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CIS 475WXH3

Form 990

"EXTENSION ATTACHED"

OMB No 1545-0047

2007

Open to Public
InspectionDepartment of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

A For the 2007 calendar year, or tax year beginning Jul 1, 2007, and ending Jun 30, 2008

B Check if applicable.

Address change
 Name change
 Initial return
 Termination
 Amended return
 Application pending

C Name of organization

THE CHINESE-AMERICAN REAL ESTATE ASSOCIATION (USA) INC.

Number and street (or P.O. box if mail is not delivered to street addr) Room/suite

37-08 MAIN STREET

217

City, town or country

FLUSHING

State ZIP code + 4

NY 11354

D Employer identification number

13-4016452

E Telephone number

(718) 886-2210

F Accounting method:

 Cash Accrual Other (specify) ►

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

H and I are not applicable to section 527 organizations

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

H (b) If 'Yes,' enter number of affiliates ►

H (c) Are all affiliates included? Yes No
(If 'No,' attach a list. See instructions.)H (d) Is this a separate return filed by an organization covered by a group ruling? Yes No

I Group Exemption Number ►

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

G Web site: ► N/A

J Organization type

(check only one) ► 501(c) 6 ← (insert no.) 4947(a)(1) or 527K Check here ► if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ► 110,163.

Part II Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

1 Contributions, gifts, grants, and similar amounts received:

a Contributions to donor advised funds

1a

b Direct public support (not included on line 1a)

1b 17,603.

c Indirect public support (not included on line 1a)

1c

d Government contributions (grants) (not included on line 1a)

1d

e Total (add lines 1a through 1d) (cash \$ 17,603. noncash \$)

1e 17,603.

2 Program service revenue including government fees and contracts (from Part VII, line 93)

2 30,895.

3 Membership dues and assessments

3 16,535.

4 Interest on savings and tempo... cash investments

4 24.

5 Dividends and interest from securities

5

6a Gross rents

6a

b Less rental expenses JAN 12 2011

6b

c Net rental income or (loss) Subtract line 6b from line 6a

6c

7 Other investment income (describe) OGDEN, UT

7

8a Gross amount from sales of assets other than inventory

(A) Securities

(B) Other

8a

b Less cost or other basis and sales expenses

8b

c Gain or (loss) (attach schedule)

8c

d Net gain or (loss). Combine line 8c, columns (A) and (B)

8d

9 Special events and activities (attach schedule). If any amount is from gaming, check here ►

9a

45,106.

a Gross revenue (not including \$ 12,095. of contributions reported on line 1b)

9b

40,996.

b Less: direct expenses other than fundraising expenses

9c

See L-9 Stmt 4,110.

c Net income or (loss) from special events. Subtract line 9b from line 9a

10a Gross sales of inventory, less returns and allowances

10a

b Less: cost of goods sold

10b

c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a

10c

11 Other revenue (from Part VII, line 103)

11

12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11

12 69,167.

13 Program services (from line 44, column (B))

13 79,202.

14 Management and general (from line 44, column (C))

14

15 Fundraising (from line 44, column (D))

15

16 Payments to affiliates (attach schedule)

16

17 Total expenses. Add lines 16 and 44, column (A)

17 79,202.

18 Excess or (deficit) for the year. Subtract line 17 from line 12

18 -10,035.

19 Net assets or fund balances at beginning of year (from line 73, column (A))

19 34,970.

20 Other changes in net assets or fund balances (attach explanation)

20

21 Net assets or fund balances at end of year. Combine lines 18, 19, and 20

21 24,935.

G10

14

Part II. Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See *instruct.*)

