PATRICIA SAIKI
Chair

DAVID B. COHEN
Vice chair

HON. RUBY G. MOY
Secretary

JOHN Q. DUONG
Chair emeritus

DEBORAH F. CHING

ANNA CROSSLIN

SANDRA HIJIKATA

DAVID L. KIM

YVONNE TATSUNO

BERNARDA WONG

PABLO J. WONG

Dear Friend,

The NAPCA Board and staff continue to strengthen the capacity and reach of the organization while pursuing new challenges in addressing the needs of Asian American and Pacific Islander elders.

NAPCA appreciates the generous support of funders that enabled us to create in-language materials, online health resources, and innovative tools such as the on-line Medicare Screening Tool used to determine eligibility for Medicare and related cost-saving programs in Chinese, Korean, Vietnamese, and English.

We remain committed to improving the lives of all AAPI elders through older worker employment programs, the resources and efforts of our Healthy Aging program, disaggregated data highlighting the needs and conditions of AAPI older adults provided by our research staff, and assistance to limited English speaking callers to the NAPCA Helpline.

Helpline received over 7,000 calls from Cantonese, Mandarin, Korean, Vietnamese, and English speakers eager to understand social insurance programs and obtain cost-savings through Medicare prescription drug plans. Calls are increasing from elders interested in knowing the implications of the Affordable Care Act, and although funding is limited, NAPCA is committed to providing key information to our population.

In spite of a difficult funding environment, NAPCA was awarded an additional \$3 million grant to serve 300 older workers in four cities.

As we approach the conclusion of an intensive three-year strategic planning process, we are grateful to our partners in the community and for the individuals, institutions, and corporations that have shown their support and trust in us.

We look forward to continuing our collaborative work to serve all AAPI elders.

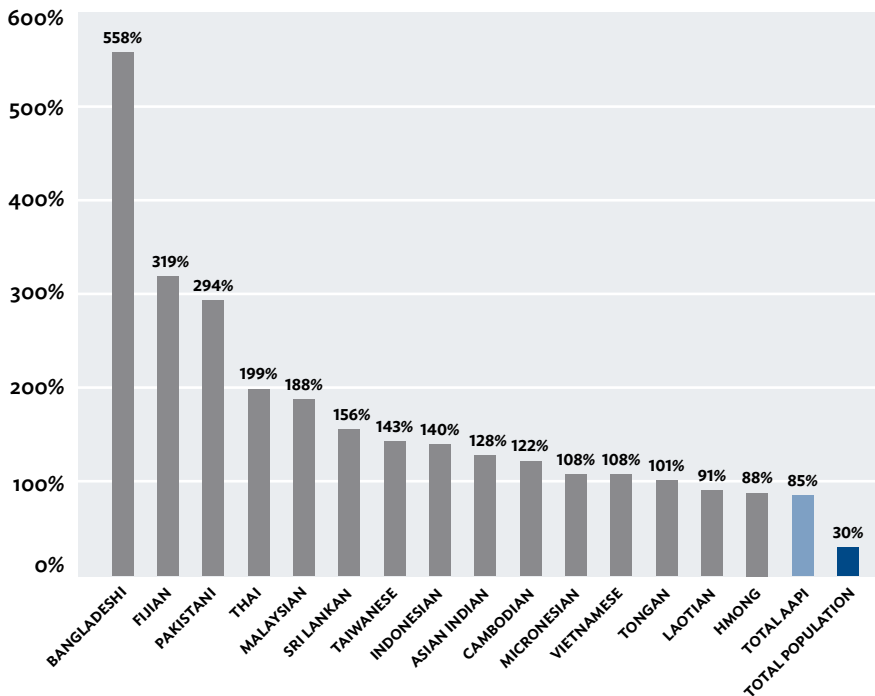
Patricia Saiki
Chairman of the Board

Christine Takada
President and CEO



OUR WORK AT A GLANCE

1 FIGURE 1: POPULATION GROWTH OF AAPI ELDERS (55+), 2000–2010



SOURCE: U.S. CENSUS BUREAU, 2000 AND 2010 U.S. CENSUS

The AAPI community aged 55 years and older is projected to grow 240% in the next 50 years. Although the aggregated AAPI population growth is significant, disaggregated data reveal that numerous AAPI ethnic sub-groups will experience growth that far exceeds the aggregated projections. Between 2000 and 2010, for instance, AAPI sub-group populations (55+) grew as much as 558%, and a majority of the AAPI sub-group populations (55+) grew more than 100%. Conversely, aggregated data from 2000 and 2010 indicate that the total AAPI older adult (55+) population only grew 85%. It is necessary to disaggregate the data in order to fully understand the future growth of AAPI elders, the diversity that exists within this population, and the specific needs faced by elders of particular AAPI ethnic sub-groups.

Our Mission

The National Asian Pacific Center on Aging's mission is to serve as the nation's leading advocacy and service organization committed to the dignity, well-being, and quality of life of Asian Americans and Pacific Islanders (AAPIs) as they age.

Our Strategies

1. **DEVELOP A STRONG NETWORK** of CBOs and leading national organizations that will collaborate effectively to ensure high-quality advocacy and services for the AAPI elderly community
2. Establish and implement a **RESEARCH, KNOWLEDGE,** and **EDUCATION** agenda
3. **PROVIDE BI-PARTISAN ADVOCACY** to make the national case for AAPI elderly needs and influence positive policy outcomes
4. **ESTABLISH THE NAPCA BRAND** as the leading voice for AAPI elders
5. **DIVERSIFY FUNDING SOURCES** beyond government grants

Our Vision

AAPI elders, regardless of language, cultural, economic, or other barriers, will have access to and equity in the services, benefits, and programs that are available to all American senior citizens, and will be able to age with dignity, well-being, and a high quality of life.

