11:16 AM 01/23/18 Accrual Basis

Korean American Fedration of LA Profit & Loss

July through December 2017

Ordinary Income/Expense Income Boardmember Fee 2016 2,500.00 2017 6,450.00 Doantion 0 Other types 4.87 Total Boardmember Fee 8,950.00 Doantion 4.87 Event 1,300.00 S5th Heritage Night 1,300.00 Sponsor 86,300.00 Total 55th Heritage Night 120,700.00 Healthfest 15,500.00 Total 55th Heritage Night 120,700.00 Healthfest 15,500.00 Total 55th Heritage Night 120,700.00 Healthfest 15,500.00 Other 15,982.18 Other 15,982.18 Grant 120,000.00 YOUTH PROGRAM 12,000.00 YOUTH PROGRAM 12,000.00 Grant 198,736.03 Expense 0 Donation 9,300.00 Facilities and Equipment 963.64 Flower 2,880.00 Food Bank		Jul - Dec 17
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Total 55th Heritage Night 100,411.53	HN Expense	80,209.53
	55th Heritage Night - Other	202.00
72nd Independence day 12,130.33	Total 55th Heritage Night	100,411.53
	72nd Independence day	12,130.33

11:16 AM 01/23/18 Accrual Basis

Korean American Fedration of LA Profit & Loss

July through December 2017 Jul - Dec 17

, ,	Jul - Dec 17
Advertisement bill	1,150.00
CERT	44.65
End of year party	1,886.53
Friends of KALFA	
2nd	820.50
Total Friends of KALFA	820.50
Grass Conference	300.00
Healthfest	10,154.35
Koreatown Masterplan	242.86
New year party	156.00
Others	500.00
Printing	130.00
Seminar	
국적법세미나	1,744.36
Seminar - Other	2,009.98
Total Seminar	3,754.34
Total KAFLA Event	132,025.06
Meeting	
KAFLA	2,613.56
Total Meeting	2,613.56
Operations	
air purifier	669.24
Office	4,235.82
Postage, Mailing Service	104.95
Printing and Copying	750.13
Supplies	116.67
Telephone, Telecommunications	2,435.52
Water	572.08
Total Operations	8,884.41
Other Types of Expenses	
동포재단	0.00
Insurance - Liability, D and O	1,221.10
Insurance - workers comp.	516.00
Total Other Types of Expenses	1,737.10
Payroll Expenses	46,221.92
ТАХ	
EDD	658.26
IRS	5,514.78
Total TAX	6,173.04
Travel and Meetings	
Business trip	2,265.74
Conference, Convention, Meeting	5,149.74
Total Travel and Meetings	7,415.48
Website	,
Website Maintenant	800.00

11:16 AM 01/23/18 Accrual Basis

Korean American Fedration of LA Profit & Loss

July through December 2017 Jul - Dec 17

Total Website	800.00
Total Expense	227,187.46
Net Ordinary Income	-28,451.43
Net Income	-28,451.43



See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form	• 99	0	Return	of Organization E	Exempt F	rom Incon	ne Ta	ax	·	OMB No 1545-0047
•				, 527, or 4947(a)(1) of the Int er social security numbers					s)	2013 Open to Public
		e Treasury e Service		on about Form 990 and its in			•			Inspection
	-	·	r year, or tax year beginr	ling	09-01	, 2015, and en	dıng	0	8-31	,2016
B Cr	neck if ap	oplicable 0	Name of organization KORE	AN AMERICAN FEDERAT	ION OF L.	Α.		·		loyer identification no
	Idress ch	ange	Doing business as						95-3	842560
Na	ame char	nge	Number and street (or PO box	if mail is not delivered to street addres	ss)		Room/s	uite	E Telep	hone number
Ini Ini	tial returi	n L	981 S WESTERN A	VE			100		_(323)732-0700
🗌 F#	nal returr	Vterminated	City or town, state or province,	country, and ZIP or foreign postal code	•					262,509
An	nended r	eturn	Los Angeles, CA	90006					G Gross	s receipts\$
L AF	plication	i pending F	Name and address of principal	officer LAURA JEON			H(a)	Is this a group re	eturn for	
			Same as C above					subordinates?		Yes X No
	x-exemp) < (insert no) 4947(a)(1)	or 527		Н(р)	Are all subord in If "No," atta	ach a list (s	ed? Yes No see instructions)
	ebsite		KAFLA.ORG	<u> </u>			H(c)	Group exemptio	n number	<u> </u>
				ciation Other	L Ye	ar of formation 19	982	M State of leg	gai domicile	e CA
Par		Summary								
			•	n or most significant activities	-	PORT AND S				.E
e		FURTHERAN	CE OF THE RIGHTS	& INTERESTS OF THE	KOREAN C	COMMUNITY A	T LO	S ANGELES	s	<u> </u>
lan										
Ջ 2017 Activities & Governance			····-				- ·			
200				discontinued its operations or	disposed of m	ore than 25% of	its net	1	1	
୍ଷ ବ୍ୟ			• •	ning body (Part VI, line 1a)		• • • • • • • •	• • • •	3		35
es	4	Number of ind	ependent voting members	of the governing body (Part V	'l, line 1b) •	• • • • • • •		• • • • 4		0
Ž0(5	Total number of	of individuals employed in	calendar year 2015 (Part V, Iır	ie 2a) •••	••••		5	_ _	
C::	6	Total number o	of volunteers (estimate if n	eceșsary)	•••••			• • • • 6		
6	7a	Total unrelated	l business revenue from P	art VIII, column (C), line 12	····	•••••		· · · · <u>7</u> a	3	0
	b	Net unrelated	business taxable income f	rom Form 990-T-line-34				· · · · 71	<u>></u>	0
MAN				APP T P OO	<u> </u>		P	rior Year		Current Year
	8	Contributions	and grants (Part VIII, line 1	h) [1 8	· · · · · ·		270,05	54	262,509
	9	Program servi	ce revenue (Part VIII, line	2g) !	<u></u>	· · · · · /		21,00	0	0
), lines 3, 4, and 7d)		· · · · ·				0
SCANNED Revenue	11	Other revenue	e (Part VIII, column (A), line	es 5, 6d, 8c, 9c, 10c, and 11e)		· · · · · · [_				0
4	12	Total revenue	- add lines 8 through 1,1 (n	nust equal Part VIII, column (A	(), line 12)			291,05	54	262,509
ñ	13	Grants and sir	nilar amounts paid (Part I)	K, column (A), lines 1-3) · ·		· · · · · ·				0
	14	Benefits paid t	o or for members (Part IX,	column (A), line 4)		· · · · · _				0
s	15	Salaries, othei	r compensation, employee	benefits (Part IX, column (A),	lines 5-10)	· · · · ·		97,81	.5	85,622
Expenses	16a	Professional fu	undraising fees (Part IX, co	olumn (A), line 11e) 🛛 • • • •		••••				0
per	b	Total fundrais	ng expenses (Part IX, colu	mn (D), line 25) 🛛 🕨	65	5,884				
Ĕ	17	Other expense	es (Part IX, column (A), lin	es 11a-11d, 11f-24e) · · ·		[198,60)7	189,954
	18	Total expense	s Add lines 13-17 (must e	equal Part IX, column (A), line	25) • • • •	[296,42	22	275,576
	19	Revenue less	expenses Subtract line 1	8 from line 12 • • • • • • •	<u>· · · · · · · · · · · · · · · · · · · </u>	· · · · · · [(5,36	58)	(13,067
or						B	leginning	g of Current Year	·	End of Year
Net Assets or Fund Balances	20	Total assets (F		••••••••••••				17,65	56	8,960
ай Чр	21	Total liabilities	(Part X, line 26) · · · ·	••••••••••		· · · · · · [1,63	34	7,500
Fun Fun	22			ne 21 from line 20 · · · ·				16,02	22	1,460
Par	t II	Signatur	e Block							
				, including accompanying schedules a			owledge	and belief, it is		
true, co	frect, and	a complete Declai	ation of preparer (other than offic	er) is based on all information of which	preparer nas any i	knowledge	· · · - ·	·		· · · · ·
		LAURA	JEON TH	THE '						
Sign)	Signature	of officer	0				Da	ate	
Here	e	LAURA	JEON, PRESIDENT							
		_	nnt name and title							
	I_	Print/Type prep	arer's name	Preparer s suprature	Da	te		Check if	PTIN	
Paid		YOONHAN		(III)	63	-28-2017		self-employed	POC	950034
	barer	Firm's name		KIM & ASSOCIATES H			Firm's E			
•	Only				· ·		Phone r			
				les CA 90005					385-6	888
May ti	he IRS	discuss this re		wn above? (see instructions)		I				Yes X No
			n Act Notice, see the sep							Form 990 (2015)
			· · · ·							

_	b 990 (2015) , KOREAN AMERICAN FEDERATION OF L.A. rt Ⅲ { Statement of Program Service Accomplishments	95-38425	50 Page 2
~a			ר ח
	Check if Schedule O contains a response or note to any line in this Part III		· · · · · []
I	TO SUPPORT AND SERVE BETTER FOR THE FURTHERANCE OF THE RIGHTS & INTERESTS O	E THE KODE	N N 1
		F THE KORE	
	COMMUNITY AT LOS ANGELES		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	🗌 Yes	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	🗌 Yes	X No
	If "Yes," describe these changes on Schedule O	····	KI NO
1	Describe the organization's program service accomplishments for each of its three largest program services, as measure expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to ot the total expenses, and revenue, if any, for each program service reported.		
a	(Code) (Expenses \$34,347 including grants of \$) (Revenue	\$)
	EVENT TO PROMOTE KOREAN CULTURE AND KOREAN LIBERATION DAY		
			····
b	(Code) (Expenses \$24,487 including grants of \$) (Revenue VARIOUS COMMUNITY EVENTS FOR CULTURE, ART AND INFORMATION SERVICES	\$)
	VARIOUS COMMONITY EVENTS FOR COLLIGNE, ART AND INFORMATION SERVICES		
			·
		<u> </u>	
			\
C	(Code) (Expenses \$19,615 including grants of \$) (Revenue GRASS ROOTS CONFERENCE TO BENEFIT COMMUNITY	\$)
	GRASS ROOTS CONFERENCE TO BENEFIT COMMONITI		
			<u> </u>
ŧd	Other program services (Describe in Schedule O) (Expenses \$ 11,880 including grants of \$) (Revenue \$	١	
le	(Expenses \$ 11,880 including grants of \$) (Revenue \$ Total program service expenses > 90,329)	
EA			orm 990 (2015)

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Forn	990 (2015) KOREAN AMERICAN FEDERATION OF L.A. 95-3842	560	F	Page 3
Pa	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			[
Ū	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	—		<u> </u>
4		4		
-		4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III •••••••••••••••••••••••••••••••••	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			<u> </u>
•	complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	<u>ا</u>		<u> </u>
3	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or	1		
				V
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	_	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	1		1
	complete Schedule D, Part VI · · · · · · · · · · · · · · · · · ·	11a	Х	
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		X
с	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
Ь	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			<u> </u>
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
e r		TIE		<u>^</u>
T	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			V
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u>X</u>
12a				
	Schedule D, Parts XI and XII	12a		<u>X</u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			1
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			1 _
	fundraising, business, investment, and program service activities outside the United States, or aggregate			1
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other		'	- <u></u> -
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17				
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	4-		v
	Part IX, column (A), lines 6 and 11e ⁹ If "Yes," complete Schedule G, Part I (see instructions)	17		<u>X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			1
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			1
	If "Yes," complete Schedule G, Part III	19	Ļ	<u>X</u>
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Form 990 (2015)

Part IV.

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		_	Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
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		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
240	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
		240		v
	through 24d and complete Schedule K If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
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		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV · · · · · · · · · · · · · · · · · ·	28b		Х
с	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
C	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
20		29		X
29 20	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	23		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	20		v
• •	conservation contributions? If "Yes," complete Schedule M	30		<u>X</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			v
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		<u>X</u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
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		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
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	1990 (2015) KOREAN AMERICAN FEDERATION OF L.A. 95-3842	560	F	Page 5
Pa	rt V 'Statements Regarding Other IRS Filings and Tax Compliance			п
	Check if Schedule O contains a response or note to any line in this Part V · · · · · · · · · · · · · · · · · ·	• • •	$\frac{\cdot}{\Gamma}$	\Box
		· · · ·	Yes	No
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	끽		(
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	외		4
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		.	2.22
	Statements, filed for the calendar year ending with or within the year covered by this return	3		2.7
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	1
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	1	ۍ تر . همه د د	Sec.
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3Ь		
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		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR)	1. · · ·		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		- <u></u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
Ju	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			<u> </u>
, S	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		1055	
a	and services provided to the payor?	7a		10.00
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	10		
С		7c		
4			942.74F	S Del S
d	If "Yes," indicate the number of Forms 8282 filed during the year		1000	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	22744	2.2. 20
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	1 235	<u>. 2</u> 8	E.
_	sponsoring organization have excess business holdings at any time during the year?	8		14.745
9	Sponsoring organizations maintaining donor advised funds.			10 B.
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
þ	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	96		
10	Section 501(c)(7) organizations Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12	4		Ι.
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders	4		{
þ	Gross income from other sources (Do not net amounts due or paid to other sources	1		
	against amounts due or received from them)			1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
þ	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
þ	Enter the amount of reserves the organization is required to maintain by the states in which			1
	the organization is licensed to issue qualified health plans			1
¢	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

	990 (2015) KOREAN AMERICAN FEDERATION OF L.A. 95-3842		F	age 6
Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "	No"		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions			
	Check If Schedule O contains a response or note to any line in this Part VI		<u>.</u>	. 🛛
Sec	tion A. Governing Body and Management	_		
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 35			
	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		i i	
	committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent ····· 1b 0		1	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			[
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct		-	
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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	l	X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		Х
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
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		
13	Did the organization have a written whistleblower policy?	13		Х
14	Did the organization have a written document retention and destruction policy?	14		Х
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b	~	
Sec	tion C. Disclosure	L		<u> </u>
17	List the states with which a copy of this Form 990 is required to be filed CA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			
	available for public inspection indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and			
	financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	LAURA JEON (323)732-0700, 981 S WESTERN AVE, Los Angeles, CA 90006			

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Form 990 (20			Page 7
Part VII'	Compensation of Officers, Directors, Trustees, Key Employees, Highes	t Compensated Employees	, and
	Independent Contractors		
	Check If Schedule O contains a response or note to any line in this Part VII		
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		

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 nor any related organization compensated any current officer, director, or trustee

	}			((C)					
(A)	(B)			Po	sition			(D)	(E)	(F)
Name and Title	Average					han one s both ai		Reportable	Reportable	Estimated
	hours per					/trustee)		compensation	compensation from	amount of
	week (list any hours for							from	related	other
	related	옥 코	Ins	ç	Ā	명 표	Ŀ	the organization	organizations (W-2/1099-MISC)	compensation from the
	organizations	Individual or director	stitut	Officer	y en	ghes	Former	(W-2/1099-MISC)		organization
	below dotted line)	Individual trustee or director	institutional trus		Key employee	lee or				and related organizations
		uste	trus		/ee	nper				
		G	tee			Highest compensated employee				
						ä				
	i									
(1) LAURA JEON	30.00									
PRESIDENT		Х		Х				0	0	00
(2) JAMES AHN	L									
CHAIRMAN		Х						0	0	0
(3) YOUNGHWA LEE										
EXECUTIVE VICE PRESIDENT		Х		X				0	0	0
(4) EMILE MACK							i			
VICE PRESIDENT		Х	_	X				0	0	0
(5) SHINE SHIM						Ì				
VICE PRESIDENT		Х		Χ				0	0	00
(6) JOHN PARK	L									
VICE CHAIRMAN		X		X				0	0	0
(7) CHUNG HYUN KIM										
TREASURER		Х		_X				0	0	0
(8) LARRY CHUNG										
MEDIA RELATIONS LIAISON		X						0	0	00
(9) STEVE KANG										
BOARDMEMBER		Х					_	0	0	0
(10)SUSAN KANG										
BOARDMEMBER		X						0	0	0
(11) JUNG A KYUNG										
BOARDMEMBER		Х						0	0	0
(12) JASON KOO										
BOARDMEMBER		X						0	0	0
(13)SUNNY KWON						1				
BOARDMEMBER		X						0	0	0
(14)GRACE_KIM										
BOARDMEMBER	l	Х				[0	0	0_

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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Com	pensated Employe	es, and
	Independent Contractors		
	Check if Schedule O contains a response or note to any line in this Part VII		••••
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
1a Complete organization	e this table for all persons required to be listed. Report compensation for the calendar year ending with or with s tax year.	in the	
	of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of n Enter -0- in columns (D), (E), and (F) if no compensation was paid	amount of	
 List all 	of the organization's current key employees, if any See instructions for definition of "key employee "		
List the	a graduid the surrent highest companyated employees (other than an officer, director, trustee, or key a	melavee)	

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 nor any related organization compensated any current officer, director, or trustee

		(C)								
(A)	(B)				ation			(D)	(E)	(F)
Name and Title	Average	-				nan one s both ai		Reportable	Reportable	Estimated
	hours per					/trustee]		compensation	compensation from	amount of
	week (list any hours for							from the	related organizations	other compensation
	related	or ind	Ins	ç	Re	e I	Fo	organization	(W-2/1099-MISC)	from the
	organizations	dırec	tıtutı	Officer	y en	ploy	Former	(W-2/1099-MISC)		organization
	below dotted line)	Individual trustee or director	Institutional trustee		Key employee	Highest compensati employee				and related organizations
		uste	trust		ee	npen				
		ų	ee			sated				
						<u></u>				
(1) JOY KIM										
BOARDMEMBER		Х						0	0	0
(2) LYNETTE KIM										
BOARDMEMBER		X						0	0	0
(3) WARREN KIM										
BOARDMEMBER		Х						0	0	0
(4) INCHA_KIM										
BOARDMEMBER		X						0	0	0
(5) HELEN KIM										
BOARDMEMBER		Х						0	0	0
(6) SUNYOUNG MOON										
BOARDMEMBER		X						0	0	0
(7) STEPHANO PARK										
BOARDMEMBER		X	$ \blacksquare$	-				0	0	0
(8) SUNNY PARK				[
BOARDMEMBER		X						0	0	0
(9) SUNG JIN PARK										
BOARDMEMBER		X						0	0	0
(10)JOON_BANG				Ì						
BOARDMEMBER		X						0	0	0
(11) PHILLIP AHN										
BOARDMEMBER		X						0	0	0
(12) IK CHEONG EOM										
BOARDMEMBER		<u>X</u>	_					0	0	.0
(13)SUZIE_OH				1						
BOARDMEMBER		<u> </u>						0	0	0
(14)LISA_LEE		U.								
BOARDMEMBER		Х]		0	0	0

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KOREAN AMERICAN FEDERATION OF L.A.

