

Form **990**

**Return of Organization Exempt from Income Tax**

OMB No 1545-0047

**2001**

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

**A** For the 2001 calendar year, or tax year beginning 7/01, 2001, and ending 6/30, 20 02

**B** Check if applicable:

- Address change
- Name change
- Initial return
- Final return
- Amended return
- Application pending

Please use IRS label or print or type See specific instructions

Seoul National University Alumni Association in the USA, Inc  
790 Busse Rd #201  
Elk Grove Village, IL 60067

**D** Employer Identification Number: 13-3859506

**E** Telephone number: (847) 981-1464

**F** Accounting method:  Cash  Accrual

**G** Web site: N/A

**H** and I are not applicable to Section 527 organizations

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

**H (b)** If 'yes,' enter number of affiliates: 14

**H (c)** Are all affiliates included?  Yes  No (If 'no,' attach a list. See instructions.)

**H (d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No

**J** Organization type (check only one):  501(c) 3 (insert no.)  4947(a)(1) or  527

**K** Check here  if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

**L** Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12: 378,413

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see instructions)

<b>1</b> Contributions, gifts, grants, and similar amounts received				
a Direct public support	1a	240,119		
b Indirect public support	1b			
c Government contributions (grants)	1c			
d Total (add lines 1a through 1c) (cash \$ 240,119 noncash \$ )	1d	240,119		
<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93)	2	134,860		
<b>3</b> Membership dues and assessments	3			
<b>4</b> Interest on savings and temporary cash investments	4	3,434		
<b>5</b> Dividends and interest from securities	5			
<b>6a</b> Gross rents	6a			
b Less rental expenses	6b			
c Net rental income or (loss) (subtract line 6b from line 6a)	6c			
<b>7</b> Other investment income (describe )	7			
<b>8a</b> Gross amount from sales of assets other than inventory	(A) Securities		(B) Other	
b Less cost or other basis and sales expenses	8a			
c Gain or (loss) (attach schedule)	8b			
d Net gain or (loss) (combine line 8c, columns (A) and (B))	8c			
<b>9</b> Special events and activities (attach schedule)				
a Gross revenue (not including \$ of contributions reported on line 1a)	9a			
b Less direct expenses other than fundraising expenses	9b			
c Net income or (loss) from special events (subtract line 9b from line 9a)	9c			
<b>10a</b> Gross sales of inventory, less returns and allowances	10a			
b Less cost of goods sold	10b			
c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			
<b>11</b> Other revenue (from Part VII, line 103)	11			
<b>12 Total revenue</b> (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	378,413		
<b>13</b> Program services (from line 44, column (B))	13	265,078		
<b>14</b> Management and general (from line 44, column (C))	14	51,849		
<b>15</b> Fundraising (from line 44, column (D))	15			
<b>16</b> Payments to affiliates (attach schedule)	16			
<b>17 Total expenses</b> (add lines 16 and 44, column (A))	17	316,927		
<b>18</b> Excess or (deficit) for the year (subtract line 17 from line 12)	18	61,486		
<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))	19	266,307		
<b>20</b> Other changes in net assets or fund balances (attach explanation)	20			
<b>21</b> Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	327,793		

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FEB 19 2003  
OGDEN, UT  
IRS-OISC

Form **990**

### Return of Organization Exempt from Income Tax

OMB No 1545 0047

**2002**

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

**A** For the 2002 calendar year, or tax year beginning 7/01, 2002, and ending 6/30, 2003

- B** Check if applicable:
- Address change
  - Name change
  - Initial return
  - Final return
  - Amended return
  - Application pending

Please use IRS label or print or type. See specific instructions.

Seoul National University Alumni Association in the USA, Inc.  
790 Busse Rd. #201  
Elk Grove Village, IL 60067

**D** Employer Identification Number  
13-3859506

**E** Telephone number  
(847) 981-1464

**F** Accounting method:  Cash  Accrual  
 Other (specify) \_\_\_\_\_

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

**H and I are not applicable to section 527 organizations**  
**H (a)** Is this a group return for affiliates?  Yes  No  
**H (b)** If 'Yes,' enter number of affiliates 14

**H (c)** Are all affiliates included?  Yes  No  
(If 'No,' attach a list. See instructions.)

**H (d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No

**G** Web site: N/A

**J** Organization type (check only one)  501(c) 3 (insert no)  4947(a)(1) or  527

**K** Check here  if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. **Some states require a complete return.**

**I** Enter 4-digit GEN 3784

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

**L** Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 364,289.

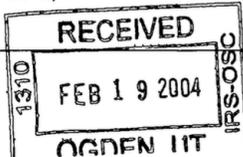
#### Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Instructions)

