

GOVERNMENT COPY

Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2004 calendar year, or tax year beginning **JUL 1, 2004** and ending **JUN 30, 2005**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input checked="" type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization MEXICAN HERITAGE CORPORATION	D Employer identification number 77-0184306
	Please use IRS label or print or type. See Specific Instructions. Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1700 ALUM ROCK AVENUE	E Telephone number (408) 928-5500
	City or town, state or country, and ZIP + 4 SAN JOSE, CA 95116	F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and **I** are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates? Yes No

H(b) If "Yes," enter number of affiliates ▶

H(c) Are all affiliates included? **N/A** Yes No (If "No," attach a list.)

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

I Group Exemption Number ▶

M Check if the organization is **not** required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

G Website: ▶ **WWW.MHCVIVA.ORG**

J Organization type (check only one) ▶ 501(c) (**3**) ◀ (insert no.) 4947(a)(1) or 527

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. **Some states require a complete return.**

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **1,395,499.**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue	1 Contributions, gifts, grants, and similar amounts received:				
	a Direct public support	1a	237,384.		
	b Indirect public support	1b			
	c Government contributions (grants)	1c	554,546.		
	d Total (add lines 1a through 1c) (cash \$ 791,930. noncash \$)	1d		791,930.	
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2		225,483.	
	3 Membership dues and assessments	3			
	4 Interest on savings and temporary cash investments	4		65.	
	5 Dividends and interest from securities	5			
	6 a Gross rents SEE STATEMENT 1	6a	359,500.		
	b Less: rental expenses SEE STATEMENT 2	6b	243,668.		
	c Net rental income or (loss) (subtract line 6b from line 6a)	6c		115,832.	
7 Other investment income (describe)	7				
8 a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other		
		8a			
	Less: cost or other basis and sales expenses	8b			
	Gain or (loss) (attach schedule)	8c			
d Net gain or (loss) (combine line 8c, columns (A) and (B))	8d				
9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>					
a Gross revenue (not including \$ of contributions reported on line 1a)	9a				
b Less: direct expenses other than fundraising expenses	9b				
c Net income or (loss) from special events (subtract line 9b from line 9a)	9c				
10 a Gross sales of inventory, less returns and allowances	10a				
	b Less: cost of goods sold	10b			
	c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			
11 Other revenue (from Part VII, line 103)	11		18,521.		
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		1,151,831.		
Expenses	13 Program services (from line 44, column (B))	13		498,168.	
	14 Management and general (from line 44, column (C))	14		676,799.	
	15 Fundraising (from line 44, column (D))	15		113,120.	
	16 Payments to affiliates (attach schedule)	16			
	17 Total expenses (add lines 16 and 44, column (A))	17		1,288,087.	
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 12)	18		-136,256.	
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19		-536,468.	
	20 Other changes in net assets or fund balances (attach explanation)	20		0.	
	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		-672,724.	

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)	22			
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25 Compensation of officers, directors, etc.	25 231,000.	0.	231,000.	0.
26 Other salaries and wages	26 244,790.	92,187.	120,165.	32,438.
27 Pension plan contributions	27			
28 Other employee benefits	28			
29 Payroll taxes	29			
30 Professional fundraising fees	30			
31 Accounting fees	31 19,592.	302.	19,290.	
32 Legal fees	32			
33 Supplies	33 20,066.	3,261.	16,286.	519.
34 Telephone	34 19,395.	4,536.	13,363.	1,496.
35 Postage and shipping	35 13,558.	4,779.	3,755.	5,024.
36 Occupancy	36 43,156.	41,020.		2,136.
37 Equipment rental and maintenance	37			
38 Printing and publications	38			
39 Travel	39 18,477.	13,010.	4,232.	1,235.
40 Conferences, conventions, and meetings	40			
41 Interest	41			
42 Depreciation, depletion, etc. (attach schedule)	42 52,392.	34,741.	14,712.	2,939.
43 Other expenses not covered above (itemize):				
a _____	43a			
b _____	43b			
c _____	43c			
d _____	43d			
e SEE STATEMENT 3	43e 625,661.	304,332.	253,996.	67,333.
44 Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15.	44 1,288,087.	498,168.	676,799.	113,120.

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____; (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose?

PROMOTE AND ENHANCE MEXICAN CULTURE THROUGH CULTURAL EVENTS

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
 (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)

a AND EXHIBITS THAT PROVIDE THE COMMUNITY OF SAN JOSE, CALIFORNIA AND SANTA CLARA COUNTY, AWARENESS OF THE RICHNESS OF MEXICAN CULTURE AND MUSIC.	(Grants and allocations \$ _____)	498,168.
b _____	(Grants and allocations \$ _____)	
c _____	(Grants and allocations \$ _____)	
d _____	(Grants and allocations \$ _____)	
e Other program services (attach schedule)	(Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)		498,168.

Part IV Balance Sheets

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
Assets	45 Cash - non-interest-bearing	39,109.	45	5,603.
	46 Savings and temporary cash investments		46	
	47 a Accounts receivable	70,466.		
	b Less: allowance for doubtful accounts			
	48 a Pledges receivable			
	b Less: allowance for doubtful accounts			
	49 Grants receivable	48,595.	49	
	50 Receivables from officers, directors, trustees, and key employees		50	
	51 a Other notes and loans receivable			
	b Less: allowance for doubtful accounts			
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	49,912.	53	86,764.
	54 Investments - securities		54	
	55 a Investments - land, buildings, and equipment: basis			
	b Less: accumulated depreciation			
56 Investments - other		56		
57 a Land, buildings, and equipment: basis	417,738.			
b Less: accumulated depreciation STMT 4	257,334.			
58 Other assets (describe ▶ _____)				
59 Total assets (add lines 45 through 58) (must equal line 74)	436,560.	59	323,237.	
Liabilities	60 Accounts payable and accrued expenses	197,524.	60	301,297.
	61 Grants payable		61	
	62 Deferred revenue	103,624.	62	72,935.
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable	650,000.	64b	600,001.
	65 Other liabilities (describe ▶ DEPOSITS)	21,880.	65	21,728.
66 Total liabilities (add lines 60 through 65)	973,028.	66	995,961.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	-536,468.	67	-672,724.
	68 Temporarily restricted		68	
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	-536,468.	73	-672,724.	
74 Total liabilities and net assets / fund balances (add lines 66 and 73)	436,560.	74	323,237.	

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return

a	Total revenue, gains, and other support per audited financial statements	a	2,510,914.
b	Amounts included on line a but not on line 12, Form 990:		
(1)	Net unrealized gains on investments		\$
(2)	Donated services and use of facilities		\$ 1,359,083.
(3)	Recoveries of prior year grants		\$
(4)	Other (specify):		\$
	Add amounts on lines (1) through (4)	b	1,359,083.
c	Line a minus line b	c	1,151,831.
d	Amounts included on line 12, Form 990 but not on line a :		
(1)	Investment expenses not included on line 6b, Form 990		\$
(2)	Other (specify):		\$
	Add amounts on lines (1) and (2)	d	0.
e	Total revenue per line 12, Form 990 (line c plus line d)	e	1,151,831.

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total expenses and losses per audited financial statements	a	2,647,170.
b	Amounts included on line a but not on line 17, Form 990:		
(1)	Donated services and use of facilities		\$ 1,359,083.
(2)	Prior year adjustments reported on line 20, Form 990		\$
(3)	Losses reported on line 20, Form 990		\$
(4)	Other (specify):		\$
	Add amounts on lines (1) through (4)	b	1,359,083.
c	Line a minus line b	c	1,288,087.
d	Amounts included on line 17, Form 990 but not on line a :		
(1)	Investment expenses not included on line 6b, Form 990		\$
(2)	Other (specify):		\$
	Add amounts on lines (1) and (2)	d	0.
e	Total expenses per line 17, Form 990 (line c plus line d)	e	1,288,087.

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
SEE STATEMENT 5		231,000.	0.	0.

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? If "Yes," attach schedule. Yes No

Part VI Other Information		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77	X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	78b	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b	If "Yes," enter the name of the organization and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81 a	Enter direct or indirect political expenditures. See line 81 instructions 81a 0.		
b	Did the organization file Form 1120-POL for this year?	81b	X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) 82b N/A		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions? N/A	83b	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A	84b	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A	85a	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A	85b	
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
c	Dues, assessments, and similar amounts from members 85c N/A		
d	Section 162(e) lobbying and political expenditures 85d N/A		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A	85g	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A	85h	
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12 86a N/A		
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A		
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders 87a N/A		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b N/A		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 0.; section 4912 0.; section 4955 0.		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0.		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization 0.		
90 a	List the states with which a copy of this return is filed CA		
b	Number of employees employed in the pay period that includes March 12, 2004 90b 21		
91	The books are in care of MARCELA DAVISON AVILES Telephone no. 408-628-5558		
	Located at 1700 ALUM ROCK AVENUE, SAN JOSE, CA ZIP + 4 95116		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A		

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions.)

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a <u>HERITAGE ARTS&EDUCATION</u>					54,477.
b <u>MEXICAN HERITAGE EVENTS</u>					139,821.
c <u>TUITION WORKSHOP FEES</u>					30,951.
d <u>TOURS</u>					234.
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments ...			14	65.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					115,832.
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a <u>MISCELLANEOUS REVENUE</u>					18,521.
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0.		65.	359,836.
105 Total (add line 104, columns (B), (D), and (E))					359,901.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93	TO PROMOTE MEXICAN CULTURE THROUGH ARTS AND EDUCATION.
97	TO PROMOTE MEXICAN HERITAGE THROUGH CULTURAL EVENTS.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

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.

Please Sign Here

Signature of officer: _____ Date: _____ Type or print name and title: _____

Paid Preparer's Use Only

Preparer's signature: PETRINOVICH PUGH & COMPANY, LLP Date: _____ Check if self-employed: Preparer's SSN or PTIN: _____
 Firm's name (or yours if self-employed), address, and ZIP + 4: 333 WEST SANTA CLARA STREET SUITE 830
SAN JOSE, CA 95113 EIN: _____
 Phone no.: (408) 287-7911

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No. 1545-0047

2004

Name of the organization

MEXICAN HERITAGE CORPORATION

Employer identification number

77 0184306

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
ALEX CARONA ----- 1700 ALUM ROCK AVE SAN JOSE, CA 95116	OPER. MANAGER 40	52,500.		
MARCELA DAVISON AVILES ----- 1700 ALUM ROCK AVE SAN JOSE, CA 95116	EXE. DIRECTOR 40	105,000.		
MARC-ANDREW AGUILERA ----- 1700 ALUM ROCK AVE SAN JOSE, CA 95116	DIR. FIN & OPS 40	73,500.		
----- -----				
----- -----				
Total number of other employees paid over \$50,000 ▶	0			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE ----- -----		
----- -----		
----- -----		
----- -----		
Total number of others receiving over \$50,000 for professional services ▶	0	

Part III Statements About Activities (See page 2 of the instructions.)	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.	1	X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property?	2a	X
b Lending of money or other extension of credit?	2b	X
c Furnishing of goods, services, or facilities?	2c	X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	X
e Transfer of any part of its income or assets?	2e	X
3 a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)	3a	X
b Do you have a section 403(b) annuity plan for your employees?	3b	X
4 a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4a	X
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b	X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