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(A) Name and title	(B) Average hours per week (list any	(C) Position (do not check more than one box unless person is both an officer and a director/trustee)						(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)	Individual trustee or director	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
(15)K_FREEMAN_LEE			-							
BOARDMEMBER		X	ļ	ļ				0	0	0
(16)RICHARD JEON										
BOARDMEMBER		X		-				0	0	0
(17)KIHO_CHOI BOARDMEMBER		X						0	0	0
(10)			-					0	0	0
BOARDMEMBER		X						0	0	0
(19) JEAN CHOI										
BOARDMEMBER		X						0	0	0
(20)DAVID_CHOI										
BOARDMEMBER		X						0	0	0
(21)MICHKEY_HONG BOARDMEMBER		X						0	0	0
(22)								0		
(23)										
(24)										
(25)			-							
46 0.16 4.441							l			
1b Sub-total		· · ·	•••	•••	•••	•••				
d Total (add lines 1b and 1c)								0	0	0
2 Total number of individuals (including but not limited							ore		.	1 `
reportable compensation from the organization									0	
3 Did the organization list any former officer, director,	or trustee k		مامية		r hia	ihest c	0000	ensated		Yes No
employee on line 1a? If "Yes," complete Schedule J							•			3 X
4 For any individual listed on line 1a, is the sum of rep				and c	ther	comp	ensa	ation from the		· · · · · · · · · · · · · · · · · · ·
organization and related organizations greater than				•						· · · · · · · · · · · · · · · · · · ·
										4 X
5 Did any person listed on line 1a receive or accrue or			-			-				
for services rendered to the organization? If "Yes," c Section B. Independent Contractors	complete Sch	equie	J IOF	suc	n pe	rson		· · · · · · · · · · · · · · · · · · ·	•••••	5 X
1 Complete this table for your five highest compensation	ed independe	ent cor	ntrac	tors	that	receiv	ed n	nore than \$100.000) of	
compensation from the organization Report compen-										
year										
(A)								(B)		(C)
Name and business address								Description of	services	Compensation
	<u> </u>									·····
								1		
2 Total number of independent contractors (including received more than \$100,000 of compensation from			ose I	listed	labo	ove) w	ho			

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art \		Statement of Revenu	ie	ERATION OF L				
		Check if Schedule O contain	s a response or no	ote to any line in this	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from t under section 512-514
l is	1a	Federated campaigns • • •	1a					
no	ь	Membership dues	1b	50,680				
Ē	ć	Fundraising events	1c	211,379				
ar	d	Related organizations	1d					
Ē	e	Government grants (contribution		1				
งี	f	All other contributions, gifts, gr						
the		and similar amounts not includ	ed above 1f	450		t i		[
Other Revenue Contributions, Gifts, Grants and Other Similar Amounts IA	g	Noncash contributions included	d in lines 1a-1f \$					ł
	h	Total. Add lines 1a-1f			262,509			
enue				Business Code		,		
	2a	VISITOR CENTER		900099	·			
287	b				<u> </u>			
	c	·····			- <u>-</u>	·		
Ser	d					ļ		
Other Revenue Contributions, Gifts, Grants and Other Similar Amounts and Other Similar Amounts	е							
	1	All other program service reven		L	<u> </u>			
		Total. Add lines 2a-2f		•••••				
	3	Investment income (including data and other similar amounts) •	vidends, interest,					
		Income from investment of tax-o						
ĺ	5						the second	· · · · ·
	62	Gross rents	(ı) Real	(II) Personal	,			IN AN ANT
		Less rental expenses · · · ·						
		Rental income or (loss)			, - ⁻	. And the second		
Í		Net rental income or (loss)		└ · · · · · · · ▶				
		Gross amount from sales of	(i) Securities	(II) Other	,			IN CONTRACTOR
	74	assets other than inventory	(/	,.,	×. ,			建 现的社会
	b	Less cost or other basis	······································					
	~	and sales expenses · · · ·						
	с	Gain or (loss)				• •		E.
1	d	Net gain or (loss) · · · · ·						
	8a	Gross income from fundraising					. ۲ آر ا	
		events (not including \$	211,379			1	· ·	
Other Revenue Program Service Revenue		of contributions reported on line	1c)					*
		See Part IV, line 18 · · · · ·						
5		Less direct expenses · · ·						
		Net income or (loss) from fundra		· · · · · · •			·	
{	9a	Gross income from gaming acti						
		See Part IV, line 19 · · · · ·						
	1	Less direct expenses · · ·		L		-		
		Net income or (loss) from gamin	ng activities · ·	· · · · · · • •				
	10a	Gross sales of inventory, less returns and allowances	-	}				
	h	Less cost of goods sold • •		}				
		Net income or (loss) from sales						
ł		Miscellaneous Revenue	or inventory	Business Code				
	11a			Business Code				
ļ	b							
	c							
	-					·		
	d	All other revenue) 1				

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Form 990 (2015) KOREAN AMERICAN FEDERATION OF L.A. Part IX Statement of Functional Expenses

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Sec	ion 501(c)(3) and 501(c)(4) organizations must complete all col	lumns All other organiz	ations must complete	column (A)	
	Check if Schedule O contains a response or note to an	iy line in this Part IX		· · · · · · · · · · · · · ·	
Dor	not include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
8b, 9	9b, and 10b of Part VIII	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments See Part IV, line 21 · · ·				{
2	Grants and other assistance to domestic				
	Individuals See Part IV, line 22 · · · · · · · · · · · · ·				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				4
	Individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B) · · · · ·				
7	Other salaries and wages	67,608		67,608	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions) · ·				
9	Other employee benefits • • • • • • • • • • • • • • • • • • •				
10	Payroll taxes	18,014		18,014	
11	Fees for services (non-employees)				
а	Management · · · · · · · · · · · · · · · · · · ·		<u> </u>		
b	Legal • • • • • • • • • • • • • • • • • • •				
c		2,100		2,100	· ····-
d				10-200-731-83 A	
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees			· · · · ·	
g	Other (If line 11g amount exceeds 10% of line 25, column				
40	(A) amount, list line 11g expenses on Schedule O)	203		203	
12 13	Advertising and promotion	4,050		4,050	
13 14	Information technology	8,903		8,903	
15	Royalties		u		
16					
17		2,023		2,023	
18	Payments of travel or entertainment expenses	8,047		8,047	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20					
21	Payments to affiliates	3,135		3,135	
22	Depreciation, depletion, and amortization	405		405	
23	Insurance	4,875		4,875	······································
24	Other expenses Itemize expenses not covered	· · · · ·			·····
	above (List miscellaneous expenses in line 24e If		•		
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)	1			
а	EVENT	156,213	90,329		65,884
b					······
с					
d					
е	All other expenses				
25	Total functional expenses Add lines 1 through 24e	275,576	90,329	119,363	65,884
26	Joint costs Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation Check here 🕨 📙 if				
	following SOP 98-2 (ASC 958-720)				

Form 990 (2015)

_		115) KOREAN AMERICAN FEDERATION OF L.A.	9	5-38	42560 Page 1
Part	: X	Balance Sheet			······
		Check if Schedule O contains a response or note to any line in this Part X	. <u></u>	· · ·	······
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	4,143	1	8,960
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
!	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	
	6	Loans and other receivables from other disgualified persons (as defined under section			\$ <u>,</u> ,
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			4 3
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary		1	
		organizations (see instructions) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net	2,500	7	
ets	8	Inventories for sale or use	2,500_	8	
Assets	9	Prepaid expenses and deferred charges		9	
٩	10a	Land, buildings, and equipment cost or			
	IVa				:
	5		4 1 2 0	10c	
	b 44	Less accumulated depreciation	4,130	11	
	11	Investments - other securities See Part IV, line 11		12	
	12			13	
	13	Investments - program-related See Part IV, line 11 · · · · · · · · · · · · · · · · · ·		14	
	14				
	15	Other assets See Part IV, line 11	6,883	15	
_	16	Total assets. Add lines 1 through 15 (must equal line 34)	17,656_	16	8,960
	17	Accounts payable and accrued expenses		17	7,500
	18	Grants payable		18	
	19		· · · · · · · · · · · · · · · · · · ·	19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	THE STATE OF A STATE OF THE
Liabilities	22	Loans and other payables to current and former officers, directors,		8. A.C.	
bili		trustees, key employees, highest compensated employees, and			(f) '2
Lial		disqualified persons Complete Part II of Schedule L		22	·····
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		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	1,634	25	
	26	Total liabilities Add lines 17 through 25	1,634	26	7,500
s		Organizations that follow SFAS 117 (ASC 958), check here		1	
aor		complete lines 27 through 29, and lines 33 and 34.			
alar	27	Unrestricted net assets		27	
ä	28	Temporarily restricted net assets		28	<u> </u>
un	29	Permanently restricted net assets		29	
ш́ г		Organizations that do not follow SFAS 117 (ASC 958), check here FX and			
s o		complete lines 30 through 34.			-
set	30	Capital stock or trust principal, or current funds	· · ·	30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	16,022	32	1,460
-	33	Total net assets or fund balances	16,022	33	1,460
	34	Total liabilities and net assets/fund balances	17,656	34	8,960 Form 990 (2015

Form			5-3842560		age 12
Pai	rt XI' Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		· 🔲
1	Total revenue (must equal Part VIII, column (A), line 12)		2	262,5	509
2	Total expenses (must equal Part IX, column (A), line 25)		2	275,5	576
3	Revenue less expenses Subtract line 2 from line 1			(13,0)67)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		16,0)22_
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses				
8	Prior period adjustments		(1,495)		
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		1,4	60
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>	. <u>.</u> .		
				Yes	No
1	Accounting method used to prepare the Form 990 🔯 Cash 🗌 Accruai 🔲 Other				j
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			İ	
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	••••	2a		X
	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				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis		: .		
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		. <u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in			- · ·	
	Schedule O		Ĺ		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u>	3b		

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Form 990 (2015)

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SCHEDULE A.

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust

OMB No 1545-0047

20	1	5	
20	1	5	

Attach to Form 990 or Form 990 F7

Deec	Department of the Treasury			Atta	Open to Public				
		enue Service	 Information at 	out Schedule A (Fo	m 990 or 990-EZ) and its i	nstructions	s is at www	irs gov/form990	Inspecțion
Name	of the	e organization	<u> </u>					Employer identifica	ition number
KOR	EAN		EDERATION OF					95-38425	
Pa	rt I	Reason fo	r Public Charity	y Status (All or	ganizations must c	omplete	this par	t) See instruction	IS
The	orga	nization is not a pr	vate foundation beca	ause it is (For lines	1 through 11, check only	one box)			
1					ches described in sectio)(A)(i).		
2		A school describe	ed in section 170(b)	(1)(A)(ii). (Attach S	chedule E (Form 990 or 9	990-EZ))			
3		A hospital or a co	operative hospital se	ervice organization	described in section 170	(b)(1)(A)(i	ii).		
4		A medical resear	ch organization operation	ated in conjunction	with a hospital described	I in section	n 170(b)(1))(A)(iii). Enter the	
		hospital's name,	city, and state						
5		An organization of	perated for the bene	fit of a college or u	niversity owned or operat	ed by a go	vernmenta	al unit described in	
		section 170(b)(1)(A)(IV) (Complete F	Part II)					
6		A federal, state, o	or local government o	or governmental un	it described in section 17	70(b)(1)(A))(v).		
7	X	An organization t	hat normally receives	a substantial part	of its support from a gove	ernmental	unit or fron	n the general public	
		described in sect	tion 170(b)(1)(A)(vi).	(Complete Part II)				
8		A community trus	st described in sectio	on 170(b)(1)(A)(vi).	(Complete Part II)				
9		An organization t	hat normally receives	6 (1) more than 33	1/3% of its support from	contributio	ns, memb	ership fees, and gross	
		receipts from act	ivities related to its ex	empt functions - si	ubject to certain exceptio	ns, and (2)) no more t	han 33 1/3% of its	
		support from gro	ss investment income	e and unrelated bus	siness taxable income (le	ss section	511 tax) fr	om businesses	
		acquired by the c	rganization after Jun	e 30, 1975 See se	ction 509(a)(2). (Comple	ete Part III)		
10		An organization of	organized and operation	ed exclusively to te	st for public safety. See s	section 50	9(a)(4).		
11		An organization of	organized and operation	ed exclusively for the	ne benefit of, to perform t	he functior	ns of, or to	carry out the purpose	s of
		one or more publ	icly supported organi	zations described i	n section 509(a)(1) or se	ection 509	(a)(2) See	e section 509(a)(3) C	heck
		the box in lines 1	1a through 11d that d	escribes the type of	of supporting organization	and comp	olete lines 1	11e, 11f, and 11g	
	а	Type I A sup	oporting organization	operated, supervis	ed, or controlled by its su	pported or	rganization	(s), typically by giving	
		the supporte	d organization(s) the	power to regularly	appoint or elect a majorit	y of the dır	ectors or ti	rustees of the support	ng
		organization	You must complete	e Part IV, Sections	A and B.				
	b	Type II. A su	pporting organization	supervised or con	trolled in connection with	its suppor	ted organiz	z ation(s), by having	
		control or ma	inagement of the sup	porting organizatio	n vested in the same per	sons that o	control or n	nanage the supported	
		organization	s) You must compl	lete Part IV, Sectio	ons A and C.				
	с	Type III fund	tionally integrated.	A supporting organ	nization operated in conne	ection with	, and funct	ionally integrated with	
		its supported	organization(s) (see	instructions) You	must complete Part IV,	Sections	A, D, and	Ε.	
	d	Type III non	-functionally integra	ated A supporting	organization operated in	connection	i with its su	pported organization(S)
		that is not fur	nctionally integrated	The organization g	enerally must satisfy a di	stribution r	equiremen	t and an attentiveness	
		requirement	(see instructions) Yo	ou must complete	Part IV, Sections A and	ID, and Pa	art V.		
	е	Check this b	ox if the organization	received a written	determination from the IF	RS that it is	a Type I, 1	Гуре II, Туре III	
		functionally in	ntegrated, or Type III	non-functionally int	egrated supporting organ	nization			· · · · · · · · · · · · · · · · · · ·
	f	Enter the numbe	r of supported organi	zations · · · ·			• • • • •	•••••	• • • • •
	g	Provide the follow	ving information abou	it the supported or	ganization(s)			r	
	(Name of supported or 	ganization	(II) EIN	(III) Type of organization		rganization	(v) Amount of monetary	(vi) Amount of
							other support (see instructions)		
						Yes	No		
(A)									
					·				
(B)									
, 							ļ		
(C)									
(D)									
·-·						<u> </u>			

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

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Schedule A (Form 990 or 990-EZ) 2015

Sched	, ule A (Form 990 or 990-EZ) 2015 KORE	AN AMERICAN	FEDERATION C	DF L.A		95-3842560	Page 2
Pa	t II Support Schedule for Org	ganizations De	escribed in Se	ctions 170(b)	(1)(A)(iv) and [·]	170(b)(1)(A)(vi)	
<u> </u>	(Complete only if you chec						under
	Part III If the organization	fails to qualify i	under the tests	listed below, p	lease complete	e Part III)	
Sec	tion A. Public Support						
Caler	ndar year (or fiscal year beginning ın) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	Include any "unusual grants ") •••••	439,018	356,773	349,707	291,054	262,509	1,699,061
2	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf • • • • • •						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge •••••						
4	Total. Add lines 1 through 3	439,018	356,773	349,707	291,054	262,509	1,699,061
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly			l			
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f) · · · · ·	10 14 42					
6	Public support. Subtract line 5 from line 4						1,699,061
	tion B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4	439,018	356,773	349,707	291,054	262,509	1,699,061
8	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties and income from similar						
	sources						
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on •••••••						
10	Other income Do not include gain or						
	loss from the sale of capital assets						
11	(Explain in Part VI) · · · · · · · · · · · · · · · · · · ·						1,699,061
12	Gross receipts from related activities, etc. (s		<u>_</u>			12	1,099,001
		,			501(-)(2)		
13	First five years. If the Form 990 is for the o organization, check this box and stop here	rganization's first, s	econa, inira, iourin	, or fifth tax year as	a section 501(c)(3	s) 	
Sec	tion C. Computation of Public Su				· · · · · · · · · · · · · · · · · · ·	·	
14	Public support percentage for 2015 (line 6, c))		14 1 (00.00 %
15	Public support percentage from 2014 Sched						00.00 %
16a	33 1/3% support test - 2015. If the organiza						
	box and stop here. The organization qualifie						· · · 🕨 🕅
b	33 1/3% support test - 2014. If the organiza				33 1/3% or more,		
	check this box and stop here. The organiza						· · · 🕨 🔲
17a	10%-facts-and-circumstances test - 2015	. If the organization	did not check a bo	x on line 13, 16a, o	or 16b, and line 14 i	S	
	10% or more, and if the organization meets	-					
	Part VI how the organization meets the "fact	ts-and-circumstanc	es" test. The organi	zation qualifies as	a publicly supporte	d	
							· · · ▶ []
b	10%-facts-and-circumstances test - 2014						
	15 is 10% or more, and if the organization m	-					
	Explain in Part VI how the organization mee					у	
						, 	· · · 🕨 📋
18	Private foundation. If the organization did i	not check a box on	line 13, 16a, 16b, 1	7a, or 17b, check t	his box and see		
	Instructions	<u>.</u>			<u></u>	. .	· · Þ 📋

Schedule A (Form 990 or 990-EZ) 2015

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Scheo	dule A (Form 990 or 990-EZ) 2015 KORE	AN AMERICAN	FEDERATION C	DF L.A.		95-3842560	Page 3
	rt III · Support Schedule for Org	ganizations D	escribed in Se	ction 509(a)(2			
	(Complete only if you chec						Part II
	If the organization fails to c	ualify under th	e tests listed be	elow, please co	omplete Part I	l)	
Sec	ction A. Public Support			·	· · · · · · · · · · · · · · · · · · ·		
Cale	endar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total Add lines 1 through 5 · · · · · ·					<u></u>	
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons •••••						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year •••			<u>, </u>			
С	Add lines 7a and 7b · · · · · · · · · · · · · · · · · ·	_					
8	Public support. (Subtract line 7c from line 6)			۰۰. ۲۹ میلی میلی م		- 5 5-1-1-1-	
	ction B. Total Support		· · · · · · · · · · · · · · · · · · ·				
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6 • • • • • • • • • • • • •						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 • • • • • • • •						
С	Add lines 10a and 10b • • • • • • • • • • • • • • • • • • •						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14 	First five years. If the Form 990 is for the or organization, check this box and stop here	• • • • • • • •	<u> </u>	or fifth tax year as	a section 501(c)(3	;) 	•
Se	ction C. Computation of Public Su				<u></u>		
15	Public support percentage for 2015 (line 8, co			,		15	%
16	Public support percentage from 2014 Schedu			. <u></u>	<u></u>	16	%
Se	ction D. Computation of Investme					1	
17	Investment income percentage for 2015 (line					17	%
18	Investment income percentage from 2014 Sc			<i>.</i>		18	%
	33 1/3% support tests - 2015. If the organiz 17 is not more than 33 1/3%, check this box	and stop here. The	e organization quali	fies as a publicly si	upported organizat	ion • • • • •	► [
	33 1/3% support tests - 2014. If the organiz line 18 is not more than 33 1/3%, check this	box and stop here	. The organization of	jualifies as a public	ly supported organ	nization · · · ·	▶ Д
20	Private foundation. If the organization did n	ot check a box on l	ine 14, 19a, or 19b,	check this box and	d see instructions		· · · · ▶ []

