For	_m 99	Return of Organization Exempt From In Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (exc	2949 come Tax	3	4909 0MB NO 1545-0047 2019
(Rev Depa	January 202 artment of the nal Revenue	20) Treasing To not enter social security numbers on this form as it may be service To not enter social security numbers on this form as it may be service. Go to www irs.gov/Form990 for instructions and the latest	e made public.	70	Open to Públic Inspection
A		2019 calendar year, or tax year beginning 06/01/19, and ending 05/31/2			mspection
В	Check if applic			D Employer iden	tification number
	Address chan				
I = I	Name change	Doing his page as CUTNA HOLDY CONGRUTTHY FOLDING HITCH	· - · ·	99-031	5441
2	warne change	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone num	ber
Q 1	Initial return	8 SOUTH KING STREET, 2ND FLOOR		808-53	3-3181
	Final return/ terminated	City or town, state or province, country, and ZIP or foreign postal code			
	Amended retu	HONOLULU HI 96813		G Gross receipts \$	214,691
、	Application pe	P Name and address of principal officer	H(a) Is this a ore	oup return for subordin	nates? Yes X No
λ_{l}	мринсавон ре	OCCUPATION OF THE PROPERTY OF		•	
4		92-1354 KIKAHA STREET	_	oordinates included? " attach a list (see if	Yes No
. 1 -		KAPOLEI HI 96707 status X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or → 27	-)	attach a list (see li	isa actions)
\mathcal{R} \vdash	Tax-exempt		4		
\$ 1	Website.			994 M S	77.7
/\	Form of orgai	Inization X Corporation Trust Association Other ▶ L \ Summary	fear of formation 1	. 994 M S	itate of legal domicile HI
V — I		efly describe the organization's mission or most significant activities			
		See Schedule O			
ng L	`	see schedule o			
Governance					
パンショ	2 05	BECEIVED.	M CORRES		
	1	eck this box ▶ ☐ if the organization discontinued its operations or disposed \$\overline{\text{LEQ}}\$ THE STATE OF THE PROPERTY OF THE PROPER	5% of his net as: 0SC - 26	sets //a/F	
11%	1	the second state of the governing real, (1 and 14)	.00 ==		
Activities &	1	mber of independent voting members of the governing body (Part VI, line 1b)	1 2021	4 5	
Ě	1	tar number of individuals employed in calendar year 2019 (Part V, line 2a)	T LOL!	5 0	
¥	1	tal number of volunteers (estimate if necessary)		6 0	
	1	tal unrelated business revenue from Part VIII, column (C), line 12 OGDEN	I, UTAH	7a	0
- -	b Net	t unrelated business taxable income from Form 990-T, line 39	Pnor Ye	7b	Current Year
1 2021 21 -	8 Co	ntributions and grants (Part VIII, line 1h)		1,308	131,343
いだ。	9 Pro	ogram service revenue (Part VIII, line 2g)		1,764	50
000	1	estment income (Part VIII, column (A), lines 3, 4, and 7d)		1,402	407
>-4%		ner revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	· - · · · · · · · · · · · · · · · · · ·	7,946	19,874
9₹	1	tal revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,420	151,674
Σ		ants and similar amounts paid (Part IX, column (A), lines 1–3)		7,700	37,000
Ur	1	nefits paid to or for members (Part IX, column (A), line 4)			0
第5 %	1	laries, other compensation, employee benefits (Part IX, column (A), lines 5–10)			0
ZO S	16a Pro	ofessional fundraising fees (Part IX, column (A), line 11e)			0
SCANN 2200 Expenses	b Tot	tal fundraising expenses (Part IX, column (D), line 25) ▶ 0		17 14. 1	-
$ abla \omega_{m} $	17 Oth	ner expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1	0,687	22,009
M	1	tal expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	4	8,387	59,009
7	19 Rev	venue less expenses. Subtract line 18 from line 12	-1	5,967	92,665
	3		Beginning of Cu		End of Year
0 4 Assets or defined and the second of the	20 Tot	tal assets (Part X, line 16)		3,794	1,151,084
et A		tal liabilities (Part X, line 26)		8,862	433,487
<u> </u>		t assets or fund balances. Subtract line 21 from line 20	62	4,932	717,597
	art II	Signature Block			
		ties of perjury, I declare that I have examined this return, including accompanying schedules and stateme, and complete. Declaration of preparer (other than officer) is based on all information of which preparer I			dge and belief, it is
۸.		Signature of officer		Date	100
Sig He	- 1.		PRESIDE		
ne	ie	Type or print name and title	FRESTDEL	4 T	
	p.	Print/Type preparer's name Preparer's signature	Date	Check	ıf PTIN
Pai	ا د			Check	"
	narer F	CUIDIC C MONG CDAIG THE		T/-/-	99-0209165
	Only	1149 BETHEL STREET STE 711		unisein 🗸 .	72 0203103
	- 1	HONOLULU, HI 96813	MAY.	0000000 80	8-521-2602
May		discuss this return with the preparer shown above? (see instructions)		municip 117	Yes No
	<u> </u>		RECEIVED	ENLIEV DE	
DAA		·	· IFOLIVED	CAHLL DE	F
				CVY	
				300	· (0

