## Form 990

## **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

2012

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service

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

For the 2012 calendar year, or tax year beginning 2012, and ending 20 D Employer identification number Check if applicable: C Name of organization NORTHERN CALIFORNIA MUSIC & ART CULTURE CENTER Doing Business As 94-3174349 Address change Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number ☐ Name change 3936 GEARY BLVD. (415) 751-6222 Initial return City, town or post office, state, and ZIP code Terminated G Gross receipts \$ Amended return SAN FRANCISCO, CA 94118 H(a) Is this a group return for affiliates? ☐ Yes ☑ No Application pending F Name and address of principal officer: If "No." attach a list, (see instructions) **☑** 501(c)(3) 🔲 501(c) ( ) ◀ (insert no.) 🔲 4947(a)(1) or Tax-exempt status: H(c) Group exemption number ▶ Website: ▶ ncmacc.org L Year of formation: 1992 M State of legal domicile: Form of organization: Corporation Trust ☐ Association ☐ Other ► Briefly describe the organization's mission or most significant activities: Culturally rich music, and arts programs are provided to the children and adults in the San Francisco Bay Area. Individualized and group lessons, after-school Piano Activities & Governance Singing and Arts classes, and Korean cultural performing arts instructions are given to the public. Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) . . . . . 4 Number of independent voting members of the governing body (Part VI, line 1b) 8 5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 7 6 Total number of volunteers (estimate if necessary) . . . . . 7 7a Total unrelated business revenue from Part VIII, column (C), line 12 0 7h Net unrelated business taxable income from Form 990-T, line 34 0 Current Year Contributions and grants (Part VIII, line 1h) . . . 205375 202097 8 Revenue 9 Program service revenue (Part VIII, line 2g) 195227 199025 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 151 85 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 64139 11 3762 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 404515 465346 12 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . . . 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . . . . Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 155125 148486 Professional fundraising fees (Part IX, column (A), line 11e) . . 16a Total fundraising expenses (Part IX, column (D), line 25) ▶ b Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 230469 253807 17 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 385594 402293 18 19 Revenue less expenses. Subtract line 18 from line 12 18921 63053 Beginning of Current Year End of Year 195065 20 Total assets (Part X, line 16) 132965 21 Total liabilities (Part X, line 26) . 26314 28361 22 Net assets or fund balances. Subtract line 21 from line 20 103651 166704 Signature Block Part II 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. 11 Sign Signature of office Executive Director Here Type or print name and title Date Print/Type preparer's name Preparer's signature Check [] if Paid seff-employed Preparer Firm's EIN ▶ Firm's name Use Only Firm's address ▶ May the IRS discuss this return with the preparer shown above? (see instructions) Yes 🗌 No

Form 99	0 (2012) Page
Part	•
1	Check if Schedule O contains a response to any question in this Part III
1	Our mission is to raise awareness of the Korean cultural heritage among Korean-Americans, and their youth in the San Francisco Ba
	Area, and to promote artistic development and cultural exchange among diverse communities in the area through music, song,
	dance, and arts instructions and performances.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other the total expenses, and revenue, if any, for each program service reported.
4a	(Code: ) (Expenses \$ 130609 including grants of \$ 124917 ) (Revenue \$ 129397 )
	YOUTH DEVELOPMENT - 175 children attended our music and arts educational programs during the year.
	Music, piano, arts and Korean martial arts classes were offered for the city children in the school age of Kindergarten to high school
	during the school period after their school hours. During the summer, two-week long Rockband and girl's chorus class were open.
	This program is supported by the city of San Francisco, and a private foundation.
4b	(Code:) (Expenses \$
	STUDIO - Individualized and group lessons of piano, singing, dance and arts programs were offered to the public throughout the
	year. This is the oldest and still growing program of our center, serving 125 participants on a weekly basis. This program focuses on individual artistic development, and skill improvement. We provide the participants with the practice room and instructor.
	The program participants are diversified in artistic level, ethnicity, and career pursuit.
	This is a fee-based instructional program.
	***************************************
4c	(Code: ) (Expenses \$ 4109 including grants of \$ 0 ) (Revenue \$ 200 )
	CULTURE - Designed to pass on Korean culture to the next generation through public performance and presentation, this program is recognized for a famous youth musical performance for a decade long. No activity was delivered in this year.
	15 Toolganizod 151 da danous youth musical portor marco 151 da double 15
	***************************************
	Otto and the Control of the Control
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ ).
40	Total pressure coming events of the second o

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Part	Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
_	complete Schedule A	1	<b>√</b>	
2 3	is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I </i>	3	✓	<b>√</b>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		<b>√</b>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	5		<b>*</b>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<b>~</b>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		<b>√</b>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		✓
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		<b>√</b>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	<b>✓</b>	1
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		✓
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<b>√</b>
đ	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<b>√</b>
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		✓
12 a	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X. Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		<u>√</u>
b	Schedule D, Parts XI and XII	12a		<u>√</u>
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>√</u>
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		✓
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		✓
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<b>√</b>
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		<b>✓</b>
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		✓
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III	19		✓
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u>√</u>
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b	990	(0040)
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EELL	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		<b>√</b>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		<b>√</b>
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		<b>✓</b>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		<b>√</b>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28¢		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		<b>√</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N. Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<i>'</i>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		<b>√</b>
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<b>√</b>
-	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		<b>✓</b>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<b>√</b>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note</b> . All Form 990 filers are required to complete Schedule O	38	1	<u> </u>
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Form **990** (2012)

Part				_
	Check if Schedule O contains a response to any question in this Part V	· ·	Yes	No
4	Estable would be producted in Day Cost Forms 1000. Enten O. March continuella.		105	140
1a'	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			30.5
b	Did the organization comply with backup withholding rules for reportable payments to vendors and	1		
•	reportable gaming (gambling) winnings to prize winners?	1c		2.00
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	100000	1000	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 2a	,		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	E (X metal) Security
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<b>✓</b>
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		✓
b	If "Yes," enter the name of the foreign country:			
_	See instructions for filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	-	<b>V</b>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b 5c	ļ	1
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	- OC		
6a	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or		·	<del>  •</del>
~	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	<b>√</b>	- Charles
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	✓	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c	Construction of the Constr	✓
d	If "Yes," indicate the number of Forms 8282 filed during the year		2.02.45	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	ļ <u>.</u>	<b>✓</b>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f	<u> </u>	1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	ļ	<b>-</b>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<b>V</b>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			V
а	Did the organization make any taxable distributions under section 4966?	9a	30,000,000	1
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		1
10	Section 501(c)(7) organizations. Enter:		100	
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:		and the	
а	Gross income from members or shareholders		1000	
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	-		
13	Is the organization licensed to issue qualified health plans in more than one state?	13a		
а	Note. See the instructions for additional information the organization must report on Schedule O.	100		19.0
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	_	

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	See ins	struct	ions.
Soot	Check if Schedule O contains a response to any question in this Part VI	<del></del>	•	<u> </u>
Sect	ion A. Governing body and ividiagement		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year  If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
ь 2	Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		<b>/</b>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		1
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?  Did the organization become aware during the year of a significant diversion of the organization's assets?  Did the organization have members or stockholders?  Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	4 5 6		√ √ √
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a b	The governing body?	8a 8b	<b>√</b>	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u> </u>
Secti	ion B. Policies (This Section B requests information about policies not required by the Internal Reven	_	ode.)	· ·
			Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		✓
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		V Lineary	
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b	<b>✓</b>	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	<b>√</b>	
13 14 15	Did the organization have a written whistleblower policy?	13 14	<b>\</b>	
a b	The organization's CEO, Executive Director, or top management official	15a 15b	✓	<u>√</u>
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		<b>✓</b>
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed OGDEN, UT  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	501(0	c)(3)s	only)
19	✓ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)  Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict o and financial statements available to the public during the tax year.	f inter	est p	olicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records organization:   Young Kim 415 488-7192 Same as the organization's mailing address.	of the		

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FOR 300 (201)	· · · · · · · · · · · · · · · · · · ·
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and
	Independent Contractors
	Check if Schedule O contains a response to any question in this Part VII
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

Check this box if neither the organization no	r any relate	d orga	aniz	atio	n c	ompe	nsa	ted any curren	t officer, directo	r, or trustee.
	(C)									
(A) Name and Title	(B) Average hours per	box,	unles	eck s pe	rson	e than o is both or/trust	an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) HAGON CHOI	8									
CHAIR		✓		✓			<u> </u>	0	0	0
(2) YOUNGMEE MOORE	10									
SECRETARY		✓		✓				0	0	0
(3) JOHN RHIM	8									
TREASURER		<b>\</b>		✓		÷	L	0	0	-0
(4) KIM, YOUNG-SOOK	40									
EXECUTIVE DIRECTOR					✓			58710		5102
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)		·								
(13)										
(14)								<u>.</u>		·

Fai	Section A. Officers, Directors, Trust	iees, Key E	mpio	yee		na F C)	ligne	St C	ompensated E	mpioyees (d	continu	iea)
	(A)	(B)				ition			(D)	(E)		(F)
Name and title		Average	(do not check more than a box, unless person is both						Reportable	Reportable	e	Estimated
		hours per week (list any	office	erano	dad	lirect	or/trus	tee)	compensation from	compensation related	from	amount of other
		hours for	Individual trustee or director	nst	Officer	€ F	Highest compensated employee	Form	the	organizatio		compensation
		related organizations	irect idu	Institutional trustee	ğ	Key employee	nest i	ПE	organization (W-2/1099-MISC)	(W-2/1099-M	IISC)	from the organization
		below dotted	Q 2	) Na		Ş	e com		,			and related
		line)	stee	l fig		1 8	pens					organizations
			"	8			ated					
(15)								<del> </del>				
2												
(16)												
(17)	~~~~~~~~~								]			
(4.0)			-		ļ							
(18)								1				
(19)				$\vdash$				+	, ,			
1.7/									/			
(20)												
(21)												
						ļ		<u> </u>				
(22)												
(00)								-				
(23)									İ			
(24)							<u> </u>	-	<u> </u>			
3=-7												
(25)						·						
1b	Sub-total							<b>&gt;</b>				
. C	Total from continuation sheets to Part			•	•		•	<b>&gt;</b>				<del></del> .
d	Total (add lines 1b and 1c)							<u>•</u>	<u> </u>			
2	Total number of individuals (including but reportable compensation from the organization)		to th	ose	list	ed a	above	e) w	ho received m	ore than \$10	00,000	of
	reportable compensation from the organi.	zation	-									Yes No
3	Did the organization list any former off	ficer, direct	tor. o	r tr	uste	e.	kev e	emp	lovee, or high	est compe	nsated	
	employee on line 1a? If "Yes," complete S											3 🗸
4	For any individual listed on line 1a, is the	sum of rep	oortak	ole d	com	nper	nsatio	n a	nd other comp	ensation fro	om the	
	organization and related organizations	greater tha	an \$1	50,	000	? //	"Ye	s,"	complete Sch	edule J foi	r such	
	individual			•	•		•					4
5	Did any person listed on line 1a receive of for services rendered to the organization?									ation or ind	lividua	CONTRACTOR OF THE PROPERTY OF THE OWN ASSESSED.
Contin	n B. Independent Contractors	n res, c	опірк		SCII	eut	ne J i	Of S	uch person	· · · ·		5 1
1	Complete this table for your five highest of	omnonest	nd inc	lone	an de	ont :	contr	a ctr	are that receive	d more tha	n \$100	0.000 of
ı	compensation from the organization. Rep											
	year.							,				,
	(A)								(B)			(C)
	Name and business adda	ess							Description of s	ervices	1	Compensation
NONE.												
2	Total number of independent contractor	rs (includin	a bu	t no	ot li	imite	ed to	th	ose listed aho	ove) who		
	received more than \$100,000 of compens											

Par	t VIII	Statement of Rev	enue						
		Check if Schedule O	contains a	respo	onse to any ques		VIII		<u> </u>
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts ats	1a	Federated campaign:	s.,,	1a		Marie Marie		La company de la	0.00
Contributions, Giffs, Grants and Other Similar Amounts	b	Membership dues .		1b			0.0000000000000000000000000000000000000	Paragraph (C)	
A, S	C	Fundraising events .		1c			P 28 5 6 5	1000000	
텳	d	Related organizations		1đ					
ži ji	е	Government grants (cor		1e	169917		0.00		
tion S S	f	All other contributions, g				100 000	0.000000	0.00	Property and the second
草葉		and similar amounts not in		1f	32180		0.5000000		
E St	g	Noncash contributions inclu		-			100		
	h	Total. Add lines 1a-1	lf	· ·		202097			
Œ					Business Code				
Ş.	2a	YOUTH DEVELOPMEN	IT			4480	4480		
es es	b					194345	194345		
<u>Ş</u> .	C	CULTURE				200	200		-
လို	d					:			
Program Service Revenue	e	**************************************							
ō	f	All other program ser							
<u>~</u>	3	Total. Add lines 2a-2 Investment income				199025		i e	
	3	and other similar amo			<b>&gt;</b>				
	4	Income from investmen	•			85		-	85
	5			-					
	"	Hoyanies	(i) Real		(ii) Personal				
	6a	Gross rents	(7)		.,,		100000000000000000000000000000000000000		
	b	Less: rental expenses							
	c	Rental income or (loss)							
	d	Net rental income or			•				
	7a	Gross amount from sales of	(i) Securiti	es	(ii) Other				
		assets other than inventory							
	b	Less: cost or other basis					0.000		
		and sales expenses .						0.000	3 (0.6) (0.6) (0.6)
	c	Gain or (loss)							
	d	Net gain or (loss) .			>	Contract to the contract of th		The Late and the second section of the second section of the second section second section sec	
enne	8a	Gross income from fuevents (not including \$	undraising			esercione especial de classico de cele de describidades	erinario complete La complete de la complete La completa de la complete de la completa del la completa de  la completa de la completa de la completa del la	Hart of the second of the seco	
Other Re		of contributions reported See Part IV, line 18 .	ed on line 10	;). a	-			and property and the second	
₹	b	Less: direct expenses		b					
		Net income or (loss) f			events . 🕨	61616		61616	
	9a	Gross income from ga	•					Section Control	
						description of		g province grante	Company of the second
	b	Less: direct expenses							
	C	Net income or (loss) for			vities ▶				
	10a	Gross sales of in returns and allowance							
				а					
	b	Less: cost of goods s							
	C	Net income or (loss) fi		i inve	entory ► Business Code				
	44-		everine.		Dusiness Code				
	11a	BOOK SALES				2523	2523		
	b								
	C	All other revenue							
	d	All other revenue  Total. Add lines 11a-		l					7
	e 12	Total revenue. See in		•		405340	204540	64040	

Page 10

## Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Object VOIL 1 0				
	Check if Schedule O contains a respo	nse to any question	in this Part IX .		· · · · ·
Do no	ot include amounts reported on lines 6b, 7b,	(A)	(B)	i (C)	(D)
	b, and 10b of Part VIII.	Total expenses	Program service	Management and general expenses	(D) Fundraising
			expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in			0.5000 4.000	Petrological states and the
	the United States. See Part IV, line 22	•			the state of the state of
	•				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
				5.4	
	United States. See Part IV, lines 15 and 16	1		STREET,	and the state of the state of the
4	Benefits paid to or for members				
4					
5	Compensation of current officers, directors,			j	
	trustees, and key employees			i	1
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	1			
	persons (as defined under section 4900(i)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	440000			
		119209	22800	96409	
8	Pension plan accruals and contributions (include				I
	section 401(k) and 403(b) employer contributions)			e e	1
_				<u> </u>	
9	Other employee benefits	18844	2500	16344	ĺ
10	Payroll taxes	10433		·-·	
		10433	2036	8397	
11	Fees for services (non-employees):				_
а	Management	<u> </u>			1
b	Legal	4000		4000	
С	Accounting	1400		1400	
		1400		1400	ļ
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
9	(A) amount, list line 11g expenses on Schedule O.)				
		119391	119391		
12	Advertising and promotion	11754	11754		
13					
		6064	1443	4621	
14	Information technology	2500	2500		•
15	Royalties				
16	Occupancy	38300	25533	12767	
17	Travel	3605		• • • • • • • • • • • • • • • • • • • •	
	Demonstrate of the colonial content of the colonial colon	3503	2118	1487	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
40					
19	Conferences, conventions, and meetings .				
20	Interest	697		697	
		337		097	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	7238	4825	2413	
23	Insurance				
حی		18014	14892	3122	
24	Other expenses. Itemize expenses not covered	Contract to the Contract of			description in the second
	above (List miscellaneous expenses in line 24e. If				
		3.154.054.054.054			
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
	•				Park Bally Conference of
а	SUPPLY:PROGRAM AND OFFICE	20064	14457	5607	
b	FUNDRAISING EXP.	6973			22.5
		· · · · · · · · · · · · · · · · · · ·			6973
С	UTILITY/PHONE	2654	1769	885	
d	PRINTING & POSTAGE/REPAIR & MAINT	4686	2371	2315	
е	All other expenses Loss of Leasehold impr	6467		6467	
25	Total functional expenses. Add lines 1 through 24e	402293	228389	166931	6973
26	Joint costs. Complete this line only if the	70220	220303	100331	08/3
20	organization reported in column (B) joint costs	1		Ì	
	from a combined educational country (b) Joint Costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here if		• ]		
	following SOP 98-2 (ASC 958-720)		}		
					Form <b>990</b> (2012)