Schedule A (Form 990 or 990-EZ) 2015

EEA

 (Part I) Supporting Organizations (Complete only fyou checked a box in line 11 of Part I. complete Sections A and C. If you checked 11a of Part I, complete Sections A and C. If you checked 11a of Part I, complete Sections A and C. If you checked 11a of Part I, complete Sections A and C. If you checked 11a of Part I, complete Sections A and C. If you checked 11a of Part I, complete Sections A and C. If you checked 11a of Part I, complete Sections A and C. If you checked 11a of Part I, complete Sections A and C. If you checked 11a of Part I, complete Sections A and C. If you checked 11a of Part I, complete Sections A and C. If you checked 11a of Part I, complete Sections A and C. If you checked 11a of Part I. A re all of the organization's supported organizations is steed by name in the organization of status under section 509(10) (10 (2)? If Yes, "explain in Part V how the organization of status under section 509(10) (10 (2)? If Yes, "explain in Part V how the organization determined that the supported organization supported organization section 509(2)? If Yes, "describe in Part V livhen and how the organization nave a supported organization y unplace deculsively for section 170(c)/(2)(6) and satisfield the public support to such organization swa used exclusively for section 170(c)/(2)(6) purposes? If Yes, "explain in Part V how the organization have an EVI multimate control and discretion in decing whether to make grants to the Greegn supported organization support any forcing supported organization have and Sole(1) of (2) If Yes, "explain in Part V how the organization have and SO decing antechon Yes in the supported organization have and SO decing whether to make grants to the forcing supported organization have and SO decing antechon Yes in the supported organization have and SO decing antechon Yes in the Sole (2) If Yes, "explain in Part V how the organization addition of Sole(1) or (2) If Yes, "explain in Part V how the organization nave anorgenoth		ReA (Form 990 or 990-EZ) 2015 KOREAN AMERICAN FEDERATION OF L.A. 95-3842	560	ł	Dage 4
and B if you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A. and C. If you checked 11c of Part I Sections A. And Supporting Organizations Section A. All Supporting Organizations I Are all of the organization supported organizations lated by name in the organization's governing documents? If Two'' escible in Part V How the supported organization are designated. If designated by class or purpose, describe the designation in that does not have an IRS determination of status under sections 509(c)(1) (02) (1) 'Tws'', explain in Part V How the organization determined that the supported organization was described in section 509(c)(2) (1) 'Tws'', explain in Part V How the organization determined that the supported organization made the determination of status under section 509(c)(2) (1) 'Tws'', explain in Part V How the organization determined that the supported organization made the determination D oth the organization contine that all support to such organization put in place to ensure such use. We are an organization contine that all support to such organization put in place to ensure such use. We are any supported organization organization to such arganization put in place to ensure such use. We arganization made the determination D oth the organization organization in the place to ensure such control and discreteon despite being controlled or supervised by or in connection with as supported organization''? If 'Tws'', explain an Part V how the organization and etch determination D of the organization support of the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes? D of the organization addid, substituted supported organization''s determination under sections \$01(c)(3) and 509(c)(1) or (2) If 'Yes'', explain in Part V how the extons. D of the organization addid, substitute or remove any supported organization''s determination under sections \$01(c)(3) and 509(c)(1) or (2) If 'Yes'', explain in Part V how the extons. D of the org	Par		<u> </u>		
Sections A. All Supporting Organizations Section A. All Supporting Organizations Section A. All Supporting Organizations A and a light e organization's supported organizations lated by name in the organization's governing documents? If "No," describe on Part V thow the supported organization are designated if designated by datas or purpose, describe the designation of the theore and comuning relationship, organi D and the organization have any supported organization that des not have an IRS determination of status under sections 599(4)(10 or (2) If 'Yes, "angline m Part V how the organization determined that the supported organization was despribed in section 508(c)(1) or (2) D and the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfiel the public support tests under section 500(c)(4), (5), or (6) and satisfiel the public support tests under section 500(c)(4), (5), or (6) and satisfiel the public support tests under section to organization are under section 501(c)(2), (5), or (6) and satisfiel the public support tests under section to organization are under section 501(c)(2), (5), or (6) and satisfiel the public support tests under section to organization are under section 501(c)(2), (5), or (6) and satisfiel the determination D and the organization have an IRS determination D and the organization have and the discretion in descretion in descretion of despribe designation (7) If "res," and fyou checked 11 a or 11 in Part 1, answire (b) and (c) below D and the organization have and Bos(6) in (7) If "res," "generation rules are under section 501(c)(2) and 509(c)(1) (7) If "res," "generation have and 509(c)(1) or (7) If "res," "generation have and FS determination under					
Section A. All Supporting Organizations Yes No 1 Are all of the organization's supported organizations tested by name in the organization's governing documents? If "No," descehes in Part VI how the supported organization are designated. If designated by class or purpose, describe the designation that design to that the supported organization are an IR3 determination of status supported organization are supported organization that design to the comparization described in section 509(a)(1) or (2)? If "Yes," answer (b) and (c) below 1				5	
A re all of the organization's supported organizations listed by name in the organization's governing documents? If "Noc," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. Image: Content of Content	<u>.</u>		Part V)		
 A re all of the organization's supported organizations stated by name in the organization's governing documents' ITNO, describe in Part VI how the supported organization are designated If designated by data so purpose, describe the designation if historic and continuing relationship, explain under section 500(a)(10 r (2) ITVSe⁻, section in Part VI who the organization determined that the supported organization are as upported organization are used social of the organization are as upported organization are used social of the organization are used exclusively for section 501(c)(4), (5), or (6) and (5) below D of the organization near under section 509(a)(2)? ITYSe⁻, describe in Part VI when and how the organization mate that all support to such organizations are used exclusively for section 170(c)(2)(E) purposes⁻ ITYSe⁻, seguination thave and idiscretion in ecoding whether to make grants to the foreign supported organization and and discretion in deciding whether to analy supported organization? ITYSe⁻, describe in Part VI when this support to constort and discretion in deciding whether to make grants to the foreign supported organization are unlimate control and discretion in deciding whether to make grants to the foreign supported organization are unlimate control and discretion in a discretion in Part VI what is support to constrain and in decima white support discretion 3501(c)(3) and 505(c)(10 (2) (2) (11 'YSe⁻, "describe in Part VI induced organization are and EIN an under sections 501(c)(2) (2) (11 'YSe⁻, "describe in Part VI induced organization are and EIN any the supported organization are and EIN any the supported organization are and the support any foreign supported organization are and EIN any the attempt and the support any foreign supported organization and	Seci	tion A. All Supporting Organizations		1	
 documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or provinces, describe the designation. If historic and continuing relationship, explain under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,'' and how the organization and how the organization and how the organization and a support dest support eds under section 501(c)(4), (5), or (6)? If 'Yes,'' and how the organization and that each support dest under section 501(c)(4), (5), or (6)? If 'Yes,'' and how the organization and in that each support destinated states (foreign supported organization)? If 'Yes,'' explain in Part VI what controls the organization and more than all support to such organization and support destinated in the Under States (foreign supported organization)? If 'Yes,'' explain in Part VI what controls the organization and support destination or indexing the theorem supported organization and supported organization and supported organization have supported organization and supported organization have supported organization have an IRS determination '' 'Yes,'' explain in Part VI what controls the organization and supported organization have and supported organization have an IRS determination under sections 501(c)(3) and 502(a)(1) or (2)? If 'Yes,'' explain in Part VI including () the names and EIN numbers 501(c)(3) and 502(a)(1) or (2)? If 'Yes,'' explain in Part VI including () the names and EIN numbers 501(c)(3) and 502(a)(1) or (2)? If 'Yes,'' explain in Part VI including () the names and EIN numbers 501(c)(3) and 502(a)(1) or (2)? If 'Yes,'''''''''''''''''''''''''''''''''''	1	Are all of the preservation's supported preservations listed by some in the preservation is a support		Yes	NO
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under sectors 50(c)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in sectors 500(c)(1) or (2). 2 2 32 Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and (5) below 3a 3a b) Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support test under section 500(c)(2) If "Yes," describe in Part VI when and how the organization make the determination 3a c) Did the organization ensure that all support to such organization the place to ensure such use. 3a 4 Was any supported organization and the determination and start control that on the supported organization in deciding whether to make grants to the forceign supported organization in deciding whether to make grants to the forceign support any foreign supported organizations. 4b b) Did the organization support any foreign supported organization in deciding whether to make grants to the forceign support any foreign supported organizations. 4b c) Did the organization add, substitute, or remove any supported organizations. 4b c) Did the organization add, substitute, or remove any supported organization grant where account was accomplished (such as by amendment to the organization such and (w) how the action was accomplished (such as by amendment to the organization such action, and (w) how the action was accomplished (such as by amendment to the organization or ord (w) the orthe acthom was a substitute) or the provision of services or	n		1	 	<u> </u>
arganization was described in section 509(a)(1) or (2) image: 2 image: 2 3 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below image: 2 b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below image: 2 b Did the organization exponent that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. image: 2 d Was any supported organization and discretion in deciding whether to make grants to the foreign supported organization supported organization have ultimate control and discretion despte being controlled or supervised by or in connection with its supported organization used to ensure that all support any foreign supported organizations during the support any foreign supported organizations during the support any foreign supported organization and such controls the organization support any foreign supported organizations during (i) the names and EIN numbers of the supported organizations during the super try (i) the reasons for each such action, (ii) the authority under the organization's organizing document) iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	2				
 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below b) Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support estimation section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination of the organization not organized in the organization in deciding whether to make grants to the foreign supported organization and discretion in deciding whether to make grants to the foreign supported organization and discretion with its support do organization used to ensure that all support to 2)? If "Yes," and the organization and discretion with discretion with supported organization. c) Did the organization support and foreign supported organization have alleng of supervised organization with used exclusively for section 170(c)(2)(B) purposes d) Did the organization and, substitule, or remove any supported organizations and the discretion soft (c) and (c) below (f) an					l
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 b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support lasts under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination c Did the organization ensure that all support to such organization put in place to ensure such use. 44 Was any supported organization not organized in the United States (Toreign supported organization)?? If "Yes," and If you checked 11 or 11 bin Part I, narwer (b) and (c) below b Did the organization support and prant in the United States (Toreign supported organization) and such control and discretion in describen in the determination under sections 501(c)(a) and 509(c)(1) or (2)? If "Yes," explain in Part VI what controls the organization. c Did the organization support by or in connection with its supported organizations. d Did the organization support of organization was used exclusively for section 170(c)(2)(B) purposes a Did the organization add, substitute, or removed. (i) the ranses of reach such action, (ii) the earticle organization's organizing document) b Type I or Type II only. Was the substitution the result of an event beyond the organization's control? c Substitutions only. Was the substitution the result of an event beyond the organization's control? d Did the organization provide signarization's control? d Did the organization provide signarization's control? d Did the organization provide signarization's control organization security of the support or dorganization's control? d Did the organization provide signarization's control? d Did the organization provide signarization's control? d Did the organization controlled directly or individuals that are part of the charabate class benefited by one or more of this supported organizations, or (ii) other supporting organizations is defined in section 458(c)(3)(Ja				i
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 (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document) b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? c Substitutions only. Was the substitution the result of an event beyond the organization's control? 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 7 Did the organization norbulor? If "Yes," complete Part 1 of Schedule L (Form 990 or 990-EZ) 8 Did the organization controlled or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI. 9 Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization also had an interest? If "Yes," provide detail in Part VI. 9 Did one organization subject to the excess business holdings rules of section 4943 because of section 4943 (f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organization had any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings) 					
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	b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			
EEA Schedule A (Form 990 or 990-EZ) 2015		determine whether the organization had excess business holdings)	10b		
	EEA	Schedule	A (Form 990	or 990-	EZ) 2015

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Pa	rt IV Supporting Organizations (continued)			<u> </u>
			Yes	No
11	· · · · · · · · · · · · · · · · · · ·			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
с	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			1
				l
800	supervised, or controlled the supporting organization tion C. Type II Supporting Organizations	2		L
Jec			Vaa	No
4	Were a mover to a file according to decode a structure during the terror of a surgery of the during terror	r	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		-	
	or management of the supporting organization was vested in the same persons that controlled or managed			l
0	the supported organization(s)	1		L
Sec	tion D. All Type III Supporting Organizations			
		r	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			ч ³ у
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	1 7		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			<u></u>
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	. 3	· ·	
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in	nstruc	tions	5)
а	The organization satisfied the Activities Test Complete line 2 below			
b				
с	The organization supported a governmental entity Describe in Part VI how you supported a government entity	(see in	struc	tions)
2	Activities Test Answer (a) and (b) below.	` [Yes	
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	[]		·
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			,
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a		- '
Ь	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	20		
u U				
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	2		
•	activities but for the organization's involvement	2b		
ა	Parent of Supported Organizations Answer (a) and (b) below.	1		

KOREAN AMERICAN FEDERATION OF L.A.

- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in **Part VI**.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

gard 3b Schedule A (Form 990 or 990-EZ) 2015

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Schedule A (Form 990 or 990 EZ) 2015

chedule A (Form 990 or 990-EZ) 2015 KOREAN AMERICAN FEDERATION OF L.A.	·	95-38	42560 Page
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org			
1 Check here if the organization satisfied the Integral Part Test as a qualifying			instructions. All
other Type III non-functionally integrated supporting organizations must com	plete S	ections A through E	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
Instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a	· · · · · · · · · · · · · · · · · · ·	
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI)		1	
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3	, ·	
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	<u></u>	
6 Multiply line 5 by 035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8	· · · · · ·	
ection C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
	6		

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Schedule A (Form 990 or 990-EZ) 2015

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Schedule A (Form 990 or 990 EZ) 2015 KOREAN AMERICAN FEDERAT		95-38	42560 Page
Part V Type III Non-Functionally Integrated 509(a) Section D - Distributions	(3) Supporting Organi	zations (continued)	C
1 Amounts paid to supported organizations to accomplish exe	matauraaaa		Current Year
 Amounts paid to supported organizations to accomplish exe Amounts paid to perform activity that directly furthers exem 			
organizations, in excess of income from activity	pr purposes or supported		
3 Administrative expenses paid to accomplish exempt purpos	es of supported organiza	tions	
Amounts paid to acquire exempt-use assets	·		
5 Qualified set-aside amounts (prior IRS approval required)			.
6 Other distributions (describe in Part VI) See instructions			<u> </u>
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations to which the	he organization is respon	sive	
(provide details in Part VI) See instructions	· · · · · · · · · · · · · · · · · · ·	····=····	
9 Distributable amount for 2015 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015			
(reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2015	1 min 1	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
a			
b			
C	1.45		,,
d From 2013	sujette . »		
e From 2014			
f Total of lines 3a through e		· · · · · · · · · · · · · · · · · · ·	
g Applied to underdistributions of prior years	in the second states in a		
h Applied to 2015 distributable amount	1. Marting to 1		
i Carryover from 2010 not applied (see instructions)		1	· · · · · · · · · · · · · · · · · · ·
j Remainder. Subtract lines 3g, 3h, and 3i from 3f		<u>,</u>	
4 Distributions for 2015 from Section	C. S.	*	
D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			<u> </u>
c Remainder Subtract lines 4a and 4b from 4			······
 Remaining underdistributions for years prior to 2015, if 	· · · · · · · · · · · · · · · · · · ·		
any Subtract lines 3g and 4a from line 2 (if amount			
greater than zero, see instructions)	-		
6 Remaining underdistributions for 2015 Subtract lines 3h	· · · · · · · · · · · · · · · · · · ·		
and 4b from line 1 (if amount greater than zero, see			
instructions)			
7 Excess distributions carryover to 2016 Add lines 3j			
and 4c 8 Breakdown of line 7			
a		· · · · · · · · · · · · · · · · · · ·	
b			
c Excess from 2013			
d Excess from 2014	<u> </u>		
e Excess from 2015			

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Schedule A (Form 990 or 990-EZ) 2015

	m 990 or 990-EZ) 2015 Pag
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Par
	III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section
	B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b
	3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E,
	lines 2, 5, and 6 Also complete this part for any additional information (See instructions)
<u> </u>	
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SC	HEDULE D.	Supplemental Financial Statements		OMB No 1545-0047
(Form 990)		 Complete if the organization answered "Yes" on Form 990, 		2015
		Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.		
	tment of the Treasury	► Attach to Form 990		Open to Public.
	al Revenue Service	Information about Schedule D (Form 990) and its instructions is at www.irs.gov/		er identification number
	-	CAN FEDERATION OF L.A.		-3842560
		tions Maintaining Donor Advised Funds or Other Similar Funds or Accourt		
	Complete	If the organization answered "Yes" on Form 990, Part IV, line 6		
		(a) Donor advised funds	(b) F	unds and other accounts
1		d of year • • • • • • • • • • • • • • • • • • •		
2		contributions to (during year)		
3		f grants from (during year)		
4 5	00 0	r end of year · · · · · · · · · · · · · · · · · · ·		
5		nization's property, subject to the organization's exclusive legal control?		Yes 🗌 No
6	-	n inform all grantees, donors, and donor advisors in writing that grant funds can be used		
	-	purposes and not for the benefit of the donor or donor advisor, or for any other purpose		
	conferring imperm	ssible private benefit?		
Pa		vation Easements.		
		e if the organization answered "Yes" on Form 990, Part IV, line 7		
1	<u> </u>	servation easements held by the organization (check all that apply)		
	Ξ	f land for public use (e.g., recreation or education)	•	
	Protection of r		toric stru	icture
2		through 2d if the organization held a qualified conservation contribution in the form of a cons	ervation	
-	-	ast day of the tax year	(1997	leld at the End of the Tax Year
а		nservation easements	2a	
b		icted by conservation easements	2b	
с	Number of conserv	vation easements on a certified historic structure included in (a)	2c	
d	Number of conserv	vation easements included in (c) acquired after 8/17/06, and not on a		
		sted in the National Register	2d	
3		vation easements modified, transferred, released, extinguished, or terminated by the organiz	ation duri	ing the
	tax year ►			
4 5		where property subject to conservation easement is located		
5	-	procement of the conservation easements it holds?		Yes 🗌 No
6	····· , ·	hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation		
	>			
7	Amount of expense	 es incurred in monitoring, inspecting, handling of violations, and enforcing conservation ease	ments du	uring the year
	▶\$			
8	Does each conser	vation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)		
	and section 170(h)			Yes 🗌 No
9	-	be how the organization reports conservation easements in its revenue and expense stateme	•	
		I include, if applicable, the text of the footnote to the organization's financial statements that comparison operation	lescribes	s the
Pa		ounting for conservation easements zations Maintaining Collections of Art, Historical Treasures, or Oth	er Sim	ilar Assets.
		te if the organization answered "Yes" on Form 990, Part IV, line 8.	0. 0	
1a		elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and	balance :	sheel
	works of art, histor	cal treasures, or other similar assets held for public exhibition, education, or research in furth	nerance o	of
	public service, pro-	vide, in Part XIII, the text of the footnote to its financial statements that describes these items		
b	If the organization	elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and bala	ance shee	et
		ical treasures, or other similar assets held for public exhibition, education, or research in furth	nerance o	of
		vide the following amounts relating to these items		► ¢
		ded on Form 990, Part VIII, line 1 · · · · · · · · · · · · · · · · · · ·		
2		o in Form 990, Part A		
•	-	required to be reported under SFAS 116 (ASC 958) relating to these lems		
а	-	on Form 990, Part VIII, line 1	. <u>.</u>	▶ \$
b		Form 990, Part X	-	
For	Paperwork Reducti	on Act Notice, see the Instructions for Form 990		Schedule D (Form 990) 2015

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-	t III (Form 990) 2015 KOREAN AMERICAN					or Oth	95-384			Page 2
								Seis	COntain	ueu)
3	Using the organization's acquisition, accession, an	id other records, ch	eck any o	t the follow	ing that are	a significa	ant use of its			
	collection items (check all that apply)									
а	Public exhibition			nge progra	ams					
b	Scholarly research	e 🗌 Othe	er							
C	Preservation for future generations									
4	Provide a description of the organization's collection	ons and explain how	they furth	her the org	anızatıon's e	xempt pu	irpose in Part			
	XIII									
5	During the year, did the organization solicit or rece	ive donations of art	, historica	l treasures	, or other sin					_
	assets to be sold to raise funds rather than to be n		of the orga	nization's d	collection?	•••	<u></u>	· ·	Yes	U No
Pa	t IV Escrow and Custodial Arrange		_						_	
	Complete if the organization ans	wered "Yes" or	Form 9	990, Par	t IV, line 9	, or rep	ported an amo	unt or	ı Form	
	990, Part X, line 21									
1a	Is the organization an agent, trustee, custodian or							_		_
	Included on Form 990, Part X?			· · · · .				· · [Yes	🗌 No
b	If "Yes," explain the arrangement in Part XIII and c	omplete the followir	ng table						_	
							An	nount		
С	Beginning balance					· · 10	;			
d	Additions during the year					· · 10	1			
е	Distributions during the year					· · 16	•			
f	Ending balance					1f				
2a	Did the organization include an amount on Form 9	90, Part X, line 21,	for escrov	v or custod	ial account li	ability?		[Yes	No
b	If "Yes," explain the arrangement in Part XIII Chec	k here if the explan	ation has	been prove	ided on Part	XIII			_ 	· 🗍
Pa	t V: Endowment Funds.									
L	Complete if the organization ans	wered "Yes" or	Form 9	990, Par	t IV, line 1	0				
		(a) Current year		or year	(c) Two year		(d) Three years back	(e)	Four years	back
1a	Beginning of year balance	· · · · · ·					· · · · · · · · · · · · · · · · · · ·			
b							•••			
с	Net investment earnings, gains, and							<u> </u>		
	losses									
d	Grants or scholarships									
e	Other expenditures for facilities and			- · · · · · · · · · · · · · · · · · · ·						
-	programs									
f	Administrative expenses			· · · · -	· · · ·					
a	End of year balance									
2	Provide the estimated percentage of the current ye	ear end balance (lin	e 1a. colu	mn (a)) he	l					
а	Board designated or quasi-endowment	%	o .g, co.c	(u)) //o						
b	Permanent endowment %									
c	Temporarily restricted endowment	%								
Ŭ	The percentages in lines 2a, 2b, and 2c should eq									
3a	Are there endowment funds not in the possession		that are b	eld and ad	ministered fo	or the				
u	organization by	or the organization							Yes	No
	(i) unrelated organizations							. 3	a(ı)	
	(ii) related organizations								a(ii)	
b	If "Yes" on 3a(ii), are the related organizations liste	d as required on Si	hedule R	2					3b	
1	Describe in Part XIII the intended uses of the organ	•						· L	<u> </u>	_[
Pa	rt VI Land, Buildings, and Equipme			-						
	Complete if the organization ans		Form 9	990 Par	t IV. line 1	1a See	e Form 990 Pa	art X	line 10)
	Description of property	(a) Cost or othe		T .	r other basis	1	Accumulated			
	Description of property	(a) Cost of bine			other)	· ·	epreciation	(u)	Book value	,
12	Land			·		· / W	· () /			
1a - h		· · ·			<u> </u>					
b		· ·				├───				
ר ה	Leasehold improvements	· ·				<u> </u>				
đ		· ·			35,350		35,350			<u> </u>
e Tatal	Other			L	<u> </u>	<u> </u>				
Tota	Add lines 1a through 1e (Column (d) must equal	Form 990, Part X, (Joiumn (B), line 10C) • • •	· · · ·	•••••		<u> </u>	
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Schedule D (Fo	
Part VII	Inves

95-3842560 Page 3

	Investments	
art VII [.] I		

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total (Column (b) must equal Form 990, Part X col (B) line 12)		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c See Form 990, Part X, line 13

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total (Column (b) must equal Form 990, Part X, col (B) line 13)		

Total (Column (b) must equal Form 990, Part X, col. (B) line 13.)

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Desc	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	

otal. (Column (b) must equal 1 onn 350, 7 art X, cor (b) me

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f See Form 990, Part X, line 25

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total (Column (b) musi equal Form 990, Part X, col. (B) line 25.)	▶	

Total (Column (b) must equal Form 990 Pan A, col (b) line 25)

2 Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

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Sche	tule D (Form 990) 2015 KOREAN AMERICAN FEDERATION OF L.A	95-3842560	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a		
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
с	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1 · · · · · · · · · · · · · · · · · ·	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · 4a		
b	Other (Describe in Part XIII)		
с	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c (This must equal Form 990, Part I, line 12)		
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses	s per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities 2a		
ь	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII) · · · · · · · · · · · · · · · · ·		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1 • • • • • • • • • • • • • • • • • •	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · 4a	No. 1	
b	Other (Describe in Part XIII)		
с	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
Pa	rtXIII Supplemental Information.		