<b>1</b> Contributions, gifts, grants, and similar amounts received				
<b>a</b> Direct public support	1a	214,961.		
<b>b</b> Indirect public support	1b			
<b>c</b> Government contributions (grants)	1c			
<b>d</b> Total (add lines 1a through 1c) (cash \$ <u>214,961.</u> noncash \$ _____)	1d		214,961.	
<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93)	2		145,417.	
<b>3</b> Membership dues and assessments	3			
<b>4</b> Interest on savings and temporary cash investments	4		3,911.	
<b>5</b> Dividends and interest from securities	5			
<b>6a</b> Gross rents	6a			
<b>b</b> Less: rental expenses	6b			
<b>c</b> Net rental income or (loss) (subtract line 6b from line 6a)	6c			
<b>7</b> Other investment income (describe _____)	7			
<b>8a</b> Gross amount from sales of assets other than inventory	(A) Securities			
	8a			
	(B) Other			
<b>b</b> Less: cost or other basis and sales expenses	8b			
<b>c</b> Gain or (loss) (attach schedule)	8c			
<b>d</b> Net gain or (loss) (combine line 8c, columns (A) and (B))	8d			
<b>9</b> Special events and activities (attach schedule)				
<b>a</b> Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a			
<b>b</b> Less: direct expenses other than fundraising expenses	9b			
<b>c</b> Net income or (loss) from special events (subtract line 9b from line 9a)	9c			
<b>10a</b> Gross sales of inventory, less returns and allowances	10a			
<b>b</b> Less: cost of goods sold	10b			
<b>c</b> Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			
<b>11</b> Other revenue (from Part VII, line 103)	11			
<b>12</b> Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		364,289.	
<b>13</b> Program services (from line 44, column (B))	13		264,887.	
<b>14</b> Management and general (from line 44, column (C))	14		52,350.	
<b>15</b> Fundraising (from line 44, column (D))	15			
<b>16</b> Payments to affiliates (attach schedule)	16			
<b>17</b> Total expenses (add lines 16 and 44, column (A))	17		317,237.	
<b>18</b> Excess or (deficit) for the year (subtract line 17 from line 12)	18		47,052.	
<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))	19		327,793.	
<b>20</b> Other changes in net assets or fund balances (attach explanation) See Statement 1	20		-36,543.	
<b>21</b> Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		338,302.	

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BAA For Paperwork Reduction Act Notice, see the separate instructions.

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Form 990 (2002)

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Form **990**

**Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047

**2004**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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

**A For the 2004 calendar year, or tax year beginning** 07/01, 2004, and ending 06/30, 2005

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return  
 Amended return  
 Application pending

**C Name of organization**  
**Seoul National University Association in the USA, Inc**  
 Number and street (or P O. box if mail is not delivered to street address) Room/suite  
**4322 Wilshire Blvd #102**  
 City or town, state or country, and ZIP + 4  
**Los Angeles CA 90010**

**D Employer identification number**  
**13-3859506**

**E Telephone number**  
**(847) 981-1464**

**F Accounting method:**  Cash  Accrual  
 Other (specify) \_\_\_\_\_

**G Website:** \_\_\_\_\_

**J Organization type (check only one)**  501(c)( ) (insert no)  4947(a)(1) or  527

**K** Check here  if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

**H and I are not applicable to section 527 organizations**  
**H(a)** Is this a group return for affiliates?  Yes  No  
**H(b)** If "Yes," enter number of affiliates: \_\_\_\_\_  
**H(c)** Are all affiliates included?  Yes  No  
 (If "No," attach a list. See instructions.)  
**H(d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No  
**I** Group Exemption Number **3784**

**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **218,327**

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

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See page 18 of the instructions.)

Revenue	<b>1</b> Contributions, gifts, grants, and similar amounts received:				
	<b>a</b> Direct public support	<b>1a</b>	169,172		
	<b>b</b> Indirect public support	<b>1b</b>			
	<b>c</b> Government contributions (grants)	<b>1c</b>			
	<b>d</b> Total (add lines 1a through 1c) (cash \$ _____ noncash \$ _____)	<b>1d</b>		169,172	
	<b>2</b> Program service revenue (including government fees and contracts (from Part VII, line 93))	<b>2</b>		46,985	
	<b>3</b> Membership dues and assessments	<b>3</b>			
	<b>4</b> Interest on savings and temporary cash investments	<b>4</b>		2,170	
	<b>5</b> Dividends and interest from securities	<b>5</b>			
	<b>6a</b> Gross rents	<b>6a</b>			
	<b>b</b> Less: rental expenses	<b>6b</b>			
	<b>c</b> Net rental income or (loss) (subtract line 6b from line 6a)	<b>6c</b>			
<b>7</b> Other investment income (describe _____)	<b>7</b>				
Revenue	<b>8a</b> Gross amount from sales of assets other than inventory	(A) Securities		(B) Other	
	<b>b</b> Less: cost or other basis and sales expenses	<b>8a</b>			
	<b>c</b> Gain or (loss) (attach schedule)	<b>8b</b>			
	<b>d</b> Net gain or (loss) (combine line 8c, columns (A) and (B))	<b>8c</b>			<b>8d</b>
Revenue	<b>9</b> Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>				
	<b>a</b> Gross revenue (not including \$ _____ of contributions reported on line 1a)	<b>9a</b>			
	<b>b</b> Less: direct expenses other than fundraising expenses	<b>9b</b>			
<b>c</b> Net income or (loss) from special events (subtract line 9b from line 9a)	<b>9c</b>				
Revenue	<b>10a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>			
	<b>b</b> Less: cost of goods sold	<b>10b</b>			
	<b>c</b> Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	<b>10c</b>			
<b>11</b> Other revenue (from Part VII, line 103)	<b>11</b>				
<b>12</b> Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	<b>12</b>		218,327		
Expenses	<b>13</b> Program services (from line 44, column (B))	<b>13</b>	126,685		
	<b>14</b> Management and general (from line 44, column (C))	<b>14</b>	89,296		
	<b>15</b> Fundraising (from line 44, column (D))	<b>15</b>	27,653		
	<b>16</b> Payments to affiliates (attach schedule)	<b>16</b>	0		
	<b>17</b> Total expenses (add lines 13 and 14, column (A))	<b>17</b>	243,634		
Net Assets	<b>18</b> Excess or (deficit) for the year (subtract line 17 from line 12)	<b>18</b>	(25,307)		
	<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))	<b>19</b>	411,493		
	<b>20</b> Other changes in net assets or fund balances (attach explanation)	<b>20</b>	26,763		
	<b>21</b> Net assets or fund balances at end of year (combine lines 18, 19, and 20)	<b>21</b>	412,949		