99-031544 TBA

Part V Checklist of Required Schedules

- 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A
- 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?
- 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I
- 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
- Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I
- 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II
- 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III
- 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV
- Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V
- 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable
 - a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI
 - b Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII
 - c Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII
 - 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
- 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
- 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 14a 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
- Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV
- 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
- 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)
- Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II
- 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?
 If "Yes," complete Schedule G, Part III
- 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H
 - b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?
- 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

	Yes	No
4	v	
1 2	X	
3	 	X
4	-	x_
5		x
6	+	X
7	ļ	х
8	-	x
9		x
10		x
	in a	X
444		
118		
111		X
110	:	x
110		x
116	-	X
111	F	X_
128	3	х
128	,	x
13		X
148		Х
141		x
15		х
16		х
17		х
18	+	X
19		X
20		Х
201	+	
21	х	
F	orm 99 6	0 (2019)

_ <u>Pa</u>	in iv Checklist of Required Schedules (Continued)		,_ _	
			Yes	<u>No</u>
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			x
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	\dashv	
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	1 1		
	employees? If "Yes," complete Schedule J	23		x
242	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
24 a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
_	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			1
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			1
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part			
	IV instructions, for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			.
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		_^
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	200		x
••	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	30_		x
24	conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
31 32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	-31		
32	complete Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- 5-		 -
33	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
•	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
_	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O	38	<u> </u>	X
P	art V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			_Ц
		,	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 3			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		X

Pa	irt V Statements Regarding Other IRS Filings and Tax Compliance (continued)	_ · · · · · · · · · · · ·		,
_	· · · · · · · · · · · · · · · · · · ·		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
	otation into the defendance of			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			x
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		_^
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		-
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			3.5
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?'	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	_	X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			7.7
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			37
	gifts were not tax deductible?	6b		X
7	Organizations that may receive deductible contributions under section 170(c)			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_		x
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d 7			X
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		1
9	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 <u>9</u> 7h		<u> </u>
h	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			T
8	sponsoring organizations maintaining dollor advised funds. Did a dollor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		X
•	Sponsoring organization have excess business holdings at any time during the year. Sponsoring organizations maintaining donor advised funds.	7		
9	Did the sponsoring organization make any taxable distributions under section 4966?	9a		X
a	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
b 10	Section 501(c)(7) organizations. Enter	100		<u> </u>
	Initiation fees and capital contributions included on Part VIII, line 12			
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		!	
11	Section 501(c)(12) organizations. Enter			
'' a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			į
•	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			1
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see instructions and file Form 4720, Schedule N		<u></u>	
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O			<u> </u>
		_	'00'	A

<u>Form</u>	990 (2019) CHINESE CHAMBER OF COMMERCE 99-0315441-	(age 6
_Pa	rt VI] Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and			
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O Se	e ınsț	ructio	
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management	-		
	1. I e	$\overline{}$	Yes	<u>No</u>
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 5	1		ļ
	If there are material differences in voting rights among members of the governing body, or			1
	if the governing body delegated broad authority to an executive committee or similar			1
	committee, explain on Schedule O			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 5	-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			<u>x</u>
	any other officer, director, trustee, or key employee?	2		
3	Did the organization delegate control over management duties customarily performed by or under the direct	,		<u>x</u> _
	supervision of officers, directors, trustees, or key employees to a management company or other person?	4		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	6	х	
6	Did the organization have members or stockholders?	-		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	7a		x
	one or more members of the governing body?	/a		
þ	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7b		x
_	stockholders, or persons other than the governing body?	7.6		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	8a	$\overline{\mathbf{x}}$!
a	The governing body?	86	X	
р	Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	00		
9	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		x
500	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Co			
JEC	tion B. I Oncies (This Occitor B requests information about policies not required by the informat Nevenue oc	<u>uo / _</u>	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10ь		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		x
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	x	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
•	describe in Schedule O how this was done	12c		x
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	l	l	ll
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			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		_X_
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		L
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ None			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and			
	financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records ▶			
C	HUNG & WONG, CPA'S INC. 1149 BETHEL STREET, SUITE 711		_	
**	ONOTHER HT 96913 909	ィーちつ	コー?	602

a	a	_	Λ	3	1	5	1	Λ	1

arm 000 (2010)	CUTNECE	CHAMBED	$\cap \mathbb{F}$	COMMERCE
orm 990 (2019)	LHINEST		Ur	COMMERCE