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

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(Form 990 or 990-EZ) Com	plete if the organization	answered "Y	'es" to Form 9	90, Part IV, lines 17, 18	, or 19, or (f the	2015
Department of the Treasury	organization en ► A	tered more th Attach to Forr	an \$15,000 or n 990 or Form	n Form 990-EZ, line 6a 990-EZ		-	Open to Public
Internal Revenue Service Inform Name of the organization	ation about Schedule (G (Form 990 o	r 990-EZ) and	its instructions is at w	ww.irs gov		Inspection Inspection
KOREAN AMERICAN FEDERATIO	ON OF LA.						42560
Part I Fundraising Activi		the organ	ization an	swered "Yes" on	Form 9		
Form 990-EZ filers are	e not required to co	mplete this	part				
1 Indicate whether the organization	raised funds through	· —	•				
a Mail solicitations				of non-government gra	ants		
 b Internet and email solicitations c Phone solicitations 	5	f [] q []		of government grants Iraising events			
d In-person solicitations		9 🗆	opecial func	raising events			
2a Did the organization have a writte	en or oral agreement v	vith any indiv	idual (includi	ng officers, directors,	trustees		
or key employees listed in Form	990, Part VII) or entity	in connectio	n with profes	sional fundraising ser	vices?	🗌 Y	es 🗌 No
b If "Yes," list the ten highest paid in compensated at least \$5,000 by		fundraisers)	pursuant to a	greements under whi	ch the fund	draiser is to b	e
(I) Name and address of individual			draiser have	(IV) Gross receipts		ount paid to tained by)	(vi) Amount paid
or entity (fundraiser)	(II) Activity		r control of outions?	from activity	fundrais	ser listed in of (i)	(or retained by) organization
		Yes	No				
1							
2		-					
3	-						
4							
* 							
5							
6							
7							
8						n	
9							
10							
T -4-1		- 1					
Total · · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · ·		· · · ▶				
registration or licensing	alion is registered of in			ons of has been notin	eu il is exe	empt from	
	···						
				• • • • • • • • • • • • • • • • • • • •	=-		

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

Schedule G (Form 990 or 990-EZ) 2015

		G (Form 990 or 990 EZ) 2015 KOF	EAN AMERICAN FED	ERATION OF L A.		-3842560 Page 2
Pa	art I					
		than \$15,000 of fundraising gross receipts greater than		nd gross income on Forr	m 990-EZ, lines 1 and 6	b List events with
	<u> </u>	gibss receipts greater than	(a) Event #1	(b) Event #2	(a) Other events	1
			HYO FESTIVAL	(b) Event #2	(c) Other events None	(d) Total events (add col (a) through
			(event type)	(event type)	(total number)	col (c))
ē			(even type)			
Revenue	1	Gross receipts				
Rev						
	2	Less Contributions				
	3	Gross income (line 1 minus			· · · · ·	
		line 2) • • • • • • • • • • • • • • • • • •				
	4	Cash prizes				
	5	Noncash prizes · · · · · ·				
Ises	6	Rent/facility costs				
ber	7	Food and beverages • • • • •				
ŵ	1	1 oou and beverages •••••				· · · _
Direct Expenses	8	Entertainment				
	9	Other direct expenses · · · · ·				
					·	
	10	Direct expense summary Add lines	4 through 9 in column (d)			
	11	Net income summary Subtract line				
il Ha	irtill		-	"Yes" to Form 990, Part	IV, line 19, or reported	more
		than \$15,000 on Form 990	-EZ, line ba.			
ant			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
evenue				(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1	Gross revenue			(c) Other gaming	
Revenue	1				(c) Other gaming	
	1				(c) Other gaming	
	_	Gross revenue			(c) Other gaming	
enses	_	Gross revenue			(c) Other gaming	
enses	2	Gross revenue			(c) Other gaming	
enses	2	Gross revenue · · · · · · · · · · · · · · · · · · ·			(c) Other gaming	
	2 3 4	Gross revenue			(c) Other gaming	
enses	2 3	Gross revenue	(a) Bingo	bingo/progressive bingo		
enses	2 3 4 5	Gross revenue	(a) Bingo	bingo/progressive bingo	Yes %	
enses	2 3 4	Gross revenue	(a) Bingo	bingo/progressive bingo		
enses	2 3 4 5	Gross revenue	(a) Bingo	bingo/progressive bingo	% % No	
enses	2 3 4 5	Gross revenue	(a) Bingo	bingo/progressive bingo	% % No	
enses	2 3 4 5	Gross revenue	(a) Bingo	bingo/progressive bingo	☐ Yes% ☐ No	
enses	2 3 4 5 6 7	Gross revenue	(a) Bingo	bingo/progressive bingo	☐ Yes% ☐ No	
enses	2 3 4 5 6 7 8 8	Gross revenue	(a) Bingo	bingo/progressive bingo	□ Yes % □ No 	col (a) through col (c))
b 6 Direct Expenses	2 3 4 5 6 7 8 Enl Is t	Gross revenue	(a) Bingo	bingo/progressive bingo	□ Yes % □ No 	col (a) through col (c))
b 6 Direct Expenses	2 3 4 5 6 7 8 Enl Is t	Gross revenue	(a) Bingo	bingo/progressive bingo	□ Yes % □ No 	col (a) through col (c))
b 6 Direct Expenses	2 3 4 5 6 7 8 Enl Is t	Gross revenue	(a) Bingo	bingo/progressive bingo	□ Yes % □ No 	col (a) through col (c))
g a 6	2 3 4 5 6 7 8 Enl Is t If "	Gross revenue	(a) Bingo	bingo/progressive bingo	Yes % No %	col (a) through col (c))
Direct Expenses	2 3 4 5 6 7 8 Enl Is t If "I 	Gross revenue	(a) Bingo	bingo/progressive bingo	Yes % No %	col (a) through col (c))
Direct Expenses	2 3 4 5 6 7 8 Enl Is t If "I 	Gross revenue	(a) Bingo	bingo/progressive bingo	Yes % No %	col (a) through col (c))

Schedule G (Form 990 or 990-EZ) 2015

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SCHEDULE O (Form 990 or 990-EZ)	Supplemental information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Parament of the Treasury email Revenue Service Information about Schedule 0 (Form 990 or 990-EZ) and its instructions is at www.irs gov/form990		OMB No 1545-0047 2015 Open to Public nspection
Name of the organization		Employer iden	tification number
KOREAN AMERICAN	FEDERATION OF L.A.	95-38425	60
01. Form 990 gov	erning body review (Part VI, line 11)		
No review was or	will be conducted.		
02. Governing do	cuments, etc, available to public (Part VI, line 19)		
No documents are	available to the public.		
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See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



efile						
orm S	990	Return of Organization Exempt From				MB No 1545-004
		Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Confoundations)	de (except p	rivate		2014
	nt of the Treasury evenue Service	 Do not enter social security numbers on this form as it ma Information about Form 990 and its instructions is at <u>www</u> 				Open to Public Inspection
For t	the 2014 c	lendar year, or tax year beginning 09-01-2014 , and ending 08-31-2015				
	k if applicable	C Name of organization KOREAN AMERICAN FEDERATION OF LA		D Employ	er ident	tification number
	ess change			95-384	42560	
	e change	Doing business as				
Initiai Final	l return	Number and street (or P O box if mail is not delivered to street address) Room/suit	e	E Telephon	ne numbe	er
	n/terminated	981 S WESTERN AVE				
	nded return cation pendin	City or town, state or province, country, and ZIP or foreign postal code Los Angeles, CA 90006		G Gross rec	ceipts \$ 2	291,054
		F Name and address of principal officer JAMESAHN	H(a) Is th subo	Is a group r rdınates?	return f	ior 「Yes 「No
			H(b) Are a inclu		ates	∏ Yes ∏ No
Tax-e	exempt statu	s 🔽 501(c)(3) 🔽 501(c)() ┥ (Insert no) 🗌 4947(a)(1) or 🗍 527			alıst (see instructions)
Web	bsite: 🕨 W	WW KAFLA ORG	H(c) Grou	ıp exemptio	on num	ber 🕨
orm o	of organizatio	n 🔽 Corporation 🗍 Trust 🗍 Association 🗍 Other 🍉		rmation 198	2 M S	state of legal domicile
Part	-	nmary				2
		5 ANGELES this box 🏹 if the organization discontinued its operations or disposed of	f more than 2	5% of its r	net ass	ets
	2 Check				net ass	
	2 Check 3 Numbe 4 Numbe	this box F if the organization discontinued its operations or disposed of r of voting members of the governing body (Part VI, line 1a) r of independent voting members of the governing body (Part VI, line 1b)		·	3 4	
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	2 Check 3 Numbe 4 Numbe 5 Total n 6 Total n 7a Total u b Net un 8 Cont 9 Prog 10 Inve	this box F if the organization discontinued its operations or disposed of r of voting members of the governing body (Part VI, line 1a) r of independent voting members of the governing body (Part VI, line 1b) umber of individuals employed in calendar year 2014 (Part V, line 2a) . umber of volunteers (estimate if necessary) nrelated business revenue from Part VIII, column (C), line 12 related business taxable income from Form 990-T, line 34			3 4 5 6 7a 7b	Current Year 270,0
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t t t t	2 Check 3 Numbe 4 Numbe 5 Total m 6 Total m 7 Total u b Net un 8 Cont 9 Prog 10 Inve 11 Othe 12 Tota 12 Tota 12 Tota 13 Gran 14 Bene 15 Sala	this box F if the organization discontinued its operations or disposed of r of voting members of the governing body (Part VI, line 1a) r of independent voting members of the governing body (Part VI, line 1b) umber of individuals employed in calendar year 2014 (Part V, line 2a) . umber of volunteers (estimate if necessary) nrelated business revenue from Part VIII, column (C), line 12 related business taxable income from Form 990-T, line 34 ributions and grants (Part VIII, line 1h) stment income (Part VIII, column (A), lines 3, 4, and 7d) r revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) revenue—add lines 8 through 11 (must equal Part VIII, column (A), line ts and similar amounts paid (Part IX, column (A), lines 1–3) fits paid to or for members (Part IX, column (A), line 4)	Prio	• • • • • • • • • • • • • • • • • • •	3 4 5 6 7a 7b 07 07 07 07	Current Year 270,0 21,0 291,0
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t t t t t t t t t	2 Check 3 Numbe 4 Numbe 5 Total m 6 Total m 7 Total u b Net un 8 Cont 9 Prog 10 Inve 11 Othe 12 Tota 12 Tota 12 Tota 13 Gran 14 Bene 15 Sala 5-1 16a Profe b Total 17 Othe	this box If the organization discontinued its operations or disposed of r of voting members of the governing body (Part VI, line 1a) r of independent voting members of the governing body (Part VI, line 1b) umber of individuals employed in calendar year 2014 (Part V, line 2a) . umber of volunteers (estimate if necessary) nrelated business revenue from Part VIII, column (C), line 12 related business taxable income from Form 990-T, line 34 ributions and grants (Part VIII, line 1h) stment income (Part VIII, column (A), lines 3, 4, and 7d) r revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) r revenue — add lines 8 through 11 (must equal Part VIII, column (A), line ts and similar amounts paid (Part IX, column (A), lines 1–3) fits paid to or for members (Part IX, column (A), line 4)		• • • • • • • • • • • • • • • • • • •	3 4 5 6 7a 7b 07 07 036 34 47	Current Year 270,0 21,0 291,0
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	2 Check 3 Numbe 4 Numbe 5 Total m 6 Total m 7 Total u b Net un 8 Cont 9 Prog 10 Inve 11 Othe 12 Tota 12 Tota 12 Tota 13 Gran 14 Bene 15 Sala 5-1 16 Profe b Total 17 Othe 18 Tota 19 Reve	this box I if the organization discontinued its operations or disposed of r of voting members of the governing body (Part VI, line 1a) r of independent voting members of the governing body (Part VI, line 1b) umber of individuals employed in calendar year 2014 (Part V, line 2a) . umber of volunteers (estimate if necessary) nrelated business revenue from Part VIII, column (C), line 12 related business taxable income from Form 990-T, line 34 ributions and grants (Part VIII, line 1h) ram service revenue (Part VIII, line 2g) revenue (Part VIII, column (A), lines 3, 4, and 7d) r revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) revenue—add lines 8 through 11 (must equal Part VIII, column (A), line ts and similar amounts paid (Part IX, column (A), lines 1–3) fits paid to or for members (Part IX, column (A), line 4) reso, other compensation, employee benefits (Part IX, column (A), lines)) ressional fundraising fees (Part IX, column (A), line 11e) fundraising expenses (Part IX, column (A), line 11e) expenses (Part IX, column (A), lines 11a–11d, 11f–24e) expenses Add lines 13–17 (must equal Part IX, column (A), line 25) nue less expenses Subtract line 18 from line 12	Prio		3 4 5 6 7a 7b 07 07 07 036 036 47 83 24 t	Current Year 270,0 21,0 291,0 97,8 198,6 296,4 -5,3
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Sign		***** Signature of officer			2016-04-15 Date	
Here		JAMES AHN PRESIDENT Type or print name and title				
Daid	<u>,</u>	Print/Type preparer's name YOONHAN KIM	Preparer's signature YOONHAN KIM	Date 2016-04-26	Check / If self-employed	PTIN P00950034
Paid Preparei	-	Firm's name 🕨 YOON HAN KIM &	ASSOCIATES PC		Firm's EIN 🕨 4	5-4001834
Use Only		Fırm's address 🕨 2954 WEST 8TH S	Т		Phone no (213	3) 385-6888
		Los Angeles, CA	90005			
May the IRS	dı	scuss this return with the prepar	er shown above? (see instruction	ns)		🔽 Yes 🔽 No
For Paperwo	ork	Reduction Act Notice, see the se	eparate instructions.	Cat No	11282Y	Form 990 (2014)

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

TO SUPPORT AND SERVE BETTER FOR THE FURTHERANCE OF THE RIGHTS & INTERESTS OF THE KOREAN COMMUNITY AT LOS ANGELES

2	Did the organization the prior Form 990 o		nt program ser	vices during the year	which were not listed on	□Yes ☑No
		ese new services on Sc				1 163 1. 110
3	,	cease conducting, or m		changes in how it cor	nducts, any program	∏Yes ☑No
	If "Yes," describe the	ese changes on Schedı	ile O			
4	expenses Section 50		organizations	are required to report	ee largest program services, as the amount of grants and alloca	
4a	(Code) (Expenses \$	79,651	including grants of \$) (Revenue \$)
	KORFAN CHORUS TO SI	NG MULTI NATIONAL SONGS	FOR VARIOUS KO	REAN FESTIVAL AS WELLA	S REGULAR PERFORMANCE	
b	(Code) (Expenses \$	34,309	including grants of \$) (Revenue \$)
b	(Code) (Expenses \$, –	including grants of \$) DN AND ETC
	(Code) (Expenses \$, –	including grants of \$) (Revenue \$) DN AND ETC)
	(Code VARIOUS KOREAN EVEN (Code) (Expenses \$ T FOR CULTURE, ART, CIVIL) (Expenses \$	RECEPTION LIKE	Including grants of \$ 8 15 EVENT, HAN SANG K(Including grants of \$) (Revenue \$ DREA, HERITAGE NIGHT, HYO INVITATIO)
	(Code VARIOUS KOREAN EVEN (Code) (Expenses \$ T FOR CULTURE, ART, CIVIL) (Expenses \$ ENCE EXPENSES FOR PROVIL	RECEPTION LIKE	Including grants of \$ 8 15 EVENT, HAN SANG K(Including grants of \$) (Revenue \$ DREA, HERITAGE NIGHT, HYO INVITATIO) (Revenue \$)
4c	(Code VARIOUS KOREAN EVEN (Code SEMINAR AND CONFERE See Additional Data) (Expenses \$ T FOR CULTURE, ART, CIVIL) (Expenses \$ ENCE EXPENSES FOR PROVIL	RECEPTION LIKE 18,073 DING USEFUL INFC	Including grants of \$ 8 15 EVENT, HAN SANG K(Including grants of \$) (Revenue \$ DREA, HERITAGE NIGHT, HYO INVITATIO) (Revenue \$)
4b 4c 4d	(Code VARIOUS KOREAN EVEN (Code SEMINAR AND CONFERE See Additional Data) (Expenses \$ T FOR CULTURE, ART, CIVIL) (Expenses \$ ENCE EXPENSES FOR PROVII a	RECEPTION LIKE 18,073 DING USEFUL INFC	Including grants of \$ 8 15 EVENT, HAN SANG K(Including grants of \$ RMATION OF THE MEDICA) (Revenue \$ DREA, HERITAGE NIGHT, HYO INVITATIO) (Revenue \$)

Form 990 (2014)

Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes,"</i> complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
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? <i>If "Yes," complete Schedule C, Part II</i>	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		No
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? <i>If "Yes," complete Schedule D, Part I</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		No
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		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 🕏	11a	Yes	
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? <i>If "Yes," complete Schedule D, Part VII</i>	11b		No
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? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		No
d	DId the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i> 🔁	11d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b		No
15	Dıd the organızatıon report on Part IX, column (A), lıne 3, more than \$5,000 of grants or other assıstance to or for any foreıgn organızatıon? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?			

Page **3**

Par	t IV Checklist of Required Schedules (continued)						
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II .	21		No			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No			
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? <i>If "Yes," complete Schedule J</i>	23		No			
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000$ as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No			
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b					
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c					
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? \cdot . \cdot .	24d					
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No			
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		No			
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>						
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? <i>If "Yes," complete Schedule L, Part III</i> .	27		No			
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)						
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part						
	<i>IV</i>	28a		No			
	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No			
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? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No			
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M .	29		No			
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No			
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No			
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		No			
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? <i>If "Yes," complete Schedule R, Part I</i>	33		No			
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		No			
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No			
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		No			
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		No			
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No			
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes				

Form	990 (2014)			Page 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
_			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . 1a 0			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 0			1
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
5	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year? \ldots .	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country 🕨			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? .	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? \ldots . \ldots	7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	_		
	file Form 8282?	7c		No
a	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		No
8	Sponsoring organizations maintaining donor advised funds. DId a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
Qa	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11				
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the voar	12a		
4.5				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
	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 13b			
-	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

	990 (2014) t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7 "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or change			
	See instructions. Check if Schedule O contains a response or note to any line in this Part VI	•		ম
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax 47			
	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			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 0			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? $$.	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
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		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а		8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	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		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	even		
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		No
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c		
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		No
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
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		
	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed⊫CA			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website V pon request. Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			

20	State the name, address, and telephone number of the person who possesses the organization's books and records
	▶JAMES AHN
	981 S WESTERN AVE

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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, or 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 nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (lıst any hours	more pers	thai on i	n (de n on s bo	e bo th a	t check x, unles n officer rustee)	s r	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Former Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organızatıon and related organızatıons

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) A verage hours per week (list any hours	more t perso	han d n is l	one l both	oox, an d	heck unless officer stee)		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organızatıons below dotted lıne)	Individual trustee or dilector	Institutional Trustee		Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organızatıon and related organızatıons

1b	Sub-Total	Ŧ			
С	Total from continuation sheets to Part VII, Section A	•			
d	Total (add lines 1b and 1c)	►	0	0	0

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization №0

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5		No

Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year (A) (B) (C) Name and business address Description of services Compensation 0

Form 99			_						Page 9
Part \	/111	Statement of Check if Schedu		espon	se or note to any lır	e in this Part VIII			
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
	1a	Federated camp	paigns	1a					
unts	ь	Membership due	es	1b	32,901				
012 10 12	c	Fundraising eve	ents	1c	211,606				
Ę,	d	Related organiz		1d					
ila ila		Government grants							
sin'	e			1e					
er j	f	All other contributio similar amounts no	ons, gifts, grants, and t included above	1f	25,547				
iế Đ	g	Noncash contributio 1a-1f \$	ons included in lines						
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines	31a-1f			270,054			
					₽- Business Code				
nue	2a	VISITOR CENTER			900099	21,000			21,000
e ve	ь			-					
Н ec	c			-					
erwa	d	-		-					
0 2	e			-					
Program Service Revenue	f	All other progra	m service revenu	e					
¥	g	Total. Add lines	2a-2f	•	🕨	21,000			
	3		ome (ıncludıng dıv						
	4		ar amounts) tment of tax-exempt						
	5	Royalties							
		[(ı) Real		(11) Personal				
	6a	Gross rents							
	Ь	Less rental expenses							
	c	Rental income or (loss)							
	d	Net rental incor	me or (loss)	•					
	7a	Gross amount	(I) Securities		(II) Other				
		from sales of assets other							
	ь	than inventory Less cost or							
		other basis and sales expenses							
	с	Gain or (loss)							
	d	Net gain or (los	s)						
Other Revenue	8a	Gross income fr events (not incl \$211,	uding .606						
eve		of contributions See Part IV , line	reported on line 1 e 18	.c)					
с Т				а					
the	Ь		penses	b					
0	C		loss) from fundra		events 📭				
	94	See Part IV, line	rom gamıng actıvı e 19	ties					
				а					
	Ь		penses	Ъ					
		Gross sales of i	loss) from gaming	activ	rities				
		returns and allo							
	Ι.			a					
	b		oods sold loss) from sales o	b funve	entory				
		Miscellaneous			Business Code				
	11a								
	b			_					
	с								
	d	All other revenu		[
	e	Total. Add lines	11a-11d	•	F				
	12	Total revenue.	See Instructions		· · · •	291,054	0	С	21,000

Part IX Statement of Functional Expenses

o nc	Check if Schedule O contains a response or note to any line in this ot include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	o, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	79,935		79,935	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
.0	Payroll taxes	17,880		17,880	
1	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	900		900	
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 (A) amount, list line 11g expenses on Schedule O)....				
2	Advertising and promotion	8,537		1,757	6,78
.3	Office expenses	11,186		11,186	
.4	Information technology	1,400		1,400	
.5	Royalties				
.6	Occupancy				
.7	Travel	10,657	6,205	2,101	2,35
.8	Payments of travel or entertainment expenses for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	26,362	18,073	5,101	3,18
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	463		463	
3	Insurance	8,279		8,279	
4	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	EVENT	113,960	113,960		
b	TELEPHONE	10,113		7,450	2,66
c					
d				├	
e	All other expenses	6,750	6,750	┝─────┤	
25	Total functional expenses. Add lines 1 through 24e	296,422	144,988	136,452	14,98
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here F 「 if following SOP 98-2 (ASC 958-720)				

Par	't X	Balance Sheet Check if Schedule O contains a response or note to any line in this Pa	art X			· · .
				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		12,919	1	4,143
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and former officers, directo employees, and highest compensated employees Complete Part II Schedule L				
Assets	6	Loans and other receivables from other disqualified persons (as define 4958(f)(1)), persons described in section 4958(c)(3)(B), and contri and sponsoring organizations of section 501(c)(9) voluntary employ organizations (see instructions) Complete Part II of Schedule L	buting employers		5	
ŝ	7	Notes and loans receivable, net			7	2,500
Å.	8				8	2,000
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other basis Complete	10a 35,350		<u> </u>	
	Ь	Less accumulated depreciation	10b 31,220	2,688	10c	4,130
	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		6,883	15	6,883
	16	Total assets. Add lines 1 through 15 (must equal line 34)		22,490	16	17,656
	17	Accounts payable and accrued expenses			17	
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
ŝ	21	Escrow or custodial account liability Complete Part IV of Schedule	D		21	
Liabilitie	22	Loans and other payables to current and former officers, directors, tr key employees, highest compensated employees, and disqualified	rustees,			
lab		persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties .			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related th and other liabilities not included on lines 17-24) Complete Part X o	fSchedule	1,021	25	1,634
	26	D		1,021	25	1,634
	20	Organizations that follow SFAS 117 (ASC 958), check here F and		1,021	20	1,004
е С		lines 27 through 29, and lines 33 and 34.	acomplete			
anc.	27	Unrestricted net assets			27	
Fund Balance	28	Temporarily restricted net assets			28	
Ę	29	Permanently restricted net assets			29	
E.		Organizations that do not follow SFAS 117 (ASC 958), check here 🕨				
orF		complete lines 30 through 34.	,			
2	30	Capital stock or trust principal, or current funds			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund 🏾 .			31	
As	32	Retained earnings, endowment, accumulated income, or other funds		21,469	32	16,022
Net	33	Total net assets or fund balances		21,469	33	16,022
	34	Total liabilities and net assets/fund balances		22,490	34	17,656

Form	990	(2014)	
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Par	Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		:	291,054
2	Total expenses (must equal Part IX, column (A), line 25)	2			296,422
3	Revenue less expenses Subtract line 2 from line 1				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3			-5,368
		4			21,469
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses				
8	Prior period adjustments	7			
0		8			-79
9	O ther changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	10			16,022
Pau	column (B)) t XII Financial Statements and Reporting	10			10,022
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Yes	
	If `Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	ewed or	۱		
	Separate basis 🔽 Consolidated basis 🗌 Both consolidated and separate basis				l
b	Were the organization's financial statements audited by an independent accountant?		2b		No
			20		
	If Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepabasis, consolidated basis, or both	arate	20		
		arate			
с	basis, consolidated basis, or both				No
с	basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig	ht of th	ne		No
	basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in	ht of th In	ne		No