Issues Faced by AAPI Elders

NAPCA serves AAPI elders by building strong partnerships and working with community-based organizations (CBOs) across the nation. In 2012, NAPCA conducted a needs assessment survey of its community partners to better understand the needs and challenges of the AAPI elder community.

The CBOs were asked to rank 10 issues facing AAPI elders based on how important they believed those issues to be. The CBOs identified health/medical care, economic security, and housing as the most important issues facing AAPI elders. Other significant issues that pose challenges for the AAPI elder population include caregiving/long-term care and food/nutrition.

2

FIGURE 2: TOP 10 PRIORITY ISSUES FOR AAPI ELDERS IDENTIFIED BY CBOs

1. HEALTH/MEDICAL CARE/FITNESS	6. TRANSPORTATION
2. ECONOMIC SECURITY	7. IMMIGRATION/CITIZENSHIP
3. HOUSING	8. MENTAL HEALTH
4. CAREGIVING/LONG-TERM CARE	9. EMPLOYMENT
5. FOOD/NUTRITION	10. ELDER ABUSE

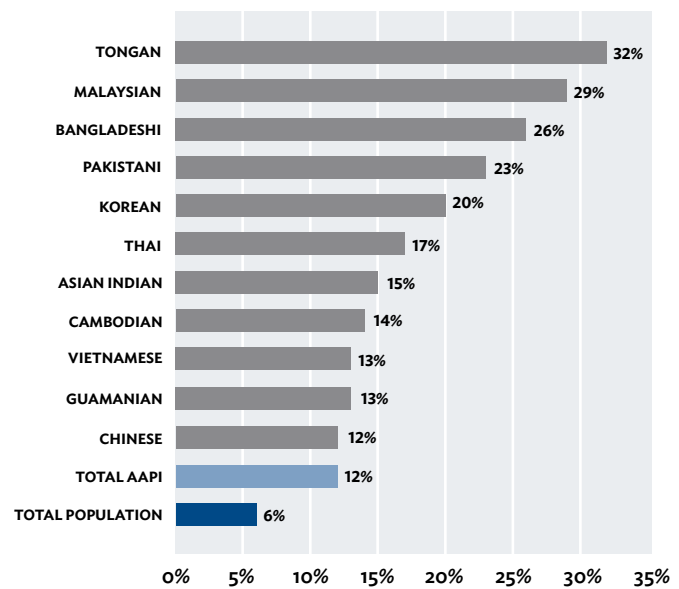
In addition to prioritizing the issues that AAPI elders often face, the CBOs were asked to identify key issues that are *not* being adequately addressed by organizations in their communities. Over 50% of responding CBOs identified social isolation as the key issue for AAPI elders that is not being adequately addressed. Additionally, 41% of CBOs reported that mental health is an important issue that is not being adequately addressed.

In an open-ended format, CBOs were asked what barriers AAPI elders confront when accessing resources or information. Out of the 70 CBOs that answered this question, 76% reported that language was a significant barrier. Transportation (31%), cultural appropriateness (20%), and lack of awareness (14%) were also mentioned as barriers to accessing information and resources for AAPI elders.

FIGURE 3: UNINSURED RATES OF AAPI ELDERS (AGED 55+)

Health Access Disparities

As identified by the NAPCA CBO Survey, the top issue facing AAPI elders is health care. Many AAPI older adults are uninsured at more than double the rate of the general population (6%) and non-Hispanic White older adults (5%). Almost 370,000 AAPI adults aged 55 years and older remain uninsured. Disaggregated data reveal that some AAPI subgroups, such as Tongans, are uninsured at rates as high as 32%, and more than one in five Koreans, Pakistanis, Bangladeshis, and Malaysians do not have health insurance.

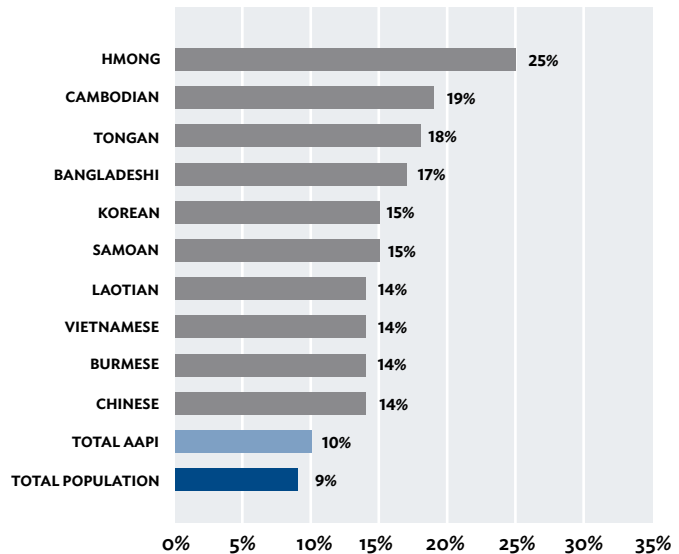


SOURCE: U.S. CENSUS BUREAU, 2009-2011 ACS 3-YEAR SUMMARY ESTIMATES

FIGURE 4: POVERTY RATES OF AAPI ELDERS (AGED 55+)

Economic Disparities

Another key concern for AAPI elders identified in the NAPCA CBO Survey is economic security, which is often masked by grouping Asian subgroups together. Specific AAPI ethnic groups, such as Hmong elders have poverty rates as high as 25%, much higher than the general older adult population. Hmong elders aged 55 years and older have average individual incomes below \$12,000, while Cambodian and Laotian elders (55+) have average individual incomes below \$17,000. However, the average aggregated annual individual income of AAPI older adults (55+) is \$32,507, which is comparable to the average individual income of the general older adult (55+) population. Thus, higher poverty rates are hidden by aggregating all AAPIs together (10% living in poverty).