_		_
മ	an	•

	//J/ VIII	~						
Part VII	Compensation	of Officers,	Directors,	Trustees,	Key Employees	, Highest Compen	sated Employees	, and
	Independent C	ontractors						

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and title	(B) Average hours per week (list any hours for	(dd box off	o not o x, unle icer a	Pos check ess pe	c) ition more irson i	than or is both ir/truste	ne an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key emplcyee	Highest compensated employee	Former			related organizations
(1) WALTER T C CHANG	;							-		- · · ·
	1.00							_	_	_
TREASURER	0.00	X		X		\sqcup		0	0	0
(2) MICHELE C CHOY									,	
	1.00									0
VICE PRESIDENT	0.00	X		X	_	┨		0	0	0
(3) JOSEPH K M HU	1.00									
VICE PRESIDENT	0.00	x		x				0	o	0
(4) ELVIRA LO	0.00		-			+				
(4/22/2141 20	1.00									
TRUSTEE	0.00	X		x				0	0	0
(5) ALVIN C P WONG										
	1.00				İ					
SECRETARY	0.00	X		X				0	0	0
(6)	·									
(7)		 		-	-	\vdash				
(7)										
(8)										
				1						
(0)		1	-	 		\vdash				
(9)		1								
(10)										-
(44)		╁	-	├—	├	\vdash				
(11)										
		1								;
	<u> </u>		<u> </u>		<u> </u>			I	L	

<u>l Part '</u>	(A) Name and title	(B) Average hours per week (list any	(dd	o not o	Pos check	c) ition more rson i	than o s both r/truste	ne an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	co	of otb ompens from t	ation he	
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)		anızatı	on and nization	ns
			ĺ											
								-						
						:					_			
1b S	ubtotal							<u> </u>				_		
c T	otal from continuation she otal (add lines 1b and 1c)	ets to Part VII,	Sect	ion A	4			>						
2 T	otal number of individuals (in portable compensation from				thos	e lis	ted a	bov	re) who received more than	\$100,000 of	· · · ·			LNI
e 4 F	id the organization list any fo mployee on line 1a? <i>If "Yes,"</i> or any individual listed on lin	" complete Sche e 1a, is the sum	<i>dule</i> of re	J for	<i>suc.</i> able	h ind	dividi. ipens	<i>ial</i> satio	on and other compensation	from the		3	Yes	X
1r 5 D	rganization and related organ idividual and any person listed on line 1 or services rendered to the or	la receive or acc	rue	com	pens	atioi	n fror	n ar	ny unrelated organization o		_	4 5	·	x x
1 C	B. Independent Contractor omplete this table for your fire	ve highest comp	ensa	ated	ındej	pend	dent d	cont	ractors that received more	than \$100,000 of				
c	ompensation from the organ Name and	ization Report c (A) business address	<u>omp</u>	ensa	ition	for t	he ca	len		nin the organization's tax ye (8) stron of services	ear	Co	(C) mpensa	ation
						•								
2 T	otal number of independent	contractors (incl	uding	g but	not	lımıt	ed to	tho	se listed above) who					
DAA	eceived more than \$100,000	of compensation	<u>fro</u>	m the	e org	anız	ation	•		0		For	m 99	0 (2019)

Part VIII! Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded (A) (C) Unrelated Total revenue function revenue business revenue from tax under --sections 512-514 Contributions, Gifts, Grants and Other Similar Amounts 1a Federated campaigns 1a 1b b Membership dues 1c c Fundraising events d Related organizations 1d 50,743 e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f 80,600 g Noncash contributions included in lines 1a-1f 1g 131,343 ▶ h Total. Add lines 1a-1f Business Code 50 50 MEETING INCOME Program Service Revenue h С f All other program service revenue 50 \triangleright q Total. Add lines 2a-2f 3 Investment income (including dividends, interest, and 407 407 other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (II) Personal (ı) Real 82,891 6a Gross rents 63,017 6b **b** Less rental expenses 19,874 c Rental inc or (loss) 19,874 19,874 ▶ d Net rental income or (loss) 7a Gross amount from (i) Securities (ii) Other sales of assets 7a other than inventory Other Revenue b Less cost or other 7b basis and sales exps c Gain or (loss) 7с Þ d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 8a b Less direct expenses ▶ c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 9b b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances 10b b Less cost of goods sold c Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 11a d All other revenue Total. Add lines 11a-11d 20,331 0 151,674 Total revenue. See instructions

Form 990 (2019) CHINESE CHAMBER OF COMMERCE
Part IX Statement of Functional Expenses