Software ID:

Software Version:

EIN: 95-3842560

Name: KOREAN AMERICAN FEDERATION OF LA

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$	12,955	including grants of \$) (Revenue \$)
ADVERTISING EXPEN	SE FOR EVENT AND S	PECIALPRC	GRAMING AND FOOD BANK EX	(PENSE FOR PROGRAM	

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Name and Title A verage hours per week (list any hours for related organizations below dotted line) Position (do not check more than one box, unless person is both an officer and a director/trustee) Reportable compensation from the organizations (W- 2/1099-MISC) Estimated amount of other compensation from the organizations (W- 2/1099-MISC)	Compensated Employees, and Inde	pendent Cor	ntracto	rs				1	1	I	
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Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Inde		11Facto 								
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th persoi and a	ion (d nan oi n is b	ne b oth ctor/	ox, u an of ′trus	inless fficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organızatıons
(26) IK CHEONG EUM	0 00	x						0	0	0
DIRECTOR	0 00	Â						0	0	0
(1) YEON YONG KI	0 00							0	0	0
DIRECTOR	0 00	×						0	0	0
(2) SCOTTIE OAH	0 00									
DIRECTOR	0 00	×						0	0	0
(3) BYUNG YUL YUN	0 00									
DIRECTOR	0 00	×						0	0	0
(4) SUNG HOON YOON	0 00									
DIRECTOR	0 00	X						0	0	0
(5) LISA LEE	0 00									
DIRECTOR	0 00	×						0	0	0
(6) SUNG JIN LEE	0 00									
DIRECTOR	0 00	x						0	0	0
(7) YOUNG SONG LEE	0.00									
		x						0	0	0
DIRECTOR (8) YI IN BOK	0 00									
		x						0	0	0
DIRECTOR (9) JOHN LEE	0 00									
		x						0	0	0
DIRECTOR (10) TAE CHUN LEE	0 00									
		x						0	0	0
DIRECTOR (11) BOB CHOUNG	0 00									
		x						0	0	0
DIRECTOR (12) GAB JEA CHO	0 00									
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	0 00									
(13) MOON KWON JOO	0 00	x						0	0	0
	0 00									
(14) DAVID CHOI	0 00	x						0	0	0
DIRECTOR	0 00									
(15) HENRY CHOI	0 00	x						0	0	0
DIRECTOR	0 00									
(16) JEAN CHOI	0 00	x						0	0	0
DIRECTOR	0 00									
(17) JULIA CHOI	0 00	x						0	0	0
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(18) KYUNG SOOK CHOI	0 00	x						0	0	0
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(19) DAVID HONG	0 00	x						0	0	0
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DIRECTOR	0 00	X						0	0	0
(21) JAMES AHN	30 00			х				0	0	0
PRESIDENT	0 00									

efil	e GR	APHIC pr	int - DO I	NOT PROCES	SS As Filed Da	ta -		DLN: 93	3493117007136			
(Form Departi Treasu	n 990 ment c	DULE A or 990EZ) of the enue Service		ete if the organ	Attach to Form bout Schedule A (Form	01(c)(3) organi charitable trust 1990 or Form 99	zation or a sec 00-EZ.	O rt tion 4947(a)(1)	DMB No 1545-0047 2014 Open to Public Inspection			
Name	of th	ne organizati	on					Employer ident if ic	ation number			
KOREA	N AME	RICAN FEDERA	TION OF LA									
Der		Descer	far Dubli	a Charity S	tatua (All araania	tions must a	malata this i	95-3842560 Dart.) See instruction				
	t I				auseitis (Forlines 1			,	JIIS			
1			-		r association of churc		-					
	')(1)(A)(ii). (Attach S		in section 170(
2	'						tion 170(b)(1)					
3					service organization				• • • • • • • •			
4	I	A medicai hospital's i			rated in conjunction v	with a nospital c	iescribed in se	ction 170(b)(1)(A)(ii	I). Enter the			
5	Г				efit of a college or un	versity owned o	or operated by	a governmental unit d	escribed in			
-		-	-	(iv). (Complete	-			- j				
6	Г				or governmental unit	described in s	ection 170(b)($1)(\mathbf{A})(\mathbf{v})_{\mathbf{v}}$				
7	ন							ental unit or from the g	reneral nublic			
-	,				i). (Complete Part II		oni a governin		general public			
8	Γ				ion 170(b)(1)(A)(vi)		tII)					
9	Γ	An organiz	ation that n	ormally receiv	es (1) more than 33	(1) more than $331/3%$ of its support from contributions, membership fees, and gross						
		receipts fro	m activitie	s related to its	s exempt functions—s	ubject to certai	n exceptions, a	and (2) no more than 3	331/3% of			
		ıts support	from gross	investment in	come and unrelated b	usiness taxabl	e income (less	section 511 tax) from	n businesses			
		acquired by	the organi	ızatıon after Ju	ne 30,1975 See sec	tion 509(a)(2)	. (Complete Pa	rt III)				
10	Г		_		ted exclusively to tes							
11	Г	-	-		-	-		ctions of, or to carry o	out the purposes of			
								509(a)(2) See sectio				
	_							complete lines 11e, 3				
а	I							rganization(s), typica				
					rt IV, Sections A and		ty of the direct	ors or trustees of the	supporting			
b	Г						with its suppo	orted organization(s), I	by having control or			
		manageme	nt of the su	pporting organ	ization vested in the			manage the supported				
	_	-		V, Sections A a								
С	I							, and functionally inte	grated with, its			
d	Г				uctions) You must co I. A supporting organi			, and c. with its supported org	anization(s) that is			
-	•							ement and an attentiv				
	_	(see ınstru	ctions) Yo	u must comple	te Part IV, Sections A	and D, and Pa	rt V.					
e								s a Type I, Type II, T	ype III functionally			
f					ally integrated suppor lizations							
					out the supported orga							
g		FIONIAE LITE	: Tonowing I		out the supported ofga	amzacioii(5)						
	(i)Na	ame of suppo	orted	(ii) EIN	(iii) Type of	(iv) Is the or	ganization	(v) A mount of	(vi) A mount of			
organization				organization (described on lines 1-9 above or IRC section (see	listed in your docume	governing	monetary support (see instructions)	other support (see instructions)				
					<pre>instructions))</pre>			1				
						Yes	No		1			

Total

Sch	edule A (Form 990 or 990-EZ) 2014	ł						Page 2
Pa	art II Support Schedule fo							
	(Complete only if you o							ualıfy under
	Part III. If the organiza	ation fails to qua	alify under the	tests listed belo	w, please com	olete Par	<u>t III.)</u>	
	ection A. Public Support endar year (or fiscal year beginning	1		<u>г</u>			<u> </u>	
Car	in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 20	14	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not	147,762	439,018	356,773	349,707	2	291,054	1,584,314
	ınclude any "unusual grants ")							
2	Tax revenues levied for the							
	organization's benefit and either							
	paid to or expended on its							
3	behalf The value of services or facilities							
5	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3	147,762	2 439,018	356,773	349,707	2	291,054	1,584,314
5	The portion of total contributions by each person (other than a							
	governmental unit or publicly							
	supported organization) included or	n l						
	line 1 that exceeds 2% of the							
	amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from							1,584,314
	line 4							1,564,514
	ection B. Total Support						<u> </u>	
Cal	endar year (or fiscal year beginning in) 🏲	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 201	4	(f) Total
7	A mounts from line 4	147,762	439,018	356,773	349,707	2	91,054	1,584,314
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties and income from similar							
	sources							
9	Net income from unrelated							
	business activities, whether or							
	not the business is regularly carried on							
10	Other income Do not include gain							
	or loss from the sale of capital							
	assets (Explain in Part VI)						\rightarrow	
11	Total support Add lines 7 through 10							1,584,314
12	Gross receipts from related activiti	es, etc (see instr	ructions)	•	•	12	L	
13	First five years. If the Form 990 is	for the organization	on's first, second	, thırd, fourth, or fı	fth tax year as a	section 50	01(c)(3	3)
	organization, check this box and st							<u></u> ,► <u></u>
	ection C. Computation of Pub			11				
14	Public support percentage for 2014			11, column (f))		14		100 000 %
15	Public support percentage for 2013		-			15		100 000 %
16a	33 1/3% support test—2014. If the and stop here. The organization qua				ne 14 is 33 1/3%	or more,	check	this box
b	33 1/3% support test—2013. If the				and line 15 is 33	1/3% or r	nore.c	
	box and stop here. The organization					-,	, .	▶
17a	10%-facts-and-circumstances test							
	is 10% or more, and if the organiza in Part VI how the organization mee							
	organization	Listine lacts-allu		test ine organiz	adon quannes ds	a publicly	sahho	
b	10%-facts-and-circumstances test							·
	15 is 10% or more, and if the organ							Ь <i>и</i>
	Explain in Part VI how the organiza supported organization	tion meets the "fa	icts-and-circums	lances test the	organization qua	mes as a	ρυσιις	
18	Private foundation. If the organization	tion did not check	a box on line 13	, 16a, 16b, 17a, o	r 17b, check this	box and s	see	
	Instructions							▶

 Part III
 Support Schedule for Organizations Described in Section 509(a)(2)

 (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	ction A. Public Support		ading and of the			inplete i ul	,
	ndar year (or fiscal year beginning						
care	in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
-	membership fees received (Do not						
	Include any "unusual grants")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organızatıon's tax-exempt						
_	purpose						
3	Gross receipts from activities that are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
-	organization's benefit and either						
	paid to or expended on its						
	behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
_	the organization without charge						
6	Total. Add lines 1 through 5			-			
7a	Amounts included on lines 1, 2,						
	and 3 received from disqualified persons						
h	Amounts included on lines 2 and 3						
U	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🏲	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
b	Unrelated business taxable						
	income (less section 511 taxes) from businesses acquired after						
	June 30, 1975						
с	Add lines 10a and 10b						
11	Net income from unrelated						
	business activities not included						
	In line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of capital assets (Explain in Part						
	VI)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)						
14	First five years. If the Form 990 is for	or the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	a section 501	
	check this box and stop here						▶
	ction C. Computation of Publi Public support percentage for 2014			1.2			
15				13, column (l))		15	
16	Public support percentage from 2013					16	
Se	ction D. Computation of Inve						
17	Investment income percentage for 2	014 (line 10c, c	olumn (f) dıvıded	by line 13, colum	ın (f))	17	
18	Investment income percentage from	2013 Schedule	A, Part III, line 1	.7		18	
19a	33 1/3% support tests-2014. If the	organization dic	not check the bo	ox on line 14, and	l line 15 is more	than 33 1/3%	, and line 17 is not
	more than 33 1/3%, check this box a	nd stop here. Th	ne organization q	ualifies as a publi	cly supported or	ganızatıon	▶
b	33 1/3% support tests—2013. If the						
20	18 is not more than 33 1/3%, check Private foundation. If the organization						
20		Sh ala not check	a box on fine 14	, 190, 01 190, CH		See macruell	una P °≬

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in **Part VI**.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI*.
- **c** Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "*Yes*," *provide detail in* **Part VI**.
- **10a** Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).
- 11 Has the organization accepted a gift or contribution from any of the following persons?
 - **a** A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?
 - **b** A family member of a person described in (a) above?
 - c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

No

Yes

1

2

3a

Зb

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

11a 11b

11c

Part IV Supporting Organizations (continued)

Section B. Type I Supporting Organizations

- 1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in **Part VI** how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.

Section C. Type II Supporting Organizations

1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in **Part VI** how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

	Yes	No
1		

Yes

No

Yes

1

2

Section D. All Type III Supporting Organizations

Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played 3 in this regard.

Section E. Type III Functionally-Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)
- a 🔽 The organization satisfied the Activities Test Complete line 2 below
- **b** The organization is the parent of each of its supported organizations. Complete **line 3** below
- **c** The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instructions)
- 2 <u>Activities Test</u> Answer (a) and (b) below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those** supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- **b** Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*
- 3 Parent of Supported Organizations Answer (a) and (b) below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI*.
- **b** Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

No

2a

2b

3a

Зb

Part V – Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

 $1 \prod$ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

Section B - Minimum Asset Amount

- 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)
- **a** Average monthly value of securities
- **b** Average monthly cash balances
- **c** Fair market value of other non-exempt-use assets
- d Total (add lines 1a, 1b, and 1c)
- e Discount claimed for blockage or other factors (explain in detail in Part VI)
- 2 Acquisition indebtedness applicable to non-exempt use assets
- 3 Subtract line 2 from line 1d
- 4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)
- 5 Net value of non-exempt-use assets (subtract line 4 from line 3)
- 6 Multiply line 5 by 035
- 7 Recoveries of prior-year distributions
- 8 Minimum Asset Amount (add line 7 to line 6)

Section C - Distributable Amount

- 1 Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- Check here if the current year is the organization's first as a non-functionally-integrated
 Type III supporting organization (see instructions)

	(A) Prior Year	(B) Current Year (optional)
1		
1a		
1b		
1c		
1d		
2		
3		
4		
5		
6		
7		
8		

	Current Year
1	
2	
3	
4	
5	
6	

Schedule A (Form 990 or 990-EZ) 2014

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 A mounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdist ribut ions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009			
b From 2010			
c From 2011			
d From 2012			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
 Carryover from 2009 not applied (see instructions) 			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7			
\$			
 Applied to underdistributions of prior years 			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 31 and 4c			
8 Breakdown of line 7			
a From 2010			
b From 2011			
c From 2012			
d From 2013			
e From 2014			

Schedule A (Form 990 or 990-EZ) (2014)

Page **8**

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference

Explanation

Schedule A (Form 990 or 990-EZ) 2014

efile GRAPHIC	print - DO NOT PROCESS As F	efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 934931170071						
SCHEDULE D (Form 990)			al Statements			омв № 15 201		
	► Complete if the or Part IV, line 6, 7, 8, 9, 1		ered "Yes," to Form 990 , 11d, 11e, 11f, 12a, or 1			20		
Department of the Treasury		Attach to Form	990.		form000	Open to		
ntemal Revenue Service Name of the organ	-	1990) and its in	structions is at <u>www.in</u>	-		Inspec		
KOREAN AMERICAN FE					-			
Part I Organ	nizations Maintaining Donor Adv	vised Funds	or Other Similar F		3842560 or A ccou	nts. Comple	te if the	
	zation answered "Yes" to Form 990	<u>, Part IV, line</u>	6.					
		(a) Dor	or advised funds	_	(b) Funds a	and other acco	unts	
1 Total number a								
	ue of contributions to (during year)			_				
	ue of grants from (during year)							
	ue at end of year zation inform all donors and donor advisi		at the accete hold in der		cod			
funds are the o	organization's property, subject to the or zation inform all grantees, donors, and d	ganization's exc	clusive legal control?			∏ Yes	∏ No	
used only for c conferring imp	charitable purposes and not for the benef ermissible private benefit?	fit of the donor o	r donor advisor, or for a	ny othe	r purpose	∏ Yes	∏ No	
	ervation Easements. Complete if			o Forn	n 990, Par	rt IV, line 7.		
☐ Preservati	conservation easements held by the org on of land for public use (e g , recreation of natural habitat		(all that apply)					
🔽 Preservati	on of open space							
	s 2a through 2d if the organization held a he last day of the tax year	a qualified conse	ervation contribution in t	the forn	n of a conse	ervation		
					Held at	the End of th	e Year	
	of conservation easements			2a				
_	restricted by conservation easements			2b				
d Number of con	nservation easements on a certified histon nservation easements included in (c) acc ure listed in the National Redister		. ,	2c 2d				
	nservation easements modified, transferr	ed, released, ex	tinguished, or terminate	ed by th	ie organizat	ion during		
the tax year 🕨	- <u></u>							
4 Number of sta	tes where property subject to conservat	ion easement is	located 🕨					
	nızatıon have a wrıtten polıcy regardıng i f the conservatıon easements ıt holds?	the periodic mor	nitoring, inspection, han	dlıng of	violations,	and [Yes	∏ No	
5 Staff and volur ▶	nteer hours devoted to monitoring, inspe	cting, and enfor	cing conservation easer	ments c	luring the y	ear		
	penses incurred in monitoring, inspecting	g, and enforcing	conservation easement	s during	g the year			
	nservation easement reported on line 2(70(h)(4)(B)(ii)?	d) above satisfy	the requirements of sec	ction 17	70(h)(4)(B)	(⊨) Γ Yes	∏ No	
balance sheet	lescribe how the organization reports con , and include, if applicable, the text of th on's accounting for conservation easeme	e footnote to the						
	nizations Maintaining Collection			or Ot	her Simil	ar Assets.		
	lete if the organization answered "Y						•	
works of art, h	ition elected, as permitted under SFAS 1 istorical treasures, or other similar asse de, in Part XIII, the text of the footnote t	ts held for publi	c exhibition, education,	or rese	arch ın furt			
works of art, h	ition elected, as permitted under SFAS 1 istorical treasures, or other similar asse de the following amounts relating to thes	ts held for publi					blic	
(i) _{Revenue in}	ncluded in Form 990, Part VIII, line 1				►\$			
(ii) Assets inc	luded in Form 990, Part X							
2 If the organiza	ation received or held works of art, histor unts required to be reported under SFAS							
a Revenue inclu	ded in Form 990, Part VIII, line 1				►\$			
b Assets include	ed in Form 990, Part X				► \$			
					·			

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

Sche	dule D (Form 990) 2014								Page 2
Part	Organizations Maintaining Co	llections of Ar	t, His	tori	cal Trea	asure	es, or Othe	r Similar Asse	ts (continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other reco	rds, ch	necka	any of the	follow	ving that are a	sıgnıficant use of	ıts
а	Public exhibition		d	Γ	Loan or	excha	nge programs		
b	☐ Scholarly research		е	Γ	Other				
с	Preservation for future generations								
4	Provide a description of the organization's co Part XIII	ollections and expl	aın hov	w the	y further t	he org	janızatıon's ex	empt purpose in	
5	During the year, did the organization solicit or assets to be sold to raise funds rather than t								Yes 🗌 No
Par	t IV Escrow and Custodial Arrang						answered "Y	es" to Form 990),
1a	Part IV, line 9, or reported an an Is the organization an agent, trustee, custod included on Form 990, Part X?						other assets r		Yes 🔽 No
Ь	If "Yes," explain the arrangement in Part XII	I and complete the	e follov	ving t	able				
				_				Αποι	int
С	Beginning balance						1c		
d	Additions during the year						1d		
е	Distributions during the year						1e		
f	Ending balance						1f		
2a	Did the organization include an amount on Fo	orm 990, Part X, Iır	ie 21,	for es	scrow or c	ustod	ıal account lıa	bility?	Yes 🔽 No
b	If "Yes," explain the arrangement in Part XII	I Check here If th	e expla	anati	on has be	en pro	vided in Part 2	KIII	
Ра	rt V Endowment Funds. Complete								
1-	Beginning of year balance	(a)Current year	(b))Prior	year b	(c) wo	years back (d)	Three years back (e)Four years back
1a b									
c	Net investment earnings, gains, and losses								
d	Grants or scholarships								
е	Other expenditures for facilities and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the cur	rent year end balan	ce (lın	e 1g	, column ((a)) he	ld as		
а	Board designated or quasi-endowment 🕨								
b	Permanent endowment 🕨								
с	Temporarily restricted endowment > The percentages in lines 2a, 2b, and 2c sho	uld equal 100%							
За	Are there endowment funds not in the posses organization by	ssion of the organiz	ation	that a	are held a	nd adr	ministered for	the	Yes No
	(i) unrelated organizations					• •		3a(i)	
ь	(ii) related organizations								
ь 4	Describe in Part XIII the intended uses of th	-				•			<u> </u>
	t VI Land, Buildings, and Equipme	=				inswe	red 'Yes' to	Form 990, Part	IV. line
	11a. See Form 990, Part X, line								-
	Description of property				a) Cost or c Isis (investr		(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land								
b	Buildings		•						
С	Leasehold improvements		•						<u> </u>
d	Equipment						35,350	31,220	4,130

e Other .

. .

.

. .

•

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

hedul	ה / I	Form	000)	2014

4,130

Sc

. . . . <u>. .</u> •

Schedule D (Form 990) 2014		Page 3
Part VII Investments—Other Securities. Com See Form 990, Part X, line 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests Other		
	•	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIIII Investments—Program Related. Co		answered 'Yes' to Form 990 Part IV line 11c
See Form 990, Part X, line 13.		· · · ·
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
	•), Part IV, line 11d See Form 990, Part X, line 15
(a) Descri		(b) Book value
(1) SECURITY DEPOSIT		6,883
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15	5)	6,883
Part X Other Liabilities. Complete if the orga		
Form 990, Part X, line 25. (a) Description of liability	(b) Book value	
Federal income taxes FEDERAL PAYROLL TAX PAYABLE	1,521	
STATE PAYROLL TAX PAYABLE	113	

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

×.