SOURCE: U.S. CENSUS BUREAU, 2006-2010 ACS 5-YEAR SUMMARY ESTIMATES

Our Impact

NAPCA is dedicated to serving a diverse group of AAPI seniors (Figure 5) through its various programs. In 2013 alone, NAPCA's five programs served 8,590 seniors.

In 2013, NAPCA has...

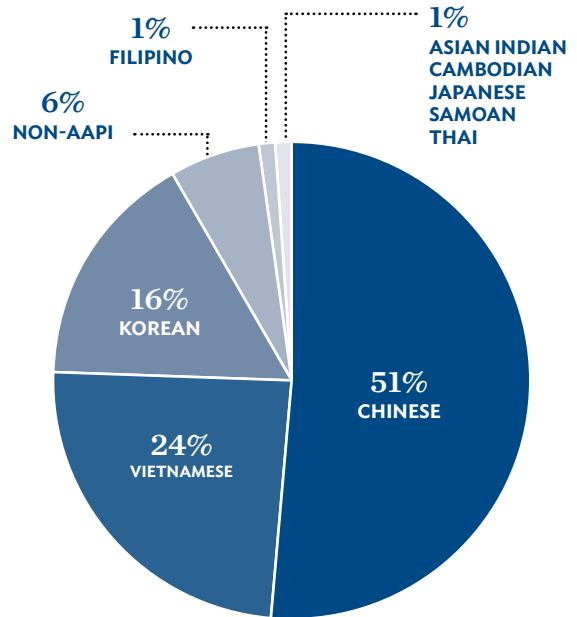
PARTNERED with 417 organizations

PUBLISHED 3 reports on NAPCA programs

PROMOTED health information and access through 120 articles, press releases, and postings

5

FIGURE 5: ELDERS SERVED BY NAPCA, 2013



NAPCA Helpline staff informs seniors of Medicare changes resulting from the implementation of the Affordable Care Act (ACA) including:

- free preventive services, such as mammograms and prostate cancer screenings
- free annual checkups
- elimination of the Medicare Part D prescription drug coverage gap (“donut hole”)

The Health Insurance Marketplace Open Enrollment begins October 1, 2013, allowing consumers to compare dozens of health insurance plans. This is an opportunity for uninsured or underinsured individuals to identify and enroll in affordable plans that meet their needs.

The federal government is expanding Medicaid eligibility; states have an option to participate. The expansion extends eligibility to individuals age

19–64 with limited income. Prior to this expansion, Medicaid was only available to individuals who are low income and:

- have significant disabilities
- are 65 years and older
- are under the age of 19 or
- pregnant women

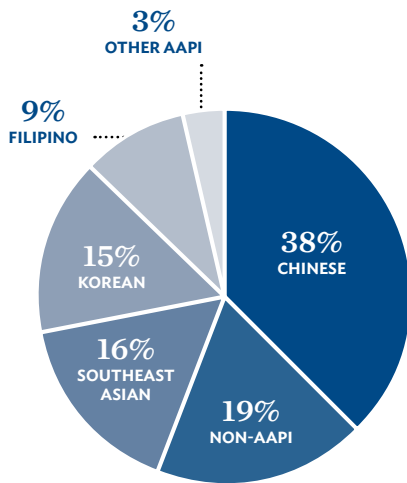
Tax credits are now available to individuals with incomes above Medicaid eligibility levels but below 400% of the federal poverty level. These tax credits are applied immediately and result in lower premiums.

These represent a few of the provisions of the ACA that impact our seniors. NAPCA is already experiencing increased call volume to the Helpline as the Health Insurance Marketplace and Medicaid expansion are being implemented.

Addressing Economic Security

6

FIGURE 6: DISTRIBUTION OF NAPCA SCSEP PARTICIPANTS BY AAPI SUB-GROUP, 2013



Senior Community Service Employment Program (SCSEP)

The first and only national grantee to serve older AAPI and mainstream job seekers.

Since 1989, NAPCA has been an AAPI-focused national grantee serving unemployed AAPI older adults aged 55 and above through the SCSEP program.

The majority of AAPI seniors who participate in the program originally immigrated to the United States in hopes of providing greater opportunities for their children and families but found themselves faced with language, cultural, and other barriers limiting their access to employment.

Despite employment barriers, such as limited English proficiency, low employment prospects, and lack of transferrable work experiences, NAPCA has helped participants obtain employment. Approximately 36% of exited participants leave for permanent jobs that enable them to live independent, self-sufficient lives.

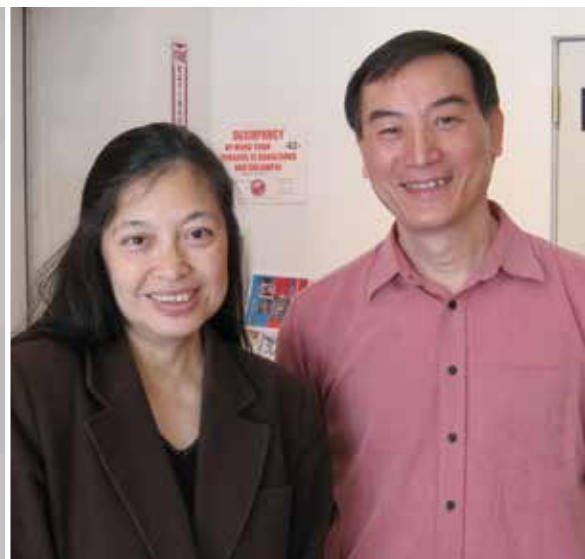
In FY2013, NAPCA received an additional grant of \$2.8 million to serve mainstream older adults through the SCSEP program. NAPCA is pleased to expand our capacity to serve the needs of all older adults based on the successful performance of the past 24 years.