Do n	Check if Schedule O contains a response of include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	- (C) Management and	(D) Fundraising
7b, 8	b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments See Part IV, line 21	37,000	37,000		
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				
	ındıvıduals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits			· · · · · · · · · · · · · · · · · · ·	
10	Payroll taxes				•
11	Fees for services (nonemployees)				
a	Management	2,000	2,000		
b	Legal	2,000			
	Accounting				
d	Lobbying Professional fundamental and appropriate Con Part IV, line 17				
e	Professional fundraising services See Part IV, line 17				
'_	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column	11,978	11,978		
12	(A) amount, list line 11g expenses on Schedule O)	11,570	11,510	-	
13	Advertising and promotion Office expenses				•
14	Information technology				
15	Royalties				
16	Occupancy			···	
17	Travel				
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				•
22	Depreciation, depletion, and amortization	8,031	8,031		
23	Insurance		- /		
24	Other expenses Itemize expenses not covered				-
	above (List miscellaneous expenses on line 24e If				· ·
	line 24e amount exceeds 10% of line 25, column			•	
	(A) amount, list line 24e expenses on Schedule O)				
а	.,,				
b					
c					
d	F				
e	All other expenses				
25	Total functional expenses Add lines 1 through 24e	59,009	59,009	0	
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 following SOP 98-2 (ASC 958-720)				

,	Check of Schedule O contains a response or note to	,	(A)		(B)
	-		Beginning of year		End of year
1	Çash—non-interest-bearing	}	53,354 30,752	1	171,372
2	Savings and temporary cash investments	-	30,732	2	24,01
3	Pledges and grants receivable, net	-	101 671	3	EE 70:
4	Accounts receivable, net	<u></u>	121,671	4	55,79:
5	Loans and other receivables from any current or former of	i			
	trustee, key employee, creator or founder, substantial co				
1	controlled entity or family member of any of these person	[=		5	
6	Loans and other receivables from other disqualified person	· [-			
7	under section 4958(f)(1)), and persons described in secti	on 4958(c)(3)(B)		6	
	Notes and loans receivable, net	<u> </u>		7	
•	Inventories for sale or use	-		8	
9	Prepaid expenses and deferred charges	, , <u>,</u>		9	
10a	Land, buildings, and equipment cost or other	1,059,626			
١.	basis Complete Part VI of Schedule D	400 000	850,218	10c	876,65
1	Less accumulated depreciation	10b 182,974	16,327	11	22,10
11	Investments—publicly traded securities	-	10,321	12	22,10
12	Investments—other securities See Part IV, line 11	<u> </u>		13	
13	Investments—program-related See Part IV, line 11	<u> </u>	1,472	14	1 1,14
14	Intangible assets	<u> </u>	2/3/2	15	<u> </u>
15	Other assets See Part IV, line 11	,	1,073,794	16	1,151,08
16	Total assets Add lines 1 through 15 (must equal line 33 Accounts payable and accrued expenses		742	17	74:
17	Grants payable	ļ-	,	18	
19	Deferred revenue	†		19	
20	Tax-exempt bond liabilities	ļ-		20	
21	Escrow or custodial account liability Complete Part IV of	Schedule D		21	
.	Loans and other payables to any current or former office	1			*
	trustee, key employee, creator or founder, substantial co				•
5	controlled entity or family member of any of these persor			22	,
23	Secured mortgages and notes payable to unrelated third			23	
24	Unsecured notes and loans payable to unrelated third pa		448,120	24	432,74
25	Other liabilities (including federal income tax, payables to				
	parties, and other liabilities not included on lines 17-24)	i i			
	of Schedule D			25	
26		Ī	448,862	26	433,48
1	Organizations that follow FASB ASC 958, check here				
ິດ	and complete lines 27, 28, 32, and 33.		<u> </u>		
27	Net assets without donor restrictions			27	
28	Net assets with donor restrictions	[28	
2	Organizations that do not follow FASB ASC 958, che	ck here ▶ 🕱 ,			
Ē	and complete lines 29 through 33.	_			
27 28 29 30 31 32				29	
30		fund		30	
2 31			624,932	31	717,59
32	Total net assets or fund balances		624,932		717,59
33	Total liabilities and net assets/fund balances		1,073,794	33	1,151,08

orm	1990 (2019) CHINESE CHAMBER OF COMMERCE 99-0315441	· · · · · · · · · · · · · · · · · · ·	4 43	Pag	ge 12
	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>	<u>·</u>	ᆚ
1	Total revenue (must equal Part VIII, column (A), line 12)	1			674
2	Total expenses (must equal Part IX, column (A), line 25)	2			009
3	Revenue less expenses Subtract line 2 from line 1	3	9	92,	<u>665</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	62	24,	<u>932</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10	7:	L7,	<u>597</u>
Pa	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				ليل
				Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other		_		,
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				į
	Schedule O				`
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis			-	'
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				ļ.,
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis		-		'
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O		-	~-	'
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				٠,
	Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		l

Form **990** (2019)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

2019

Open to Public Inspection

► Go to www.irs gov/Form990 for instructions and the latest information.