- The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)
- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
 - 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
 - 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
 - 8 A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
 - 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ► _____
 - 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
 - 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
 - 11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
 - 12 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
 - 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.**
 Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	2,705,377.	2,738,467.	3,787,454.	3,206,970.	12,438,268.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975					
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	2,705,377.	2,738,467.	3,787,454.	3,206,970.	12,438,268.
24 Line 23 minus line 17	2,705,377.	2,738,467.	3,787,454.	3,206,970.	12,438,268.
25 Enter 1% of line 23	27,054.	27,385.	37,875.	32,070.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 248,765.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 0.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 12,438,268.
d Add: Amounts from column (e) for lines: 18 _____ 19 _____ 22 _____ 26b _____					26d
e Public support (line 26c minus line 26d total)					26e 12,438,268.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 100.0000%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A (2003) _____ (2002) _____ (2001) _____ (2000) _____					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A (2003) _____ (2002) _____ (2001) _____ (2000) _____					
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					27c N/A
d Add: Line 27a total _____ and line 27b total _____					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e) ▶	27f N/A				
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

NONE

Part V Private School Questionnaire (See page 7 of the instructions.)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31	
If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			

32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			

33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities?	33h	
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			

34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b	Has the organization's right to such aid ever been revoked or suspended?	34b	
If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)

N/A

(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred.)			
		N/A	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table -		
	If the amount on line 40 is - The lobbying nontaxable amount is -		
	Not over \$500,000		20% of the amount on line 40
	Over \$500,000 but not over \$1,000,000		\$100,000 plus 15% of the excess over \$500,000
	Over \$1,000,000 but not over \$1,500,000		\$175,000 plus 10% of the excess over \$1,000,000
	Over \$1,500,000 but not over \$17,000,000		\$225,000 plus 5% of the excess over \$1,500,000
	Over \$17,000,000		\$1,000,000
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h .)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h .)			0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 11 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

		Yes	No
a	Transfers from the reporting organization to a noncharitable exempt organization of:		
	(i) Cash	51a(i)	<input checked="" type="checkbox"/>
	(ii) Other assets	a(ii)	<input checked="" type="checkbox"/>
b	Other transactions:		
	(i) Sales or exchanges of assets with a noncharitable exempt organization	b(i)	<input checked="" type="checkbox"/>
	(ii) Purchases of assets from a noncharitable exempt organization	b(ii)	<input checked="" type="checkbox"/>
	(iii) Rental of facilities, equipment, or other assets	b(iii)	<input checked="" type="checkbox"/>
	(iv) Reimbursement arrangements	b(iv)	<input checked="" type="checkbox"/>
	(v) Loans or loan guarantees	b(v)	<input checked="" type="checkbox"/>
	(vi) Performance of services or membership or fundraising solicitations	b(vi)	<input checked="" type="checkbox"/>
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c	<input checked="" type="checkbox"/>

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received: **N/A**

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

52 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule: **N/A**

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Schedule B
(Form 990, 990-EZ, or
990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Supplementary Information for
line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No. 1545-0047

2004

Name of organization

MEXICAN HERITAGE CORPORATION

Employer identification number

77-0184306

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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-

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules-

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to 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. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) ► \$ _____

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2004)

Name of organization

Employer identification number

MEXICAN HERITAGE CORPORATION**77-0184306****Part I Contributors** (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	CITY OF SAN JOSE - O&M 801 NORTH FIRST STREET, RM 140 SAN JOSE, CA 95110	\$ 328,864.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	CITY OF SAN JOSE - GRANT 801 NORTH FIRST STREET, RM 140 SAN JOSE, CA 95110	\$ 70,410.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	WELLS FARGO BANK 90 SOUTH 7TH STREET MINNEAPOLIS, MN 55440	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	MAYFAIR IMPROVEMENT DIVISION 2342 ALUM ROCK AVENUE SAN JOSE, CA 95116	\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	SBC 130 E. TRAVIS, SUITE 350 SAN ANTONIO, TX 78205	\$ 35,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
1	COMPUTER SYSTEM (386) W/ COLOR MONITOR	101292	200DB	5.00	17	3,252.			3,252.	3,252.		0.
2	COMPUTER (386) MARIACHI YOUTH PROG	022296	200DB	5.00	17	2,392.			2,392.	2,392.		0.
3	INSTRUMENTS	041296	200DB	3.00	17	500.			500.	442.		0.
4	PRINTERS	090896	200DB	5.00	17	1,107.			1,107.	1,040.		0.
5	CRECENZA	091796	200DB	5.00	17	264.			264.	243.		0.
6	RED SOFA-2 SEAT	091796	200DB	5.00	17	350.			350.	323.		0.
7	PNEUMATIC CHAIR	091796	200DB	5.00	17	150.			150.	139.		0.
8	BROWN STORAGE CABINET	091796	200DB	5.00	17	117.			117.	103.		0.
9	2 DRAWER LATERAL-36" SERVICING AND	091796	200DB	5.00	17	162.			162.	141.		0.
10	UPGRADING OF COMPUTER COMPUTER MONITOR,	092096	200DB	5.00	17	1,681.			1,681.	1,551.		0.
11	ZYNK-GN 1498	100996	200DB	5.00	17	242.			242.	224.		0.
12	COMPUTER SOFTWARE COMPUTER OFFICE 3, CD	022897	200DB	5.00	17	7,763.			7,763.	6,516.		0.
13	ROM-OFFICE 2	041697	200DB	5.00	17	1,743.			1,743.	1,405.		0.
14	COMPUTERS-PCI SYS RECEPTION, CUBICAL	061397	200DB	5.00	17	3,302.			3,302.	2,606.		0.
15	COMPUTER - ADD ON HARDWARE	091997	200DB	5.00	17	124.			124.	104.		0.
16	COMPUTER - ADD ON HARDWARE	092597	200DB	5.00	17	179.			179.	150.		0.
17	MYP INSTRUMENTS	030398	200DB	3.00	17	1,083.			1,083.	874.		0.
18	MYP INSTRUMENTS	031398	200DB	3.00	17	520.			520.	420.		0.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
19	MYP INSTRUMENTS	031898	200DB	3.00	17	387.			387.	306.		0.
20	PENTIUM COMPUTER	032398	200DB	5.00	17	650.			650.	479.		0.
21	MYP INSTRUMENTS	041098	200DB	3.00	17	390.			390.	308.		0.
22	MYP INSTRUMENTS	042398	200DB	3.00	17	644.			644.	499.		0.
23	MYP INSTRUMENTS	042398	200DB	3.00	17	650.			650.	503.		0.
24	MYP INSTRUMENTS	042398	200DB	3.00	17	450.			450.	348.		0.
25	MYP INSTRUMENTS	042398	200DB	3.00	17	500.			500.	387.		0.
26	COMPAQ LAPTOP COMPUTER	053098	200DB	5.00	17	1,947.			1,947.	1,372.		0.
27	VIDEO CAMERA	061698	200DB	5.00	17	1,170.			1,170.	825.		0.
28	MICROSOFT OFFICE PROFESSIONAL	080598	200DB	5.00	17	896.			896.	759.		0.
29	JUSTIN MCCOY VIHUELA	081498	200DB	3.00	17	642.			642.	536.		0.
30	AMEX - NO DOCUMENTATION	082898	200DB	3.00	17	571.			571.	317.		0.
31	SYSTEMENDER-PENTIUM 233 COMPUTER	091198	200DB	5.00	17	487.			487.	396.		0.
32	ARTURO GONZALES-COMPUTER	111098	200DB	5.00	17	1,100.			1,100.	822.		0.
33	CRAIG'S ANTIQUES-YORK	120498	200DB	3.00	17	150.			150.	92.		0.
34	CRAIG'S ANTIQUES-MARTIN	120498	200DB	3.00	17	250.			250.	153.		0.
35	CRAIG'S ANTIQUES-CONN	120498	200DB	3.00	17	400.			400.	245.		0.
36				.000	16							0.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
37				.000	16							0.
38	CRAIG'S ANTIQUES	120498	200DB	3.00	17	325.			325.	199.		0.
39	CRAIG'S ANTIQUES	120498	200DB	3.00	17	350.			350.	214.		0.
40	CRAIG'S ANTIQUES	120498	200DB	3.00	17	400.			400.	245.		0.
41	CRAIG'S ANTIQUES	120498	200DB	3.00	17	400.			400.	245.		0.
42	8 GUITARS-KAMAMUTO INSTRUMENTS	120498	200DB	3.00	17	2,317.			2,317.	1,416.		0.
43	VIHUELA WITH HAND CASE-WM FAULKNER	120498	200DB	3.00	17	250.			250.	153.		0.
44	VIHUELA WITH HAND CASE-WM FAULKNER	120498	200DB	3.00	17	250.			250.	153.		0.
45	TRUMPET	010899	200DB	3.00	17	1,200.			1,200.	667.		0.
46	COMPUTERS	030399	200DB	5.00	17	45,401.			45,401.	27,846.		0.
47	8 COMMUNICATION PORT SWITCHES	051499	200DB	3.00	17	23,960.			23,960.	14,907.		0.
48	8 COMMUNICATION UPLINK SWITCHES	051499	200DB	5.00	17	7,960.			7,960.	7,005.		0.
49	EQUIPMENT DONATED FROM FRY'S	063000	200DB	5.00	17	96,934.			96,934.	91,351.		5,583.
50	FLOOR MODEL LECTURN	100799	200DB	5.00	17	1,561.			1,561.	1,472.		90.
51	FLOOR WAXING MACHINE	060900	200DB	5.00	17	1,614.			1,614.	1,521.		93.
52	FLOOR MODEL LECTURN	060200	200DB	5.00	17	129.			129.	122.		7.
53	STORAGE CART	120199	200DB	5.00	17	1,301.			1,301.	1,227.		75.
54	COMPUTER SOFTWARE	122195	200DB	3.00	17	162.			162.	156.		0.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
55	CONSTRUCTION DOCUMENTS FOR THE GALLERY SPACE	091800	SL	39.00	17	8,750.			8,750.	850.		224.
56	GALLERY RETROFIT 50% OF TRACK LIGHTING	092100	SL	39.00	17	8,126.			8,126.	789.		208.
57	GALLERY TRACK LIGHTING	010201	SL	39.00	17	36,406.			36,406.	3,228.		933.
58	CABINETS	063001	SL	39.00	17	9,421.			9,421.	736.		242.
59	PREMIER SECURITY	063001	SL	39.00	17	1,505.			1,505.	119.		39.
61	ACCOUNTING SERVER	010802	200DB	5.00	17	2,096.			2,096.	1,489.		241.
62	MODULAR FURNITURE	083101	200DB	5.00	17	1,763.			1,763.	1,255.		203.
63	MUSIC EQUIPMENT	070102	200DB	5.00	17	1,998.			1,998.	1,039.		384.
64	PRINTER	083002	200DB	5.00	17	1,225.			1,225.	637.		235.
65	MONITOR AND MODEM	083002	200DB	5.00	17	17,783.			17,783.	9,247.		3,414.
66	COMPUTER, 1 YOUNG EXPLORER	083002	200DB	5.00	17	2,149.			2,149.	1,118.		412.
67	PROJECTION AND SOUND EQUIPMENT	062504	200DB	5.00	17	54,999.			54,999.	2,749.		20,900.
68	COMPAQ SERVER	053104	200DB	5.00	17	12,607.			12,607.	630.		4,791.
69	3 ROLLIN SPEAKER STACKS	061604	200DB	7.00	17	1,819.			1,819.	65.		501.
70	HP PANEL, DESKTOP, AND STORAGEWORKS	053104	200DB	5.00	17	32,214.			32,214.	1,610.		12,241.
71	HP PRINTER AND PROJECTOR	053104	200DB	5.00	17	4,148.			4,148.	207.		1,576.
	* TOTAL 990 PAGE 2 DEPR					417,738.		0.	417,738.	204,939.	0.	52,392.

