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Return of Organization Exempt From Income Tax

OMB No 1545-0047

2014

Open to Public

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service Inspection ▶ Information about Form 990 and its instructions is at www.irs.gov/form990. For the 2014 calendar year, or tax year beginning 2014, and ending D Employer identification number C Name of organization Asian Chamber of Commerce Check if applicable Address change Doing business as 88-0326274 Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number Name change Initial return 6431 W SAHARA AVE 7027374300 City or town, state or province, country, and ZIP or foreign postal code Final return/terminated AS VEGAS, NV 89146 G Gross receipts \$ Amended return Application pending F Name and address of principal officer H(a) Is this a group return for subordinates? Yes Vo H(b) Are all subordinates included? Yes No Terry Wong 6431 W Sahara Ave #280 Las Vegas, NV 89146 If "No," attach a list (see instructions) **√** 501(c) (Tax-exempt status 501(c)(3)) ◀ (insert no) ☐ 4947(a)(1) or J≗⊇Website: ▶ **H(c)** Group exemption number ▶ Form of organization Corporation Trust Association ☐ Other ► L Year of formation M State of legal domicile NV Part I Briefly describe the organization's mission or most significant activities. Serve and Represent the professional and business Interest of Asian Pacific Americans 2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 14 Total number of individuals employed in calendar year 2014 (Part V, line 2a) 5 1 Total number of volunteers (estimate if necessary) 6 20 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, line 34 7h Current Year Contributions and grants (Part VIII, line 1h) . 8 129,065 128,133 9 Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 76) ES 10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)-11 O 0 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 128,133 129,065 13 Grants and similar amounts paid (Part IX, column (A),-lines-1-3). 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 22,716 16a→ Professional fundraising fees (Part IX, column (A), line 11e) . . . Total fundraising expenses (Part IX, column (D), line 25) ▶ b 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 70,446 73,702 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 112,545 96,418 19 Revenue less expenses. Subtract line 18 from line 12 . 16,520 31,715 Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 40,303 79,857 21 Total liabilities (Part X, line 26) 249 194 22 Net assets or fund balances. Subtract line 21 from line 20 40,054 79,663 Signature Block 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 Sign Signature of officei Here Type or print hame and title Print/Type preparer's name reparer's signature Date Paid Check I If self-employed Preparer Firm's name Firm's EIN ▶ **Use Only** Phone no

]Yes ☐ No Form **990** (201

May the IRS discuss this return with the preparer shown above? (see instructions)