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Form **990**

**Return of Organization Exempt From Income Tax**

OMB No 1545-0047

**2005**

**Open to Public Inspection**

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

Department of the Treasury  
Internal Revenue Service

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

**A For the 2005 calendar year, or tax year beginning 07/01, 2005, and ending 06/30, 20 06**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	<b>C Name of organization</b> <b>SEOUL NATIONAL UNIVERSITY ALUMNI ASSOCIATION IN USA</b>	<b>D Employer identification number</b> <b>13 : 3859506</b>
		Number and street (or P O box if mail is not delivered to street address) Room/suite <b>7263 MAPLE PLACE #201</b>	<b>E Telephone number</b> <b>( 703 ) 354-4344</b>
		City or town, state or country, and ZIP + 4 <b>ANNANDALE, VA 22003</b>	<b>F Accounting method:</b> <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶

**G Website:** ▶

**J Organization type** (check only one) ▶  501(c) ( ) ◀ (insert no)  4947(a)(1) or  527

**K** Check here ▶  if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization chooses to file a return, be sure to file a complete return. **Some states require a complete return.**

**H and I are not applicable to section 527 organizations**

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

**H(b)** If "Yes," enter number of affiliates ▶

**H(c)** Are all affiliates included?  Yes  No (If "No," attach a list. See instructions.)

**H(d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No

**I Group Exemption Number** ▶ **3784**

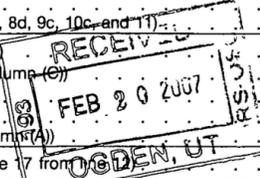
**M** Check ▶  if the organization is **not** required to attach Sch. B (Form 990, 990-EZ, or 990-PF)

**L** Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 ▶

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

Revenue	<b>1</b> Contributions, gifts, grants, and similar amounts received:			
	<b>a</b> Direct public support	<b>1a</b>	192,789	
	<b>b</b> Indirect public support	<b>1b</b>		
	<b>c</b> Government contributions (grants)	<b>1c</b>		
	<b>d Total</b> (add lines 1a through 1c) (cash \$ _____ noncash \$ _____)	<b>1d</b>		192,789
	<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93)	<b>2</b>		33,817
	<b>3</b> Membership dues and assessments	<b>3</b>		
	<b>4</b> Interest on savings and temporary cash investments	<b>4</b>		3,814
	<b>5</b> Dividends and interest from securities	<b>5</b>		
	<b>6a</b> Gross rents	<b>6a</b>		
	<b>b</b> Less: rental expenses	<b>6b</b>		
	<b>c</b> Net rental income or (loss) (subtract line 6b from line 6a)	<b>6c</b>		
<b>7</b> Other investment income (describe ▶)	<b>7</b>			
	<b>8a</b> Gross amount from sales of assets other than inventory	(A) Securities	(B) Other	
	<b>b</b> Less: cost or other basis and sales expenses	<b>8a</b>	<b>8b</b>	
	<b>c</b> Gain or (loss) (attach schedule)	<b>8c</b>		
	<b>d</b> Net gain or (loss) (combine line 8c, columns (A) and (B))	<b>8d</b>		
	<b>9</b> Special events and activities (attach schedule). If any amount is from gaming, check here ▶ <input type="checkbox"/>			
	<b>a</b> Gross revenue (not including \$ _____ of contributions reported on line 1a)	<b>9a</b>		
	<b>b</b> Less: direct expenses other than fundraising expenses	<b>9b</b>		
<b>c</b> Net income or (loss) from special events (subtract line 9b from line 9a)	<b>9c</b>			
	<b>10a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>		
	<b>b</b> Less: cost of goods sold	<b>10b</b>		
	<b>c</b> Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	<b>10c</b>		
<b>11</b> Other revenue (from Part VII, line 103)	<b>11</b>			
<b>12 Total revenue</b> (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	<b>12</b>		230,420	
Expenses	<b>13</b> Program services (from line 44, column (B))	<b>13</b>		25,307
	<b>14</b> Management and general (from line 44, column (C))	<b>14</b>		128,528
	<b>15</b> Fundraising (from line 44, column (D))	<b>15</b>		22,954
	<b>16</b> Payments to affiliates (attach schedule)	<b>16</b>		0
	<b>17 Total expenses</b> (add lines 13 and 14, column (A))	<b>17</b>		176,789
Net Assets	<b>18</b> Excess or (deficit) for the year (subtract line 17 from line 12)	<b>18</b>		53,631
	<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))	<b>19</b>		412,949
	<b>20</b> Other changes in net assets or fund balances (attach explanation)	<b>20</b>		(102,200)
	<b>21</b> Net assets or fund balances at end of year (combine lines 18, 19, and 20)	<b>21</b>		364,380

SCANNED MAR 09 2007



*RP*

**Return of Organization Exempt From Income Tax**  
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)  
 The organization may have to use a copy of this return to satisfy state reporting requirements