FORM 990	RENTAL INCOME	STATEMENT	1
KIND AND LOCATION OF PROPERTY		ACTIVITY NUMBER	GROSS RENTAL INCOME
FACILITY RENTAL		1	359,500.
TOTAL TO FORM 990, PART I, LINE 6A			359,500.

FORM 990	RENTAL EXPENSES	STATEMENT	2
DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
LABOR		201,840.	
NON-LABOR		41,828.	
- SUBTOTAL -	1		243,668.
TOTAL TO FORM 990, PART I, LINE 6B			243,668.

FORM 990	OTHER EXPENSES	STATEMENT	3	
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
CATERING	26,505.	315.	0.	26,190.
CONTRACT FEES				
ARTISTS	83,493.	67,543.	0.	15,950.
CONTRACT TEACHERS	108,455.	108,455.	0.	0.
CONTRACTORS	51,762.	32,446.	17,696.	1,620.
CREDIT CARD FEES	6,292.		4,126.	2,166.
GALLERY	863.		863.	
INSURANCE	25,467.		25,467.	
MAINTENANCE AND REPAIRS	50,073.	1,998.	47,825.	250.
MARKETING AND ADVERTISING	78,776.	56,569.	1,682.	20,525.
SECURITY	37,032.	12,806.	23,964.	262.
SPECIAL EVENTS	5,866.	5,671.		195.
SUBSCRIPTIONS	252.		77.	175.
UTILITIES	122,986.	614.	122,372.	
MISCELLANEOUS	27,839.	17,915.	9,924.	
TOTAL TO FM 990, LN 43	625,661.	304,332.	253,996.	67,333.

FORM 990	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT	STATEMENT	4
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
COMPUTER SYSTEM (386) W/ COLOR MONITOR	3,252.	3,252.	0.
COMPUTER (386)	2,392.	2,392.	0.
MARIACHI YOUTH PROG INSTRUMENTS	500.	442.	58.
PRINTERS	1,107.	1,040.	67.
CRECENZA	264.	243.	21.
RED SOFA-2 SEAT	350.	323.	27.
PNEUMATIC CHAIR	150.	139.	11.
BROWN STORAGE CABINET	117.	103.	14.
2 DRAWER LATERAL-36"	162.	141.	21.
SERVICING AND UPGRADING OF COMPUTER	1,681.	1,551.	130.
COMPUTER MONITOR, ZYMK-GN 1498	242.	224.	18.
COMPUTER SOFTWARE	7,763.	6,516.	1,247.
COMPUTER OFFICE 3, CD ROM-OFFICE 2	1,743.	1,405.	338.
COMPUTERS-PCI SYS RECEPTION, CUBICAL	3,302.	2,606.	696.
COMPUTER - ADD ON HARDWARE	124.	104.	20.
COMPUTER - ADD ON HARDWARE	179.	150.	29.
MYP INSTRUMENTS	1,083.	874.	209.
MYP INSTRUMENTS	520.	420.	100.
MYP INSTRUMENTS	387.	306.	81.
PENTIUM COMPUTER	650.	479.	171.
MYP INSTRUMENTS	390.	308.	82.
MYP INSTRUMENTS	644.	499.	145.
MYP INSTRUMENTS	650.	503.	147.
MYP INSTRUMENTS	450.	348.	102.
MYP INSTRUMENTS	500.	387.	113.
COMPAQ LAPTOP COMPUTER	1,947.	1,372.	575.
VIDEO CAMERA	1,170.	825.	345.
MICROSOFT OFFICE PROFESSIONAL	896.	759.	137.
JUSTIN MCCOY VIHUELA	642.	536.	106.
AMEX - NO DOCUMENTATION	571.	317.	254.
SYSTEMENDER-PENTIUM 233 COMPUTER	487.	396.	91.
ARTURO GONZALES-COMPUTER	1,100.	822.	278.
CRAIG'S ANTIQUES-YORK	150.	92.	58.
CRAIG'S ANTIQUES-MARTIN	250.	153.	97.
CRAIG'S ANTIQUES-CONNOR	400.	245.	155.
CRAIG'S ANTIQUES	325.	199.	126.
CRAIG'S ANTIQUES	350.	214.	136.
CRAIG'S ANTIQUES	400.	245.	155.
CRAIG'S ANTIQUES	400.	245.	155.
8 GUITARS-KAMAMUTO INSTRUMENTS	2,317.	1,416.	901.
VIHUELA WITH HAND CASE-WM FAULKNER	250.	153.	97.

VIHUELA WITH HAND CASE-WM			
FAULKNER	250.	153.	97.
TRUMPET	1,200.	667.	533.
COMPUTERS	45,401.	27,846.	17,555.
8 COMMUNICATION PORT SWITCHES	23,960.	14,907.	9,053.
8 COMMUNICATION UPLINK SWITCHES	7,960.	7,005.	955.
EQUIPMENT DONATED FROM FRY'S	96,934.	96,934.	0.
FLOOR MODEL LECTURN	1,561.	1,562.	-1.
FLOOR WAXING MACHINE	1,614.	1,614.	0.
FLOOR MODEL LECTURN	129.	129.	0.
STORAGE CART	1,301.	1,302.	-1.
COMPUTER SOFTWARE	162.	156.	6.
CONSTRUCTION DOCUMENTS FOR THE GALLERY SPACE	8,750.	1,074.	7,676.
GALLERY RETROFIT 50% OF TRACK LIGHTING	8,126.	997.	7,129.
GALLERY TRACK LIGHTING	36,406.	4,161.	32,245.
CABINETS	9,421.	978.	8,443.
PREMIER SECURITY	1,505.	158.	1,347.
ACCOUNTING SERVER	2,096.	1,730.	366.
MODULAR FURNITURE	1,763.	1,458.	305.
MUSIC EQUIPMENT	1,998.	1,423.	575.
PRINTER	1,225.	872.	353.
MONITOR AND MODEM	17,783.	12,661.	5,122.
COMPUTER, 1 YOUNG EXPLORER	2,149.	1,530.	619.
PROJECTION AND SOUND EQUIPMENT	54,999.	23,649.	31,350.
COMPAQ SERVER	12,607.	5,421.	7,186.
3 ROLLIN SPEAKER STACKS	1,819.	566.	1,253.
HP PANEL, DESKTOP, AND STORAGEWORKS	32,214.	13,851.	18,363.
HP PRINTER AND PROJECTOR	4,148.	1,783.	2,365.
TOTAL TO FORM 990, PART IV, LN 57	417,738.	257,331.	160,407.

FORM 990 PART V - LIST OF OFFICERS, DIRECTORS,
TRUSTEES AND KEY EMPLOYEES STATEMENT 5

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
BENNY BOVEDO 1700 ALUM ROCK AVE SAN JOSE, CA 95116	BOARD MEMBER 5	0.	0.	0.
ARMANDO CASTELLANO 1700 ALUM ROCK AVE SAN JOSE, CA 95116	BOARD MEMBER 5	0.	0.	0.
EDDIE GARCIA 1900 S. 10TH STREET SAN JOSE, CA 95112	CHAIRPERSON 5	0.	0.	0.
DANIEL FENTON 408 ALMADEN BLVD. SAN JOSE, CA 95110	VICE CHAIR 5	0.	0.	0.
RUDY RODRIGUEZ 1919 S. BASCOM AVE., SUITE 600 CAMPBELL, CA 95008	SECRETARY 5	0.	0.	0.
MARTHA J. KANTER 1700 ALUM ROCK AVE SAN JOSE, CA 95116	BOARD MEMBER 5	0.	0.	0.
GEORGE SHIRAKAWA, JR 1700 ALUM ROCK AVE SAN JOSE, CA 95116	BOARD MEMBER 5	0.	0.	0.
LEON BEAUCHMAN 100 PARK CENTER PLAZA, SUITE 325 SAN JOSE, CA 95113	BOARD MEMBER 5	0.	0.	0.
MARGIE GAETA 1675 EL DORADO SAN JOSE, CA 95126	BOARD MEMBER 5	0.	0.	0.
JIM SANTOYO GONZALES 5314 GARRISON CIRCLE SAN JOSE, CA 95123	BOARD MEMBER 5	0.	0.	0.
NOEL MONTOYA 1070 COMMERCIAL STREET, SUITE 103 SAN JOSE, CA 95112	BOARD MEMBER 5	0.	0.	0.

MARCE MORA 2855 EL MONTE WAY SAN JOSE, CA 95127	BOARD MEMBER 5	0.	0.	0.
KIMBERLEY ROCHA 2187 BENTLEY RIDGE DR. SAN JOSE, CA 95138	BOARD MEMBER 5	0.	0.	0.
OLGA MARTIN STEELE 5750 ALMADEN EXPY (HQ BLDG.) SAN JOSE, CA 95118	TREASURER 5	0.	0.	0.
MARCELA DAVISON AVILES 1700 ALUM ROCK AVE SAN JOSE, CA 95116	EXE. DIRECTOR 40	105,000.	0.	0.
MARC-ANDREW AGUILERA 1700 ALUM ROCK AVE SAN JOSE, CA 95116	DIRECTOR OF FIN. & OPER. 40	73,500.	0.	0.
ALEX CORONA 1700 ALUM ROCK AVE SAN JOSE, CA 95116	OPERATIONS MANAGER 40	52,500.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V		<u>231,000.</u>	<u>0.</u>	<u>0.</u>

STATE COPY

YEAR
2004

California Exempt Organization Annual Information Return

FORM

199

MONTH For calendar or fiscal year beginning JULY	DAY 1	YEAR 2004	MONTH and ending JUNE	DAY 30	YEAR 2005
IMPORTANT: Your number is required.					
California corporation number C1502376		Federal employer identification number (FEIN) 77-0184306			
Corporation/Organization name MEXICAN HERITAGE CORPORATION					
Address 1700 ALUM ROCK AVENUE				PMB no.	
City SAN JOSE, CA		State CA		ZIP Code 95116	
A Final return? <input type="checkbox"/> Yes. Check applicable box. <input checked="" type="checkbox"/> No <input type="checkbox"/> Dissolved <input type="checkbox"/> Withdrawn <input type="checkbox"/> Merged/Reorganized (attach explanation) If a box is checked, enter date					
B Check forms filed this year: State: <input type="checkbox"/> 109 <input type="checkbox"/> 100 <input type="checkbox"/> 100S <input type="checkbox"/> 100W Federal: <input checked="" type="checkbox"/> 990 <input type="checkbox"/> 990EZ <input type="checkbox"/> 990T <input type="checkbox"/> 990PF <input type="checkbox"/> 1041 <input type="checkbox"/> 1120H <input type="checkbox"/> 1120					
C If organization is exempt under R&TC Section 23701d and is a school, public charity, religious organization, or is controlled by a religious operation, check box. See General Instruction F. No filing fee is required. <input type="checkbox"/>					
D Is this a group filing? See General Instruction N. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
E Accounting method used ACCRUAL					
F Type of organization <input checked="" type="checkbox"/> Exempt under Section 23701 d (insert letter) <input type="checkbox"/> IRC Section 4947(a)(1) trust					

Part I Complete Part I unless not required to file this form. See General Instructions B and C.