Sik Man Leung immigrated from Hong Kong in the 2000s. Mr. Leung and his wife lived with family and both were unemployed for 10 years, during a period when Mrs. Leung was recuperating from a serious illness.

After Mrs. Leung recovered, Mr. Leung went in search of work.

Finding none, he applied to the SCSEP program in 2010. Mr. Leung had 18 years of office experience and was fluent in Cantonese, Mandarin, and some English. He was assigned to the Chinese American Museum in Chicago as a program assistant to improve his English skills. He quickly learned the exhibits and began giving docent tours. After one year of training, Mr. Leung was hired by the museum as a part-time Office Assistant.

SIK MAN LEUNG, SCSEP Participant



SCSEP By The Numbers

Nationally, NAPCA served 1,156 low-income AAPI seniors through 10 project sites in FY 2013.

55% female and 45% male

38% age 65 and older

32% have no high-school diploma

92% are below poverty level

84% are limited English proficient

95% have low employment prospects

696,931 hours of community service were provided by NAPCA SCSEP participants in FY 2013

In FY 2013, NAPCA partnered with over 417 non-profits nationwide, contributing more than \$1,397,190 of in-kind support.

SCSEP is the only federally funded program specifically targeting older adults seeking employment and training assistance.

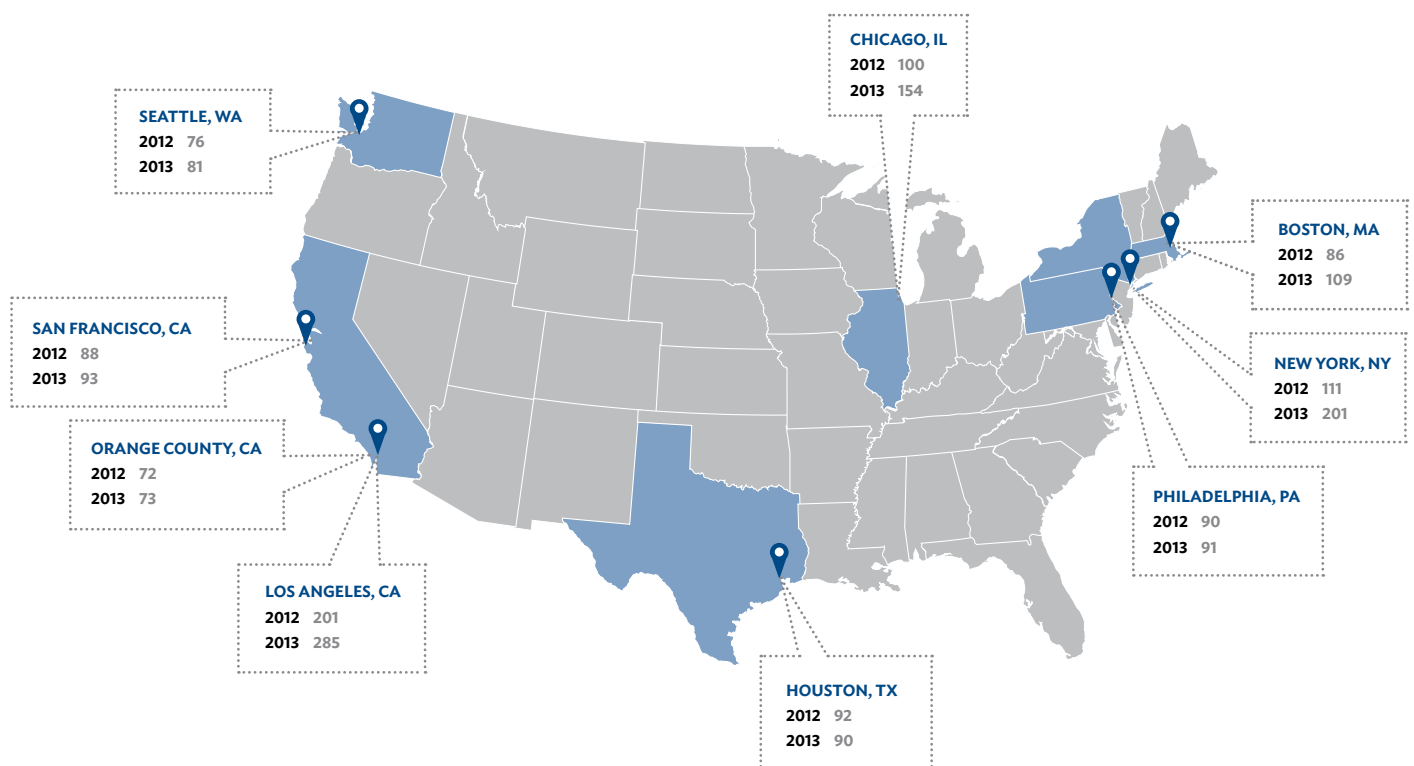
NAPCA partnered with organizations that provide SCSEP participants exposure to the work environment to develop their skills, build their self-confidence, and lessen their isolation while providing them with a minimum income.

SCSEP partners must be a 501(c)(3) non-profit organization or government agency, such as a social service agency, senior center, daycare center, public library, public school, or community health clinic.