**A** For the 2007 calendar year, or tax year beginning **7/01/07**, and ending **6/30/08**

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

**C** Name of organization: **Seoul National University Alumni Association In USA**  
 Number and street (or P.O. box if mail is not delivered to street address): **131 W. 35th St.** Room/suite: **2 Fl.**  
 City or town, state or country, and ZIP + 4: **New York NY 10001**

**D** Employer identification number: **13-3859506**

**E** Telephone number: **212-563-9641**

**F** Accounting method:  Cash  Accrual  Other (specify)

**G** Website: **www.snua.net**

**J** Organization type (check only one):  501(c) ( **3** ) (insert no)  4947(a)(1) or  527

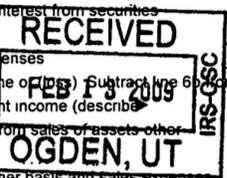
**K** Check here  if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

**H** and **I** are not applicable to section 527 organizations.  
**H(a)** Is this a group return for affiliates?  Yes  No  
**H(b)** If "Yes," enter number of affiliates: **10**  
**H(c)** Are all affiliates included?  Yes  No (If "No," attach a list. See instructions.)  
**H(d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No  
**I** Group Exemption Number: **3784**  
**M** Check  if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF)

**L** Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12: **425,823**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)		
1 Contributions, gifts, grants, and similar amounts received		
a Contributions to donor advised funds	1a	
b Direct public support (not included on line 1a)	1b	219,115
c Indirect public support (not included on line 1a)	1c	
d Government contributions (grants) (not included on line 1a)	1d	
e Total (add lines 1a through 1d) (cash \$ <b>219,115</b> noncash \$ _____)	1e	219,115
2 Program service revenue including government fees and contracts (from Part VII, line 93)	2	113,968
3 Membership dues and assessments	3	77,637
4 Interest on savings and temporary cash investments	4	15,103
5 Dividends and interest from securities	5	
6a Gross rents	6a	
b Less rental expenses	6b	
c Net rental income (or loss). Subtract line 6b from line 6a	6c	
7 Other investment income (describe _____)	7	
8a Gross amount from sales of assets other than inventory	(A) Securities	(B) Other
b Less cost or other basis and sales expenses	8a	
c Gain or (loss) (attach schedule)	8b	
d Net gain or (loss). Combine line 8c, columns (A) and (B)	8c	
8d		
9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>		
a Gross revenue (not including \$ _____ of contributions reported on line 1b)	9a	
b Less direct expenses other than fundraising expenses	9b	
c Net income or (loss) from special events. Subtract line 9b from line 9a	9c	
10a Gross sales of inventory, less returns and allowances	10a	
b Less cost of goods sold	10b	
c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	10c	
11 Other revenue (from Part VII, line 103)	11	
12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12	425,823
13 Program services (from line 44, column (B))	13	280,511
14 Management and general (from line 44, column (C))	14	102,522
15 Fundraising (from line 44, column (D))	15	16,841
16 Payments to affiliates (attach schedule)	16	
17 Total expenses. Add lines 16 and 44, column (A)	17	399,874
18 Excess or (deficit) for the year. Subtract line 17 from line 12	18	25,949
19 Net assets or fund balances at beginning of year (from line 73, column (A))	19	284,443
20 Other changes in net assets or fund balances (attach explanation)	20	
21 Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21	310,392

Revenue SCANNED MAR 05 2009



Form **990**

**Return of Organization Exempt From Income Tax**

OMB No 1545-0047

**2008**  
**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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

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

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

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>Seoul National University Alumni Association In USA</b> Doing Business As Number and street (or P O box if mail is not delivered to street address) <b>131 W. 35th St.</b> City or town, state or country, and ZIP + 4 <b>New York NY 10001</b>	<b>D</b> Employer identification number <b>13-3859506</b>
		<b>E</b> Telephone number <b>212-563-9641</b>
		<b>G</b> Gross receipts \$ <b>351,513</b>
		<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)
<b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c) ( <u>3</u> ) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>H(c)</b> Group exemption number <b>3784</b>
<b>J</b> Website: <b>www.snua.net</b>		
<b>K</b> Type of organization <input type="checkbox"/> Corporation <input type="checkbox"/> Trust <input checked="" type="checkbox"/> Association <input type="checkbox"/> Other	<b>L</b> Year of formation <b>1995</b>	<b>M</b> State of legal domicile <b>NY</b>

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities <b>Charitable, educational, and fraternal</b>			
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets			
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>		
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>		
	<b>5</b> Total number of employees (Part V, line 2a)	<b>5</b>		
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>		
	<b>7a</b> Total gross unrelated business revenue from Part VIII, line 12, column (C)	<b>7a</b>		
	<b>7b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	<b>0</b>	
	<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year <b>219,115</b>	Current Year <b>263,060</b>
		<b>9</b> Program service revenue (Part VIII, line 2g)	<b>191,605</b>	<b>73,346</b>
<b>10</b> Investment income (Part VIII, column (A), lines 3c, and 9c, 10c, and 11e)		<b>15,103</b>	<b>15,107</b>	
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				
<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		<b>425,823</b>	<b>351,513</b>	
<b>Expenses</b>		<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
		<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		
		<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
		<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		
		<b>b</b> Total fundraising expenses (Part IX, column (D), line 25)		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	<b>399,874</b>	<b>363,248</b>	
	<b>18</b> Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>399,874</b>	<b>363,248</b>	
<b>19</b> Revenue less expenses Subtract line 18 from line 12	<b>25,949</b>	<b>-11,735</b>		
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	Beginning of Year <b>310,392</b>	End of Year <b>293,270</b>	
	<b>21</b> Total liabilities (Part X, line 26)			
	<b>22</b> Net assets or fund balances Subtract line 21 from line 20	<b>310,392</b>	<b>293,270</b>	