1. Is the organization described in section 501(e)(3) or 4947(e)(1) (other than a private foundation)? If "Yes," complete Schedule A. Schedule G. Schedule G. Cartifutotos (see instructions)? 2. Is the organization required to complete Schedule B. Schedule G. Cartifutotos (see instructions)? 3. Is the organization required to complete Schedule B. Schedule G. Cart I. 4. Section 501(e)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year /! "Yes," complete Schedule C. Part II. 5. Is the organization and in the section 501(e)(4). 501(e)(5), or 501(e)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C. Part II. 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 II. 7. 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 but of the environment, historic land areas, or historic structures? If "Yes," complete Schedule D. Part III. 8. Did the organization and a mount in Part X, line 21 for escow or outstodial account liability, serve as a custodiant for amounts, pormanent endowments, are quest-endowments? If "Yes," complete Schedule D. Part VII. 9. If the organization directly or through a related organization, hold assets in temporally restricted endowments, pormanent endowments, are quest-endowments? If "Yes," complete Schedule D. Part VII. 10. Did the organization accessed "If "Yes," complete Schedule D. Part VII. 11. If the organization directly or through a related organization, but a section of the stolal assets reported in Part X, line 157 If "Yes," complete Schedule D. Part VIII. 11. Just the organizatio	Form 99	0 (2014)		ı	Page 3
1. Is the organization described in section 501(e)(3) or 4947(e)(1) (other than a private foundation)? If "Yes," complete Schedule A. Schedule of Contributors (see instructions)? 2. Is the organization required to complete Schedule B. Schedule C. Part II. 3. Did the organization sequel in direct or indicate political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II. 4. Section 501(e)(3) organizations. Did the organization regards with the control of t	Part	V Checklist of Required Schedules			
2 Is the organization required to complete Schedule B, Schedule of Cantibutors (see instructions)? 2 In the organization regale in direct or indicate political carpaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II. 4 Section S01(c)(d) 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. 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6), or	1,	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
3 Old 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 . 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 . 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. 6 Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II . 7 Did the organization maintain collections of works of art, instinctial treasures, or other similar assets? If "Yes," complete Schedule D, Part III . 8 Did the organization instination collections of works of art, instinctial treasures, or other similar assets? If "Yes," complete Schedule D, Part III . 9 Did the organization of the part X, in Eq. (1) or escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, in Eq. (2) or Part IV. 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or part II . 10 Did the organization organization amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI, IV, IV, IV, IV, X, X as applicable. 10 Did the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI . 11 Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assests reported in Part X, line 16? If "Yes," complete Schedule D, Part VI III VI VI Did the organization report an amount for investments—organization and the part X, line 13 that is 5% or more of its total assests reported in Part X, line 1		·			1
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B Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 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. 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. If the organization's answer to any of the following questions is "Yes," complete Schedule D, Part V. If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII. Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of list total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of list total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. 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 X III. Did the organization report an amount for other labilities in Part X, line 25? If "Yes," complete Schedule D, Part X III. Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X III. Did the organization ashood described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E, Parts II and IV. Did the organization report on Part IX, column (A), line 3, more than \$10,000 from grantmaking, for organization report more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 6	7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			1
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of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. 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. e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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 111	b		11b		√
reported in Part X, line 16? If "Yes," complete Schedule D, Part IX e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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 12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 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 13 Is the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14 a Did the organization maintain an office, employees, or agents outside of the United States? b 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? If "Yes," complete Schedule F, Parts I and IV. 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV. 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of expenses for professional fundraising services on Part VIII, lines 6 and 11e? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income and contributions on Part VIII, lines 1 and 8a	С		11c		1
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12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 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		Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
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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	15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			1
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? If "Yes," complete Schedule G, Part I (see instructions)	16				
Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	17	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)			
If "Yes," complete Schedule G, Part III	18	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		√
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . 20b ✓	19	If "Yes," complete Schedule G, Part III			1
					✓
	b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .		, <u>aan</u>	√

Part	Checklist of Required Schedules (continued)			
04	Did the executation remark was all the control of t		Yes	No
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		, √
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		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
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		 ✓
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 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	24d 25a		
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		
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		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):	,		
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		√
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29 30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If</i> "Yes," <i>complete Schedule R, Part I</i>	33		1
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		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		√
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
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,</i>			
38	Part VI	37		1
		_ 55		

Form **990** (2014)

Part					
	Check if Schedule O contains a response or note to any line in this Part V	·_ · · · · · · ·		1 32	
1a	Enter the number reported in Poy 2 of Form 1006. Enter . 0. if not applicable	1a	N 7	Yes	No
b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b			
C	Did the organization comply with backup withholding rules for reportable payments			72.3	,, ,
-	reportable gaming (gambling) winnings to prize winners?		1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1 1	15.54	Mrs.	<u> </u>
	Statements, filed for the calendar year ending with or within the year covered by this return	2a			Ϊ,
b	If at least one is reported on line 2a, did the organization file all required federal employment	tax returns? .	2b	1	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see inst			(3)	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year	•	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in So	chedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature of	or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or	or other financial			
	account)?		4a		V
b	If "Yes," enter the name of the foreign country: ▶			97.77	\$
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Fin	nancial Accounts			
_	(FBAR).	_		<u> </u>	بِعَالًا.
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax	-	5a	<u> </u>	1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelte	r transaction?	5b		
с 6а	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	 00 and did tha	5c		
Oa	organization solicit any contributions that were not tax deductible as charitable contributions		60		/
b	If "Yes," did the organization include with every solicitation an express statement that such		6a	-	
-	gifts were not tax deductible?	CONTINUATIONS OF	6b		
7	Organizations that may receive deductible contributions under section 170(c).		\(\frac{1}{2}\)	₩° 3	7
	Did the organization receive a payment in excess of \$75 made partly as a contribution and	partly for goods		× 37 -	
	and services provided to the payor?		7a	herbe	1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	-	ΙĖ
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property f				
	required to file Form 8282?		7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	25 3.6	, Te	1.
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal b	enefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal bene	fit contract?.	·7f		✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form	•	7g		1
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file		7h		<u> </u>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund m	aintained by the		<u>',</u>	
•	sponsoring organization have excess business holdings at any time during the year?		8		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.			\$	~ \
a	Did the sponsoring organization make any taxable distributions under section 4966?		9a	_	├
b 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related pers Section 501(c)(7) organizations. Enter:	son?	9b	8€ ₹	2
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			Ι,
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities .	10b			×
11	Section 501(c)(12) organizations. Enter:	[105]		141	, .
	Gross income from members or shareholders	11a			
	Gross income from other sources (Do not net amounts due or paid to other sources				38
	against amounts due or received from them.)	11b			*
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu or		12a) Jack British	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	45.	100	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				# \$K.
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	e O.		2, 3, 3, s.	· &
	Enter the amount of reserves the organization is required to maintain by the states in which		021 J		
	the organization is licensed to issue qualified health plans	13b	1. 14	, ·	,
	Enter the amount of reserves on hand	13c	10	1:0	
	Did the organization receive any payments for indoor tanning services during the tax year? .		14a	<u> </u>	<u> </u>
b	If "Yes," has it filed a Form 720 to report these payments? If "No " provide an explanation in S	Schedule O	14h	l	I