Over the years, NAPCA has addressed this growing need by providing SCSEP services to unemployed low-income older adults with customized and individualized job training for an average of 20 hours per week. This training helps each participant obtain skills, opportunities, and support in a linguistically and culturally appropriate environment.

7

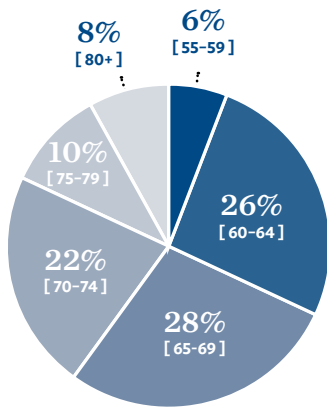
FIGURE 7: NUMBER OF PARTICIPANTS SERVED BY NAPCA SCSEP, 2013



8

FIGURE 8: AGES SERVED IN SEE AND ACES, 2013

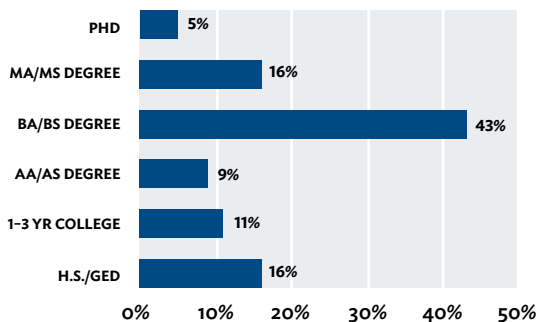
The larger age groupings in SEE and ACES are almost equally divided between the 60-64, 65-69, and 70-74 age ranges. Eight percent of the enrollees are 80 years and older.



9

FIGURE 9: EDUCATION LEVEL OF ENROLLEES IN SEE AND ACES, 2013

Almost two-thirds of the enrollees in the SEE or ACES programs hold a bachelors, masters, or doctoral degree.



NAPCA matches older workers aged 55 and older to federal agencies in need of specific expertise through its SEE and ACES programs.

The Senior Environmental Employment (SEE) program and the Agriculture Conservation Experienced Services (ACES) program serve a diverse range of age groups (Figure 8) and educational attainment (Figure 9).

Senior Environmental Employment (SEE)

NAPCA's SEE program assists the U.S. Environmental Protection Agency (EPA) and other federal and state agencies in meeting their environmental mandates by using the talents and experience of workers 55 years of age and older in support positions that range from clerical and administrative, to scientific, technical, and field positions. Enrollees contribute their experience, knowledge, and work ethic, while increasing their skill levels, helping their own financial security, and maintaining active learning and social interaction.

Agriculture Conservation Experienced Services (ACES)

The ACES program assists the U.S. Department of Agriculture's Natural Resources Conservation Service (NRCS) by providing workers 55 years of age and older to support conservation-related programs. Enrollees use the knowledge and experience gained over their long careers to do meaningful and technical work to contribute to the conservation of our natural resources.

A SEE enrollee says: "It is never too late to learn and to do things you want to do in our life. I find that the Senior Environmental Employment (SEE) program is a wonderful opportunity to finish whatever God wants us to do before we leave. This program definitely has great potential for each enrollee to leave a legacy in our work place, in our society, and above all in our immediate and extended family. I am grateful to the organizers of the SEE program for giving me this opportunity and thank God that I feel that I am using my talents and my life effectively."



Mutually Beneficial Partnerships

In the past year, NAPCA has served almost 250 seniors 55 years of age and older through the SEE and ACES programs. Both programs, which have placed enrollees in states as far reaching as New York, Alabama, Hawaii, and Alaska are administered through the Washington, D.C. Project Office, the Region V project office in Chicago, IL, and the Region X Project Office in Seattle, WA.

NAPCA has maintained strong relationships with NRCS, EPA, and other federal and state agencies to ensure job stability and safety for enrollees in the SEE and ACES programs, and to provide these agencies with qualified seniors who are able to provide the support they need.

Pride, Independence, and Improved Livelihoods

The SEE Program battles age discrimination in the workplace through a competitive interviewing and hiring process, which values the skills and experience of the older adults and reinstates their sense of pride, self-confidence, and truly capitalizes on their professional capabilities. These programs allow for this population to:

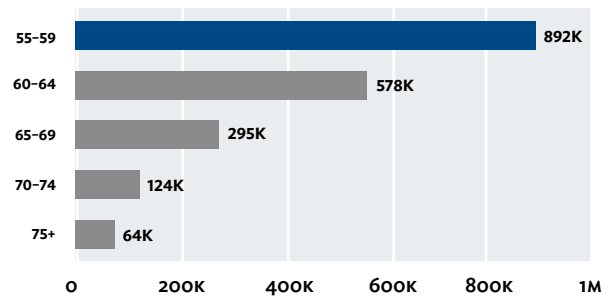
CONTINUE earning an income, receive benefits, and continue giving back to their communities

SHARE the wisdom and experience that comes from having worked lifetimes

EXPAND their skills and **PARTICIPATE** in gratifying environmental protection responsibilities

10

FIGURE 10: NUMBER OF UNEMPLOYED SENIORS IN THE GENERAL POPULATION, 2012



SOURCE: U.S. DEPARTMENT OF LABOR, BUREAU OF LABOR STATISTICS, LABOR FORCE STATISTICS FROM THE CURRENT POPULATION SURVEY: [HTTP://DATA.BLS.GOV/PDQ/QUERYTOOL.JSP?SURVEY=LN](http://data.bls.gov/pdq/querytool.jsp?survey=ln)

Nationwide labor force statistics show that there are close to two million seniors 55 years of age and older who are actively seeking employment, often willing to take positions far under their skill and education levels. Enrollment in the SEE and ACES programs provides seniors with opportunities to retain their dignity, foster their physical and mental well-being, and increase their overall quality of life.