**Part II 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 Here**  
 Signature of officer: *[Signature]* **TREASURER**  
 Date: **11/8/09**  
 Type or print name and title: **President**

**Paid Preparer's Use Only**  
 Preparer's signature: *[Signature]* Date: **10/26/09** Check if self-employed:  Preparer's identifying number: **26-1765614**  
 Firm's name (or yours if self-employed), address, and ZIP + 4: **HANMI USA LLP, CPAs 1430 Broadway, Suite 906 New York, NY 10018** EIN: **26-1765614** Phone no: **212-768-9144**

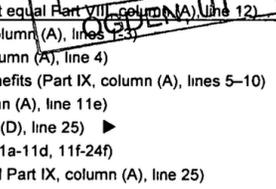
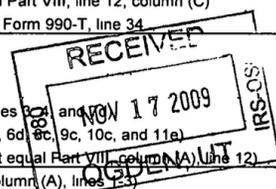
May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

DAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2008)

7966

SCANNED DEC 03 2009



Form **990**

**Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047

**2009**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

**A** For the **2009** calendar year, or tax year beginning **JUL 1, 2009** and ending **JUN 30, 2010**

<b>B</b> Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type See Specific Instructions	<b>C</b> Name of organization <b>SEOUL NATIONAL UNIVERSITY ALUMNI ASSOCIATION IN USA</b>		<b>D</b> Employer identification number 13-3859506
		Doing Business As		<b>E</b> Telephone number 847-441-0011
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>456 W FRONTAGE ROAD 3</b>	<b>G</b> Gross receipts \$ <b>304,627.</b>	
		City or town, state or country, and ZIP + 4 <b>NORTHFIELD, IL 60093</b>		<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) <b>H(c)</b> Group exemption number <b>3784</b>
<b>F</b> Name and address of principal officer <b>SUHN YUNG AHN</b> <b>13425 PROVENCE DR., PALM BEACH GARDENS, FL</b>		<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (3) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J</b> Website: <b>WWW.SNUAA.ORG</b>		<b>K</b> Form of organization: <input type="checkbox"/> Corporation <input type="checkbox"/> Trust <input checked="" type="checkbox"/> Association <input type="checkbox"/> Other		
		<b>L</b> Year of formation: <b>1995</b>		<b>M</b> State of legal domicile: <b>NY</b>

**Part I Summary**

Activities & Governance	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>CHARITABLE, EDUCATIONAL AND FRATERNAL.</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>4</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>4</b>
	<b>5</b> Total number of employees (Part V, line 2a)	<b>5</b>	<b>1</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>80</b>
	<b>7a</b> Total gross unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	<b>0.</b>	
Revenue	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	<b>9</b> Program service revenue (Part VIII, line 2g)	263,060.	179,925.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	73,346.	118,418.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	15,107.	6,284.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	351,513.	304,627.
Expenses	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		
	<b>15</b> Salaries, other compensation, and employee benefits (Part IX, column (A), lines 5-10)		34,168.
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25)		
<b>17</b> Other expenses (Part IX, column (A), lines 11d, 11f-24f)	363,248.	247,879.	
<b>18</b> Total expenses - Add lines 13-17 (must equal Part IX, column (A), line 25)	363,248.	282,047.	
<b>19</b> Revenue less expenses - Subtract line 18 from line 12	-11,735.	22,580.	
Net Assets or Fund Balances	<b>20</b> Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	<b>21</b> Total liabilities (Part X, line 26)	293,270.	316,419.
	<b>22</b> Net assets or fund balances - Subtract line 21 from line 20	293,270.	316,419.

**Part II 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 Here**  
 Signature of officer: *Suhn Yung Ahn* Date: **1/18/2010**  
 Type or print name and title: **SUHN YUNG AHN, PRESIDENT**

**Paid Preparer's Use Only**  
 Preparer's signature: *Keith A. Friedlein* Date: **1/11/11** Check if self-employed:   
 Firm's name (or yours if self-employed), address, and ZIP + 4: **WOLF & COMPANY LLP**  
**1901 S. MEYERS ROAD, SUITE 500**  
**OAKBROOK TERRACE, ILLINOIS 60181-5209** EIN: **36-1111111**  
 Phone no.: **(630) 545-4500**

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

SCANNED FEB 07 2011

6/16 23

Form **990**  
 Department of the Treasury  
 Internal Revenue Service

**Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047

**2010**

**Open to Public Inspection**

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

**A For the 2010 calendar year, or tax year beginning 07-01-2010 and ending 06-30-2011**

- B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Terminated  
 Amended return  
 Application pending

**C** Name of organization  
 SEOUL NATIONAL UNIVERSITY ALUMNI ASSOCIATION IN USA  
 Doing Business As

Number and street (or P O box if mail is not delivered to street address) Room/suite  
 456 W FRONTAGE ROAD NO 3