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response or note to any line in this Part VI	iee ins	tructi	ons.
Secti	on A. Governing Body and Management	<u> </u>		
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b 2	Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	**************************************	7
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		1
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets?. Did the organization have members or stockholders?	5 6		√ √ √
b	one or more members of the governing body?	7a 7b		√
8 a	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body?	8a		
ь 9	Each committee with authority to act on behalf of the governing body?	8b		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	_	ode.)	
	on bir choice (The economic hoppies and manufacture penales her required by the internal term		Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		✓
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	√	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	100	9 13 m	*; ', i
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 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 14 15	Did the organization have a written whistleblower policy?	13		✓ ✓
a b	The organization's CEO, Executive Director, or top management official	15a 15b	1	
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		1
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶			
17 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Sectio available for public inspection. Indicate how you made these available. Check all that apply.	n 501	c)(3)s	only)
19	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of infinancial statements available to the public during the tax year.	erest	policy	y, and
20	State the name, address, and telephone number of the person who possesses the organization's books and reason Chamber of Commerce 6431 W. SAHARA AVE STE 280 Las Vegas, NV 89146 (702) 737-4300	cords	:▶	

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Form	990	(2014)	

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Page	•

	•		
Part V	Ш	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,	and
		Independent Contractors	

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 employees."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization no	r any relate	d orga	aniz			ompe	nsa	ted any curren	t officer, director	, or trustee.
(A) Name and Title	(B) Average hours per week (list any	bòx, i	unles er and	Pos neck s pe d a d	rson	than on the than of the the than of the than of the	an ee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Terry Wong			 						;	
President	8.00	✓		✓				0	0	0
(2) Ken Liu			i	١,						
Vice President	6 00	✓.	<u> </u>	✓	_		<u> </u>	0	0	0
(3)	1									
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)		_					_			· · · · · · · · · · · · · · · · · · ·
(12)		-								
(13)										
(14)										