SEE and ACES enrollees often express their appreciation for these programs. An ACES enrollee says that it is “a truly gratifying experience, knowing that her efforts helped local farmers qualify for federal conservation programs, as well as the processing and completion of documentation that ultimately led to the federal payments to farmers for their hard work in completing conservation practices. ACES provided her with the opportunity to use her administrative and accounting skills in new and challenging areas. ACES allowed her to not only keep active mentally, but to enjoy new experiences and acquaintances.” What was initially a temporary position grew into a challenging and enjoyable experience that was made possible only through the ACES program.

SEE enrollees likewise say they have benefited by gaining knowledge and experience, learned the value of cooperation with various teams and co-workers, and have been mentally stimulated and challenged.

Addressing Health and Well-being

Impact

DISTRIBUTED 400 vouchers to AAPI-serving organizations and offered free flu-shot clinics through a partnership with the Centers for Medicare and Medicaid Services, U.S. Department of Health and Human Services Office of Minority Health, and Walgreens.

CONDUCTED outreach presentations nationally for the Social Security Administration's *Go Direct* and *my Social Security* campaigns.

ORGANIZED a health fair for limited English speaking Chinese, Korean, and Cambodian elders, in collaboration with the American Heart Association.

Healthy Aging and National Resource Consortium on Racial and Ethnic Minority Seniors

In 2012, the U.S. Department of Health and Human Services, Administration for Community Living, Administration on Aging (AoA) awarded NAPCA with a grant to serve on the National Resource Consortium on Racial and Ethnic Minority Seniors ("Consortium"). As part of the Consortium, NAPCA works in partnership with:

- Asociación Nacional Pro Personas Mayores (Hispanic/Latino)
- National Caucus and Center for the Black Aged, Inc. (Black/African-American)
- National Indian Council on Aging (American Indian/Alaska Native)

The Consortium offers technical assistance for aging-services providers to provide culturally appropriate programs for racial and ethnic minority seniors. In doing this, NAPCA increases AAPI elders' access to community-based supportive services that improve their health, well-being, and quality of life.

Seniors Served

NAPCA and its partners served over 1,000 AAPIs through outreach activities, including six community events.

AAPI seniors and their families attend a presentation during a health fair offered by NAPCA in partnership with the American Heart Association and YNOT Foundation. Limited English speaking participants listen to interpreters on personal headphones.



Helpline by the Numbers

In 2013, the NAPCA Helpline

- **RECEIVED** 7,169 calls
- **ENROLLED** 472 seniors in Medicare Part D prescription drug plans
- **ASSISTED** 94 seniors to apply for the Low Income Subsidy, a benefit that helps pay for prescription drug costs
- **ANSWERED** 185 letters from “Ask NAPCA” column readers

Access to Benefits

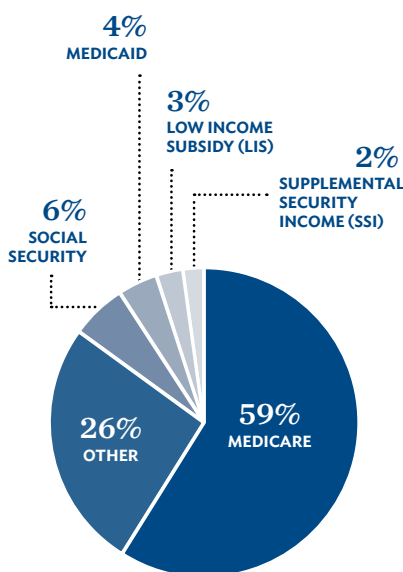
Access to public benefits is important to limited-income seniors who often have to make difficult decisions between paying for medications, food, and rent.

11

FIGURE 11: HELPLINE CALLS BY TOPIC, 2013

The NAPCA Helpline

NAPCA’s toll-free multilingual Helpline provides information and assistance to limited English speaking Chinese, Korean, and Vietnamese seniors on topics such as Medicare, Social Security, Medicaid, and other programs (Figure 11). Helpline staff educates callers about their eligibility for public benefits and assists callers to apply for Medicare and related cost-saving programs for which they are eligible.

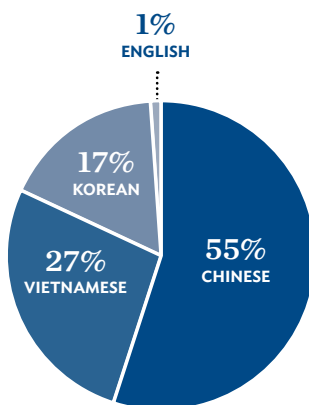


Note: “Other” topics include SCSEP, Affordable Care Act and the Health Insurance Marketplace, Housing, Supplemental Nutrition Assistance Program (SNAP, formerly known as Food Stamps), Legal Services, Senior Benefits, etc.

12

FIGURE 12: HELPLINE CALLS BY LANGUAGE, 2013

In 2013, the Helpline received over 7,000 calls through its five language lines (Figure 12). Each language is supported by a separate phone line, allowing callers to directly reach a representative or voicemail message in their preferred language.



Dear NAPCA Staff:

One year ago, I read an article about Medicare and Medicaid in the newspaper and noticed NAPCA’s free Chinese Helpline. In early 2013, I received my Medicare Card and called your office asking about various medical benefits for seniors. As my English is limited, Ms. Hui did not mind to take troubles to explain various applications to me. With her help and guidance, my daughter checked the address of the social service agency online. I was able to get the form to apply for Medicaid. Ms. Hui also helped me apply for Medicare Part D LIS and I got approval for both benefits quickly. I also received my White Card. I feel so grateful to Ms. Hui and the help from your staff and express my thankfulness to you all. Your center can really help many seniors who do not understand English.