CHINESE CHAMBER OF COMMERCE

FOUNDATION

Employer identification number 99-0315441

Pa	rt I	Reas	on for Public Charity	Status (All organizations	must co	mplete	this part) See instruction	ns	
The	orga	nization is not	a private foundation becaus	e it is (For lines 1 through 12,	check only	one box)		
1	\Box	A church, coi	nvention of churches, or ass	ociation of churches described	ın sectior	170(b)(I)(A)(ı).	1	
2		A school des	cribed in section 170(b)(1)(A)(ıi). (Attach Schedule E (Forr	n 990 or 9	90-EZ))	<i>(</i>)		
3	П			ce organization described in se			ıii).		
4	П	A medical res	search organization operated	d in conjunction with a hospital	described	ın sectio	n 170(b)(1)(A)(iii). Enter the h	ospital's name,	
		city, and state	e						
5	\Box	•		of a college or university owned	or operate	ed by a g	overnmental unit described in		
	_	_	b)(1)(A)(ıv). (Complete Part						
6	\Box			overnmental unit described in s	ection 17	'0(b)(1)(A)(v).		
7	X		ion that normally receives a section 170(b)(1)(A)(vi). (C	substantial part of its support fr omplete Part II)	om a gove	ernmental	unit or from the general public	;	
8	П			i70(b)(1)(A)(vi). (Complete Par	t II)				•
9		or university		cribed in section 170(b)(1)(A)(of agriculture (see instructions)				ge	
10		university	on that normally recover (I) more than 33 1/3% of its sup	nort from	contributi	one membership tees and are	166	
10	ш			npt functions—subject to certain				,,,,	
		•		nd unrelated business taxable in			•		
	_	acquired by t	he organization after June 3	0, 1975 See section 509(a)(2)	. (Comple	te Part III)		
11				exclusively to test for public saf				(•
12				exclusively for the benefit of, to					
				zations described in section 50					
		_		nat describes the type of suppo					
	а			erated, supervised, or controlled ver to regularly appoint or elect				ng	
				omplete Part IV, Sections A a		or the ur	rectors of trustees of the		
	ь	_ ``		pervised or controlled in conne		its suppo	rted organization(s), by having		
				ting organization vested in the					
				Part IV, Sections A and C.			3		
	С	Type III 1	functionally integrated. A sorted organization(s) (see ins	supporting organization operated tructions) You must complete	d in conne Part IV,	ection with Sections	n, and functionally integrated w A, D, and E.	ith,	
	d			i. A supporting organization ope				on(s)	
				e organization generally must sa				ess	
				nust complete Part IV, Sectio					
	е	Check th functiona	is box if the organization rec ally integrated, or Type III no	eived a written determination fr n-functionally integrated suppor	om the IR ting organ	S that it is	s a Type I, Type II, Type III		
	f		mber of supported organizati						
	g	Provide the fo	ollowing information about th	ne supported organization(s)	T			<u> </u>	
(1		ie of supported ganization	(II) EIN	(III) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	•
					Yes	No	insulation of	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(A)									
(~)									
(B)					1				
(0)				7					
(C)	-								
(D)					 	-			
(E)					-				
						ļ			
T-4-									

Page 2

CHINESE CHAMBER OF COMMERCE

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support				· · · · · ·		
Caler	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	25,500	249,456	50,085	21,308	131,343	3 477,692
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf		1				
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	25,500	249,456	50,085	21,308	131,343	477,692
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)	į					:
6	Public support. Subtract line 5 from line 4						477,692
	tion B. Total Support	го поставания					
Caler	idar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	25,500	249,456	50,085	21,308	131,34	477,692
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	29	108	548		204	1 889
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	15,200		27,226		25:	3 42,679
11	Total support. Add lines 7 through 10						521,260
12	Gross receipts from related activities, etc	(see instructions)		-		12	276,775
13	First five years. If the Form 990 is for the	organization's first	, second, third, for	urth, or fifth tax yea	ar as a section 501	(c)(3)	
	organization, check this box and stop her	е					▶ □
Sec	tion C. Computation of Public Su	upport Percent	tage				
14	Public support percentage for 2019 (line 6	, column (f) divided	by line 11, colum	ın (f))		14	91.64%
15	Public support percentage from 2018 Sch	edule A, Part II, line	e 14			15	86.11%
16a	33 1/3% support test—2019. If the organ	ization did not che	ck the box on line	13, and line 14 is 3	33 1/3% or more, o	heck this	. =
	box and stop here. The organization qual						▶ X
b	33 1/3% support test—2018. If the organ				5 is 33 1/3% or m	ore, check	
	this box and stop here. The organization						▶ _
17a	10%-facts-and-circumstances test—201	•					
	10% or more, and if the organization meet						•
	Part VI how the organization meets the "fa organization			,			·
b	10%-facts-and-circumstances test—20° 15 is 10% or more, and if the organization	•					
	Explain in Part VI how the organization me				•		
	supported organization						· • [
18	Private foundation. If the organization di	d not check a box o	on line 13, 16a, 16	b, 17a, or 17b, che	eck this box and se	ee	
	instructions						▶ _