r ai i	VII Section A. Officers, Directors, Trust	lees, Key E	mpio	yees		na r C)	ligne	St C	ompensated E	mpioyees (CONTINUE	ea)		
		-			•	•					ŀ		_	
	(A)	(B) Position (D) (E)					(F) ,		,					
1	Name and title	Average hours per				erson is both an Reportable Reportable compensation rom						mate ount c		
		week (list any		_				, 	from	related			ther	,
		hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	ğ ģ	Former	the	organizatio		comp		
		related organizations	P G	Ĕ	ĕ	em_	og eg	₽	organization (W-2/1099-MISC)	(W-2/1099-N	AISC)		m the	
		below dotted	Q 2	nal		<u></u>	i g		(** 2, 1000 *********************************	ļ			relate	
		line)	l st	ŧ		99	l bei					orgar	nizatio	ons
			18	stee			Highest compensated employee		1					
				L"		L	<u>e</u>							
(15)						İ								
(16)						i			1		ļ			
(17)														
(18)														
		<u> </u>	1											
(19)														
			1								Ì			
(20)														
			1											
(21)														
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(22)							-				-			
·/														
(23)								\vdash						
3777														
(24)						_		 						
37														
(25)								-						
(20)														
	Sub total						L	_						
C	Sub-total			•	•		•					·····		
d		•		•	•	• •	•							
<u>u</u>	······································				_		<u> </u>	<u> </u>						
2	Total number of individuals (including but reportable compensation from the organi		i to th	ose	list	ea a	above	e) W	no receivea mo	ore than \$1	00,000	or		
-	reportable compensation from the organic	Zation											V	N.
3	Did the organization list any former of	liaar diraa	tar a		uoto		م برما	·~-	lovoo or biab	aat aamna	hotod		Yes	No
3	Did the organization list any former of employee on line 1a? If "Yes," complete S							mp	noyee, or nigh	est compe	nsated		ļ	- ,
	· •											3	<u> </u>	 ✓
4	For any individual listed on line 1a, is the													,
	organization and related organizations	greater tha	an \$1	50,	UUU	? 11	"Ye	s, "	complete Sch	edule J fo	r such	ļ		
_	individual		• •	٠.			•					4		/
5	Did any person listed on line 1a receive o									ation or ind	lividual			
	for services rendered to the organization?	r ir "Yes," c	ompi	ete .	Scn	eau	ile J t	or s	ucn person	· · · ·	<u> </u>	5	L	
Section	on B. Independent Contractors													
1	Complete this table for your five highest of													
	compensation from the organization. Rep	ort comper	nsatio	n fo	or th	e c	alend	ar y	ear ending wit	h or within t	the orga	anizatio	on's	tax
	year.													
	(A)								(B)		_	(C)		
	Name and business add	ress							Description of si	ervices	C	ompens	ation	
2	Total number of independent contracto	rs (ıncludir	ng bu	t no	ot I	imit	ed to	th	ose listed abo	ove) who				
	recoved more than \$100,000 of company													

	90 (2014	<u>,</u>			· <u> </u>			Page 9
Part	VЩ	Statement of Reven			a anu lina ia thia	Dort VIII		_
	, ,	Check if Schedule O o	contains a resp	oonse or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
tributions, Gifts, Grants Other Similar Amounts	1a b c d e f	Federated campaigns Membership dues . Fundraising events . Related organizations Government grants (contri All other contributions, gifts	1b 1c 1d butions) 1e	13,276 48,560		٠ : ١٠٠٠ <u> </u>		
Contributions, (and Other Simil	g h	and similar amounts not include Noncash contributions included Total . Add lines 1a–1f	ded above 1f	66,297	128,133		*	
Program Service Revenue	2a b c	Total. Add lines 14-11		Business Code	120,133			
Program	e f g	All other program service Total. Add lines 2a-2f		•		8 × / > \$ \$ \$ \$ \$. 3 3.	
	3 4 5	Investment income (in and other similar amount income from investment of Royalties	nts)	ond proceeds ▶		<	9	4
	6a b c d	Gross rents Less. rental expenses Rental income or (loss) Net rental income or (loss)	SS)					***
	7a b	Gross amount from sales of assets other than inventory Less' cost or other basis and sales expenses .	(i) Securities	(ii) Other				
	c d	Gain or (loss)		▶				e 3 1, % 5
Other Revenue	8a	Gross income from fundevents (not including \$ of contributions reported See Part IV, line 18 .						
ð	b c 9a	Less: direct expenses Net income or (loss) fro Gross income from gam See Part IV, line 19	m fundraising	events . ►		3		
	b c 10a	Less: direct expenses Net income or (loss) fro Gross sales of invereturns and allowances	m gaming acti entory, less	vities ▶			,	
	b c	Less: cost of goods sol Net income or (loss) fro	m sales of inve	entory ►				×
	11a b c				An annual value va		Andrew or Appeared to the second of the seco	A companies organical organical design of a con-
	d e	All other revenue . Total. Add lines 11a-11 Total revenue See ins		🟲	0	0	0	C