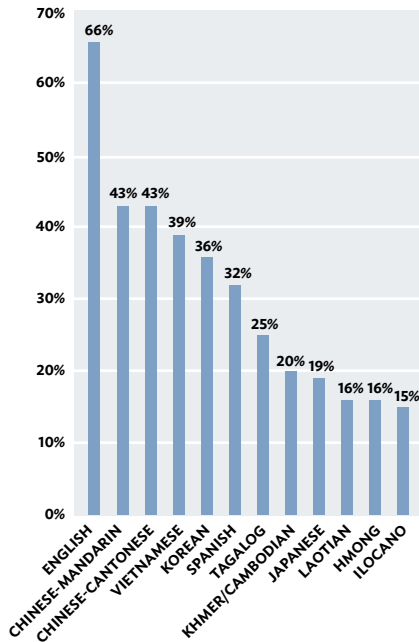
Thank you!

Sincerely,
Maria Ying

Addressing Language Access

13

FIGURE 13: MOST COMMONLY SPOKEN LANGUAGES OF CBO TARGET POPULATIONS



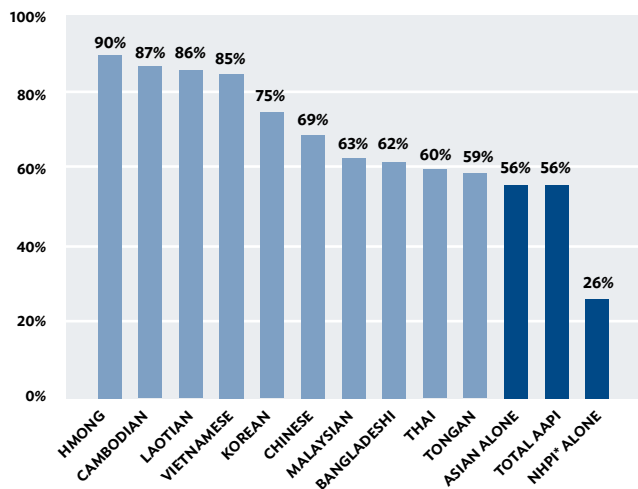
Languages Spoken by AAPI Elders

Results from NAPCA’s CBO survey highlighted the need for linguistically appropriate resources for AAPI elders. Although the majority of organizations in NAPCA’s network serve clients who speak English, Chinese, Vietnamese, and Korean (Figure 13), CBOs reported serving populations who speak a wide variety of languages, including Thai, Hindi, Samoan, Urdu, Mien, Tongan, Punjabi, Pakistani, Bengali, Gujarati, Native Hawaiian, Malayalam, Tamil, and Bahasa-Indonesian/Malay.

AAPIs speak over 40 languages and dialects. Recent statistics show that only 15% of AAPIs aged 55 years and older speak English at home, and over half (56%) of elderly AAPIs (55+) are limited English proficient (LEP). Moreover, a significant proportion (27%) of elderly AAPIs (55+) are linguistically isolated. Disaggregated data indicate that LEP rates among AAPI sub-groups (55+) are actually as high as 90%, and linguistic isolation rates reach 46% among this population (Figures 14 and 15).

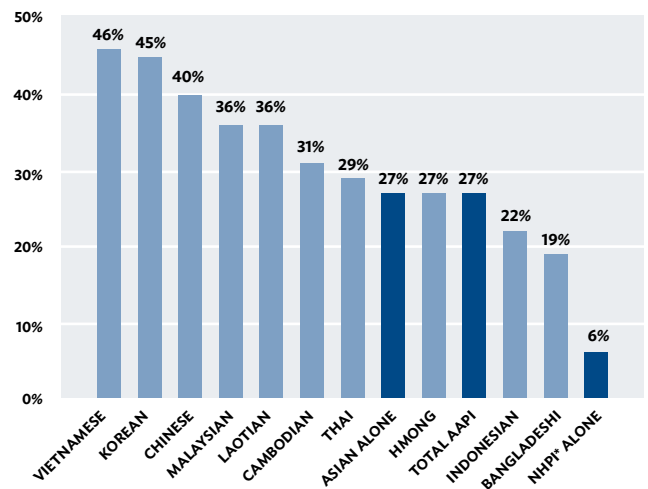
14

FIGURE 14: PERCENT OF AAPI POPULATION WHO ARE LIMITED ENGLISH PROFICIENT, 55 YEARS AND OLDER*



15

FIGURE 15: PERCENT OF AAPI OLDER ADULTS WHO RESIDE IN LINGUISTICALLY ISOLATED HOUSEHOLDS, 55 YEARS AND OLDER*



SOURCE: U.S. CENSUS BUREAU, 2009-2011 ACS 3-YEAR SUMMARY ESTIMATES

* Includes rates of top 10 highest AAPI sub-groups only. Excluded groups include: Indonesian, Pakistani, Samoan, Asian Indian, Filipino, Sri Lankan, Japanese, Guamanian, Tongan, and Native Hawaiian.

** Native Hawaiian/Pacific Islander

Informing the Community

Resources

In 2013, NAPCA launched web-based tools for limited English speaking AAPI elders:

- AAPI Healthy Aging Resource Center
<http://napca.org/healthy-aging/resources/>
- NAPCA Medicare Screening Tool
<http://napca.org/medicare-screener/>

The AAPI Healthy Aging Resource Center is an online repository of health information materials in multiple Asian and Pacific Islander languages. NAPCA developed the resource in 2010, and relaunched it in 2013 with enhanced features that enable users to more easily find materials in specific topics or languages.