99-0315441 CHINESE CHAMBER OF COMMERCE Page 3 Schedule A (Form 990 or 990-EZ) 201 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization rails to qualify under the tests listed below, please complete Part II) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2015 (b) 2016 (c) 2017 (d) 2018 **(é**) 2019 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise 2 sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year Add lines 7a and 7b Public support. (Subtract line 7c from line 6) Section B. Total Support (b) 2016 (၉) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (or fiscal year beginning in) (a) 2015 Amounts from line 6 10a Gross income from interest, dividends. payments received on securities loans, rents, royalties, and income from similar sources b. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b Net income from unrelated business 11 activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or 12 loss from the sale of capital assets (Explain in Part VI) 13 Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(à)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f)) 15 15 16 % Public support percentage from 2018 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage % Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f)) 17 Investment income percentage from 2018 Schedule A, Part III, line 17 19a 33 1/3% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests \neq 2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and

line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990 EZ) 2019

20

Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Se	ction	A.	All	Supporting	Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation If historic and continuing relationship, explain
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
- Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

		Yes	No
		-	
	1		
	2		
•	3a_		
	3b		
	3с		
	4a		
		•	
	4b	,	
	4c		
	.'		
	5a		
	 5b		
	5c		
	· 6		
	 7		<u></u>
	 8		
	 9a		
	9b		
	9c		
	10a		
_	10b		l
F	orm 99	0 or 990	EZ) 2019

3a

trustees of each of the supported organizations? Provide details in Part VI.

Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
em	ergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally integrated	Гуре II	l supporting organization (s	see
	instructions)			

1 2

3

4

5

1 Adjusted net income for prior year (from Section A, line 8, Column A)

Minimum asset amount for prior year (from Section B, line 8, Column A)

2 Enter 85% of line 1

Enter greater of line 2 or line 3

Income tax imposed in prior year

Par	t V IType III Non-Functionally Integrated 509(a)(3) \$	Supporting Organiza	tions (continued)	
Sect	ion D - Distributions			· Current Year
_ 1_	Amounts paid to supported organizations to accomplish exempt purpo	ses	· · · · · · · · · · · · · · · · · · ·	
2	Amounts paid to perform activity that directly furthers exempt purposes organizations, in excess of income from activity	s of supported	, -	
3	Administrative expenses paid to accomplish exempt purposes of supp	orted organizations	<u> </u>	
4	Amounts paid to acquire exempt-use assets	onco organizations	<u>.</u>	
5	Qualified set-aside amounts (prior IRS approval required)		<i>:</i>	
6	Other distributions (describe in Part VI) See instructions	···	•	•
7	Total annual distributions. Add lines 1 through 6			1
8	Distributions to attentive supported organizations to which the organizations	ation is responsive	1	
-	(provide details in Part VI) See instructions		r	
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required-explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2019			,
	From 2014			
	From 2015			
	From 2016			
	From 2017			
	From 2018			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
	Carryover from 2014 not applied (see instructions)			
j	Remainder Subtract lines 3g, 3h, and 3i from 3f			**
4	Distributions for 2019 from			
	Section D, line 7 \$			
а	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount		•	
С	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2019, if		,	
	any Subtract lines 3g and 4a from line 2 For result			
	greater than zero, explain in Part VI See instructions			<u> </u>
6	Remaining underdistributions for 2019 Subtract lines 3h		,	
	and 4b from line 1. For result greater than zero, explain in		•	
	Part VI See instructions			
7	Excess distributions carryover to 2020. Add lines 3j and 4c		•	
8	Breakdown of line 7			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			
	Excess from 2019			

Part VI

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

Part II, Line 10 - Other Income Detail

\$

42,679

SCHEDULE D (Form 990)

Department of the Treasury Internal Rèvenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information

OMB No 1545-0047 Open to Public

Inspection Employer identification number Name of the organization CHINESE CHAMBER OF COMMERCE 99-0315441 FOUNDATION Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year 4 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation Held at the End of the Tax Year easement on the last day of the tax year 2a a Total number of conservation easements 2b b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2¢ d Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes | No and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 S (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items \$ a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