City or town, state or country, and ZIP + 4  
 NORTHFIELD, IL 60093

**D** Employer identification number  
 13-3859506

**E** Telephone number  
 (847) 441-0011

**G** Gross receipts \$ 181,350

**F** Name and address of principal officer  
 SUHN YUNG AHN  
 13425 PROVENCE DR  
 PALM BEACH GARDENS, FL 33410

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

**H(b)** Are all affiliates included?  Yes  No  
 If "No," attach a list (see instructions)

**H(c)** Group exemption number ▶ 3784

**I** Tax-exempt status  501(c)(3)  501(c) ( ) ◀ (insert no )  4947(a)(1) or  527

**J** Website: ▶ WWW.SNUAA.ORG

**K** Form of organization  Corporation  Trust  Association  Other ▶

**L** Year of formation 1995

**M** State of legal domicile NY

**Part I Summary**

Activities & Governance

- 1** Briefly describe the organization's mission or most significant activities  
 CHARITABLE, EDUCATIONAL AND FRATERNAL
- 2** Check this box  if the organization discontinued its operations or disposed of more than 25% of its net assets
- |  |    |
|--|----|
| <b>3</b> Number of voting members of the governing body (Part VI, line 1a)             | 4  |
| <b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) | 4  |
| <b>5</b> Total number of individuals employed in calendar year 2010 (Part V, line 2a)  | 1  |
| <b>6</b> Total number of volunteers (estimate if necessary)                            | 80 |
| <b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12         | 0  |
| <b>7b</b> Net unrelated business taxable income from Form 990-T, line 34               | 0  |

Revenue

	Prior Year	Current Year
<b>8</b> Contributions and grants (Part VIII, line 1h)	179,925	88,941
<b>9</b> Program service revenue (Part VIII, line 2g)	118,418	90,600
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	6,284	1,809
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0
<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	304,627	181,350

Expenses

<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0	0
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0	0
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	34,168	51,569
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	0	0
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 0		
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	247,879	151,260
<b>18</b> Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	282,047	202,829
<b>19</b> Revenue less expenses Subtract line 18 from line 12	22,580	-21,479

Net Assets or Fund Balances

	Beginning of Current Year	End of Year
<b>20</b> Total assets (Part X, line 16)	316,419	294,940
<b>21</b> Total liabilities (Part X, line 26)	0	0
<b>22</b> Net assets or fund balances Subtract line 21 from line 20	316,419	294,940

Form **990**

**Return of Organization Exempt From Income Tax**

OMB No 1545-0047

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

**2011**

Department of the Treasury  
Internal Revenue Service

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

**Open to Public Inspection**

**A For the 2011 calendar year, or tax year beginning 07-01-2011 and ending 06-30-2012**

<b>B</b> Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization SEOUL NATIONAL UNIVERSITY ALUMNI ASSOCIATION IN USA	<b>D</b> Employer identification number 13-3859506
	Doing Business As	<b>E</b> Telephone number (310) 515-7888
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1225 W 190TH STREET	<b>G</b> Gross receipts \$ 179,319
	City or town, state or country, and ZIP + 4 GARDENA, CA 90248	
	<b>F</b> Name and address of principal officer EUNJONG KIM 1425 VIA GALICIA PALOS VERDES ESTATES, CA 90274	<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)
<b>J</b> Website: WWW.SNUAA.ORG		<b>H(c)</b> Group exemption number ▶

**K** Form of organization  Corporation  Trust  Association  Other ▶ **L** Year of formation 1994 **M** State of legal domicile DE

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities CHARITABLE, EDUCATIONAL AND FRATERNAL		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	4
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	4
	<b>5</b> Total number of individuals employed in calendar year 2011 (Part V, line 2a)	<b>5</b>	1
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	80
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>		
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	88,941	89,185
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	90,600	88,560
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,809	1,574
	<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	181,350	179,319
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		0
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	51,569	70,172
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		0
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <sup>0</sup>		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	151,260	171,015
<b>18</b> Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	202,829	241,187	
<b>19</b> Revenue less expenses Subtract line 18 from line 12	-21,479	-61,868	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>21</b> Total liabilities (Part X, line 26)	294,940	233,072
	<b>22</b> Net assets or fund balances Subtract line 21 from line 20		0
		294,940	233,072

Form **990**

**Return of Organization Exempt From Income Tax**

OMB No 1545-0047

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

**2012**

Department of the Treasury  
Internal Revenue Service

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

**Open to Public Inspection**

**A For the 2012 calendar year, or tax year beginning 07-01-2012, 2012, and ending 06-30-2013**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization SEOUL NATIONAL UNIVERSITY ALUMNI ASSOCIATION IN USA		<b>D</b> Employer identification number 13-3859506
	Doing Business As		<b>E</b> Telephone number (310) 515-7888
	Number and street (or P O box if mail is not delivered to street address) Room/suite 1225 W 190TH STREET	<b>G</b> Gross receipts \$ 262,618	
	City or town, state or country, and ZIP + 4 GARDENA, CA 90248		

<b>F</b> Name and address of principal officer EUNJONG KIM 1425 VIA GALICIA PALOS VERDES ESTATES, CA 90274	<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) <b>H(c)</b> Group exemption number ▶ 3784
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**I** Tax-exempt status  501(c)(3)  501(c) ( ) (insert no)  4947(a)(1) or  527

**J** Website: ▶ WWW.SNUAA.ORG

**K** Form of organization  Corporation  Trust  Association  Other ▶ **L** Year of formation 1994 **M** State of legal domicile DE