1,634

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

Par	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Audited Financial Statements With Revenue per the organization answered 'Yes' to Form 990, Part IV, line 12a.	oer Re	eturn Complete if
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments 2a		
b	Donated services and use of facilities		
с	Recoveries of prior year grants	1	
d	Other (Describe in Part XIII)	1	
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line ${f 1}$		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)	1	
С	Add lines 4a and 4b	4 c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12).......	5	
Par	XII Reconciliation of Expenses per Audited Financial Statements With Expenses If the organization answered 'Yes' to Form 990, Part IV, line 12a.	s per	Return. Complete
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
с	O ther losses		
d	Other (Describe in Part XIII)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)		
С	Add lines 4a and 4b	4 c	
с 5		4c 5	

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

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation
	Schedule D (Form 990) 2014

Schedule	D	(Form	990	201	4

Part XIII Supplemental Information (continued)							
Return Reference	Explanation						

Schedule D (Form 990) 2014

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SCHEDULE G		Supple	ementa	al Infor	mation Regard	ling	OMB No 1545-0047
(Form 990 or 990-EZ) Department of the Treasury nternal Revenue Service	omplete if the organization	ation answe tion entered Attac	g or G red "Yes" to more than \$ th to Form 99	aming Activitie Form 990, Part IV, lines 17, : 15,000 on Form 990-EZ, line 0 or Form 990-EZ.	2 S 18, or 19, or if the 6a.	2014 Open to Public Inspection	
Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Name of the organization Employer ide							entification number
KOREAN AMERICAN FEDERATION OF LA						0	
		ies. Complete to complete th		ganızatıo	n answered "Yes" to		, line 17. Form 990-Ez
 a Mail solicitation b Internet and en c Phone solicitat d In-person solic 2a Did the organization 	ns nail solicita ions itations n have a wr isted in For n highest p	ations ntten or oral agrea m 990, Part VII) aid individuals or	ement wit or entity entities (e f g h any ındıv ın connec	ollowing activities Che Solicitation of nor Solicitation of gov Special fundraisin vidual (including officer tion with professional f rs) pursuant to agreem	r-government grants vernment grants g events rs, directors, trustees fundraising services?	F Yes F N undraiser is
(i) Name and address ındıvıdual or entity (fundraıse		(ii) Activity	fundrai cust cont) Did ser have ody or trol of outions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
1			Yes	No			
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total				•			

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Pa		G (Form 990 or 990-EZ) 2014				Page 2
	t II	Fundraising Events. Com more than \$15,000 of fundr events with gross receipts of	raising event contribu			
			(a) Event #1 HYO FESTIVAL	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))
			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts				
θλθ	2	Less Contributions				
ž	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
60	5	Noncash prizes				
ЦŚ	6	Rent/facility costs				
Expenses	7	Food and beverages				
	8	Entertainment				
Direct	9	Other direct expenses .				
	10	Direct expense summary Add lii	nes 4 through 9 in colum	n (d)		(
	11	Net income summary Subtract li	-			
		\$15,000 on Form 990-EZ, li				1
Revenue	1	Gross revenue	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
		Gross revenue	(a) Bingo		(c) Other gaming	col (a) through col
		Gross revenue Cash prizes	(a) Bingo		(c) Other gaming	col (a) through col
	2		(a) Bingo		(c) Other gaming	col (a) through col
Expenses	2 3	Cash prizes Non-cash prizes	(a) Bingo		(c) Other gaming	col (a) through col
Expenses	2 3 4	Cash prizes Non-cash prizes	(a) Bingo		(c) Other gaming	col (a) through col
Expenses	2 3 4 5	Cash prizes Non-cash prizes Rent/facility costs	(a) Bingo		(c) O ther gaming 	
Expenses	2 3 4 5	Cash prizes Non-cash prizes Rent/facility costs Other direct expenses		bingo/progressive bingo	Yes%	col (a) through col
Direct Expenses Reveiuue	2 3 4 5 6 7	Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor	✓ ✓ ✓ Yes%_ ✓ No es 2 through 5 in column	bingo/progressive bingo	✓ Yes%_ ✓ No ✓ No	col (a) through col
Direct Expenses	2 3 4 5 6 7 8	Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add line Net gaming income summary Sub	✓ Yes% ✓ No es 2 through 5 in column tract line 7 from line 1, or	bingo/progressive bingo	✓ Yes	col (a) through col
Expenses	2 3 4 5 6 7 8 Ent	Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add line Net gaming income summary Sub ter the state(s) in which the organiz	✓ Yes% ✓ No es 2 through 5 in column tract line 7 from line 1, or sation conducts gaming a	bingo/progressive bingo Image: progressive bingo Image: progresi Image: progresive b	✓ Yes	col (a) through col (c))
Direct Expenses	2 3 4 5 6 7 8 Ent Ist	Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add line Net gaming income summary Sub	✓ Yes%_ ✓ No es 2 through 5 in column tract line 7 from line 1, or ration conducts gaming activities in each est gaming activities in each	bingo/progressive bingo	Yes%_ No ▶ ▶ ▶	col (a) through col (c))

Sche	nedule G (Form 990 or 990-EZ) 2014				Page 3		
11	Does the organization conduct gaming a	ctivities with nonm	nembers?		Γ _{Yes} Γ _{No}		
12	Is the organization a grantor, beneficiary	/ or trustee of a tru	ist or a member of a partnership or other er	ntity			
	formed to administer charitable gaming?						
13	Indicate the percentage of gaming activ						
а	The organization's facility			. 13a	%		
b	An outside facility			. 13b	%		
14	Enter the name and address of the perso	n who prepares the	e organization's gaming/special events boo	oks and records			
	Name 🕨						
	Address 🕨						
15a	Does the organization have a contract w						
					Γ _{Yes} Γ _{No}		
b			he organization 🏲 \$	_ and the			
	amount of gaming revenue retained by th	1e third party 🏲 \$ _					
С	If "Yes," enter name and address of the third party						
	Name 🕨						
	Address 🕨						
16	Gaming manager information						
	Name 🕨						
	Gaming manager compensation 🏲 \$						
	Description of services provided 🏲						
	Director/officer	, Employee	☐ Independent contractor				
17	Mandatory distributions						
а	Is the organization required under state	law to make charit	able distributions from the gaming proceed	is to			
	retain the state gaming license?				Γ _{Yes} Γ _{No}		
b	Enter the amount of distributions require	ed under state law o	distributed to other exempt organizations o	rspent			
	in the organization's own exempt activiti						
Pa			xplanations required by Part I, line 2b 7b, as applicable. Also provide any a				
	Return Reference		Explanation				

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SCHEDULE O				OMBN0 1545-0047
(Form 990 or 990-EZ)	Supplementa	2014		
Internal Revenue Service Form 990 or 990-EZ or to			oonses to specific questions on ny additional information.) or 990-EZ.	Open to Public Inspection
_	► Information about	schedule 0 (Form 990) www.irs.gov/fo	or 990-EZ) and its instructions is at rm990.	
Name of the organization KOREAN AMERICAN FEDERATI			Employe	r identification number
			95-384	2560

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990 governing body review Part VI line 11	No review was or will be conducted
Governing documents etc available to public Part VI line 19	No documents are available to the public



See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



	990	Return of Organization Exempt From Incol		2013	
	•	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (excep ► Do not enter Social Security numbers on this form as it may be m			
	ent of the Treasury	 Do not enter Social Security numbers on this form as it may be m Information about Form 990 and its instructions is at www.irs.g 	•	Open to Public Inspection	
	Revenue Service				
	<u> </u>				
 	Check if applicable C Name of organization KOREAN AMERICAN FEDERATION OF L.A. Address change Doing Business As			D Employer identification n	
		Doing Business As	Dec-femile	95-3842560	
	Name change Number and street (or P O box if mail is not delivered to street address) Room/suit			E Telephone number	
5	tial return	981 S WESTERN AVE	100	(323)732-0700	
5	rminated	City or town, state or province, country, and ZIP or foreign postal code		349,707	
-	nended return	Los Angeles, CA 90006 F Name and address of principal officer JAMES AHN		G Gross receipts \$	
_ Арг	plication pending	F Name and address of pnncipal officer JAMES AHN Same as C above	H(a) Is this a group re subordinates?	eturn for 🗌 Yes 🕅 N	
Tav	x-exempt status	501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527			
		KAFLA.ORG	H(b) Are all subordina If "No," attach a H(c) Group exemptio	ates included? Yes N list (see instructions) n number	
			982 M State of leg		
Part					
- <u>-</u>					
	-				
8	FURTHERA	CE OF THE RIGHTS & INTERESTS OF THE KOREAN COMMUNITY	AT LOS ANGELES	5	
Ĕ					
na					
Ver			futo mot opposto		
Activities & Governance		$x \models \Box$ if the organization discontinued its operations or disposed of more than 25% of the approximate body (Red.)(Line 1a)	1	.	
م و	-	ting members of the governing body (Part VI, line 1a)			
s		ependent voting members of the governing body (Part VI, line 1b)	•••••		
ž	5 Total number	of individuals employed in calendar year 2013 (Part V, line 2a)	5		
Cti	6 Total number	of volunteers (estimate if necessary)	6		
<	7a Total unrelate	d business revenue from Part VIII, column (C), line 12		a	
	b Net unrelated	business taxable income from Form 990-T, line 34	71	5	
			Prior Year	Current Year	
	8 Contributions	and grants (Part Vill, line 1h)	155,78		
e		ice revenue (Part VIII, line 2g)	193,92		
Revenue		come (Part VIII, column (A), lines 3, 4, and 7d)	195,92		
Š					
~		e (Rart-VIII;-column (A)-lines 5-6d-8c, 9c, 10c, and 11e)	· <u>-</u> · · ·		
		- add lines 8 through 11 (must)equal Part VIII, column (A), line 12)	349,70	349,70	
		nilar amounts paid (Part IX, column (Å), lines 1-3)			
		to ortfor members (Part IX, column (A), line 4)			
ø	15 Salaries, othe	r compensation, employee benefits (Part IX, column (A), lines 5-10)	39,00	48,83	
Expenses	16a Professional	undraising fees (Part IX, column (A) fline 11e)			
en	b Total fundrais	ng expenses (Part IX, column (D), line 25) 🕨 46,084			
- X		es (Part IX, column (A), lines 11a-11d, 11f-24e)	286,16	51 277,64	
-		s Add lines 13-17 (must equal Part IX, column (A), line 25)	325,16		
		expenses Subtract line 18 from line 12 · · · · · · · · · · · · · · · · · ·			
	1.0 IVENUE IES		24,54		
- 28		F	Beginning of Current Year		
ts or ances		Part X, line 16)	14,08	-+	
ssets or Balances			4 71		
let Assets or and Balances	21 Total liabilities	(Part X, line 26)	4,71	AL 01 4/	
Pur	21 Total liabilities 22 Net assets of	fund balances Subtract line 21 from line 20		21,40	
	21 Total liabilities 22 Net assets of	fund balances Subtract line 21 from line 20			
Part Jnder pe	21 Total liabilities 22 Net assets or t II Signatu enalties of perjury, I declar	fund balances Subtract line 21 from line 20	9,36		
Part Jnder pe	21 Total liabilities 22 Net assets or t II Signatu enalties of perjury, I declar	fund balances Subtract line 21 from line 20 · · · · · · · · · · · · · · · · · ·	9,36		
Part Jnder pe	21 Total liabilities 22 Net assets or t II Signatu enalties of perjury, I declar rrect, and complete Decl	fund balances Subtract line 21 from line 20	9,36	4/14/15	
Part Under po rue, con	21 Total liabilities 22 Net assets of t II Signatu enalties of perjury, I declar rect, and complete Decl	fund balances Subtract line 21 from line 20	9,36	4/14/15 ate	
Part Jnder po rue, corr Sign	21 Total liabilities 22 Net assets on t II Signatu enalties of penury, I declar rrect, and complete Decl JAME: Signatur	fund balances Subtract line 21 from line 20 e Block re that I have examined this return, including accompanying schedules and statements, and to the best of my kration of preparer (other than officer) is based on all information of which preparer has any knowledge AHN Attach of officer	9,36	4/14/15	
Part Jnder per rue, corr Sign	21 Total liabilities 22 Net assets on t II Signatu enalties of perjury, I deck rect, and complete Deck JAME: Signatur JAME:	fund balances Subtract line 21 from line 20 • e Block • • re that I have examined this return, including accompanying schedules and statements, and to the best of my kration of preparer (other than officer) is based on all information of which preparer has any knowledge AHN Attach of officer AHN, CHAIRPERSON	9,36	4/14/15	
Part Jnder per rue, corr Sign	21 Total liabilities 22 Net assets on t II Signatu enalties of penjury, I deck rect, and complete Deck JAME: JAME: Type or p	fund balances Subtract line 21 from line 20 e Block re that I have examined this return, including accompanying schedules and statements, and to the best of my k ration of preparer (other than officer) is based on all information of which preparer has any knowledge AHN of officer AHN, CHAIRPERSON int name and title	9,36 nowledge and belief, it is Da	4/14/15 ate 4/13/2015	
Part Under po rue, con Sign Here	21 Total liabilities 22 Net assets on 21 Signatu enalties of perjury, I declar rect, and complete Decl JAME: Signatur JAME: Type or p	fund balances Subtract line 21 from line 20 Image: Comparison of the subtract line 21 from line 20 e Block re that i have examined this return, including accompanying schedules and statements, and to the best of my kration of preparer (other than officer) is based on all information of which preparer has any knowledge AHN AHN of officer AHN, CHAIRPERSON and title arer's name Date	9,36 inowledge and belief, it is Da Da	4/14/15 ate 4/13/2015 PTIN	
Part ^{Under part rue, corr Sign Here Paid}	21 Total liabilities 22 Net assets of t II Signatu enalties of penjury, I deck rect, and complete Deck JAME: Signatur JAME: Type or p Pont/Type pre YOONHAN	fund balances Subtract line 21 from line 20 Image: Comparison of the set of the se	9,36 inowledge and belief, it is Da Da Check inf self-employed	4/14/15 ate 4/13/2015	
Part Under part Sign Here Paid Prep	21 Total liabilities 22 Net assets on 21 Signatu enalties of perjury, I declar rect, and complete Decl JAME: Signatur JAME: Type or p Pnnt/Type pre YOONHAN Firm's name	fund balances Subtract line 21 from line 20 Image: Comparison of the set of the se	9,36 inowledge and belief, it is Da Da	4/14/15 ate 4/13/2015 PTIN	
Part Under por rue, corn Sign Here Paid Prep	21 Total liabilities 22 Net assets of t II Signatu enalties of penjury, I deck rect, and complete Deck JAME: Signatur JAME: Type or p Pont/Type pre YOONHAN	fund balances Subtract line 21 from line 20 Image: Comparison of the set of the se	9,36 inowledge and belief, it is Da Da Check inf self-employed	4/14/15 ate 4/13/2015 PTIN	
Part Jinder part Sign Here Paid Prep	21 Total liabilities 22 Net assets on 21 Signatu enalties of perjury, I declar rect, and complete Decl JAME: Signatur JAME: Type or p Pnnt/Type pre YOONHAN Firm's name	fund balances Subtract line 21 from line 20 Image: Comparison of the set of the se	9,36 inowledge and belief, it is Da Check if self-employed Firm's EIN Phone no	4/14/15 ale 4/13/2015 PTIN P00950034	
Part Jinder part Sign Here Paid Prep Use	21 Total liabilities 22 Net assets of til Signatu enalties of perjury, I deck rrect, and complete Deck Signatur JAME: Signatur JAME: Type or p Pnnt/Type pre YOONHAN Firm's name Firm's address	fund balances Subtract line 21 from line 20 Image: Comparison of the set of the se	9,36 snowledge and belief, it is Da Da Check ☐ if self-employed Firm's EIN ► Phone no 213-	4/14/15 ale 4/13/2015 PTIN P00950034	

	990 (2013) KOREAN AMERICAN FEDERATION OF L.A. 95-3842560 Page 2
Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission
	TO SUPPORT AND SERVE BETTER FOR THE FURTHERANCE OF THE RIGHTS & INTERESTS OF THE KOREAN
	COMMUNITY AT LOS ANGELES
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 others,
	the total expenses, and revenue, if any, for each program service reported
4a	(Code) (Expenses \$ 33,050 including grants of \$) (Revenue \$)
	SEMINAR AND CONFERENCE EXPENSES FOR PROVIDING USEFUL INFORMATION OF THE MEDICAL EXPENSE,
	EDUCATION, LAW, TAX & ETC.
4b	(Code) (Expenses \$27,695 including grants of \$) (Revenue \$)
	KOREAN CHORUS TO SING MULTI NATIONAL SONGS FOR VARIOUS KOREAN FESTIVAL AS WELL AS REGULAR
	PERFORMANCE
4c	(Code) (Expenses \$56,178 including grants of \$) (Revenue \$)
	VARIOUS KOREAN EVENT FOR CULTURE, ART, CIVIL RECEPTION LIKE 8.15 EVENT, HAN SANG KOREA,
	HERITAGE NIGHT, HYO INVITATION AND ETC.
4d	Other program services (Describe in Schedule O)
	(Expenses \$ 2,948 including grants of \$) (Revenue \$)
4e	Total program service expenses 119,871
EEA	Form 990 (2013)

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	990 (2013) KOREAN AMERICAN FEDERATION OF L.A. 95-38425	60	P	age 3
Ра	rt IV Checklist of Required Schedules			_
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
•	complete Schedule A	1	<u>X</u>	v
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	3		x
4	candidates for public office? If "Yes," complete Schedule C, Part I	- <u> </u>		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			<u>^</u>
J	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
		5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	 -		<u>~</u>
v	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		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			<u></u>
•	the environment, histonc land areas, or histonc structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	⊢•		
•	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	<u>ا</u>		<u> </u>
•	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		Х
10	Did the organization, directly or through a related organization, hold assets in temporanly restricted	_		<u> </u>
	endowments, permanent endowments, or guasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	if the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments - other secunties 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		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more	[
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	<u> </u>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
_	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u>X</u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b		4.00		v
40	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
b	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		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	1	x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	<u> </u>		<u> </u>
	Part IX, column (A), lines 6 and 11e ⁹ If "Yes," complete Schedule G, Part I (see instructions)	17	1	x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	<u> </u>		<u> </u>
	Part VIII, lines 1c and 8a? If "Yes" complete Schedule G, Part II	18	x	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		<u> </u>	<u> </u>
	If "Yes," complete Schedule G, Part III · · · · · · · · · · · · · · · · ·	19	ŀ	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

\ <u> </u>	990 (2013) KOREAN AMERICAN FEDERATION OF L.A. 95-3842	560	P	age 4
Pa	rt IV Checklist of Required Schedules (continued)		r	r
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			1
	government on Part IX, column (A), line 1? If "Yes," complete Scheudle I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or 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		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			ĺ
	organization's current and former officers, directors, trustees, key employees, and highest compensated	1		
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
С		24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person dunng the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a phor			
	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		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If so, complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,		1	<u> </u>
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)		1	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	1	x
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	200		<u> </u>
b		28b		X
-	Schedule L, Part IV	200		<u> </u>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	00-		v
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I • • • • • • • • • • • • • • • • • •	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	i		
	complete Schedule N, Part II · · · · · · · · · · · · · · · · · ·	32		Х
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		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,		<u> </u>	
	or IV, and Part V, line 1 · · · · · · · · · · · · · · · · · ·	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		<u> </u>	X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	000	<u> </u>	+
b		951	1	
• -	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		1	1
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,		i i	
	Part VI · · · · · · · · · · · · · · · · · ·	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	
<u> </u>			_	2012

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	990 (2013) KOREAN AMERICAN FEDERATION OF L.A. 95-38425 rt V Statements Regarding Other IRS Filings and Tax Compliance	60	F	^p age 5
	Check if Schedule O contains a response or note to any line in this Part V			
		· · ·	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable · · · · · · · · · · · · · · · 1a		165	
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			Í
c	Did the organization comply with backup withholding rules for reportable payments to vendors and			
-	reportable gaming (gambling) winnings to pnze winners?	1c	х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	1
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			<u> </u>
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		x
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			<u> </u>
	over, a financial account in a foreign country (such as a bank account, secunties account, or other financial			
		4a		x
b	If "Yes," enter the name of the foreign country			
	See instructions for filing 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		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as chantable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			<u> </u>
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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		x
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		Х
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		Х
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 sponsonng			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
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			
а	Gross income from members or shareholders			
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 filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O			
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		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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Form	990 (2013) KOREAN AMERICAN FEDERATION OF L.A. 95-38425		F	age 6
Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "	No"		
	rèsponse to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions			
	Check if Schedule O contains a response or note to any line in the Part VI Check if Schedule O contains a response or note to any line in the Part VI	•••		. 🛛
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 47			
	If there are matenal differences in voting rights among members of the governing body, or			1
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11 a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	ļ	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	-		
	describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	ŀ		
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		ł	
	with a taxable entity during the year?	16 a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
<u> </u>	organization's exempt status with respect to such arrangements?	16b		
	tion C. Disclosure	<u>_</u>		····
17 40	List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an ergonization to make its Forma 1023 (or 1024 if applicable), 000, and 000 T (Section 501(a)(2)) apply			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			
	available for public inspection Indicate how you made these available Check all that apply.			
40	Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and			
20	financial statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization			
	JAMES AHN (323)732-0700, 981 S WESTERN AVE, Los Angeles, CA 90006			

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Form 990 (20	3) KOREAN AMERICAN FEDERATION OF L.A.	95-3842560	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Co Independent Contractors	mpensated Employe	es, and
	Check if Schedule O contains a response or note to any line in this Part VII		•••□
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
1a Complete organization's	this table for all persons required to be listed. Report compensation for the calendar year ending with or wit tax year	thin the	
· · · ·			

• 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 nor any related organization compensated any current officer, director, or trustee

(A)	(A) (B) (C)			(D)	(E)	(F)					
Name and Title	Average hours per			Posr				Reportable compensation	Reportable compensation from	Estimated amount of other	
	week (list any	1				an one		from	related		
	hours for related			•		both an		the organization	organizations (W-2/1099-MISC)	compensation from the	
	organizations		officer and a dir		_		T _	(W-2/1099-MISC)	(11-2) (000-41100)	organization	
	below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			and related organizations	
(1) MICHAEL K_SUH											
EXECUTIVE VICE PRESIDENT		X						0	0	0	
(2) GI DUK KIM											
VICE CHIRMAN		X						0	0	0	
(3) KI HYONG KIM											
VICE CHAIRMAN	1	X						0	0	0	
(4) RICHARD LEE											
VICE CHAIRMAN		X						0	0	0	
(5) JOHN KIM											
VICE PRESIDENT		X						0	0	0	
(6) JULIANA PARK											
VICE PRESIDENT		X						0	0	0	
(7) SUNNY PARK											
VICE PRESIDENT		X						0	0	0	
(8) DAVID LIM											
VICE PRESIDENT		X						0	0	0	
(9) PAUL JUN											
VICE PRESIDENT		<u>X</u>						0	0	0	
(10)SUSAN_KANG	.										
DIRECTOR		X		L.				0	0	0	
(11)JUNG_OK_LEE											
DIRECTOR		_X_						0	<u> </u>	0	
(12)MICHAEL KO											
DIRECTOR		X					<u> </u>	0	0	0	
(13)DONG SIL KIM											
DIRECTOR		X						0	0	0	
(14)SUNNY KIM								_	_		
DIRECTOR		X						0	0	0 Form 890 (2013	