The NAPCA Medicare Screening Tool is an innovative resource for seniors to determine their eligibility for Medicare and related cost-savings programs. The online tool is available in Chinese (audio in Cantonese and Mandarin), Korean, Vietnamese, and English. The screening tool has audio support in each language for people with visual impairments and can also be accessed on mobile devices, allowing service providers to use it in the field.

Communications

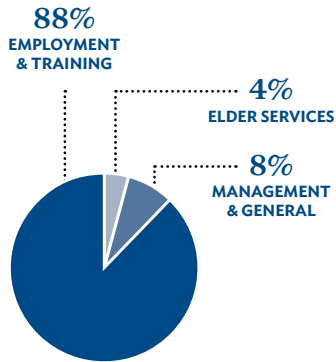
NAPCA also publishes the “Ask NAPCA” newspaper column biweekly and responds to readers’ questions on Medicare, Social Security, and other senior benefits. “Ask NAPCA” is distributed locally and nationally through Chinese, Korean, and Vietnamese language newspapers with a combined circulation of nearly 600,000 readers. With the launch of our new multilingual website, visitors can now ask a question in English, Chinese, Korean, or Vietnamese via a form on our “Ask NAPCA” page.



“You and your center helped us get Medicare Part D. Each month we can save some money. It is very important to us in our senior years. Please accept our deepest appreciation and thanks to you and your center.”

VIETNAMESE SENIOR
Philadelphia, PA

Financials



Statement of Activity

FY2013

REVENUE

GOVERNMENT GRANTS	\$ 16,606,759
NON-GOVERNMENT	\$112,358
TOTAL REVENUE	\$16,719,117

EXPENSES

EMPLOYMENT & TRAINING	\$ 14,992,567
ELDER SERVICES	\$659,336
MANAGEMENT & GENERAL	\$1,430,075
TOTAL EXPENSES	\$17,081,978

CHANGE IN NET ASSETS	\$(362,861)
NET ASSETS AT BEGINNING OF PERIOD	\$1,154,749

Ending Net Assets

\$791,888

Statement of Financial Position

FY2013

ASSETS

DISCRETIONARY	\$578,161
GOVERNMENT/PROGRAM	\$650,458
RESTRICTED	\$306,029
TOTAL ASSETS	\$1,534,647

LIABILITIES

DISCRETIONARY	\$86,546
GOVERNMENT/PROGRAM	\$650,458
RESTRICTED	\$5,755
TOTAL LIABILITIES	\$742,760

NET ASSETS

NET ASSETS	\$791,888
------------	-----------

Total Net Assets & Liabilities

\$1,534,647

FUNDERS

U.S. DEPARTMENT OF LABOR
U.S. ENVIRONMENTAL PROTECTION AGENCY
U.S. DEPARTMENT OF AGRICULTURE
U.S. DEPARTMENT OF HEALTH
& HUMAN SERVICES
THE ATLANTIC PHILANTHROPIES
ELI LILLY AND COMPANY
THE FORD FOUNDATION
WALMART
WALMART FOUNDATION

INDIVIDUAL / ORGANIZATIONAL DONORS

AGING & DISABILITIES
CHARITIES OF AMERICA
MR. PETER CHANG
MR. THOMAS SOKSAN CHEONG
MR. JOHNSON CHIANG
MS. DEBORAH CHING
MS. SIU YING CHOW
MS. JULIANA CHUNG
MR. DAVID COHEN
MR. JOHN QUOC DUONG
MR. FANG FANG
MR. SAN HUA FANG
FILIPINO COMMUNITY OF SEATTLE
MR. PETER UN HAN
MS. YOUNG SOON HAN
MR. KENNY HELMS
MR. LE NGOC HUYNH AND MS. HOANG LE
MR. VAN LE HUYNH
INTERNATIONAL INSTITUTE SAINT LOUIS
MR. ALBERT JEE
MR. AND MRS. NIALL KENNEDY
MR. AND MRS. KYUNG KIM
MS. DENISE KLEIN AND MR. DAVID SOPER
MR. AND MRS. ANTHONY KOO
KOREAN WELFARE ORGANIZATIONS
OF AMERICA, INC.
MS. SYLVANA KWOK
MR. WING LAM
MR. KING SHING LAU
MR. HOFMAN LI
MS. LINDA LIANG
MR. VICTOR LIU AND
MS. REBECCA HICKMAN-LIU

MS. DEBBIE LOUIE AND MR. PETE MARTONE
MR. AND MRS. CHAO-HWEI LU
MS. SOPHIA TAM LU
MR. HIEP VAN LUONG
MR. AND MRS. STAN MAJEWSKI
MS. SANG MAN
MR. KENNETH MENDEZ
MS. CAROL NOBORI
OLDER WOMEN'S LEAGUE
ON LOK HOUSE OF PHILADELPHIA
MS. DAISY ONG
MR. JOSELITO ONG
MR. CHI SHING OR
MR. HIRONORI PETERSON
MS. LY PHAM
MS. WENJIE ZHANG POOLEY
HON. PATRICIA SAIKI
MS. MEI HUA SHAO
MR. CHEE WON TAM
MS. YVONNE TATSUNO
MR. WAI TSANG
MS. JIA QUI WANG
MR. AND MRS. CHUL YONG WE
MS. BERNARDA WONG
MR. PABLO WONG
MR. AND MRS. WAH PING WONG
MS. HON MIN WU
MR. AND MRS. JON YASUDA
DR. DONNA YEE
MR. TI YU AND MS. YU QIN ZHU
MS. SHI YUAN ZHANG