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities CHARITABLE, EDUCATIONAL AND FRATERNAL		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	4
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	4
	<b>5</b> Total number of individuals employed in calendar year 2012 (Part V, line 2a)	<b>5</b>	2
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	80
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>		
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	<b>9</b> Program service revenue (Part VIII, line 2g)	89,185	152,689
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	88,560	109,240
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,574	689
	<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	179,319	262,618
	<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)			0
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		70,172	81,052
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)			0
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <sup>0</sup>			
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		171,015	120,165
<b>18</b> Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	241,187	201,217	
<b>19</b> Revenue less expenses Subtract line 18 from line 12	-61,868	61,401	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	<b>21</b> Total liabilities (Part X, line 26)	233,072	294,473
	<b>22</b> Net assets or fund balances Subtract line 21 from line 20		0
		233,072	294,473

Form **990**  
 Department of the Treasury  
 Internal Revenue Service

**Return of Organization Exempt From Income Tax**

OMB No 1545-0047

**2013**

**Open to Public Inspection**

**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. By law, the IRS generally cannot redact the information on the form.  
 Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

**A For the 2013 calendar year, or tax year beginning 07-01-2013, 2013, and ending 06-30-2014**

<b>B</b> Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization SEOUL NATIONAL UNIVERSITY ALUMNI ASSOCIATION IN USA Doing Business As		<b>D</b> Employer identification number 13-3859506
	Number and street (or P O box if mail is not delivered to street address)	Room/suite	<b>E</b> Telephone number (301) 590-0858
	City or town, state or province, country, and ZIP or foreign postal code VIENNA, VA 22182		<b>G</b> Gross receipts \$ 272,640
<b>F</b> Name and address of principal officer			<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "No," attach a list (see instructions) <b>H(c)</b> Group exemption number ▶
<b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
<b>J</b> Website: ▶ WWW.SNUAA.ORG			
<b>K</b> Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			<b>L</b> Year of formation 1994 <b>M</b> State of legal domicile DE

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities CHARITABLE, EDUCATIONAL AND FRATERNAL		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	4
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	4
	<b>5</b> Total number of individuals employed in calendar year 2013 (Part V, line 2a)	<b>5</b>	1
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	80
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0
	<b>7b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	0
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	152,689	156,286
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	689	439
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0
	<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	262,618	272,640
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		0
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	81,052	67,724
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		0
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <sup>0</sup>		
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	120,165	174,132	
<b>18</b> Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	201,217	241,856	
<b>19</b> Revenue less expenses Subtract line 18 from line 12	61,401	30,784	
<b>Net Assets or Fund Balances</b>		<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>20</b> Total assets (Part X, line 16)	294,473	325,257
	<b>21</b> Total liabilities (Part X, line 26)		0
<b>22</b> Net assets or fund balances Subtract line 21 from line 20	294,473	325,257	

Form **990**  
 Department of the Treasury  
 Internal Revenue Service

**Return of Organization Exempt From Income Tax**  
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)  
 Do not enter social security numbers on this form as it may be made public  
 Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047  
**2014**  
 Open to Public Inspection

**A For the 2014 calendar year, or tax year beginning 07-01-2014, and ending 06-30-2015**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization SEOUL NATIONAL UNIVERSITY ALUMNI ASSOCIATION IN USA	<b>D</b> Employer identification number 13-3859506
	Doing business as	<b>E</b> Telephone number (301) 590-0858
	Number and street (or P O box if mail is not delivered to street address) Room/suite 1952 GALLOWES ROAD 206	<b>G</b> Gross receipts \$ 176,985
	City or town, state or province, country, and ZIP or foreign postal code VIENNA, VA 22182	
<b>F</b> Name and address of principal officer		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "No," attach a list (see instructions) <b>H(c)</b> Group exemption number
<b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J</b> Website: WWW.SNUAA.ORG		
<b>K</b> Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		<b>L</b> Year of formation 1994 <b>M</b> State of legal domicile DE

**Part I Summary**

Activities & Governance	<b>1</b> Briefly describe the organization's mission or most significant activities CHARITABLE, EDUCATIONAL AND FRATERNAL		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	4
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	4
	<b>5</b> Total number of individuals employed in calendar year 2014 (Part V, line 2a)	<b>5</b>	1
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	70
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>		
Revenue	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	<b>9</b> Program service revenue (Part VIII, line 2g)	156,286	65,576
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	439	341
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,848
	<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	272,640	176,985
	Expenses	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)			0
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		67,724	73,167
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)			0
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) <sup>0</sup>			
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		174,132	115,020
<b>18</b> Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		241,856	188,187
<b>19</b> Revenue less expenses Subtract line 18 from line 12	30,784	-11,202	
Net Assets or Fund Balances	<b>20</b> Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	<b>21</b> Total liabilities (Part X, line 26)	325,257	314,055
	<b>22</b> Net assets or fund balances Subtract line 21 from line 20		0
		325,257	314,055

Form **990**  
 Department of the Treasury  
 Internal Revenue Service

**Return of Organization Exempt From Income Tax**  
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)  
 Do not enter social security numbers on this form as it may be made public  
 Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047  
**2015**  
 Open to Public Inspection

**A For the 2015 calendar year, or tax year beginning 07-01-2015, and ending 06-30-2016**

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return/terminated  
 Amended return  
 Application pending

**C** Name of organization: SEOL NATIONAL UNIVERSITY ALUMNI ASSOCIATION IN USA  
 Doing business as:  
 Number and street (or P O box if mail is not delivered to street address) Room/suite: 550 TOWNSHIP LINE ROAD SUITE 100  
 City or town, state or province, country, and ZIP or foreign postal code: BLUE BELL, PA 19422