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach sch)				
(cash \$ _____ non-cash \$ _____)				
If this amount includes foreign grants, check here ► <input type="checkbox"/>	22a			
22b Other grants and allocations (att sch)				
(cash \$ 2,000. non-cash \$ _____)				
If this amount includes foreign grants, check here ► <input type="checkbox"/>	22b	2,000.	2,000.	
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A		0.		
b Compensation of former officers, directors, key employees, etc. listed in Part V-B	25b			
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	25c			
26 Salaries and wages of employees not included on lines 25a, b, and c	26	1,941.	1,941.	
27 Pension plan contributions not included on lines 25a, b, and c	27			
28 Employee benefits not included on lines 25a - 27	28	600.	600.	
29 Payroll taxes	29	271.	271.	
30 Professional fundraising fees	30			
31 Accounting fees	31	750.	750.	
32 Legal fees	32			
33 Supplies	33	3,505.	3,505.	
34 Telephone	34	1,397.	1,397.	
35 Postage and shipping	35	966.	966.	
36 Occupancy	36	2,400.	2,400.	
37 Equipment rental and maintenance	37			
38 Printing and publications	38	15,805.	15,805.	
39 Travel	39			
40 Conferences, conventions, and meetings	40	5,518.	5,518.	
41 Interest	41			
42 Depreciation, depletion, etc (attach schedule)	42			
43 Other expenses not covered above (itemize):				
a ADVERTISING	43a	4,089.	4,089.	
b BANK CHARGES	43b	290.	290.	
c OUTREACHING & NETWORKING	43c	11,541.	11,541.	
d MEETINGS & SEMINARS	43d	12,297.	12,297.	
e WEBSITE & INTERNET	43e	569.	569.	
f PUBLIC RELATIONS	43f	4,723.	4,723.	
g See Other Expenses Sml	43g	10,540.	10,540.	
44 Total functional expenses Add lines 22a through 43g. (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	44	79,202.	79,202.	

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

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

\$ _____; (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See the instructions.)

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

What is the organization's primary exempt purpose? ► **SEE ATTACHED**

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

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

a N/A

(Grants and allocations \$) If this amount includes foreign grants, check here

b

(Grants and allocations \$) If this amount includes foreign grants, check here

c

(Grants and allocations \$) If this amount includes foreign grants, check here

d

(Grants and allocations \$) If this amount includes foreign grants, check here

e Other program services

(Grants and allocations \$) If this amount includes foreign grants, check here

f **Total of Program Service Expenses** (should equal line 44, column (B), Program services)

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Part IV | Balance Sheets (See the instructions.)

		(A) Beginning of year		(B) End of year
	45 Cash – non-interest-bearing	26,756.	45	16,194.
	46 Savings and temporary cash investments	8,312.	46	8,341.
	47a Accounts receivable	47a		
	b Less allowance for doubtful accounts	47b		47c
	48a Pledges receivable	48a		
	b Less: allowance for doubtful accounts	48b		48c
	49 Grants receivable		49	
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)		50a	
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)			50b
ASSETS	51a Other notes and loans receivable (attach schedule)	51a		
	b Less: allowance for doubtful accounts	51b		51c
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges		53	
	54a Investments – publicly-traded securities	► Cost FMV	54a	
	b Investments – other securities (attach sch)	► Cost FMV	54b	
	55a Investments – land, buildings, & equipment: basis	55a		
	b Less accumulated depreciation (attach schedule)	55b		55c
	56 Investments – other (attach schedule)		56	
	57a Land, buildings, and equipment: basis	57a		
	b Less accumulated depreciation (attach schedule)	57b		57c
	58 Other assets, including program-related investments (describe ► <u>RENTAL SECURITY DEPOSIT</u>)		0.	58 400.
	59 Total assets (must equal line 74). Add lines 45 through 58		35,068.	59 24,935.
LIABILITIES	60 Accounts payable and accrued expenses		60	
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a Tax-exempt bond liabilities (attach schedule)		64a	
	b Mortgages and other notes payable (attach schedule)		64b	
	65 Other liabilities (describe ► <u>PAYROLL TAX PAYABLE</u>)		98.	65 0.
	66 Total liabilities. Add lines 60 through 65		98.	66 0.
	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	34,970.	67	24,935.
NET ASSETS OR FUND BALANCES	68 Temporarily restricted		68	
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)		34,970.	73 24,935.
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73		35,068.	74 24,935.

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Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See the instructions.)

a Total revenue, gains, and other support per audited financial statements	.....	N/A
b Amounts included on line a but not on Part I, line 12:		
1 Net unrealized gains on investments	.....	b1
2 Donated services and use of facilities	.....	b2
3 Recoveries of prior year grants	.....	b3
4 Other (specify):	.....	b4
Add lines b1 through b4	.....	b
c Subtract line b from line a	.....	c
d Amounts included on Part I, line 12, but not on line a:		
1 Investment expenses not included on Part I, line 6b	.....	d1
2 Other (specify):	.....	d2
Add lines d1 and d2	.....	d
e Total revenue (Part I, line 12). Add lines c and d	.....	e

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

a Total expenses and losses per audited financial statements	.....	N/A
b Amounts included on line a but not on Part I, line 17:		
1 Donated services and use of facilities	.....	b1
2 Prior year adjustments reported on Part I, line 20	.....	b2
3 Losses reported on Part I, line 20	.....	b3
4 Other (specify):	.....	b4
Add lines b1 through b4	.....	b
c Subtract line b from line a	.....	c
d Amounts included on Part I, line 17, but not on line a:		
1 Investment expenses not included on Part I, line 6b	.....	d1
2 Other (specify):	.....	d2
Add lines d1 and d2	.....	d
e Total expenses (Part I, line 17). Add lines c and d	.....	e

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated) (See the instructions)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense account and other allowances
KATHY TSAO 205 E 42 STREET, 6/FL NEW YORK, NY 10017	PRESIDENT 5.00	0.	0.	0.
WILLIAM SETO 37-08 MAIN STREET, STE 207 FLUSHING, NY 11354	VICE PRESIDENT 5.00	0.	0.	0.
KC TONG 28 ELIZABETH ST, STE 200 NEW YORK NY 10013	SECRETARY 2.00	0.	0.	0.
IRIS H TAM 105-10 QUEENS BLVD FOREST HILLS NY 11375	ASST. SECRETARY 2.00	0.	0.	0.
STEPHEN CHEUNG 74A FORSYTH STREET NEW YORK NY 11375	TREASURER 2.00	0.	0.	0.
CLEMENT SO 42-73 MAIN STREET FLUSHING NY 11355	ASST. TREASURER 2.00	0.	0.	0.

Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)

75a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings ► Yes No

b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If 'Yes,' attach a statement that identifies the individuals and explains the relationship(s) ► 75b X

c Do any officers, directors, trustees, or key employees listed in form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of 'related organization' ► 75c X

If 'Yes,' attach a statement that includes the information described in the instructions.

d Does the organization have a written conflict of interest policy? ► 75d X

Part V-B | Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other

Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

Part VI Other Information (See the instructions.)

76	Did the organization make a change in its activities or methods of conducting activities? If 'Yes,' attach a detailed statement of each change	76	X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes.	77	X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? b If 'Yes,' has it filed a tax return on Form 990-T for this year?	78a	X
		78b	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement	79	X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc, to any other exempt or nonexempt organization? b If 'Yes,' enter the name of the organization ► ----- and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.	80a	X
81a	Enter direct and indirect political expenditures. (See line 81 instructions)	81a	
	b Did the organization file Form 1120-POL for this year?	81b	X

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Form 990 (2007)

Part VI Other Information (continued)

	Yes	No
82a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III.)	82b	
83a Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	83b	X
84a Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	
85a 501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?	85a	X
b Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b	X
If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	85c	
c Dues, assessments, and similar amounts from members	85c	N/A
d Section 162(e) lobbying and political expenditures	85d	N/A
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	86a	N/A
b Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87 501(c)(12) organizations Enter: a Gross income from members or shareholders	87a	N/A
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
88a At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX	88a	X
b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Part XI	88b	X
89a 501(c)(3) organizations. Enter. Amount of tax imposed on the organization during the year under section 4911 ► N/A ; section 4912 ► N/A , section 4955 ► N/A	89a	
b 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction	89b	N/A
c Enter. Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	89c	
d Enter: Amount of tax on line 89c, above, reimbursed by the organization	89d	
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	X
f All organizations Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	X
g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	X
90a List the states with which a copy of this return is filed ►	90b	1
b Number of employees employed in the pay period that includes March 12, 2007 (See instructions.)	90b	1
91a The books are in care of ► STEVEN CHEUNG Located at ► 37-08 MAIN STREET FLUSHING	Telephone number ► (718) 886-2210	
b 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)? If 'Yes,' enter the name of the foreign country ►	NY ZIP + 4 ► 11354	
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts	91b	Yes No

Part VI Other Information (continued)Yes No c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c

If 'Yes,' enter the name of the foreign country ►

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 – Check here ►

and enter the amount of tax-exempt interest received or accrued during the tax year ► 92

Part VII Analysis of Income-Producing Activities (See the instructions.)**Note: Enter gross amounts unless otherwise indicated.**

93 Program service revenue:

a JOURNAL ADVERTISEMENT
 b EVENTS & PROGRAMS
 c _____
 d _____
 e _____

f Medicare/Medicaid payments
 g Fees & contracts from government agencies
 94 Membership dues and assessments
 95 Interest on savings & temporary cash invmnts
 96 Dividends & interest from securities
 97 Net rental income or (loss) from real estate.
 a debt-financed property
 b not debt-financed property
 98 Net rental income or (loss) from pers prop
 99 Other investment income

100 Gain or (loss) from sales of assets other than inventory
 101 Net income or (loss) from special events
 102 Gross profit or (loss) from sales of inventory
 103 Other revenue: a _____
 b _____
 c _____
 d _____
 e _____

104 Subtotal (add columns (B), (D), and (E))

105 Total (add line 104, columns (B), (D), and (E)) ►

23,340.

7,555.

16,535.

24.

47,454.

47,454.

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

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

Line No. Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).

93 ANNUAL JOURNAL AND EVENTS INCOME CARRIED OUT FROM THE ORGANIZATION'S EXEMPT ACTIVITIES.

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

N/A

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

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

a Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

Yes No

b Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

Yes No

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

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

N/A

Yes No

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If 'Yes,' complete the schedule below for each controlled entity

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

Yes No

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If 'Yes,' complete the schedule below for each controlled entity

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

Yes No

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

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

Please
Sign
Here

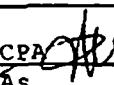
► R. Ho 12/30/10

Date

TREASURER

Signature of officer
Type or print name and title

Paid
Pre-
parer's
Use
Only

Preparer's signature	► JAFREY S LIU, CPA 	Date 12/29/10	Check if self employed ► <input type="checkbox"/>	Preparer's SSN or PTIN (See General Instruction X) P00179307
Firm's name (or yours if self- employed). address, and ZIP + 4	► WONG & CO., CPAs ► 57 WEST 38TH STREET, 12/ FL NEW YORK NY 10018	EIN ► 13-3909555	Phone no ► (212) 840-6123	

BAA

Form 990 (2007)

Additional Information For Tax Return

THE CHINESE-AMERICAN REAL ESTATE ASSOCIATION (USA) INC.

13-4016452

Form 990 p 3: Exempt purpose

TO PROMOTE THE SOCIAL AND ECONOMIC WELL BEING OF CHINESE AMERICAN ACTIVITY
ENGAGED IN THE FIELD OF REAL ESTATE SALES AND BROKERAGE, PROPERTY MANAGEMENT,
MORTGAGE BANKING, REAL ESTATE DEVELOPMENT AND REAL ESTATE SYNDICATION.

Form 990, Page 2, Part II, Line 43

Other Expenses Stmt

Other expenses not covered above (itemize):	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
<u>TRANSPORTATION</u>	902.	902.		
<u>MANAGEMENT AND CONSULTING FEES</u>	7,800.	7,800.		
<u>SCHOLARSHIPS</u>	1,600.	1,600.		
<u>MISCELLANEOUS</u>	238.	238.		
Total	<u>10,540.</u>	<u>10,540.</u>		

Form 990, Page 1, Part I, Line 9

Special Events and Activities Statement

List of Three Largest Events and Type and Number of Others	Gross Receipts	Less Contributions	Gross Revenue	Less Direct Expenses	Net Income (Loss)
<u>ANNUAL BANQUET</u>	40,210.	12,095.	28,115.	22,038.	6,077.
<u>CHRISTMAS CELEBRATION</u>	16,991.	0.	16,991.	18,958.	-1,967.
Total	<u>57,201.</u>	<u>12,095.</u>	<u>45,106.</u>	<u>40,996.</u>	<u>4,110.</u>