		CHAMBER OF			99-0315441	Page 2
Part 3 L	t III Organizations Maintaini Using the organization's acquisition, access					sets (continued)
	collection items (check all that apply)				te significant use of its	,
a _	Public exhibition	 -	Loan or exchange pr	ogram		
b	Scholarly research	e	Other			
C	Preservation for future generations		- h 4h 6	araanination's a	warmet austrage in Dort	
	Provide a description of the organization's KIII	collections and explain	i now they further the	organization's e	xempt purpose in Fait	
	Ouring the year, did the organization solici	t or receive donations	of art, historical treas	ures, or other sin	nılar	
	assets to be sold to raise funds rather that					Yes No
Par			•	<u>-</u>		
	Complete if the organizati	on answered "Yes	" on Form 990, P	art IV, line 9,	or reported an amo	ount on Form
4- 1	990, Part X, line 21					<u> </u>
	s the organization an agent, trustee, custoncluded on Form 990, Part X?	odian or other intermed	liary for contributions	or other assets i	not	☐ Yes ☐ No
	If "Yes," explain the arrangement in Part X	III and complete the fo	illowing table			[163 [NO
~ '	Too, explain the analigement in Factor	and complete the re	moving table			Amount
c E	Beginning balance				1c	
d /	Additions during the year				1d	
e l	Distributions during the year				1e	.
	Ending balance				1 <u>f</u>	
	Did the organization include an amount or				•	∐ Yes ☐ No
Par	If "Yes," explain the arrangement in Part X t V Endowment Funds.	III Check here if the e	xplanation has been j	provided on Part	XIII	
rai	Complete if the organizati	on answered "Yes	" on Form 990 P	art IV line 10		
	Complete ii allo olganizati	(a) Current year	(b) Prior year	(c) Two years		back (e) Four years back
1a 8	Beginning of year balance					
	Contributions					
c i	Net investment earnings, gains, and					
I	osses					
	Grants or scholarships			1		
	Other expenditures for facilities and					
	programs Administrative expenses			 		
	End of year balance					
_	Provide the estimated percentage of the c	urrent vear end balanc	e (line 1g. column (a)) held as		
	Board designated or quasi-endowment	%	, ,,	•		
		6				
c ·	Term endowment ► %					
	The percentages on lines 2a, 2b, and 2c s	•				
	Are there endowment funds not in the pos	session of the organiza	ation that are held an	d administered fo	or the	No. No.
	organization by					Yes No
	(i) Unrelated organizations (ii) Related organizations					3a(i) 3a(ii)
	If "Yes" on line 3a(ii), are the related organ	nizations listed as requ	red on Schedule R?			3b
	Describe in Part XIII the intended uses of					
Par						
	Complete if the organizati	on answered "Yes	<u>" on Form 990, P</u>	art IV, line 11	a See Form 990, F	Part X, line 10
	Description of property	(a) Cost or other	1 ' '	other basis	(c) Accumulated	(d) Book value
		(investment)		her)	depreciation	F70 700
	Land			572,722 269,516	76,308	572,722 193,208
	Buildings			L01,404	9,514	
	Leasehold improvements Equipment			13,610	95,247	
	Other		<u> </u>	2,374	1,905	
	Add lines 1a through 1e (Column (d) mus	st equal Form 990, Par	t X, column (B), line		>	876,652

DAA

Schedule D (Form 990) 2019

Part VII	Investments – Other Securities. Complete if the organization answered "Yes" or	n Form 990, Part IV, line	e 11b See Form 990, F	art X, line 12
	(a) Description of security or category	(b) Book value	(c) Method of	
	(including name of security)		Cost or end-of-yea	ar market value
(1) Financia	derivatives			
-	neld equity interests			
(3) Other				
(A)				
(B)				
(C)				·
(D)				
(E)				
(F)				
(G)				
(U) (H)				· · · · · · · · · · · · · · · · · · ·
Total. (Colur	nn (b) must equal Form 990, Part X, col (B) line 12)	•		
Part VIII				
	Complete if the organization answered "Yes" or			
	(a) Description of investment	(b) Book value	(c) Method of Cost or end-of-yea	
(1)				
(2)				
(3)				· · · · · · · · · · · · · · · · · · ·
(4)				
(5)				
(6)				
(7)				
(8)				
(9)			<u> </u>	
	mn (b) must equal Form 990, Part X, col (B) line 13)	•	***************************************	
Part IX	Other Assets.		!	
1 411 171	Complete if the organization answered "Yes" or	n Form 990. Part IV. lin	e 11d See Form 990. F	Part X, line 15.
	(a) Description		-	(b) Book value
(1)				
(2)				
(3)		··········		
(4)				
(5)				
(6)				
(7)				
(8)				- -
(9)	(h) and and Form 000 Part V and (B) line (F)		•	
	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities.			
Part X	Complete if the organization answered "Yes" or	n Form 990, Part IV, lin	e 11e or 11f See Form	990, Part X,
	line 25 (a) Description of liability		· · · · ·	(b) Book value
1. (1) Fodor				(2) BOOK VAILED
	al income taxes			
(2)				
(3)		-		<u> </u>
(4)				
(5)				
(6)				
		 		
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col (B) line 25)		<u> </u>	<u> </u>
	or uncertain tax positions. In Part XIII, provide the text of the fo			
organization	's liability for uncertain tax positions under FASB ASC 740 Ch	neck here if the text of the foo	otnote has been provided in P	art XIII

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

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

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

4c

5

c Add lines 4a and 4b

Part XIII Supplemental Information (continued)

SCHEDULE 1 (Form 990)

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No 1545-0047 2019

▶ Attach to Form 990.

Open to Public Inspection % X Employer identification number Yes 99-0315441 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ▶ Go to www.irs.gov/Form990 for the latest information. CHINESE CHAMBER OF COMMERCE General Information on Grants and Assistance FOUNDATION Department of the Treasury Internal Revenue Service Name of the organization Part |

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	toring the use of g	grant funds	n the United States)
art II	nestic Organi	zations a	nd Domestic Go	vernments. Com	plete if the orga	ınızatıon answere	zations and Domestic Governments. Complete if the organization answered "Yes" on Form 990,
Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed	sceived more t	han \$5,00	00 Part II can be	Juplicated if additi	onal space is n	eeded	•
(a) Name and address of organization or government	(p) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) CHINESE CHAMBER OF COMMERCE OF HAWA							
8 SOUTH KING STREET, 2ND FLOOR							
HONOLLU HI 96813			37,000				
(2)							
(3)							
(4)	>						
(5)							
(9)							
(7)							i
(8)							
(6)							

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2019)

	ו מיניון סמוי כל משפווסמונים יו מממיונים וכלים כל	50501010500				
	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of noncash assistance
		recipients	cash grant	noncash assistance	FMV, appraisal, other)	
_						
2						
က						
•						
ĸ			•			
9						
7						
Part IV	Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	ide the information rec	quired in Part I, line	2, Part III, column (b)	, and any other additional i	nformation

SCHEDULE O. (Form 990, or 990-EZ).

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information. Internal Revenue Service Name of the organization CHINESE CHAMBER OF COMMERCE

Open to Public Inspection

OMB No 1545-0047

2019

Employer identification number 99-0315441

Department of the Treasury

FOUNDATION

Form 990 - Organization's Mission

TO RECEIVE CHARITABLE CONTRIBUTIONS AND TO MAKE DONATIONS EXCLUSIVELY FOR CHARITABLE PURPOSE; TO PROMOTE THE CULTURAL; HISTORIC AND SOCIAL HERITAGE OF THE CHINESE IN HAWAII; PRESERVING AND ENHANCING THE CHARACTER AND TRADITION OF CHINATOWN.

Form 990, Part III, Line 4d - All Other Accomplishments TO MAKE DONATIONS EXCLUSIVELHY FOR CHARITABLE PURPOSE, INCLUDING WITHOUT LIMITATIONS, DONATIONS FOR THE RELIEF OF THE POOR, DISTRESSED OR UNDERPRIVELEGED, THE ADVANCEMENT OF EDUCATION, RELIGION OR SCIENCE, THE LESSENING THE BURDEN OF GOVERNMENT AND THE PROMOTION OF SOCIAL WELFARE.

Form 990, Part VI, Line 6 - Classes of Members or Stockholders THE ORGANIZATION HAVE MEMBERS BUT NO STOCKHOLDERS

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 THIS FORM 990 IS OPEN FOR REVIEW TO THE MEMBERS OF THE GOVERNING BODY. IT IS AVAILABLE AT THE GOVERNING BODY OFFICE.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public

Form 990, Part IX, Line 11q - Other Fees for Services Description

Tot/Prog Service

Mqt & General

Fundraising

Schedule O (Form 990 or 990-EZ) (2019)				Page 2
Name of the organization				Employer identification number	
CHINESE CHAMBER	OF COMMERCE			99-0315441	· ,
BANK SERVICE CH	ARGE				
\$	44	\$	0	\$	0
CREDIT CARD FEE					
\$	231	\$	0	\$	0
MEETING					
\$	744	\$	0	\$	0
DONATION					
\$	3,422	\$	0	\$	0
LICENSE & FEE					
\$	37	\$	0	\$	0
CGM EXPENSE					
\$	7,500	\$	0	\$	0
Total					
\$	11,978	\$	0	\$	0