**D** Employer identification number: 13-3859506  
**E** Telephone number: (484) 344-5500  
**G** Gross receipts \$ 225,432

**F** Name and address of principal officer: JANICE J HAAHS

**H(a)** Is this a group return for subordinates? No  Yes   
**H(b)** Are all subordinates included?  Yes  No  
 If "No," attach a list (see instructions)  
**H(c)** Group exemption number ▶

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) (insert no )  4947(a)(1) or  527

**J** Website: WWW SNUAA ORG

**K** Form of organization:  Corporation  Trust  Association  Other ▶  
**L** Year of formation 1994 **M** State of legal domicile DE

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities CHARITABLE, EDUCATIONAL AND FRATERNAL		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	5	
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	4	
	<b>5</b> Total number of individuals employed in calendar year 2015 (Part V, line 2a)	0	
	<b>6</b> Total number of volunteers (estimate if necessary)	50	
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	0	
<b>7b</b> Net unrelated business taxable income from Form 990-T, line 34			
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	65,576	171,667
	<b>9</b> Program service revenue (Part VIII, line 2g)	96,195	53,437
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	341	136
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,903	192
	<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	166,015	225,432
	<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)			0
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		73,167	8,190
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)			0
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <sup>0</sup>			
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		113,361	204,253
<b>18</b> Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		186,528	212,443
<b>19</b> Revenue less expenses Subtract line 18 from line 12	-20,513	12,989	
<b>Net Assets or Fund Balances</b>		<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>20</b> Total assets (Part X, line 16)	304,744	348,351
	<b>21</b> Total liabilities (Part X, line 26)		21,850
<b>22</b> Net assets or fund balances Subtract line 21 from line 20	304,744	326,501	

Form **990**  
 Department of the Treasury  
 Internal Revenue Service

**Return of Organization Exempt From Income Tax**  
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)  
 Do not enter social security numbers on this form as it may be made public  
 Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047  
**2016**  
 Open to Public Inspection

**A For the 2016 calendar year, or tax year beginning 07-01-2016 , and ending 06-30-2017**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final <input checked="" type="checkbox"/> Return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization SEOUL NATIONAL UNIVERSITY ALUMNI ASSOCIATION IN USA	<b>D</b> Employer identification number 13-3859506
	Doing business as	<b>E</b> Telephone number (484) 344-5500
	Number and street (or P O box if mail is not delivered to street address) Room/suite 550 TOWNSHIP LINE ROAD SUITE 100	<b>G</b> Gross receipts \$ 257,487
	City or town, state or province, country, and ZIP or foreign postal code BLUE BELL, PA 19422	<b>F</b> Name and address of principal officer JANICE J HAAHS

**H(a)** Is this a group return for subordinates?  Yes  No  
**H(b)** Are all subordinates included?  Yes  No  
 If "No," attach a list (see instructions)  
**H(c)** Group exemption number ▶

**I** Tax-exempt status  501(c)(3)  501(c) ( ) ◀ (insert no )  4947(a)(1) or  527  
**J** Website: ▶ WWW.SNUAA.ORG

**K** Form of organization  Corporation  Trust  Association  Other ▶  
**L** Year of formation 1994 **M** State of legal domicile DE

Part I Summary			
Activities & Governance	<b>1</b> Briefly describe the organization's mission or most significant activities CHARITABLE, EDUCATIONAL AND FRATERNAL		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	5
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	4
	<b>5</b> Total number of individuals employed in calendar year 2016 (Part V, line 2a)	<b>5</b>	0
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>		
Revenue	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	<b>9</b> Program service revenue (Part VIII, line 2g)	171,667	188,520
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	136	1,100
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	192	0
	<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	225,432	257,487
Expenses	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)		2,000
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		0
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	8,190	5,961
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		0
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 0		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	204,253	210,767
<b>18</b> Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	212,443	218,728	
<b>19</b> Revenue less expenses Subtract line 18 from line 12	12,989	38,759	
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	<b>20</b> Total assets (Part X, line 16)	348,351	365,260
	<b>21</b> Total liabilities (Part X, line 26)	21,850	0
<b>22</b> Net assets or fund balances Subtract line 21 from line 20	326,501	365,260	

Form **990**  
 Department of the Treasury  
 Internal Revenue Service

**Return of Organization Exempt From Income Tax**  
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)  
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 Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047  
**2017**  
 Open to Public Inspection

**A For the 2018 calendar year, or tax year beginning 07-01-2017, and ending 06-30-2018**

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return/terminated  
 Amended return  
 Application pending

**C** Name of organization: SEOUL NATIONAL UNIVERSITY ALUMNI ASSOCIATION IN USA  
 Doing business as: \_\_\_\_\_  
 Number and street (or P.O. box if mail is not delivered to street address): 869 SOUTH ST Room/suite: \_\_\_\_\_  
 City or town, state or province, country, and ZIP or foreign postal code: FITCHBURG, MA 01420

**D** Employer identification number: 13-3859506  
**E** Telephone number: (978) 835-0100  
**G** Gross receipts \$ 306,097

**F** Name and address of principal officer: SAMUEL YOON  
**H(a)** Is this a group return for subordinates?  Yes  No  
**H(b)** Are all subordinates included?  Yes  No  
 If "No," attach a list. (see instructions)  
**H(c)** