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Form **990-EZ**

Department of the Treasury
Internal Revenue Service

Short Form
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)

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than $1,000,000 and total assets less than $2,500,000 at the end of the year may use this form

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

OMB No 1545-1150

2008

Open to Public Inspection

POSTMARK DATE MAR 12 2010

SCANNED APR 07 2010

A For the 2008 calendar year, or tax year beginning 7/01/08 , and ending 6/30/09

B Check if applicable
- Address change
- Name change
- Initial return
- Termination
- Amended return
- Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
ASIAN WOMEN'S CHRISTIAN ASSOCIATION INC.

Number and street (or P O box, if mail is not delivered to street address) 9 GENESEE AVENUE

Room/suite

City or town, state or country, and ZIP + 4 TEANECK NJ 07666

D Employer identification number 22-3646307

E Telephone number 201-862-1663

F Group Exemption Number ▶

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

G Accounting method ☐ Cash ☒ Accrual Other (specify) ▶

I Website: ▶ www.awcanj.org

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

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

K Check ▶ ☐ if the organization is not a section 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 Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if $1,000,000 or more, file Form 990 instead of Form 990-EZ ▶ $ 361,208

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

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	316,600
	2	Program service revenue including government fees and contracts Extension filed	2	40,488
	3	Membership dues and assessments	3	
	4	Investment income	4	7,860
	5a	Gross amount from sale of assets other than inventory 5a		
	b	Less. cost or other basis and sales expenses 5b		
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach sch)	5c	
	6	Special events and activities (complete applicable parts of Schedule G) If any amount is from **gaming,** check here ▶ ☐		
	a	Gross revenue (not including $ _____ of contributions reported on line 1) 6a		
	b	Less: direct expenses other than fundraising expenses 6b		
	c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	
	7a	Gross sales of inventory, less returns and allowances 7a		
	b	Less: cost of goods sold 7b		
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
	8	Other revenue (describe ▶ See Statement 1)	8	-3,740
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 ▶	9	361,208
Expenses	10	Grants and similar amounts paid (attach schedule)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	134,595
	13	Professional fees and other payments to independent contractors	13	72,601
	14	Occupancy, rent, utilities, and maintenance	14	74,022
	15	Printing, publications, postage, and shipping	15	17,784
	16	Other expenses (describe ▶ See Statement 2)	16	188,827
	17	**Total expenses.** Add lines 10 through 16 ▶	17	487,829
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-126,621
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	250,828
	20	Other changes in net assets or fund balances (attach explanation) See Statement	20	-25,755
	21	Net assets or fund balances at end of year. Combine lines 18 through 20 ▶	21	98,452

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Part II Balance Sheets. If Total assets on line 25, column (B) are $2,500,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II)		(A) Beginning of year		(B) End of year
22	Cash, savings, and investments	180,164	22	257,065
23	Land and buildings		23	
24	Other assets (describe ▶ See Statement)	142,969	24	21,273
25	**Total assets**	323,133	25	278,338
26	**Total liabilities** (describe ▶ See Statement)	60,377	26	176,146
27	**Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	262,756	27	102,192

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

Form **990-EZ** (2008)

DAA

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

What is the organization's primary exempt purpose?

TO SUPPORT ASIAN-AMERICAN COMMUNITY

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; optional for others.)

28	GRACE ACADEMY - TO EDUCATE IMMIGRANT ASIAN SENIORS AND PROVIDE RECREATIONAL PROGRAMS (Grants $) If this amount includes foreign grants, check here ▶ ☐	28a	50,466
29	FAMILY SERVICE - TO SUPPORT IMMIGRANT ASIAN SOCIETY WITH SERVICES WHICH MEETS THE CHANGING NEEDS OF THE IMMIGRANT ASIAN FAMILIES. (Grants $) If this amount includes foreign grants, check here ▶ ☐	29a	70,930
30	OTHER PROGRAM SERVICE (Grants $) If this amount includes foreign grants, check here ▶ ☐	30a	0
31	Other program services (attach schedule) See Statement 3 (Grants $) If this amount includes foreign grants, check here ▶ ☐	31a	68,110
32	**Total program service expenses** (add lines 28a through 31a) ▶	32	189,506

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for Part IV.)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Bong S. Jun 335 E. Central Blvd, Palisades Park Plaisades Park, NJ 07650	E. DIRECTOR 40	37,500		
See the attachment				

Part V Other Information (Note the statement requirements in the instructions for Part VI.)

			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.			
a	Did the organization have unrelated business gross income of $1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?	35a	X	
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	35b	X	
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N	36		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instr. ▶ 37a			
b	Did the organization file **Form 1120-POL** for this year?	37b		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b			
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9 39a			
b	Gross receipts, included on line 9, for public use of club facilities 39b			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ _____ ; section 4912 ▶ _____ ; section 4955 ▶ _____			
b	Section 501(c)(3) and (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," complete Schedule L, Part I	40b		X
c	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ _____			
d	Enter amount of tax on line 40c reimbursed by the organization ▶ _____			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		X

41 List the states with which a copy of this return is filed. ▶ NJ

42a The books are in care of ▶ JUN, BONG SOOK Telephone no. ▶ 201-862-1665

Located at ▶ TEANECK, NJ ZIP + 4 ▶ 07666

			Yes	No
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: ▶ _____ See the instructions for exceptions and filing requirements for **Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.**	42b		X
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ▶ _____	42c		X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041**—Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43			

			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45		X

Part VI **Section 501(c)(3) organizations only.** All section 501(c)(3) organizations must answer questions 46–49 and complete the tables for lines 50 and 51.

			Yes	No
46	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	46		X
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47		X
48	Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		X
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a		X
b	If "Yes," was the related organization(s) a section 527 organization?	49b		

50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than $100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than $100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over $100,000 ▶				

51 Complete this table for the five highest compensated independent contractors who each received more than $100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than $100,000	(b) Type of service	(c) Compensation
None		
Total number of other independent contractors each receiving over $100,000 ▶		

Sign Here

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

X Bong Sook Jun — X 02/23/10

Signature of officer — Date

BONG S JUN — EXECUTIVE DIRECTOR

Type or print name and title

Paid Preparer's Use Only

Preparer's signature	Date	Check if self-employed ▶ X	Preparer's Identifying Number (See instr.)
	2/23/10		P00370519

Firm's name (or yours if self-employed), address, and ZIP + 4: Young Sik Oh, CPA, 440 Sylvan Ave Ste 260, Englewood Cliffs, NJ 07632

EIN ▶ 22-3330452

Phone no ▶ 201-569-1177

May the IRS discuss this return with the preparer shown above? See instructions ▶ Yes | No

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization ASIAN WOMEN'S CHRISTIAN ASSOCIATION INC.

Employer identification number 22-3646307

Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

The organization is not a private foundation because it is: (Please check only **one** organization.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).** (Attach Schedule H.)

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).** (see instructions)

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I b ☐ Type II c ☐ Type III–Functionally Integrated d ☐ Type III–Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii) A family member of a person described in (i) above?

(iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

h Provide the following information about the organizations the organization supports.

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	215,445	266,330	328,059	399,546	327,645	1,537,025
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 1-3	215,445	266,330	328,059	399,546	327,645	1,537,025
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1,494,513
6 **Public support.** Subtract line 5 from line 4						42,512

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	215,445	266,330	328,059	399,546	327,645	1,537,025
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	-358	-45,557	2,122	83,859	-3,740	36,326
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						1,573,351
12 Gross receipts from related activities, etc. (see instructions)					12	456,957

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ [X]

Section C. Computation of Public Support Percentage

14	Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	%
15	Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	%

16a **33 1/3 % support test—2008.** If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ [ ]

b **33 1/3 % support test—2007.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ [ ]

17a **10%-facts-and-circumstances test—2008.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ [ ]

b **10%-facts-and-circumstances test—2007.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ [ ]

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ [ ]

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No. 1545-0172

2008

Attachment Sequence No. **67**

Name(s) shown on return	Business or activity to which this form relates	Identifying number
ASIAN WOMEN'S CHRISTIAN ASSOCIATION	503(c) 3	22-3646307

Part I Election To Expense Certain Property Under Section 179

Note: *If you have any listed property, complete Part V before you complete Part I.*

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	$250,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	$800,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	

	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
6			
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the **smaller** of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2007 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2009. Add lines 9 and 10, less line 12 ▶	13	

Note: *Do not use Part II or Part III below for listed property. Instead, use Part V.*

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2008	17	3,984
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ ☐		

Section B—Assets Placed in Service During 2008 Tax Year Using the General Depreciation System

	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property						
b	5-year property						
c	7-year property						
d	10-year property						
e	15-year property						
f	20-year property						
g	25-year property			25 yrs.		S/L	
h	Residential rental property			27.5 yrs.	MM	S/L	
				27.5 yrs.	MM	S/L	
i	Nonresidential real property			39 yrs.	MM	S/L	
					MM	S/L	

Section C—Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System

20a	Class life					S/L	
b	12-year			12 yrs.		S/L	
c	40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	**Total.** Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instr.	22	3,984
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Asian Women's Christian Association, Inc. EIN 22-3646307

Form 990EZ Supportig Statement Page 1 Line 16, Other Expenses

Program Services and Supports	
Annual Dinner & Concert	$ 47,006
Contribution	50
Golf Outgoing Fee	9,626
Program Supplies	4,813
Senior Center Lunch & Trip	50,466
Transportation	4,944
Management and General Administration	
Bank Service Charge	495
Depreciation	3,984
Due & Subscription	2,627
Finance & Interest Charge	4,116
Insurance	4,872
Office Supplies	19,825
Payroll Tax	12,108
Print & Mailing	4,282
Telephone	3,904
Utilities	7,953
Misc Expense	7,756
Total	**$ 188,827**

Form 990EZ Supportig Statement Page 1 Line 20, Other Changes in Net Assets

Loss from Investment in subsiaiary	**$ 25,755**

Asian Women's Christian Association, Inc. EIN 22-3646307

Form 990EZ Supportig Statement Page 1 Line 24, Other Assets

	2008	2007
Assets		
Current Assets		
Cash in Bank and on Hand	$ 257,065	$ 180,164
Other Current Receivables	662	306
Total Current Assets	257,727	180,470
Property and Equipments:		
Furniture & Fixture	17,638	33,235
Machinery & Equipment	23,837	54,640
Less: Accumulated Depreciation	(29,621)	(51,724)
Total Property and Equipments	11,854	36,151
Investment in Subsidiary	8,757	34,512
Security Deposit	0	72,000
Total Assets	$ 278,338	$ 323,133
Less: Cash in Bank and on Hand	257,065	180,164
Total Other Assets(Line 24)	**$ 21,273**	**$ 142,969**

Form 990EZ Supportig Statement Page 1 Line 26, Liabilities Line 27, Net Assets

Liabilities		
Current Liabilities:		
Line of Credit-BNB	$ 147,884	$ 10,040
Loan from Subsidiary and others	12,952	48,370
Accrued Liabilities	15,310	1,967
Total Current Liabilities(Line 26)	**176,146**	**60,377**
Net Assets		
Unrestricted Net Assets	93,435	228,244
Invested in Subsidiary	8,757	34,512
Total Net Assets(Line 27)	**102,192**	**262,756**
Total Liabilities and Net Assets	**$ 278,338**	**$ 323,133**

Asian Women Christian Association Inc
9 Genesee Ave, Teaneck, NJ 07666
990EZ PartVI

Name	Business Address	Telephone number	Title	Salary($)
Jun, Bong S.	9 Genesee ave, Teaneck, NJ 07666	(201) 862-1665	Executive Director	37,500
Kim, Young S.	9 Genesee ave, Teaneck, NJ 07666	(201) 862-1665	Manager	22,000
Je, Mi K.	9 Genesee ave, Teaneck, NJ 07666	(201) 862-1665	Director	20,000
Lee, Hwain	9 Genesee ave, Teaneck, NJ 07666	(201) 862-1665	President , Board of Trustees	-
Youn, Mia	9 Genesee ave, Teaneck, NJ 07666	(201) 862-1665	Chair, Board of Directors	-
Lee, Anne	9 Genesee ave, Teaneck, NJ 07666	(201) 862-1665	Vice Chair, Board of Directors	-
Kim Shin K.	9 Genesee ave, Teaneck, NJ 07666	(201) 862-1665	Vice Chair, Board of Directors	-
Hyun, Miki	9 Genesee ave, Teaneck, NJ 07666	(201) 862-1665	Secretary	-
Kim, Ok W.	9 Genesee ave, Teaneck, NJ 07666	(201) 862-1665	Executive Board	-
Kim, Yoon H.	9 Genesee ave, Teaneck, NJ 07666	(201) 862-1665	Executive Board	-
Chong, Kathy L.	9 Genesee ave, Teaneck, NJ 07666	(201) 862-1665	Executive Board	-
Kim, Bang W.	9 Genesee ave, Teaneck, NJ 07666	(201) 862-1665	Executive Board	-