Form 990 (20	13) KOREAN AMERICAN FEDERATION OF L.A.	95-3842560	Page 7							
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Comp Independent Contractors	ensated Employe	es, and							
	Check If Schedule O contains a response or note to any line in this Part VII		•••							
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees									
•	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									
• Listali	of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of a	mount of								

 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount 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 nor any related organization compensated any current officer, director, or trustee

(A)	(B)	(C)				(D)	(E)	(F)		
Name and Title	Average hours per	(do no	t che	Posr ck mo		an one		Reportable compensation	Reportable compensation from	Estimated amount of
	week (list any hours for	•				both an		from the	related organizations	other compensation
	related					rustee)		organization	(W-2/1099-MISC)	from the
	organizations below dotted		_			g I	5	(W-2/1099-MISC)		organization and related
·	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) SUNG WOONG KIM										
DIRECTOR		X						о	о	о
(2) EUN AH KIM										
DIRECTOR		Х						0	0	0
(3) HYONG HO KIM	L									
DIRECTOR		Х						0	0	0
(4) SANG_KUM_PARK DIRECTOR		x						0	0	0
(5) JUN SUK SEO										
DIRECTOR	F	х						o	o	o
(6) STEVEN SEOL										
DIRECTOR		Х						0	0	0
(7) DANNY SHON										
DIRECTOR		Х						0	0	0
(8) KUM SOON SHIN										
DIRECTOR		Х			_			0	0	0
(9) CHUNG HO SHIN										
DIRECTOR		X						0	0	00
(10)STEVE SHIN	 									
DIRECTOR		Х					<u> </u>	0	0	0
(11)SUSAN YANG										_
DIRECTOR	_	<u>X</u>						0	0	0
(12)IK CHEONG EUM									-	_
DIRECTOR	+	Х						0	0	0
(13)YEON YONG KI DIRECTOR		х						0	0_	0
(14)SCOTTIE OAH DIRECTOR		x						o	0	0
	+	<u> </u>	L		<u> </u>			·	·	

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Form 990 (20	13) KOREAN AMERICAN FEDERATION OF L.A. Compensation of Officers, Directors, Trustees, Key Employees, Highest Co	95-3842560 mpensated Employe	Page 7
, <u></u>	Independent Contractors		,
	Check if Schedule O contains a response or note to any line in this Part VII		🗌
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
1a Complete	this table for all persons required to be listed Report compensation for the calendar year ending with or wi	thin the	<u> </u>

• 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 nor any related organization compensated any current officer, director, or trustee

(A)	(B)			(0)			(D)	(E)	(F)
Name and Title	Average hours per week (list any hours for related	box, u	inless	pers	ore thi on is l	an one both an rustee)		Reportable compensation from the organization	Reportable compensation from retated organizations (W-2/1099-MISC)	Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organization and related organizations
(1) BYUNG YUL YUN DIRECTOR		x						0	0	0
(2) SUNG HOON YOON								ľ	v	v
DIRECTOR		X						o	o	о
(3) LISA LEE										-
DIRECTOR		Х					Ì	0	0	0
(4) SUNG JIN LEE DIRECTOR		x						0	0	0
(5) YOUNG SONG LEE										
DIRECTOR		Х						0	0	0
(6) YI IN BOK DIRECTOR		x						0	0	0
(7) JOHN LEE DIRECTOR		x						0	0	0
(8) TAE CHUN LEE DIRECTOR		x						0	0	0
								0	<u>0</u>	0
DIRECTOR		x						0	o	o
(10)GAB JEA CHO DIRECTOR		x						0	0	0
(11) (00) 1010 100								U	<u>_</u>	
DIRECTOR		х						0	0	0
(12)DAVID_CHOI DIRECTOR		x						o	0	0
(13)HENRY CHOI DIRECTOR		x						0	0	0
(14)JEAN_CHOI DIRECTOR		x						0	0	0

					_	_		ensa					_
	(A) Name and title	(B) Average hours per week (list any	· ·	Inless	s pers	tion ore th on is	an one both an		(D) Reportable compensation from	(E) Reportable compensation from related organizations	an	(F) stimated nount of other	
		hours for related organizations below dotted line)	Individual trustee or director	r	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	f org an	nperisatio from the ganization nd related janization	anızatıon
5)JULIA_C	HOI R		x						(0			
	OOK CHOI		X						(0			
7)DAVID_H DIRECTO	ONG R		X							0 0			
8)KWANG I DIRECTO	L HONG R		x							oo			
PRESIDE	BAE	30.00			х					00			
0)													
<u>)</u>													
<u>2</u>)													
3)													
4)													
5)													_
d Total (rom continuation sheets to Part VII, Se add lines 1b and 1c)	ction A .	•••	•••	 	•••	•••		1	0 0			
	umber of individuals (including but not limitable compensation from the organization		ed abov	ve) v	vho	rece	ived m	ore	than \$100,000 of	00		T · · · · · ·	-
	e organization list any former officer, direc											Yes	
4 For an	yee on line 1a? If "Yes," complete Schedul y individual listed on line 1a, is the sum of zation and related organizations greater th	reportable comp	pensati	on a	nd c	ther	comp	ens		•••••	3		
individ				•••	••	••	• • •	•••		•••••	4		ĺ
for ser	vices rendered to the organization? If "Yes Independent Contractors	•		-			-			•••••	5		Ĺ
1 Compl compe	ete this table for your five highest compenensation from the organization Report com												-
year	(A) Name and business addr	ess							(B Description o			(C) pensation	- 0
								<u> </u>					-
													-
													_

received more than \$100,000 of compensation from the organization

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	0 (20		MERICAN FEDI	ERATION OF L	.A.		95-38425	60 Page 9
irt \	/	Statement of Reven						F
<u>.</u>	•	Check if Schedule O contair	is a response or no	ote to any line in this	(A) (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
2	1a	Federated campaigns	· · · · · 1a					512-514
and Other Similar Amounts	b	Membership dues		52,100				
	c	Fundraising events		184,250				
	d	Related organizations		164,250				
	e	Government grants (contributi						
	f	All other contributions, gifts, gi		-				
	•	and similar amounts not include		110 059				
	-	Noncash contributions include	ł	113,357				
	g b	Total. Add lines 1a-1f			240 707			
_		Total. Add lines fa-fi			349,707			
	2-			Business Code				
	2a							
	b							
ervic	C L							
	d							
Program Service Revenue	e						<u></u>	· · · ·
		All other program service rever						
_		Total. Add lines 2a-2f · · ·						
	3	Investment income (including d	lividends, interest,					
		and other similar amounts)						
		Income from investment of tax-						
	5	Royalties		1				
	_		(i) Real	(II) Personal				
		Gross rents · · · · · ·						
		Less rental expenses · · · ·	-					
		Rental income or (loss) · · ·						
	d	Net rental income or (loss) ·		· · · · · · · •				
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(II) Other				
	b	Less cost or other basis and sales expenses						
	c	Gain or (loss)						
		Net gain or (loss)		· · · · · · · · •				
		Gross income from fundraising						
		events (not including \$	184,250					
		of contributions reported on line						
		See Part IV, line 18						
	b	Less direct expenses			1 1			
		Net income or (loss) from fundi			1		-	
		Gross income from gaming act	•	[
		See Part IV, line 19						
	ь	Less direct expenses			1			
		Net income or (loss) from gami				-		
		· · · -	ing dollmico					
		Gross sales of inventory, less returns and allowances • • •						
		Less cost of goods sold •••		L				
	C	Net income or (loss) from sales	s of inventory • •	<u></u>				
		Miscellaneous Revenue		Business Code				
	11a	<u> </u>		L				l
	b	<u></u>						ļ
	C			L	1			
		All other revenue				_		<u> </u>
		Total. Add lines 11a-11d ·			ļ			
	12	Total revenue. See instruction	s • • • • • • • •	•	349,707	0	0	

Form 990 (2013)

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KOREAN AMERICAN FEDERATION OF L.A. **Statement of Functional Expenses**

95-3842560

Page	1	0
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	Check if Schedule O contains a response or note to an	y line in this Part IX		•••••	[]
Don	ot include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
<u>8b, 9</u>	b, and 10b of Part VIII.		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				
	the United States See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	39,000	· · · · · · · · · · · · · · · · · · ·	39,000	
8	Pension plan accruals and contributions (include				
~	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits · · · · · · · · · · · · · · · · · · ·				
10	-	9,836		9,836	
11	Fees for services (non-employees) Management				
a ⊾					
b			· · ·	0.000	
с д		2,800		2,800	
d	Professional fundraising services See Part IV, line 17		·		
e f	Investment management fees				
	Other (If line 11g amount exceeds 10% of line 25, column				
g	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	6,971	2,300	2 450	1,221
13	Office expenses	14,811	2,300	<u>3,450</u> 14,811	1,221
14	Information technology	2,156		2,156	· · · · · · · · · · · · · · · · · · ·
15	Royalties · · · · · · · · · · · · · · · · · · ·	2,156		2,156	
16					
17		22,340	15,488	6,852	
18	Payments of travel or entertainment expenses	22,340	13,400	0,852	
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	19,236		918	18,318
20					10,510
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,062		1,062	
23	Insurance	3,421		3,421	
24	Other expenses Itemize expenses not covered	<i>t</i>			
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
а	EVENT	101,435	101,435		
b	ELECTION	95,307	h	68,762	26,545
с					
d					· · · · · · · · · · · · · · · · · · ·
е	All other expenses	8,108	648	7,460	
25	Total functional expenses. Add lines 1 through 24e	326,483	119,871	160,528	46,084
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaigri and				
	fundraising solicitation Check here				
	following SOP 98-2 (ASC 958-720)				

Part X

Form 990 (2013)

•		Check if Schedule O contains a response or note to any line in this Part X	• • • • • • • • • • • •		[]
	•		(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	2,008	1	12,919
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	· · · · · · · · · · · · · · · · · · ·	3	
	4	Accounts receivable, net		4	<u> </u>
	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	
	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	
	7	Notes and loans receivable, net		7	
ets	8	Inventones for sale or use		8	
Assets	9	Prepaid expenses and deferred charges		9	<u> </u>
-	10a	Land, buildings, and equipment cost or			
		other basis Complete Part VI of Schedule D 10a 35,350			
	ь	Less accumulated depreciation · · · · · · · 10b 32,662	5,192	10c	2 699
	11	Investments - publicly traded securities	5,192	11	2,688
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
	14			14	
	15	Other assets See Part IV, line 11	6 000	15	6 002
	16	Total assets. Add lines 1 through 15 (must equal line 34)	6,883	16	6,883
	17	Accounts payable and accrued expenses	14,083	17	22,490
	18	Grants payable		18	
	19			10	
	20	Tax-exempt bond liabilities		20	
	20	Escrow or custodial account liability Complete Part IV of Schedule D		20	
ŝ	22	Loans and other payables to current and former officers, directors,		<u> </u>	······
Liabilities	~~	-			
pil		trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
Lia	23			22	
	23 24			23	
	24 25	Unsecured notes and loans payable to unrelated third parties		24	
	25	parties, and other liabilities not included on lines 17-24) Complete Part X			
		of Schedule D	4 710	25	1 001
	26	Total liabilities. Add lines 17 through 25	4,719	1 1	1,021
	. 20	Organizations that follow SFAS 117 (ASC 958), check here	4,719	26	1,021
ş		complete lines 27 through 29, and lines 33 and 34.			
лсе	27			27	
ala	27 28	Temporarily restricted net assets		27	
8	20 29	Permanently restricted net assets		20	
Ű.	23	Organizations that do not follow SFAS 117 (ASC 958), check here \blacktriangleright 🕅 and		23	
ъF					
ន	20	complete lines 30 through 34.		2	
336	30 24	Capital stock or trust principal, or current funds		30 31	
Net Assets of Fund Balances	31	Paid-in or capital surplus, or land, building, or equipment fund			
Ň	32	Retained earnings, endowment, accumulated income, or other funds	9,364	32	21,469
	33	Total net assets or fund balances	9,364	33	21,469
	34	Total liabilities and net assets/fund balances	14,083	34	22,490

95-3842560

Page 11

Form 990 (2013)

Form	990 (2013) KOREAN AMERICAN FEDERATION OF L.A. 95	5-384	2560	Pa	age 12
Pai	t XI Reconciliation of Net Assets				<u> </u>
	Check If Schedule O contains a response or note to any line in this Part XI				·□
1	Total revenue (must equal Part VIII, column (A), line 12)	1		349,7	707
2	Total expenses (must equal Part IX, column (A), line 25)	2		326,4	183
3	Revenue less expenses Subtract line 2 from line 1	3		23,2	224
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		9,3	364
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7		-	
8	Pnor period adjustments	8		(11,1	19)
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
<u></u>	33, column (B))	10		21,4	169
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		
				Yes	No
1	Accounting method used to prepare the Form 990 🛛 Cash 🗌 Accrual 🗌 Other				
	If the organization changed its method of accounting from a pnor year or checked "Other," explain in				
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		· · 2a	X	
	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				
	Separate basis 🛛 Consolidated basis 🗌 Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		· · 2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				1
	separate basis, consolidated basis, or both.				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		•• 2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		•• 3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
EEA			Form	n 990 (2013)

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(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Depa	rtment	of the Treasury		Attach to F								o Public	;
Interr	al Rev	enue Service	Information	about Schedule A (Form 990	or 990-EZ) and	d its instruction	ons is at www	wirs gov/for	m990.		Insp	ection	
Name	e of the	organization							Employer	identificatio	n number		
KOR	EAN		EDERATION OF L							842560			
Pa	rt I	Reason fo	or Public Charity	Status (All organiz	zations m	ust com	plete thi	s part)\$	See instr	uctions.			
The	orgai	nization is not a pr	nvate foundation becau	ise it is (For lines 1 thro	ugh 11, che	ck only one	ebox)						
1		A church, conver	ntion of churches, or as	ssociation of churches d	escribed in a	section 17	0(b)(1)(A)	(i).					
2		A school describ	ed in section 170(b)(1)(A)(ii). (Attach Schedul	eE)								
3		A hospital or a co	poperative hospital ser	vice organization descrit	oed in section	on 170(b)(1)(A)(iii).						
4		A medical resear	ch organization operat	ed in conjunction with a	hospital des	scnbed in s	section 17	0(b)(1)(A)	(iii). Enter t	he			
		hospital's name,	city, and state										
5		An organization of	operated for the benefit	t of a college or universit	y owned or	operated b	y a goverr	nmental un	It describe	d in			
		-	I)(A)(iv). (Complete Pa	-		•							
6	Π			governmental unit desc	nbed in sec	tion 170(b)(1)(A)(v).						
7	\boxtimes		-	a substantial part of its s		•		or from the	e general p	ublic			
	_	-	tion 170(b)(1)(A)(vi). (•	••	0			5 1				
8	Π			170(b)(1)(A)(vi). (Com	olete Part II)							
9				(1) more than 33 1/3% (Inbutions.	membersh	ip fees, an	d aross			
	—	•	•	empt functions - subject					•	•			
				and unrelated business									
				30, 1975 See section		•		,		-			
10	Π		-	d exclusively to test for p		•	-	(4).					
11	П	0	•	d exclusively for the ben	•		• •	• •	v out the				
	-	•		orted organizations desci	•				•	ction			
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		other than found:	ation managers and of	her than one or more pu	blicly suppo								
			=	her than one or more pu	blicly suppo								
f		or section 509(a)	(2)		-	orted organ	izations de	escribed in	section 50				
f		or section 509(a) If the organization	n received a written de	termination from the IRS	S that it is a	orted organ Type I, Typ	izations de pe II, or Typ	escribed in De III suppo	section 50				. 🗆
		or section 509(a) If the organization organization, che	n received a written de eck this box	termination from the IRS	S that it is a	nted organ Type I, Typ	izations de pe II, or Typ	escribed in De III suppo	section 50				· 🗆
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For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2013

OMB No 1545-0047

2013

Open to Public

EEA

Sched Pa	t II Support Schedule for Org		escribed in Se	ctions 170(b)(
	(Complete only if you chec				• •		under
500	Part III. If the organization tion A. Public Support	ans to quality t	inder the tests	listed below, p	lease complete	e Part III)	
		() 0000		() 00(4	(1) 0040	() 0010	
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contnbutions, and membership fees received (Do not						
	include any "unusual grants ")	492,972	147,762	439,018	356,773	349,707	1,786,232
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	492,972	147,762	439,018	356,773	349,707	1,786,232
5	The portion of total contributions by			,			
	each person (other than a						
	governmental unit or publicity						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						1,786,232
Sec	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4 · · · · · · · · ·	492,972	147,762	439,018	356,773	349,707	1,786,232
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) • • • • • • • • • • • • •						
11	Total support. Add lines 7 through 10						1,786,232
12	Gross receipts from related activities, etc (s	see instructions)				12	
13	First five years. If the Form 990 is for the o organization, check this box and stop here						▶∏
Sec	tion C. Computation of Public Su						<u>······</u>
14	Public support percentage for 2013 (line 6, c))		14 10	0.00 %
15	Public support percentage from 2012 Sched						0.00 %
16a	33 1/3% support test - 2013. If the organization						
	box and stop here. The organization qualified						🕨 🔀
ь	33 1/3% support test - 2012. If the organization				33 1/3% or more,		_
	check this box and stop here. The organization	ition qualifies as a p	ublicly supported o	organization			· · · 🕨 🔲
17a	10%-facts-and-circumstances test - 2013	. If the organization	did not check a bo	x on line 13, 16a, o	r 16b, and line 14	IS	
	10% or more, and if the organization meets	the "facts-and-circu	imstances" test, ch	eck this box and st	op here. Explain i	n	
	Part IV how the organization meets the "fact		-				
	organization · · · · · · · · · · · · · · · · · · ·						· · · 🕨 🔲
b	10%-facts-and-circumstances test - 2012	-				e	
	15 is 10% or more, and if the organization m				•		
	Explain in Part IV how the organization mee				-	•	_
	FF						· · · 🕨 🔲
18	Private foundation. If the organization did						. –
			• • • • • <u>• • • • •</u>	• • • • • • • • •	••••••		
EEA						Schedule A (Form	990 or 990-EZ) 2013

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	dule A (Form 990 or 990-EZ) 2013 KORE	AN AMERICAN Janizations D	FEDERATION escribed in S	of L.A. ection 509(a)((2)	95-38425	60Page 3
<u> </u>	(Complete only if you chec			Ų.			er Part II
	If the organization fails to q	ualify under th	e tests listed I	pelow, please o	complete Part II)	
	ction A. Public Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees						
2	received (Do not include any "unusual grants ") Gross receipts from admissions, merchandise				+		
-	sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus under sec 513 \cdots \cdot						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge · · · · · · · ·						
6	Total. Add lines 1 through 5 • • • • • • •						
7 a	Amounts included on lines 1, 2, and 3 received from disqualified persons · · · ·						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b • • • • • • • • • •						
8	Public support (Subtract line 7c from line 6)						
Se	ction B. Total Support		· · · · · · · · · · · · · · · · · · ·				
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6 • • • • • • • • • • •						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b · · · · · · · · · · ·						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on ••••						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12) • • • • • • • • • • • • • • • • • •						
14	First five years. If the Form 990 is for the org organization, check this box and stop here				s a section 501(c)(3		· · · · · · ► 🔲
	ction C. Computation of Public Su	• •				46	
15 16	Public support percentage for 2013 (line 8, co Public support percentage from 2012 Schedu			• ·	 	15	% %
	ction D. Computation of Investme						
17	Investment income percentage for 2013 (line			olumn (f))		17	%
18	Investment income percentage from 2012 Sc					18	%
19a	33 1/3% support tests - 2013. If the organization of the test of tes						· · · · · • 🛛
b	33 1/3% support tests - 2012. If the organization line 18 is not more than 33 1/3%, check this b						► 🔲
20	Private foundation. If the organization did no	ot check a box on I	ine 14, 19a, or 19	b, check this box a	ind see instructions		🕨 🔲