Part IX Statement of Functional Expenses

Section	Check if Schedule O contains a respon				
Do no	ot include amounts reported on lines 6b, 7b,		(B)		(D)
8b, 9l	b, and 10b of Part VIII.	(A) 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 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees			, , ,	1, {}
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 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	20,119	0	20,119	(
9	Other employee benefits				
10	Payroll taxes	2,597	0	2,597	
11	Fees for services (non-employees):				
a	Management				
þ	Legal				
C	Accounting				
d	Lobbying			0.000	
e	Professional fundraising services. See Part IV, line 17		, , , , , , , , , , , , , , , , , , , ,	· 1/2/3/4/2	
f g	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13	Office expenses	9,142	0	9,142	
14	Information technology	0/1/12		9,112	
15	Royalties				
16	Occupancy	16,333	0	16,333	(
17	Travel		<u> </u>	. 0,000	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	2,609	0	2,609	(
20	Interest				·
21	Payments to affiliates				,
22	Depreciation, depletion, and amortization .		·		
23	Insurance	1,830	0	1,830	0
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.)	*, *	3 44.23	*	4 3.
а	Bank and Merchant Charge	3,373	0	3,373	(
b	Utilities	3,632	. 0	3,632	
С	Luncheon	25,422	25,422	0	
d	Chinese New Year	9,918	9,918	0	(
е	All other expenses	1,443	0	1,443	
25	Total functional expenses. Add lines 1 through 24e	96,418	35,340	61,078	
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)				

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X Beginning of year End of year Cash - non-interest-bearing 1 40.303 1 79,857 2 2 Savings and temporary cash investments 3 3 4 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 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 6 **Assets** 7 7 Inventories for sale or use 8 Prepaid expenses and deferred charges . 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a Less: accumulated depreciation 10b b 10c 11 Investments—publicly traded securities 11 12 12 Investments—other securities. See Part IV, line 11 . . . 13 Investments—program-related. See Part IV, line 11... 13 14 14 Other assets. See Part IV, line 11 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 40.303 79,857 17 Accounts payable and accrued expenses 17 249 194 18 18 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. Loans and other payables to current and former officers, directors, 22 trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties . . . Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 25 Total liabilities. Add lines 17 through 25 26 249 194 Organizations that follow SFAS 117 (ASC 958), check here ▶ Balances complete lines 27 through 29, and lines 33 and 34. 27 27 Unrestricted net assets 40,054 79,663 28 28 Fund 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34. Net Assets or 30 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 32 32 Retained earnings, endowment, accumulated income, or other funds. 33 33 40,054 79,663 40,303 34 79.857

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Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			<i>′</i>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		12	8,133
2	Total expenses (must equal Part IX, column (A), line 25)	2		ę	6,418
3	Revenue less expenses. Subtract line 2 from line 1	3		3	31,715
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		. 4	10,054
5	Net unrealized gains (losses) on investments	5			0
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			7,894
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	1			
	33, column (B))	10		7	9,663
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	· · ·			
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other		_	,3%	
	If the organization changed its method of accounting from a prior year or checked "Other," exp	olain ir	1		
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	iled o	۱	r saile	
	reviewed on a separate basis, consolidated basis, or both:				, m.
	Separate basis Consolidated basis Both consolidated and separate basis			++++ e>+	
b	Were the organization's financial statements audited by an independent accountant?		2b		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	d on a	¹	, i	
	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 over the audit review or committee of its financial extrements and collection of an independent account.		i I		
	of the audit, review, or compilation of its financial statements and selection of an independent accounts the appropriate and selection of an independent accounts the appropriate and selection of an independent accounts.				ļ
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	olain ir	۱		,
_					
за	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?	ortn ir			,
	♥		3a		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au		1 1		
	required addition addits, explain why in Schedule O and describe any steps taken to undergo such at	iulis.	3b	000	
			Forn	n 9 90	(2014)

SCHÈDULE 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.

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

► 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. Name of the organization Employer identification number

Inspection

Asian Chamber of Commerce	88-0326274						
Pt VI-A, Line 8 There are written recorded minutes for Executive Board and General Board meetings							
Pt VI-B, Line 11a Directors with ACC selects CPA firm such as Chen Accounting Group to review Form	990						
Pt VI-B, Line 15 Executive Board performs periodic reviews of top management and key employees.							
Pt VI-C, Line 19 Governing documents are available upon request. Governing documents are kept at the	ne ACC offices						
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Schedule O (Form 990 or 990-EZ) (2014)	P	Page 2
Name of the organization	Employer identification number	-
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