Receipts and Revenues <small>(Enclose, but do not staple any payment.)</small>	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8	•	1	603,569.
	2	Gross dues and assessments from members and affiliates	•	2	
	3	Gross contributions, gifts, grants, and similar amounts received. See instructions STMT 1	•	3	791,930.
	4	Total gross receipts for filing requirement test. Add line 1 through line 3 This line must be completed. If the result is less than \$25,000, see General Instruction C	•	4	1,395,499.
	5	Cost of goods sold		5	
	6	Cost or other basis, and sales expenses of assets sold		6	
	7	Total costs. Add line 5 and line 6		7	
	8	Total gross income. Subtract line 7 from line 4		8	1,395,499.
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18		9	1,528,199.
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8		10	-132,700.
Filing Fee	11	Filing fee \$10 or \$25. See General Instruction F		11	10.
	12	Penalty for failure to file on time. See General Instruction L		12	
	13	Use tax. See instructions	•	13	
	14	Balance due. Add line 11, line 12, and line 13		14	10.

- 15** If exempt under R&TC Section 23701d, has the organization during the year: (1) participated in any political campaign or (2) attempted to influence legislation or any ballot measure, or (3) made an election under R&TC Section 23704.5 (relating to lobbying by public charities)? If "Yes," complete and attach form FTB 3509, Political or Legislative Activities by Section 23701d Organizations Yes No
- 16** Did the organization have any changes in its activities, governing instrument, articles of incorporation, or bylaws that have not been reported to the Franchise Tax Board? If "Yes," complete an explanation and attach copies of revised documents Yes No
- 17** Is the organization exempt under R&TC Section 23701g? Yes No
If "Yes," enter amount of gross receipts from nonmember sources \$ _____
- 18** Did the organization file Form 100, Form 100S, 100W, or Form 109 to report taxable income? Yes No
If "Yes," enter amount of total income reported \$ _____
- 19** The financial records are in care of MARCELA DAVISON AVILES Daytime telephone 408-628-5558

located at 1700 ALUM ROCK AVENUE, SAN JOSE, CA 95116

Please Sign Here	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 taxpayer) is based on all information of which preparer has any knowledge.			
	Signature of officer	Date	Title	Daytime telephone
Paid Preparer's Use Only	Paid Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Paid preparer's SSN or PTIN
	Firm's name (or yours, if self-employed) and address PETRINOVICH PUGH & COMPANY, LLP 333 WEST SANTA CLARA STREET SUITE 830 SAN JOSE, CA 95113			FEIN 94-1668792 Daytime telephone (408) 287-7911

428941/01-14-05

Part II Organizations with gross receipts of more than \$25,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information. See Specific Line Instructions.

Receipts from Other Sources	1	Gross sales or receipts from all business activities. See instructions	1	
	2	Interest	2	65.
	3	Dividends	3	
	4	Gross rents	4	359,500.
	5	Gross royalties	5	
	6	Gross amount received from sale of assets	6	
	7	Other income SEE STATEMENT 2	7	244,004.
	8	Total gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1	8	603,569.
Expenses and Disbursements	9	Contributions, gifts, grants, and similar amounts paid	9	
	10	Disbursements to or for members	10	
	11	Compensation of officers, directors, and trustees SEE STATEMENT 3	11	231,000.
	12	Other salaries and wages	12	244,790.
	13	Interest	13	
	14	Taxes	14	
	15	Rents	15	43,156.
	16	Depreciation and depletion	16	48,836.
	17	Other SEE STATEMENT 4	17	960,417.
	18	Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9	18	1,528,199.

Schedule L Balance Sheets

Beginning of taxable year

End of taxable year

Assets	(a)	(b)	(c)	(d)
1 Cash		39,109.		5,603.
2 Net accounts receivable		86,145.		70,466.
3 Net notes receivable				
4 Inventories				
5 Federal and state government obligations				
6 Investments in other bonds				
7 Investments in stock				
8 Mortgage loans (number of loans _____)				
9 Other investments				
10 a Depreciable assets	417,738.		417,738.	
b Less accumulated depreciation	(204,939.)	212,799.	(257,334.)	160,404.
11 Land				
12 Other assets STMT 5		98,507.		86,764.
13 Total assets		436,560.		323,237.
Liabilities and net worth				
14 Accounts payable		197,524.		301,297.
15 Contributions, gifts, or grants payable				
16 Bonds and notes payable				
17 Mortgages payable		650,000.		600,001.
18 Other liabilities STMT 6		125,504.		94,663.
19 Capital stock or principle fund				
20 Paid-in or capital surplus. Attach reconciliation				
21 Retained earnings or income fund		-536,468.		-672,724.
22 Total liabilities and net worth		436,560.		323,237.

Schedule M-1 Reconciliation of income per books with income per return

Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$25,000

1 Net income per books	-136,256.	7 Income recorded on books this year not included in this return	
2 Federal income tax		8 Deductions in this return not charged against book income this year	
3 Excess of capital losses over capital gains		9 Total. Add line 7 and line 8	
4 Income not recorded on books this year		10 Net income per return	
5 Expenses recorded on books this year not deducted in this return STMT 7	3,556.	Subtract line 9 from line 6	-132,700.
6 Total			
Add line 1 through line 5	-132,700.		

FORM 199 CASH CONTRIBUTIONS OF \$5000 OR MORE STATEMENT 1
 INCLUDED ON PART I, LINE 3

CONTRIBUTOR'S NAME	CONTRIBUTOR'S ADDRESS	DATE OF GIFT	AMOUNT
CITY OF SAN JOSE - O&M	801 NORTH FIRST STREET, RM 140 SAN JOSE, CA 95110		328,864.
CITY OF SAN JOSE - GRANT	801 NORTH FIRST STREET, RM 140 SAN JOSE, CA 95110		70,410.
TARGET	PO BOX 1296 MINNEAPOLIS, MN 55440-1296		5,000.
WELLS FARGO BANK	90 SOUTH 7TH STREET MINNEAPOLIS, MN 55440		25,000.
ARTS COUNCIL	4 NORTH SECOND STREET, SUITE 210 SAN JOSE, CA 95110		5,400.
MAYFAIR IMPROVEMENT DIVISION	2342 ALUM ROCK AVENUE SAN JOSE, CA 95116		30,000.
ENTERTAINMENT INDUSTRY FOUNDATION	11132 VENTURA BOULEVARD, SUITE 401 STUDIO CITY, CA 91604		5,000.
CASTELLANO FAMILY FOUNDATION	PO BOX 4874 SAN JOSE, CA 95125		5,000.
COMCAST	183 INVERNESS DRIVE WEST ENGLEWOOD, CO 80112		10,000.
SAN JOSE UNIFIED SCHOOL DISTRICT	855 LENZEN AVENUE SAN JOSE, CA 95126		6,525.
ACENTO ADVERTISING, INC.	2254 S. SEPULVEDA BOULEVARD LOS ANGELES, CA 90064		5,000.
SBC	130 E. TRAVIS, SUITE 350 SAN ANTONIO, TX 78205		35,000.
TOTAL INCLUDED ON LINE 3			<u>531,199.</u>

FORM 199	OTHER INCOME	STATEMENT	2
DESCRIPTION		AMOUNT	
MISCELLANEOUS REVENUE		18,521.	
HERITAGE ARTS&EDUCATION		54,477.	
MEXICAN HERITAGE EVENTS		139,821.	
TUITION WORKSHOP FEES		30,951.	
TOURS		234.	
TOTAL TO FORM 199, PART II, LINE 7		244,004.	

FORM 199	COMPENSATION OF OFFICERS, DIRECTORS AND TRUSTEES	STATEMENT	3
NAME AND ADDRESS	TITLE AND AVERAGE HRS WORKED/WK	COMPENSATION	
BENNY BOVEDO 1700 ALUM ROCK AVE SAN JOSE, CA 95116	BOARD MEMBER 5	0.	
ARMANDO CASTELLANO 1700 ALUM ROCK AVE SAN JOSE, CA 95116	BOARD MEMBER 5	0.	
EDDIE GARCIA 1900 S. 10TH STREET SAN JOSE, CA 95112	CHAIRPERSON 5	0.	
DANIEL FENTON 408 ALMADEN BLVD. SAN JOSE, CA 95110	VICE CHAIR 5	0.	
RUDY RODRIGUEZ 1919 S. BASCOM AVE., SUITE 600 CAMPBELL, CA 95008	SECRETARY 5	0.	
MARTHA J. KANTER 1700 ALUM ROCK AVE SAN JOSE, CA 95116	BOARD MEMBER 5	0.	
GEORGE SHIRAKAWA, JR 1700 ALUM ROCK AVE SAN JOSE, CA 95116	BOARD MEMBER 5	0.	

LEON BEAUCHMAN 100 PARK CENTER PLAZA, SUITE 325 SAN JOSE, CA 95113	BOARD MEMBER 5	0.
MARGIE GAETA 1675 EL DORADO SAN JOSE, CA 95126	BOARD MEMBER 5	0.
JIM SANTOYO GONZALES 5314 GARRISON CIRCLE SAN JOSE, CA 95123	BOARD MEMBER 5	0.
NOEL MONTOYA 1070 COMMERCIAL STREET, SUITE 103 SAN JOSE, CA 95112	BOARD MEMBER 5	0.
MARCE MORA 2855 EL MONTE WAY SAN JOSE, CA 95127	BOARD MEMBER 5	0.
KIMBERLEY ROCHA 2187 BENTLEY RIDGE DR. SAN JOSE, CA 95138	BOARD MEMBER 5	0.
OLGA MARTIN STEELE 5750 ALMADEN EXPY (HQ BLDG.) SAN JOSE, CA 95118	TREASURER 5	0.
MARCELA DAVISON AVILES 1700 ALUM ROCK AVE SAN JOSE, CA 95116	EXE. DIRECTOR 40	105,000.
MARC-ANDREW AGUILERA 1700 ALUM ROCK AVE SAN JOSE, CA 95116	DIRECTOR OF FIN. & OPER. 40	73,500.
ALEX CORONA 1700 ALUM ROCK AVE SAN JOSE, CA 95116	OPERATIONS MANAGER 40	52,500.
TOTAL TO FORM 199, PART II, LINE 11		<u>231,000.</u>

FORM 199	OTHER EXPENSES	STATEMENT	4
DESCRIPTION		AMOUNT	
CATERING		26,505.	
CONTRACT FEES ARTISTS		83,493.	
CONTRACT TEACHERS		108,455.	
CONTRACTORS		51,762.	
CREDIT CARD FEES		6,292.	
GALLERY		863.	
INSURANCE		25,467.	
MAINTENANCE AND REPAIRS		50,073.	
MARKETING AND ADVERTISING		78,776.	
SECURITY		37,032.	
SPECIAL EVENTS		5,866.	
SUBSCRIPTIONS		252.	
UTILITIES		122,986.	
MISCELLANEOUS		27,839.	
LABOR		201,840.	
NON-LABOR		41,828.	
ACCOUNTING FEES		19,592.	
SUPPLIES		20,066.	
TELEPHONE		19,395.	
POSTAGE AND SHIPPING		13,558.	
TRAVEL		18,477.	
TOTAL TO FORM 199, PART II, LINE 17		960,417.	

FORM 199	OTHER ASSETS	STATEMENT	5
DESCRIPTION	BEG. OF YEAR	END OF YEAR	
GRANTS RECEIVABLE	48,595.	0.	
PREPAID EXPENSES AND DEFERRED CHARGES	49,912.	86,764.	
TOTAL TO FORM 199, SCHEDULE L, LINE 12	98,507.	86,764.	

FORM 199	OTHER LIABILITIES	STATEMENT	6
DESCRIPTION	BEG. OF YEAR	END OF YEAR	
DEPOSITS	21,880.	21,728.	
DEFERRED REVENUE	103,624.	72,935.	
TOTAL TO FORM 199, SCHEDULE L, LINE 18	125,504.	94,663.	

FORM 199	EXPENSES RECORDED ON BOOKS THIS YEAR NOT DEDUCTED IN THIS RETURN	STATEMENT 7
DESCRIPTION		AMOUNT
DEPRECIATION		3,556.
TOTAL TO FORM 199, SCHEDULE M-1, LINE 5		3,556.

FORM 199	FUND BALANCES	STATEMENT 8
DESCRIPTION	BEG. OF YEAR	END OF YEAR
UNRESTRICTED ASSETS	-536,468.	-672,724.
TOTAL TO FORM 199, SCHEDULE L, LINE 21	-536,468.	-672,724.

Corporation Depreciation and Amortization

Attach to Form 100 or Form 100W.

FORM 199

FEIN 77-0184306

Corporation name

California corporation number

MEXICAN HERITAGE CORPORATION

C1502376

Part I Depreciation

(a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Method of figuring depreciation	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
1							
SEE STATEMENT	9	417,738.	204,939.				

2 Add the amounts in column (g) and column (h). The combined total of column (h) may not exceed \$2,000. See instructions for line 1, column (h) 2	48,836.	
3 Total. Add the amounts on line 2, column (g) and column (h) 3	48,836.	
4 Total depreciation claimed for federal purposes from federal Form 4562, line 22 4	52,392.	
5 Depreciation adjustment. If line 4 is greater than line 3, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 4 is less than line 3, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.) 5	-3,556.	

Part II Amortization

(a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section	(f) Period or percentage	(g) Amortization for this year
1						
2 Total. Add the amounts in column (g) 2						
3 Total amortization claimed for federal purposes from federal Form 4562, line 44 3						
4 Amortization adjustment. If line 3 is greater than line 2, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 3 is less than line 2, enter the difference here and on Form 100 or Form 100W, Side 1, line 12 4						

439281
11-24-04

CA 3885	DEPRECIATION					STATEMENT	9
ASSET NO./ DESCRIPTION	DATE IN SERVICE	COST OR BASIS	PRIOR DEPR	METHOD	LIFE	DEPRE- CIATION	BONUS
1 COMPUTER SYSTEM (386) W/ COLOR MONITOR	10/12/92	3,252.	3,252.	200DB	5.00	0.	
2 COMPUTER (386)	02/22/96	2,392.	2,392.	200DB	5.00	0.	
3 MARIACHI YOUTH PROG INSTRUMENTS	04/12/96	500.	442.	200DB	3.00	0.	
4 PRINTERS	09/08/96	1,107.	1,040.	200DB	5.00	0.	
5 CRECENZA	09/17/96	264.	243.	200DB	5.00	0.	
6 RED SOFA-2 SEAT	09/17/96	350.	323.	200DB	5.00	0.	
7 PNEUMATIC CHAIR	09/17/96	150.	139.	200DB	5.00	0.	
8 BROWN STORAGE CABINET	09/17/96	117.	103.	200DB	5.00	0.	
9 2 DRAWER LATERAL-36"	09/17/96	162.	141.	200DB	5.00	0.	
10 SERVICING AND UPGRADING OF COMPUTER	09/20/96	1,681.	1,551.	200DB	5.00	0.	
11 COMPUTER MONITOR, ZYMK-GN 1498	10/09/96	242.	224.	200DB	5.00	0.	
12 COMPUTER SOFTWARE	02/28/97	7,763.	6,516.	200DB	5.00	0.	
13 COMPUTER OFFICE 3, CD ROM-OFFICE 2	04/16/97	1,743.	1,405.	200DB	5.00	0.	
14 COMPUTERS-PCI SYS RECEPTION, CUBICAL	06/13/97	3,302.	2,606.	200DB	5.00	0.	
15 COMPUTER - ADD ON HARDWARE	09/19/97	124.	104.	200DB	5.00	0.	
16 COMPUTER - ADD ON HARDWARE	09/25/97	179.	150.	200DB	5.00	0.	
17 MYP INSTRUMENTS	03/03/98	1,083.	874.	200DB	3.00	0.	
18 MYP INSTRUMENTS	03/13/98	520.	420.	200DB	3.00	0.	
19 MYP INSTRUMENTS	03/18/98	387.	306.	200DB	3.00	0.	
20 PENTIUM COMPUTER	03/23/98	650.	479.	200DB	5.00	0.	
21 MYP INSTRUMENTS	04/10/98	390.	308.	200DB	3.00	0.	
22 MYP INSTRUMENTS	04/23/98	644.	499.	200DB	3.00	0.	
23 MYP INSTRUMENTS	04/23/98	650.	503.	200DB	3.00	0.	

24	MYP INSTRUMENTS						
	04/23/98	450.	348.	200DB	3.00		0.
25	MYP INSTRUMENTS						
	04/23/98	500.	387.	200DB	3.00		0.
26	COMPAQ LAPTOP COMPUTER						
	05/30/98	1,947.	1,372.	200DB	5.00		0.
27	VIDEO CAMERA						
	06/16/98	1,170.	825.	200DB	5.00		0.
28	MICROSOFT OFFICE PROFESSIONAL						
	08/05/98	896.	759.	200DB	5.00		0.
29	JUSTIN MCCOY VIHUELA						
	08/14/98	642.	536.	200DB	3.00		0.
30	AMEX - NO DOCUMENTATION						
	08/28/98	571.	317.	200DB	3.00		0.
31	SYSTEMENDER-PENTIUM 233 COMPUTER						
	09/11/98	487.	396.	200DB	5.00		0.
32	ARTURO GONZALES-COMPUTER						
	11/10/98	1,100.	822.	200DB	5.00		0.
33	CRAIG'S ANTIQUES-YORK						
	12/04/98	150.	92.	200DB	3.00		0.
34	CRAIG'S ANTIQUES-MARTIN						
	12/04/98	250.	153.	200DB	3.00		0.
35	CRAIG'S ANTIQUES-CONNOR						
	12/04/98	400.	245.	200DB	3.00		0.
38	CRAIG'S ANTIQUES						
	12/04/98	325.	199.	200DB	3.00		0.
39	CRAIG'S ANTIQUES						
	12/04/98	350.	214.	200DB	3.00		0.
40	CRAIG'S ANTIQUES						
	12/04/98	400.	245.	200DB	3.00		0.
41	CRAIG'S ANTIQUES						
	12/04/98	400.	245.	200DB	3.00		0.
42	8 GUITARS-KAMAMUTO INSTRUMENTS						
	12/04/98	2,317.	1,416.	200DB	3.00		0.
43	VIHUELA WITH HAND CASE-WM FAULKNER						
	12/04/98	250.	153.	200DB	3.00		0.
44	VIHUELA WITH HAND CASE-WM FAULKNER						
	12/04/98	250.	153.	200DB	3.00		0.
45	TRUMPET						
	01/08/99	1,200.	667.	200DB	3.00		0.
46	COMPUTERS						
	03/03/99	45,401.	27,846.	200DB	5.00		0.
47	8 COMMUNICATION PORT SWITCHES						
	05/14/99	23,960.	14,907.	200DB	3.00		0.
48	8 COMMUNICATION UPLINK SWITCHES						
	05/14/99	7,960.	7,005.	200DB	5.00		0.
49	EQUIPMENT DONATED FROM FRY'S						
	06/30/00	96,934.	91,351.	200DB	5.00	2,233.	
50	FLOOR MODEL LECTURN						
	10/07/99	1,561.	1,472.	200DB	5.00		9.
51	FLOOR WAXING MACHINE						
	06/09/00	1,614.	1,521.	200DB	5.00		34.
52	FLOOR MODEL LECTURN						
	06/02/00	129.	122.	200DB	5.00		3.

53	STORAGE CART					
	12/01/99	1,301.	1,227.	200DB	5.00	12.
54	COMPUTER SOFTWARE					
	12/21/95	162.	156.	200DB	3.00	0.
55	CONSTRUCTION DOCUMENTS FOR THE GALLERY SPACE					
	09/18/00	8,750.	850.	SL	39.00	224.
56	GALLERY RETROFIT 50% OF TRACK LIGHTING					
	09/21/00	8,126.	789.	SL	39.00	208.
57	GALLERY TRACK LIGHTING					
	01/02/01	36,406.	3,228.	SL	39.00	933.
58	CABINETS					
	06/30/01	9,421.	736.	SL	39.00	242.
59	PREMIER SECURITY					
	06/30/01	1,505.	119.	SL	39.00	39.
61	ACCOUNTING SERVER					
	01/08/02	2,096.	1,489.	200DB	5.00	241.
62	MODULAR FURNITURE					
	08/31/01	1,763.	1,255.	200DB	5.00	203.
63	MUSIC EQUIPMENT					
	07/01/02	1,998.	1,039.	200DB	5.00	384.
64	PRINTER					
	08/30/02	1,225.	637.	200DB	5.00	235.
65	MONITOR AND MODEM					
	08/30/02	17,783.	9,247.	200DB	5.00	3,414.
66	COMPUTER, 1 YOUNG EXPLORER					
	08/30/02	2,149.	1,118.	200DB	5.00	412.
67	PROJECTION AND SOUND EQUIPMENT					
	06/25/04	54,999.	2,749.	200DB	5.00	20,900.
68	COMPAQ SERVER					
	05/31/04	12,607.	630.	200DB	5.00	4,791.
69	3 ROLLIN SPEAKER STACKS					
	06/16/04	1,819.	65.	200DB	7.00	501.
70	HP PANEL, DESKTOP, AND STORAGEWORKS					
	05/31/04	32,214.	1,610.	200DB	5.00	12,242.
71	HP PRINTER AND PROJECTOR					
	05/31/04	4,148.	207.	200DB	5.00	1,576.
TOTAL TO FORM 3885		<u>417,738.</u>	<u>204,939.</u>			<u>48,836.</u>

MAIL TO:
 Registry of Charitable Trusts
 P. O. Box 903447
 Sacramento, CA 94203-4470
 Telephone: (916) 445-2021

**ANNUAL
 REGISTRATION RENEWAL FEE REPORT
 TO ATTORNEY GENERAL OF CALIFORNIA**

Sections 12586 and 12587, California Government Code
 11 Cal. Code Regs. sections 301-307, 311 and 312

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties as defined in Government Code section 12586.1. IRS extensions will be honored.

WEB SITE ADDRESS:
<http://ag.ca.gov/charities/>

State Charity Registration Number: <u>CT 071831</u> <u>MEXICAN HERITAGE CORPORATION</u> <small>Name of Organization</small> <u>1700 ALUM ROCK AVENUE</u> <small>Address (Number and Street)</small> <u>SAN JOSE, CA 95116</u> <small>City or Town, State and ZIP Code</small>	Check if: <input type="checkbox"/> Change of address <input type="checkbox"/> Amended report Corporate or Organization No. <u>C1502376</u> Federal Employer I.D. No. <u>77-0184306</u>
---	---

ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311 and 312)
 Make Check Payable to Attorney General's Registry of Charitable Trusts

Gross Annual Revenue	Fee	Gross Annual Revenue	Fee	Gross Annual Revenue	Fee
Less than \$25,000	0	Between \$100,001 and \$250,000	\$50	Between \$1,000,001 and \$10 million	\$150
Between \$25,000 and \$100,000	\$25	Between \$250,001 and \$1 million	\$75	Between \$10,000,001 and \$50 million	\$225
				Greater than \$50 million	\$300

PART A - ACTIVITIES

For your most recent full accounting period (beginning 07/01/2004 ending 06/30/2005) list:
 Gross annual revenue \$ 1,151,831. Total assets \$ 323,237.

PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT

Note: If you answer "yes" to any of the questions below, you must attach a separate sheet providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required.

	Yes	No
1. During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof either directly or with an entity in which any such officer, director or trustee had any financial interest?		X
2. During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?		X
3. During this reporting period, did non-program expenditures exceed 50% of gross revenues?		X
4. During this reporting period, were any organization funds used to pay any penalty, fine or judgment? If you filed a Form 4720 with the Internal Revenue Service, attach a copy.		X
5. During this reporting period, were the services of a commercial fundraiser or fundraising counsel for charitable purposes used? If "yes," provide an attachment listing the name, address, and telephone number of the service provider.		X
6. During this reporting period, did the organization receive any governmental funding? If so, provide an attachment listing the name of the agency, mailing address, contact person, and telephone number.	X	
7. During this reporting period, did the organization hold a raffle for charitable purposes? If "yes," provide an attachment indicating the number of raffles and the date(s) they occurred.		X
8. Does the organization conduct a vehicle donation program? If "yes," provide an attachment indicating whether the program is operated by the charity or whether the organization contracts with a commercial fundraiser for charitable purposes.		X
9. Did your organization have prepared an audited financial statement in accordance with generally accepted accounting principles for this reporting period?		X

Organization's area code and telephone number (408) 928-5500

Organization's e-mail address N/A

I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, it is true, correct and complete.

Signature of authorized officer

Printed Name

Title

Date

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the **2004** calendar year, or tax year beginning **JUL 1, 2004** and ending **JUN 30, 2005**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input checked="" type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization MEXICAN HERITAGE CORPORATION Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1700 ALUM ROCK AVENUE City or town, state or country, and ZIP + 4 SAN JOSE, CA 95116	D Employer identification number 77-0184306 E Telephone number (408) 928-5500 F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶
--	---	---	---

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and **I** are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates ▶
H(c) Are all affiliates included? **N/A** Yes No
 (If "No," attach a list.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Group Exemption Number ▶
M Check if the organization is **not** required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

G Website: ▶ **WWW.MHCVIVA.ORG**

J Organization type (check only one) ▶ 501(c) (**3**) ◀ (insert no.) 4947(a)(1) or 527

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. **Some states require a complete return.**

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **1,395,499.**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue	1	Contributions, gifts, grants, and similar amounts received:				
		a	Direct public support	1a	237,384.	
		b	Indirect public support	1b		
		c	Government contributions (grants)	1c	554,546.	
		d	Total (add lines 1a through 1c) (cash \$ 791,930. noncash \$) ...	1d	791,930.	
		2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	225,483.	
		3	Membership dues and assessments	3		
		4	Interest on savings and temporary cash investments	4	65.	
		5	Dividends and interest from securities	5		
		6 a	Gross rents SEE STATEMENT 1	6a	359,500.	
		b	Less: rental expenses SEE STATEMENT 2	6b	243,668.	
		c	Net rental income or (loss) (subtract line 6b from line 6a)	6c	115,832.	
	7	Other investment income (describe)	7			
	8 a	Gross amount from sales of assets other than inventory	(A) Securities (B) Other			
			8a			
	b	Less: cost or other basis and sales expenses	8b			
	c	Gain or (loss) (attach schedule)	8c			
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8d			
	9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>				
	a	Gross revenue (not including \$ of contributions reported on line 1a)	9a			
	b	Less: direct expenses other than fundraising expenses	9b			
	c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c			
	10 a	Gross sales of inventory, less returns and allowances	10a			
	b	Less: cost of goods sold	10b			
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			
	11	Other revenue (from Part VII, line 103)	11	18,521.		
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	1,151,831.		
Expenses	13	Program services (from line 44, column (B))	13	498,168.		
	14	Management and general (from line 44, column (C))	14	676,799.		
	15	Fundraising (from line 44, column (D))	15	113,120.		
	16	Payments to affiliates (attach schedule)	16			
	17	Total expenses (add lines 16 and 44, column (A))	17	1,288,087.		
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	-136,256.		
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	-536,468.		
	20	Other changes in net assets or fund balances (attach explanation)	20	0.		
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	-672,724.		

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule)				
	(cash \$ _____ noncash \$ _____)	22			
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc.	25	231,000.	0.	231,000.
26	Other salaries and wages	26	244,790.	92,187.	120,165.
27	Pension plan contributions	27			
28	Other employee benefits	28			
29	Payroll taxes	29			
30	Professional fundraising fees	30			
31	Accounting fees	31	19,592.	302.	19,290.
32	Legal fees	32			
33	Supplies	33	20,066.	3,261.	16,286.
34	Telephone	34	19,395.	4,536.	13,363.
35	Postage and shipping	35	13,558.	4,779.	3,755.
36	Occupancy	36	43,156.	41,020.	
37	Equipment rental and maintenance	37			
38	Printing and publications	38			
39	Travel	39	18,477.	13,010.	4,232.
40	Conferences, conventions, and meetings	40			
41	Interest	41			
42	Depreciation, depletion, etc. (attach schedule)	42	52,392.	34,741.	14,712.
43	Other expenses not covered above (itemize):				
a	_____	43a			
b	_____	43b			
c	_____	43c			
d	_____	43d			
e	SEE STATEMENT 3	43e	625,661.	304,332.	253,996.
44	<small>Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15.</small>	44	1,288,087.	498,168.	676,799.

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____;
 (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose?

PROMOTE AND ENHANCE MEXICAN CULTURE THROUGH CULTURAL EVENTS

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
 (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)

a	AND EXHIBITS THAT PROVIDE THE COMMUNITY OF SAN JOSE, CALIFORNIA AND SANTA CLARA COUNTY, AWARENESS OF THE RICHNESS OF MEXICAN CULTURE AND MUSIC.	(Grants and allocations \$ _____)	498,168.
b	_____	(Grants and allocations \$ _____)	
c	_____	(Grants and allocations \$ _____)	
d	_____	(Grants and allocations \$ _____)	
e	Other program services (attach schedule)	(Grants and allocations \$ _____)	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)		498,168.

Part IV Balance Sheets

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year	(B) End of year
Assets	45 Cash - non-interest-bearing	39,109.	45 5,603.
	46 Savings and temporary cash investments		46
	47 a Accounts receivable	70,466.	
	b Less: allowance for doubtful accounts		47c 70,466.
	48 a Pledges receivable		48a
	b Less: allowance for doubtful accounts		48b 48c
	49 Grants receivable	48,595.	49
	50 Receivables from officers, directors, trustees, and key employees		50
	51 a Other notes and loans receivable		51a
	b Less: allowance for doubtful accounts		51b 51c
	52 Inventories for sale or use		52
	53 Prepaid expenses and deferred charges	49,912.	53 86,764.
	54 Investments - securities	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	54
	55 a Investments - land, buildings, and equipment: basis		55a
	b Less: accumulated depreciation		55b 55c
56 Investments - other		56	
57 a Land, buildings, and equipment: basis	417,738.		
b Less: accumulated depreciation STMT 4	257,334.	57b 212,799.	
57c 160,404.			
58 Other assets (describe ▶ _____)		58	
59 Total assets (add lines 45 through 58) (must equal line 74)	436,560.	59 323,237.	
Liabilities	60 Accounts payable and accrued expenses	197,524.	60 301,297.
	61 Grants payable		61
	62 Deferred revenue	103,624.	62 72,935.
	63 Loans from officers, directors, trustees, and key employees		63
	64 a Tax-exempt bond liabilities		64a
	b Mortgages and other notes payable	650,000.	64b 600,001.
	65 Other liabilities (describe ▶ DEPOSITS)	21,880.	65 21,728.
66 Total liabilities (add lines 60 through 65)	973,028.	66 995,961.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.		
	67 Unrestricted	-536,468.	67 -672,724.
	68 Temporarily restricted		68
	69 Permanently restricted		69
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.		
	70 Capital stock, trust principal, or current funds		70
	71 Paid-in or capital surplus, or land, building, and equipment fund		71
	72 Retained earnings, endowment, accumulated income, or other funds		72
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	-536,468.	73 -672,724.
74 Total liabilities and net assets / fund balances (add lines 66 and 73)	436,560.	74 323,237.	

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return

Table with 2 columns: Description and Amount. Rows include: Total revenue, gains, and other support per audited financial statements (2,510,914); Amounts included on line a but not on line 12, Form 990 (1,359,083); Line a minus line b (1,151,831); Total revenue per line 12, Form 990 (1,151,831).

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

Table with 2 columns: Description and Amount. Rows include: Total expenses and losses per audited financial statements (2,647,170); Amounts included on line a but not on line 17, Form 990 (1,359,083); Line a minus line b (1,288,087); Total expenses per line 17, Form 990 (1,288,087).

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated.)

Table with 5 columns: (A) Name and address, (B) Title and average hours per week devoted to position, (C) Compensation (if not paid, enter -0-), (D) Contributions to employee benefit plans & deferred compensation, (E) Expense account and other allowances. Row 1: SEE STATEMENT 5, 231,000, 0, 0.

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? If "Yes," attach schedule. [] Yes [X] No

Part VI Other Information		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77	X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	78b	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b	If "Yes," enter the name of the organization and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81 a	Enter direct or indirect political expenditures. See line 81 instructions 81a 0.		
b	Did the organization file Form 1120-POL for this year?	81b	X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) 82b N/A		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions? N/A	83b	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A	84b	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A	85a	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A	85b	
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
c	Dues, assessments, and similar amounts from members 85c N/A		
d	Section 162(e) lobbying and political expenditures 85d N/A		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A	85g	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A	85h	
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12 86a N/A		
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A		
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders 87a N/A		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b N/A		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 0.; section 4912 0.; section 4955 0.		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0.		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization 0.		
90 a	List the states with which a copy of this return is filed CA		
b	Number of employees employed in the pay period that includes March 12, 2004 90b 21		
91	The books are in care of MARCELA DAVISON AVILES Telephone no. 408-628-5558		
	Located at 1700 ALUM ROCK AVENUE, SAN JOSE, CA ZIP + 4 95116		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A		

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions.)

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a <u>HERITAGE ARTS&EDUCATION</u>					54,477.
b <u>MEXICAN HERITAGE EVENTS</u>					139,821.
c <u>TUITION WORKSHOP FEES</u>					30,951.
d <u>TOURS</u>					234.
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments ...			14	65.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					115,832.
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a <u>MISCELLANEOUS REVENUE</u>					18,521.
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0.		65.	359,836.
105 Total (add line 104, columns (B), (D), and (E))					359,901.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93	TO PROMOTE MEXICAN CULTURE THROUGH ARTS AND EDUCATION.
97	TO PROMOTE MEXICAN HERITAGE THROUGH CULTURAL EVENTS.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

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.

Please Sign Here Signature of officer Date Type or print name and title.

Paid Preparer's Use Only Preparer's signature: Date: Check if self-employed: Preparer's SSN or PTIN:

Firm's name (or yours if self-employed), address, and ZIP + 4: **PETRINOVICH PUGH & COMPANY, LLP**
333 WEST SANTA CLARA STREET SUITE 830
SAN JOSE, CA 95113 EIN: Phone no.: **(408) 287-7911**

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No. 1545-0047

2004

Name of the organization

MEXICAN HERITAGE CORPORATION

Employer identification number

77 0184306

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
ALEX CARONA ----- 1700 ALUM ROCK AVE SAN JOSE, CA 95116	OPER. MANAGER 40	52,500.		
MARCELA DAVISON AVILES ----- 1700 ALUM ROCK AVE SAN JOSE, CA 95116	EXE. DIRECTOR 40	105,000.		
MARC-ANDREW AGUILERA ----- 1700 ALUM ROCK AVE SAN JOSE, CA 95116	DIR. FIN & OPS 40	73,500.		
----- -----				
----- -----				
Total number of other employees paid over \$50,000 ▶	0			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE -----		
----- -----		
----- -----		
----- -----		
----- -----		
Total number of others receiving over \$50,000 for professional services ▶	0	

Part III Statements About Activities (See page 2 of the instructions.)	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.	1	X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property?	2a	X
b Lending of money or other extension of credit?	2b	X
c Furnishing of goods, services, or facilities?	2c	X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	X
e Transfer of any part of its income or assets?	2e	X
3 a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)	3a	X
b Do you have a section 403(b) annuity plan for your employees?	3b	X
4 a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4a	X
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b	X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

- The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)
- 5** A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
 - 6** A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
 - 7** A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
 - 8** A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
 - 9** A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ► _____
 - 10** An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
 - 11a** An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
 - 11b** A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
 - 12** An organization that normally receives: **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
 - 13** An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: **(1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2).** (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.**
 Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	2,705,377.	2,738,467.	3,787,454.	3,206,970.	12,438,268.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975					
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	2,705,377.	2,738,467.	3,787,454.	3,206,970.	12,438,268.
24 Line 23 minus line 17	2,705,377.	2,738,467.	3,787,454.	3,206,970.	12,438,268.
25 Enter 1% of line 23	27,054.	27,385.	37,875.	32,070.	

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24	▶	26a	248,765.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts	▶	26b	0.
c Total support for section 509(a)(1) test: Enter line 24, column (e)	▶	26c	12,438,268.
d Add: Amounts from column (e) for lines: 18 _____ 19 _____ 22 _____ 26b _____	▶	26d	
e Public support (line 26c minus line 26d total)	▶	26e	12,438,268.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))	▶	26f	100.0000%

27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A	(2003) _____ (2002) _____ (2001) _____ (2000) _____		
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A	(2003) _____ (2002) _____ (2001) _____ (2000) _____		
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____	▶	27c	N/A
d Add: Line 27a total _____ and line 27b total _____	▶	27d	N/A
e Public support (line 27c total minus line 27d total)	▶	27e	N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)	▶	27f	N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))	▶	27g	N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))	▶	27h	N/A %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

NONE

Part V Private School Questionnaire (See page 7 of the instructions.)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31	
If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			

32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			

33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities?	33h	
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			

34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b	Has the organization's right to such aid ever been revoked or suspended?	34b	
If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)

N/A

(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		N/A	
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount. Enter the amount from the following table -			
If the amount on line 40 is -	The lobbying nontaxable amount is -		
Not over \$500,000	20% of the amount on line 40		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h .)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h .)			0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 11 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

Table with 3 columns: Question, Yes, No. Rows include: Transfers from the reporting organization to a noncharitable exempt organization of: (i) Cash, (ii) Other assets; Other transactions: (i) Sales or exchanges of assets, (ii) Purchases of assets, (iii) Rental of facilities, (iv) Reimbursement arrangements, (v) Loans or loan guarantees, (vi) Performance of services; Sharing of facilities, equipment, mailing lists, other assets, or paid employees; and If the answer to any of the above is "Yes," complete the following schedule.

Table with 4 columns: (a) Line no., (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. Content is N/A.

52 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? [] Yes [X] No

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. Content is N/A.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
1	COMPUTER SYSTEM (386) W/ COLOR MONITOR	101292	200DB	5.00	17	3,252.			3,252.	3,252.		0.
2	COMPUTER (386) MARIACHI YOUTH PROG	022296	200DB	5.00	17	2,392.			2,392.	2,392.		0.
3	INSTRUMENTS	041296	200DB	3.00	17	500.			500.	442.		0.
4	PRINTERS	090896	200DB	5.00	17	1,107.			1,107.	1,040.		0.
5	CRECENZA	091796	200DB	5.00	17	264.			264.	243.		0.
6	RED SOFA-2 SEAT	091796	200DB	5.00	17	350.			350.	323.		0.
7	PNEUMATIC CHAIR	091796	200DB	5.00	17	150.			150.	139.		0.
8	BROWN STORAGE CABINET	091796	200DB	5.00	17	117.			117.	103.		0.
9	2 DRAWER LATERAL-36" SERVICING AND	091796	200DB	5.00	17	162.			162.	141.		0.
10	UPGRADING OF COMPUTER COMPUTER MONITOR,	092096	200DB	5.00	17	1,681.			1,681.	1,551.		0.
11	ZYNK-GN 1498	100996	200DB	5.00	17	242.			242.	224.		0.
12	COMPUTER SOFTWARE COMPUTER OFFICE 3, CD	022897	200DB	5.00	17	7,763.			7,763.	6,516.		0.
13	ROM-OFFICE 2	041697	200DB	5.00	17	1,743.			1,743.	1,405.		0.
14	COMPUTERS-PCI SYS RECEPTION, CUBICAL	061397	200DB	5.00	17	3,302.			3,302.	2,606.		0.
15	COMPUTER - ADD ON HARDWARE	091997	200DB	5.00	17	124.			124.	104.		0.
16	COMPUTER - ADD ON HARDWARE	092597	200DB	5.00	17	179.			179.	150.		0.
17	MYP INSTRUMENTS	030398	200DB	3.00	17	1,083.			1,083.	874.		0.
18	MYP INSTRUMENTS	031398	200DB	3.00	17	520.			520.	420.		0.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
19	MYP INSTRUMENTS	031898	200DB	3.00	17	387.			387.	306.		0.
20	PENTIUM COMPUTER	032398	200DB	5.00	17	650.			650.	479.		0.
21	MYP INSTRUMENTS	041098	200DB	3.00	17	390.			390.	308.		0.
22	MYP INSTRUMENTS	042398	200DB	3.00	17	644.			644.	499.		0.
23	MYP INSTRUMENTS	042398	200DB	3.00	17	650.			650.	503.		0.
24	MYP INSTRUMENTS	042398	200DB	3.00	17	450.			450.	348.		0.
25	MYP INSTRUMENTS	042398	200DB	3.00	17	500.			500.	387.		0.
26	COMPAQ LAPTOP COMPUTER	053098	200DB	5.00	17	1,947.			1,947.	1,372.		0.
27	VIDEO CAMERA	061698	200DB	5.00	17	1,170.			1,170.	825.		0.
28	MICROSOFT OFFICE PROFESSIONAL	080598	200DB	5.00	17	896.			896.	759.		0.
29	JUSTIN MCCOY VIHUELA	081498	200DB	3.00	17	642.			642.	536.		0.
30	AMEX - NO DOCUMENTATION	082898	200DB	3.00	17	571.			571.	317.		0.
31	SYSTEMENDER-PENTIUM 233 COMPUTER	091198	200DB	5.00	17	487.			487.	396.		0.
32	ARTURO GONZALES-COMPUTER	111098	200DB	5.00	17	1,100.			1,100.	822.		0.
33	CRAIG'S ANTIQUES-YORK	120498	200DB	3.00	17	150.			150.	92.		0.
34	CRAIG'S ANTIQUES-MARTIN	120498	200DB	3.00	17	250.			250.	153.		0.
35	CRAIG'S ANTIQUES-CONN	120498	200DB	3.00	17	400.			400.	245.		0.
36				.000	16							0.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
37				.000	16							0.
38	CRAIG'S ANTIQUES	120498	200DB	3.00	17	325.			325.	199.		0.
39	CRAIG'S ANTIQUES	120498	200DB	3.00	17	350.			350.	214.		0.
40	CRAIG'S ANTIQUES	120498	200DB	3.00	17	400.			400.	245.		0.
41	CRAIG'S ANTIQUES	120498	200DB	3.00	17	400.			400.	245.		0.
42	8 GUITARS-KAMAMUTO INSTRUMENTS	120498	200DB	3.00	17	2,317.			2,317.	1,416.		0.
43	VIHUELA WITH HAND CASE-WM FAULKNER	120498	200DB	3.00	17	250.			250.	153.		0.
44	VIHUELA WITH HAND CASE-WM FAULKNER	120498	200DB	3.00	17	250.			250.	153.		0.
45	TRUMPET	010899	200DB	3.00	17	1,200.			1,200.	667.		0.
46	COMPUTERS	030399	200DB	5.00	17	45,401.			45,401.	27,846.		0.
47	8 COMMUNICATION PORT SWITCHES	051499	200DB	3.00	17	23,960.			23,960.	14,907.		0.
48	8 COMMUNICATION UPLINK SWITCHES	051499	200DB	5.00	17	7,960.			7,960.	7,005.		0.
49	EQUIPMENT DONATED FROM FRY'S	063000	200DB	5.00	17	96,934.			96,934.	91,351.		5,583.
50	FLOOR MODEL LECTURN	100799	200DB	5.00	17	1,561.			1,561.	1,472.		90.
51	FLOOR WAXING MACHINE	060900	200DB	5.00	17	1,614.			1,614.	1,521.		93.
52	FLOOR MODEL LECTURN	060200	200DB	5.00	17	129.			129.	122.		7.
53	STORAGE CART	120199	200DB	5.00	17	1,301.			1,301.	1,227.		75.
54	COMPUTER SOFTWARE	122195	200DB	3.00	17	162.			162.	156.		0.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
55	CONSTRUCTION DOCUMENTS FOR THE GALLERY SPACE	091800	SL	39.00	17	8,750.			8,750.	850.		224.
56	GALLERY RETROFIT 50% OF TRACK LIGHTING	092100	SL	39.00	17	8,126.			8,126.	789.		208.
57	GALLERY TRACK LIGHTING	010201	SL	39.00	17	36,406.			36,406.	3,228.		933.
58	CABINETS	063001	SL	39.00	17	9,421.			9,421.	736.		242.
59	PREMIER SECURITY	063001	SL	39.00	17	1,505.			1,505.	119.		39.
61	ACCOUNTING SERVER	010802	200DB	5.00	17	2,096.			2,096.	1,489.		241.
62	MODULAR FURNITURE	083101	200DB	5.00	17	1,763.			1,763.	1,255.		203.
63	MUSIC EQUIPMENT	070102	200DB	5.00	17	1,998.			1,998.	1,039.		384.
64	PRINTER	083002	200DB	5.00	17	1,225.			1,225.	637.		235.
65	MONITOR AND MODEM	083002	200DB	5.00	17	17,783.			17,783.	9,247.		3,414.
66	COMPUTER, 1 YOUNG EXPLORER	083002	200DB	5.00	17	2,149.			2,149.	1,118.		412.
67	PROJECTION AND SOUND EQUIPMENT	062504	200DB	5.00	17	54,999.			54,999.	2,749.		20,900.
68	COMPAQ SERVER	053104	200DB	5.00	17	12,607.			12,607.	630.		4,791.
69	3 ROLLIN SPEAKER STACKS	061604	200DB	7.00	17	1,819.			1,819.	65.		501.
70	HP PANEL, DESKTOP, AND STORAGEWORKS	053104	200DB	5.00	17	32,214.			32,214.	1,610.		12,241.
71	HP PRINTER AND PROJECTOR	053104	200DB	5.00	17	4,148.			4,148.	207.		1,576.
	* TOTAL 990 PAGE 2 DEPR					417,738.		0.	417,738.	204,939.	0.	52,392.

Schedule B
(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Supplementary Information for
line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No. 1545-0047

2004

Name of organization

MEXICAN HERITAGE CORPORATION

Employer identification number

77-0184306

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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-

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules-

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to 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. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) ► \$ _____

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2004)

Name of organization

Employer identification number

MEXICAN HERITAGE CORPORATION

77-0184306

Part I Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	CITY OF SAN JOSE - O&M 801 NORTH FIRST STREET, RM 140 SAN JOSE, CA 95110	\$ 328,864.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	CITY OF SAN JOSE - GRANT 801 NORTH FIRST STREET, RM 140 SAN JOSE, CA 95110	\$ 70,410.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	WELLS FARGO BANK 90 SOUTH 7TH STREET MINNEAPOLIS, MN 55440	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	MAYFAIR IMPROVEMENT DIVISION 2342 ALUM ROCK AVENUE SAN JOSE, CA 95116	\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	SBC 130 E. TRAVIS, SUITE 350 SAN ANTONIO, TX 78205	\$ 35,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

FORM 990	RENTAL INCOME	STATEMENT	1
KIND AND LOCATION OF PROPERTY		ACTIVITY NUMBER	GROSS RENTAL INCOME
FACILITY RENTAL		1	359,500.
TOTAL TO FORM 990, PART I, LINE 6A			359,500.

FORM 990	RENTAL EXPENSES	STATEMENT	2
DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
LABOR		201,840.	
NON-LABOR		41,828.	
- SUBTOTAL -	1		243,668.
TOTAL TO FORM 990, PART I, LINE 6B			243,668.

FORM 990	OTHER EXPENSES	STATEMENT	3	
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
CATERING	26,505.	315.	0.	26,190.
CONTRACT FEES				
ARTISTS	83,493.	67,543.	0.	15,950.
CONTRACT TEACHERS	108,455.	108,455.	0.	0.
CONTRACTORS	51,762.	32,446.	17,696.	1,620.
CREDIT CARD FEES	6,292.		4,126.	2,166.
GALLERY	863.		863.	
INSURANCE	25,467.		25,467.	
MAINTENANCE AND REPAIRS	50,073.	1,998.	47,825.	250.
MARKETING AND ADVERTISING	78,776.	56,569.	1,682.	20,525.
SECURITY	37,032.	12,806.	23,964.	262.
SPECIAL EVENTS	5,866.	5,671.		195.
SUBSCRIPTIONS	252.		77.	175.
UTILITIES	122,986.	614.	122,372.	
MISCELLANEOUS	27,839.	17,915.	9,924.	
TOTAL TO FM 990, LN 43	625,661.	304,332.	253,996.	67,333.

FORM 990	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT	STATEMENT	4
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
COMPUTER SYSTEM (386) W/ COLOR MONITOR	3,252.	3,252.	0.
COMPUTER (386)	2,392.	2,392.	0.
MARIACHI YOUTH PROG INSTRUMENTS	500.	442.	58.
PRINTERS	1,107.	1,040.	67.
CRECENZA	264.	243.	21.
RED SOFA-2 SEAT	350.	323.	27.
PNEUMATIC CHAIR	150.	139.	11.
BROWN STORAGE CABINET	117.	103.	14.
2 DRAWER LATERAL-36"	162.	141.	21.
SERVICING AND UPGRADING OF COMPUTER	1,681.	1,551.	130.
COMPUTER MONITOR, ZYMK-GN 1498	242.	224.	18.
COMPUTER SOFTWARE	7,763.	6,516.	1,247.
COMPUTER OFFICE 3, CD ROM-OFFICE 2	1,743.	1,405.	338.
COMPUTERS-PCI SYS RECEPTION, CUBICAL	3,302.	2,606.	696.
COMPUTER - ADD ON HARDWARE	124.	104.	20.
COMPUTER - ADD ON HARDWARE	179.	150.	29.
MYP INSTRUMENTS	1,083.	874.	209.
MYP INSTRUMENTS	520.	420.	100.
MYP INSTRUMENTS	387.	306.	81.
PENTIUM COMPUTER	650.	479.	171.
MYP INSTRUMENTS	390.	308.	82.
MYP INSTRUMENTS	644.	499.	145.
MYP INSTRUMENTS	650.	503.	147.
MYP INSTRUMENTS	450.	348.	102.
MYP INSTRUMENTS	500.	387.	113.
COMPAQ LAPTOP COMPUTER	1,947.	1,372.	575.
VIDEO CAMERA	1,170.	825.	345.
MICROSOFT OFFICE PROFESSIONAL	896.	759.	137.
JUSTIN MCCOY VIHUELA	642.	536.	106.
AMEX - NO DOCUMENTATION	571.	317.	254.
SYSTEMENDER-PENTIUM 233 COMPUTER	487.	396.	91.
ARTURO GONZALES-COMPUTER	1,100.	822.	278.
CRAIG'S ANTIQUES-YORK	150.	92.	58.
CRAIG'S ANTIQUES-MARTIN	250.	153.	97.
CRAIG'S ANTIQUES-CONNOR	400.	245.	155.
CRAIG'S ANTIQUES	325.	199.	126.
CRAIG'S ANTIQUES	350.	214.	136.
CRAIG'S ANTIQUES	400.	245.	155.
CRAIG'S ANTIQUES	400.	245.	155.
8 GUITARS-KAMAMUTO INSTRUMENTS	2,317.	1,416.	901.
VIHUELA WITH HAND CASE-WM FAULKNER	250.	153.	97.

VIHUELA WITH HAND CASE-WM			
FAULKNER	250.	153.	97.
TRUMPET	1,200.	667.	533.
COMPUTERS	45,401.	27,846.	17,555.
8 COMMUNICATION PORT SWITCHES	23,960.	14,907.	9,053.
8 COMMUNICATION UPLINK SWITCHES	7,960.	7,005.	955.
EQUIPMENT DONATED FROM FRY'S	96,934.	96,934.	0.
FLOOR MODEL LECTURN	1,561.	1,562.	-1.
FLOOR WAXING MACHINE	1,614.	1,614.	0.
FLOOR MODEL LECTURN	129.	129.	0.
STORAGE CART	1,301.	1,302.	-1.
COMPUTER SOFTWARE	162.	156.	6.
CONSTRUCTION DOCUMENTS FOR THE GALLERY SPACE	8,750.	1,074.	7,676.
GALLERY RETROFIT 50% OF TRACK LIGHTING	8,126.	997.	7,129.
GALLERY TRACK LIGHTING	36,406.	4,161.	32,245.
CABINETS	9,421.	978.	8,443.
PREMIER SECURITY	1,505.	158.	1,347.
ACCOUNTING SERVER	2,096.	1,730.	366.
MODULAR FURNITURE	1,763.	1,458.	305.
MUSIC EQUIPMENT	1,998.	1,423.	575.
PRINTER	1,225.	872.	353.
MONITOR AND MODEM	17,783.	12,661.	5,122.
COMPUTER, 1 YOUNG EXPLORER	2,149.	1,530.	619.
PROJECTION AND SOUND EQUIPMENT	54,999.	23,649.	31,350.
COMPAQ SERVER	12,607.	5,421.	7,186.
3 ROLLIN SPEAKER STACKS	1,819.	566.	1,253.
HP PANEL, DESKTOP, AND STORAGEWORKS	32,214.	13,851.	18,363.
HP PRINTER AND PROJECTOR	4,148.	1,783.	2,365.
TOTAL TO FORM 990, PART IV, LN 57	417,738.	257,331.	160,407.

FORM 990	PART V - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES	STATEMENT	5
----------	---	-----------	---

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
BENNY BOVEDO 1700 ALUM ROCK AVE SAN JOSE, CA 95116	BOARD MEMBER 5	0.	0.	0.
ARMANDO CASTELLANO 1700 ALUM ROCK AVE SAN JOSE, CA 95116	BOARD MEMBER 5	0.	0.	0.
EDDIE GARCIA 1900 S. 10TH STREET SAN JOSE, CA 95112	CHAIRPERSON 5	0.	0.	0.
DANIEL FENTON 408 ALMADEN BLVD. SAN JOSE, CA 95110	VICE CHAIR 5	0.	0.	0.
RUDY RODRIGUEZ 1919 S. BASCOM AVE., SUITE 600 CAMPBELL, CA 95008	SECRETARY 5	0.	0.	0.
MARTHA J. KANTER 1700 ALUM ROCK AVE SAN JOSE, CA 95116	BOARD MEMBER 5	0.	0.	0.
GEORGE SHIRAKAWA, JR 1700 ALUM ROCK AVE SAN JOSE, CA 95116	BOARD MEMBER 5	0.	0.	0.
LEON BEAUCHMAN 100 PARK CENTER PLAZA, SUITE 325 SAN JOSE, CA 95113	BOARD MEMBER 5	0.	0.	0.
MARGIE GAETA 1675 EL DORADO SAN JOSE, CA 95126	BOARD MEMBER 5	0.	0.	0.
JIM SANTOYO GONZALES 5314 GARRISON CIRCLE SAN JOSE, CA 95123	BOARD MEMBER 5	0.	0.	0.
NOEL MONTOYA 1070 COMMERCIAL STREET, SUITE 103 SAN JOSE, CA 95112	BOARD MEMBER 5	0.	0.	0.

MARCE MORA 2855 EL MONTE WAY SAN JOSE, CA 95127	BOARD MEMBER 5	0.	0.	0.
KIMBERLEY ROCHA 2187 BENTLEY RIDGE DR. SAN JOSE, CA 95138	BOARD MEMBER 5	0.	0.	0.
OLGA MARTIN STEELE 5750 ALMADEN EXPY (HQ BLDG.) SAN JOSE, CA 95118	TREASURER 5	0.	0.	0.
MARCELA DAVISON AVILES 1700 ALUM ROCK AVE SAN JOSE, CA 95116	EXE. DIRECTOR 40	105,000.	0.	0.
MARC-ANDREW AGUILERA 1700 ALUM ROCK AVE SAN JOSE, CA 95116	DIRECTOR OF FIN. & OPER. 40	73,500.	0.	0.
ALEX CORONA 1700 ALUM ROCK AVE SAN JOSE, CA 95116	OPERATIONS MANAGER 40	52,500.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V		<u>231,000.</u>	<u>0.</u>	<u>0.</u>