SCF	IEDULE D	Supplemental Financial Statements		OMB No 1545-0047
•	m 990)	 Complete if the organization answered "Yes," to Form 990, 		2013
•	•••	Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.		2015
Denad	ment of the Treasury	Attach to Form 990.		Open to Public
•	Revenue Service	Information about Schedule D (Form 990) and its instructions is at www.irs.gov/fo	rm990.	Inspection
	of the organization		Employer identif	
		CAN FEDERATION OF L.A.	95-384	2560
Pa		tions Maintaining Donor Advised Funds or Other Similar Funds or Account if the organization answered "Yes" to Form 990, Part IV, line 6	S.	
	Complete		(b) Cueda and	
1	Total number at en	(a) Donor advised funds	(b) Funds and	
2		tions to (during year)		
3		rom (dunng year)		
4		tend of year · · · · · · · · ·		
5	Did the organizatio	n inform all donors and donor advisors in writing that the assets held in donor advised		
	funds are the organ	nization's property, subject to the organization's exclusive legal control?		•••• 🗌 Yes 🗌 No
6	Did the organizatio	n inform all grantees, donors, and donor advisors in wnting that grant funds can be used		
	-	purposes and not for the benefit of the donor or donor advisor, or for any other purpose		
		ssible private benefit?		· · · L Yes L No
Pa		vation Easements e if the organization answered "Yes" to Form 990, Part IV, line 7.		
1		servation easements held by the organization (check all that apply)		
•	_	f land for public use (e g , recreation or education)	mportant land	area
	Protection of n		•	
	Preservation o			
2	Complete lines 2a	through 2d if the organization held a qualified conservation contribution in the form of a conservation	rvation	
	easement on the la	ast day of the tax year	Held at	the End of the Tax Year
а	Total number of co	nservation easements	2a	
b	Total acreage restr	icted by conservation easements	2b	
С	Number of conserv	vation easements on a certified histonc structure included in (a)	2c	
d		vation easements included in (c) acquired after 8/17/06, and not on a		
		sted in the National Register	2d	
3		vation easements modified, transferred, released, extinguished, or terminated by the organizat	tion during the	
	tax year	where property subject to conservation easement is located		
4 5		tion have a written policy regarding the penodic monitoring, inspection, handling of		
Ŭ	-	procement of the conservation easements it holds?		Yes No
6		hours devoted to monitoring, inspecting, and enforcing conservation easements during the ye		
-	•	,		
7	Amount of expense	 es incurred in monitoring, inspecting, and enforcing conservation easements dunng the year		
	► \$			
8	Does each conser	vation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)		
	(i) and section 170	(h)(4)(B)(ii)?		🗌 Yes 🗌 No
9	•	be how the organization reports conservation easements in its revenue and expense statemer	-	
		I include, if applicable, the text of the footnote to the organization's financial statements that de	escribes the	
		ounting for conservation easements zations Maintaining Collections of Art, Historical Treasures, or Othe	r Similar A	ccote
Га		te if the organization answered "Yes" to Form 990, Part IV, line 8.	n Sinnar A	33513.
- 1a		elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and b	alance sheet	
14	-	ical treasures, or other similar assets held for public exhibition, education, or research in furthe		
		vide, in Part XIII, the text of the footnote to its financial statements that describes these items		
b		elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balar	nce sheet	
-	-	ical treasures, or other similar assets held for public exhibition, education, or research in furthe		
		vide the following amounts relating to these items		
	(i) Revenues inclu	uded in Form 990, Part VIII, line 1		;
		d in Form 990, Part X • • • • • • • • • • • • • • • • • •		
2		received or held works of art, histoncal treasures, or other similar assets for financial gain, pro		
		required to be reported under SFAS 116 (ASC 958) relating to these items		
а		1 in Form 990, Part VIII, line 1 · · · · · · · · · · · · · · · · · ·		
b		Form 990, Part X	· · · · ▶ \$;
For F	aperwork Reducti	on Act Notice, see the Instructions for Form 990.		Schedule D (Form 990) 2013

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Schedi	ule D (Form 990) 2013 KOREAN AMERICAN						95-384			Page 2
Par	t III Organizations Maintaining C	ollections of A	rt, Histo	rical Tr	easures, d	or Oth	er Similar As	sets (C	ontin	ued)
3	Using the organization's acquisition, accession, a	nd other records, ch	eck any of	the follow	ing that are a	significa	ant use of its		-	
	coflection items (check all that apply)									
а	Public exhibition	d 🗌 Loai	n or exchar	nge progra	ms					
b	Scholarly research	e 🗌 Othe								
С	Preservation for future generations								_	
4	Provide a description of the organization's collect	ions and explain how	v they furth	er the ora	anızatıon's ex	empt pu	iroose in Part			
	XIII	•				• •	P			
5	During the year, did the organization solicit or rec	eive donations of an	t. historical	treasures.	or other simi	lar				
•	assets to be sold to raise funds rather than to be							П	Yes	
Pa	t IV Escrow and Custodial Arrang					<u> </u>				
	Complete if the organization an		Form 9	90. Part	IV. line 9.	or rep	orted an amou	unt on F	orm	
	990, Part X, line 21.			,						
1a	Is the organization an agent, trustee, custodian o	r other intermediary	for contribu	itions or o	ther assets n	ot				<u> </u>
14		· · · · · · · · · · · · · ·						п	Yes	
b	If "Yes," explain the arrangement in Part XIII and								100	
5		complete the following	ing table				Δι	nount		
	Beginning balance					10		noun		
ر م										
a	J ,					1e				<u> </u>
e	Distributions during the year · · · · · · · · · · · · · · · · · · ·									
T	-					· · · · · · · · · · · · · · · · · · ·			Yes	□ No
2a	Did the organization include an amount on Form							_		_
	If "Yes," explain the arrangement in Part XIII Che	eck here if the explan	hation has	been provi	ded in Part X	111		• • • •	<u> </u>	<u>· </u>
Pa	<u>t</u> V Endowment Funds.				N/ line 10					
	Complete if the organization an									
		(a) Current year	(b) Pro	or year	(c) Two years	back	(d) Three years back	(e) Fo	ur year	s back
1a	Beginning of year balance									
b	Contributions		ļ							
C	Net investment earnings, gains, and									
	losses · · · · · · · · · · · · · · · · · ·									
d	Grants or scholarships									
е	Other expenditures for facilities and									
	programs									
f	Administrative expenses · · · · · · · ·									
g	End of year balance									
2	Provide the estimated percentage of the current	year end balance (lir	ne 1g, colu	mn (a)) he	ld as [.]					
а	Board designated or quasi-endowment	%								
b	Permanent endowment %									
c	Temporanly restricted endowment	%								
	The percentages in lines 2a, 2b, and 2c should e	qual 100%								
3a	Are there endowment funds not in the possessio	n of the organization	that are h	eld and ad	ministered for	r the				
	organization by								Yes	s No
	(i) unrelated organizations							. 3a(i)	
	(ii) related organizations							. 3a(i	i)	
b	If "Yes" to 3a(ii), are the related organizations list	ed as required on S	chedule R?					. 3t	-	
4	Describe in Part XIII the intended uses of the org							L		
Pa	rt VI Land, Buildings, and Equipm									
	Complete if the organization an		Form 9	90. Part	IV. line 11	a. See	e Form 990, P	art X. lir	ie 10).
	Description of property	(a) Cost or oth			r other basis		Accumulated		ook valu	
	Description of property	(u) cost of our		• •	other)		lepreciation	(-, -		20
 1a	Land			Ì						
b	Buildings									
-	Leasehold improvements									
ט ה	•				25 250		32 662			600
d	Equipment		÷		35,350		32,662			,688
e Total	Other		column (P	l	1)		b			600
Tota			column (B	, inte 10(0	<u></u>		· · · · · · · ·	bedule D /E		<u>,688</u>

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Schedule D (Form	990) 2013 KOREAN AMERICAN Investments - Other Securities	V FEDERATION OF L.A.	95-3842560	Page 3
Part VII	Complete if the organization answere	d "Yes" to Form 990, Par	t IV, line 11b. See Form 990, Part X, I	ine 12.
•	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
(1) Financial d	envatives · · · · · · · · · · · · · · · · · · ·		······································	
(2) Closely-he	Id equity interests			
(3) Other				
_(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	must equal Form 990, Part X, col (B) line 12)		· · · · · · · · · · · · · · · · · · ·	
Part VIII	Investments - Program Related. Complete if the organization answere	d "Yes" to Form 990. Par	t IV line 11c See Form 990 Part X I	ine 13
	(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
(1)				
(2)				
(3)			····	
_(4)			· · · · · · · · · · · · · · · · · · ·	
	,			
(6)				
(7)				
_(8)	······································		····	
(9)				
	must equal Form 990, Part X, col (B) line 13)	 		
Part IX	Other Assets.			
<u> </u>	Complete if the organization answere			
(4)		escription	(b) B	ook value
	ITY DEPOSIT			6,883
(2)				
(3)				
<u>(4)</u>		•••		
(5)				
(6)				
<u>(7)</u>				
(8)	······			
(9) Tatal (Colum	n (b) must aqual Form 000, Port X, col. (P) inc. 15	·····	·····	
Part X	n (b) must equal Form 990, Part X, col (B) line 15 Other Liabilities.	,		6,883
	Complete if the organization answere	d "Yes" to Form 990 Par	t IV/ line 11e or 11f See Form 990. P	art X
	line 25.			art A,
 1.		(b) Pook voluo	1	
	(a) Description of hability ncome taxes	(b) Book value	-	
		1 021	-	
	AL PAYROLL TAX PAYABLE	1,021	-	
(3)			-1	
<u>(4)</u>	<u></u>		-1	
<u>(5)</u>				
<u>(6)</u>				
<u>(7)</u>			-1	
(8)			-1	
(9)				
	must equal Form 990, Part X, col (B) line 25)	1,021		
-	uncertain tax positions In Part XIII, provide the tex		-	r-
organization's	liability for uncertain tax positions under FIN 48 (AS	SC 740) Check here if the text o	a the roothote has been provided in Part XIII	•••

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Sched	ule D (Form 990) 2013 KOREAN AMERICAN FEDERATION OF L.A.	95-3842560	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Return.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a		
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of pnor year grants		
d	Other (Describe in Part XIII) • • • • • • • • • • • • • • • • •		
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1	. 3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · · 4a		
b	Other (Descnbe in Part XIII)		
с	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	. 5	
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses	s per Return.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	. 1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Pnor year adjustments		
С	Other losses		
d	Other (Describe in Part XIII)		
е	Add lines 2a through 2d	. 2e	
3	Subtract line 2e from line 1	. 3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)		
с	Add lines 4a and 4b	. 4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	. 5	
Pa	rt XIII Supplemental Information	· · · -	

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

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SCHEDULE G	Supplemer	ntal Informatio	on Regar	ding Fun	draising or Gam	ning Act	ivities	OMB No 1545-0047
(Form 990 or 990-EZ)	Complete	if the organization	answered "Ye	es" to Form 9	90, Part IV, lines 17, 18	, or 19, or i	f the	2013
Department of the Treasury					Form 990-EZ, line 6a. 990-EZ.		"	Open to Public
Internal Revenue Service Name of the organization	Information	about Schedule G	(Form 990 or	· 990-EZ) and	its instructions is at w	ww.irs.gov		Inspection entification number
KOREAN AMERICAN F	EDERATION (OF L.A.					95-38	42560
Eundraisi	ng Activities	. Complete if I	the organ	ization an	swered "Yes" to	Form 99	0, Part IV	, line 17.
Part I Form 990-E	Z filers are no	t required to cor	mplete this	part.				
1 Indicate whether the	organization rais	ed funds through a			ties. Check all that ap			
a Mail solicitations					of non-government gra	ants		
	b Internet and email solicitations f I Solicitation of government grants c I Phone solicitations g I Special fundraising events							
d In-person solicitation			9 🗆	Special lunc	iraising events			
2a Did the organization		oral agreement w	ith any indivi	Idual (Includi	ng officers, directors, t	trustees		
÷		•	-	•	sional fundraising ser		י 🗋	les 🗌 No
b If "Yes," list the ten h	ighest paid indivi	duals or entities (fu	undraisers) p	oursuant to a	igreements under whi	ch the fun	draiser is to b	be
compensated at leas	st \$5,000 by the o	organization						
	······	F	1	_		(v) Am	ount paid to	
(i) Name and address or entity (fundra		(ii) Activity	custody or	draiser have r control of outions?	(iv) Gross receipts from activity	(or re fundrai	etained by) ser listed in col. (i)	(vi) Amount paid to (or retained by) organization
<u> </u>			Yes	No			~ (1)	
1								
2	_					-		
3								
4	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,_,			<u></u>				
5					/ .			
6								
· · · · · · · · · · · · · · · · · · ·								
7						_		
8								
9								
10								
		<u> </u>						
Total				►				
 List all states in which registration or licensii 	-	i is registered or lid	censed to so	licit contribu	tions or has been notif	fied it is ex	empt from	
	· _ · · ·							
<u></u>	<u></u>	······································						

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

Schedule G (Form 990 or 990-EZ) 2013

EEA

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_	ule G r t II	Fundraising Events. Com	plete if the organization			
		than \$15,000 of fundraising	-			•
		gross receipts greater than				D LIST CVCIILS WITH
T		gross receipto greater than	(a) Event #1	(b) Event #2	(c) Other events	<u>_</u>
			HYO FESTIVAL			(d) Total events (add col (a) through
			(event type)	(event type)	(total number)	col (c))
			(event type)	(event type)	(total number)	· · · ·
Revenue	1	Gross receipts · · · · · · · ·				
Š	•					
	2	Less Contributions				
	3	Gross income (line 1 minus		-		
		line 2)				
T						
	4	Cash prizes				
	5	Noncash pnzes • • • • • • • •				
g	6	Rent/facility costs · · · · · · ·				L
ź	7	Food and beverages •••••				
	~					
5	8	Entertainment · · · · · · · · ·				
	•	Other direct expenses				
	9	Other direct expenses				
	10	Direct expense summary Add lines	A through Q in column (d)		•	
- I						
		• •				
	11 rt II	Net income summary Subtract line	10 from line 3, column (d)			more
	11	Net income summary Subtract line	10 from line 3, column (d) organization answered			more
ai	11	Net income summary Subtract line Gaming. Complete if the o	10 from line 3, column (d) organization answered)-EZ, line 6a.	"Yes" to Form 990, Par	t IV, line 19, or reported	(d) Total gaming (a
ai	11	Net income summary Subtract line Gaming. Complete if the o	10 from line 3, column (d) organization answered	"Yes" to Form 990, Par		(d) Total gaming (a
ai	11	Net income summary Subtract line Gaming. Complete if the o	10 from line 3, column (d) organization answered)-EZ, line 6a.	"Yes" to Form 990, Par	t IV, line 19, or reported	(d) Total gaming (a
ai	11	Net income summary Subtract line Gaming. Complete if the o	10 from line 3, column (d) organization answered)-EZ, line 6a.	"Yes" to Form 990, Par	t IV, line 19, or reported	
ai I	11 rt II	Net income summary Subtract line Gaming. Complete if the o than \$15,000 on Form 990 Gross revenue	10 from line 3, column (d) organization answered)-EZ, line 6a.	"Yes" to Form 990, Par	t IV, line 19, or reported	(d) Total gaming (a
al	11	Net income summary Subtract line Gaming. Complete if the o than \$15,000 on Form 990	10 from line 3, column (d) organization answered)-EZ, line 6a.	"Yes" to Form 990, Par	t IV, line 19, or reported	(d) Total gaming (a
	11 rt II 1 2	Net income summary Subtract line Gaming. Complete if the of than \$15,000 on Form 990 Gross revenue Cash pnzes	10 from line 3, column (d) organization answered)-EZ, line 6a.	"Yes" to Form 990, Par	t IV, line 19, or reported	(d) Total gaming (a
	11 rt II	Net income summary Subtract line Gaming. Complete if the o than \$15,000 on Form 990 Gross revenue	10 from line 3, column (d) organization answered)-EZ, line 6a.	"Yes" to Form 990, Par	t IV, line 19, or reported	(d) Total gaming (a
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a	11 rt II 1 2 3 4	Net income summary Subtract line Gaming. Complete if the orthan \$15,000 on Form 990 Gross revenue Gross revenue Cash pnzes Second Sec	10 from line 3, column (d) organization answered 0-EZ, line 6a. (a) Bingo	"Yes" to Form 990, Par (b) Pull tabs/instant bingo/progressive bingo	t IV, line 19, or reported	(d) Total gaming (a
al	11 rt II 2 3 4 5	Net income summary Subtract line Gaming. Complete if the orthan \$15,000 on Form 990 Gross revenue Gross revenue Cash pnzes Gross revenue Noncash pnzes Gross Rent/facility costs Gross Other direct expenses Gross	10 from line 3, column (d) organization answered D-EZ, line 6a. (a) Bingo	"Yes" to Form 990, Par (b) Pull tabs/instant bingo/progressive bingo	t IV, line 19, or reported (c) Other gaming	(d) Total gaming (a
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al	11 rt II 1 2 3 4 5 6	Net income summary Subtract line Gaming. Complete if the original complete is the original complete if the original complete is the	10 from line 3, column (d) organization answered D-EZ, line 6a. (a) Bingo	"Yes" to Form 990, Par (b) Pull tabs/instant bingo/progressive bingo	t IV, line 19, or reported (c) Other gaming	(d) Total gaming (a
al	11 rt II 1 2 3 4 5 6	Net income summary Subtract line Gaming. Complete if the original complete is the original complete if the original complete is the	10 from line 3, column (d) organization answered D-EZ, line 6a. (a) Bingo	"Yes" to Form 990, Part (b) Pull tabs/instant bingo/progressive bingo	t IV, line 19, or reported (c) Other gaming	(d) Total gaming (a
ania	11 rt II 2 3 4 5 6 7	Net income summary Subtract line Gaming. Complete if the orthan \$15,000 on Form 990 Gross revenue Gross revenue Cash pnzes Cash pnzes Noncash pnzes Cash Rent/facility costs Cash Other direct expenses Cash Volunteer labor Cash pnzes Direct expense summary Add lines	10 from line 3, column (d) organization answered D-EZ, line 6a. (a) Bingo	"Yes" to Form 990, Part (b) Pull tabs/instant bingo/progressive bingo	t IV, line 19, or reported (c) Other gaming	(d) Total gaming (a
	11 rt II 2 3 4 5 6 7 8 En	Net income summary Subtract line Gaming. Complete if the organizate Image: Complete if the organizate Gross revenue One of the organizate Gross revenue One of the organizate Cash pnzes One of the organizate Noncash pnzes One of the organizate Other direct expenses One of the organizate Volunteer labor One of the organizate Net gaming income summary Subtract the state(s) in which the organizate	10 from line 3, column (d) organization answered D-EZ, line 6a. (a) Bingo Yes% Yes% No 2 through 5 in column (d) ract line 7 from line 1, columition operates gaming activition	"Yes" to Form 990, Par (b) Pull tabs/instant bingo/progressive bingo 	t IV, line 19, or reported (c) Other gaming (c) Other gam	(d) Total gaming (a col (a) through col
	11 rt II 2 3 4 5 6 7 8 En	Net income summary Subtract line Gaming. Complete if the orthan \$15,000 on Form 990 Gross revenue Gross revenue Cash pnzes Gross revenue Noncash pnzes Gross Noncash pnzes Gross Other direct expenses Gross Volunteer labor Gross Direct expense summary Add lines Net gaming income summary Subtract line	10 from line 3, column (d) organization answered D-EZ, line 6a. (a) Bingo Yes% Yes% No 2 through 5 in column (d) ract line 7 from line 1, columition operates gaming activition	"Yes" to Form 990, Par (b) Pull tabs/instant bingo/progressive bingo 	t IV, line 19, or reported (c) Other gaming	(d) Total gaming (a col (a) through col
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Schedule G (Form 990 or 990-EZ) 2013

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service Name of the organization

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Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ.

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

2013 Open to Public

OMB No 1545-0047

Employer identification number

95-3842560

KOREAN AMERICAN FEDERATION OF L.A.

01. Form 990 governing body review (Part VI, line 11)

No review was or will be conducted.

02. Governing documents, etc, available to public (Part VI, line 19)

No documents are available to the public.

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

	Statement of Program Service Accomplishments	2013 01
Name(s) as shown on return KOREAN AMERICA	N FEDERATION OF L.A.	Your Social Security Number 95-3842560
	Form 990, Part III(a)	
Program Service Program Service	e Code e Expenses \$2948	
Grants and allo	ocations included in above expense \$0	
Program Servic	es Revenue \$0	
Explanation	E FOR EVENT AND SPECIAL PROGRAMING AND FOOD BANK EXP	ENSE FOR PROCRAM
ADVERIISING EXFENSE	FOR EVENT AND SPECIAL PROGRAMING AND FOUD BANK EAP.	ENSE FOR PROGRAM

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990	Overflow Statement		2013 Page_1_
Name(s) as shown on return		F	EIN
KOREAN AMERICAN FI	EDERATION OF L.A.	I	95-384256
Decemintion			Amount
Description FOOD BANK			Amount \$ 64
		Total:	\$ 64 \$ 64
Decemintion			Amount
Description FLOWER			\$ 7,46
		Total:	\$ 7,46 \$ 7,46

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Form	886

(Rev January 2014)

Applica	tion f	or Ex	tensi	on of	Time	То	File	an
	Exen	npt O	rgani	zation	n Retu	Irn		

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Department of the Treasury Internal Revenue Service File a separate application for each return.

Le Service Information about Form 8868 and its instructions is at www.irs.gov/form8868.

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits

Part Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Enter filer's identifying number, see instructions

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Type or	Name of exempt organization or other filer, see instructions	Employer identification number (EIN) or				
print	KOREAN AMERICAN FEDERATION OF L.A.		95-3842560			
File by the	Number, street, and room or suite no. If a P.O box, see instructions		Social security number (SSN)			
due date for	981 S WESTERN AVE S	TE 100				
filing your return See	City, town or post office, state, and ZIP code. For a foreign address, see instructions.					
instructions	Los Angeles, CA 90006					

Enter the Return code for the return that this application is for (file a separate application for each return)

Application	Return	Application	Return	
Is For	Code	Is For	Code	
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07	
Form 990-BL	02	Form 1041-A	08	
Form 4720 (Individual)	03	Form 4720 (other than individual)	09	
Form 990-PF	04	Form 5227	10	
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11	
Form 990-T (trust other than above)	06	Form 8870	12	

• The books are in the care of **MOO HAN BAE**, 981 S WESTERN AVE, CA 90006

٦	Telephone No. ► 323-732-0700 FAX No ►		
• •	f the organization does not have an office or place of business in the United States, check this box		· · · · · · · • 🗋
• 1	f this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	hıs is	
	he whole group, check this box · · · · · · · · · · · · · · · · · · ·	attach	
a lis	t with the names and EINs of all members the extension is for		
1	I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time		
	until 04-15, 20, 15, to file the exempt organization return for the organization named above. The ex	tension	IS
	for the organization's return for:		
	calendar year 20 or		
	tax year beginning 09-01 , 2013 , and ending 08-31	, 201	4
2	If the tax year entered in line 1 is for less than 12 months, check reason:		
	Change in accounting period		
3 a	a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	Τ	
	nonrefundable credits. See instructions.	3a	\$
t	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and		
	estimated tax payments made Include any prior year overpayment allowed as a credit.	3b	\$
c	Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using		
	EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$
Cau	tion. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO an	d Form	8879-EO for
раут	ment instructions		

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