F	art X	Balance Sheet			
		Check if Schedule O contains a response to any question in this Part	x		
			(A) Beginning of year		(B) End of year
	1	Cashnon-interest-bearing	24895	1	2040
	2	Savings and temporary cash investments	· 60032	2	14235
	3	Pledges and grants receivable, net	15036	3	1041
	4	Accounts receivable, net	7251	4	274
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
r)	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a 62632			
	b	Less: accumulated depreciation 10b 46687		10c	15945
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	3200
	16	Total assets. Add lines 1 through 15 (must equal line 34)	132965	16	195065
	17	Accounts payable and accrued expenses	17126	17	21089
	18	Grants payable		18	
	19	Deferred revenue	3284	19	7272
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	·
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	8904	24	,
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	29314	26	28361
es		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
Ĕ	27	Unrestricted net assets	103203	27	166256
ă		Temporarily restricted net assets	448		448
<u> </u>		Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
ध्र		Capital stock or trust principal, or current funds		30	
SS		Paid-in or capital surplus, or land, building, or equipment fund		31	
ایٍ۲		Retained earnings, endowment, accumulated income, or other funds .		32	
S		Total net assets or fund balances	103651	33	166704
	34	Total liabilities and net assets/fund balances	132965	34	195065
					Form <b>990</b> (2012)

Form	990	(20	12)
		-	

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2	Check if Schedule O contains a response to any question in this Part XI	1		465346		
_	Total expenses (must equal Part IX, column (A), line 25)	2		402293		
3	Revenue less expenses. Subtract line 2 from line 1	3		63053		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		103651		
5	Net unrealized gains (losses) on investments					
6	Donated services and use of facilities			•		
7 Investment expenses		7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10		166704		
'ar	XII Financial Statements and Reporting	•				
	Check if Schedule O contains a response to any question in this Part XII					
				res No		
1	Accounting method used to prepare the Form 990: Cash Accrual Other	<del></del>				
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain in	100	93 90		
_	Schedule O.		V. 100			
If 're\						
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on a separate basis, consolidated basis, or both:		1000			
Ł.	Separate basis Consolidated basis Both consolidated and separate basis					
D	Were the organization's financial statements audited by an independent accountant?		2b			
	If "Yes," check a box below to indicate whether the financial statements for the year were audit separate basis, consolidated basis, or both:	ed on a				
	·		76.746			
		vorciabt	1000			
_	If "Ves" to line 29 or 2h, does the organization have a committee that accumes recognicibility for a		2c	,		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o			Y		
С	of the audit, review, or compilation of its financial statements and selection of an independent account	ıntant?	20	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
С	of the audit, review, or compilation of its financial statements and selection of an independent account if the organization changed either its oversight process or selection process during the tax year, experiences are selection process.	ıntant?	20			
-	of the audit, review, or compilation of its financial statements and selection of an independent account the organization changed either its oversight process or selection process during the tax year, exactly considered to the control of the selection process during the tax year, exactly control of the co	intant? oplain in	20			
-	of the audit, review, or compilation of its financial statements and selection of an independent accoulf the organization changed either its oversight process or selection process during the tax year, exchedule O.  As a result of a federal award, was the organization required to undergo an audit or audits as set	intant? oplain in				
3a	of the audit, review, or compilation of its financial statements and selection of an independent account the organization changed either its oversight process or selection process during the tax year, expended to complete the complete of the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?	intant?  oplain in  forth in	3a			
-	of the audit, review, or compilation of its financial statements and selection of an independent accoulf the organization changed either its oversight process or selection process during the tax year, exchedule O.  As a result of a federal award, was the organization required to undergo an audit or audits as set	intant?  splain in  forth in  ergo the				

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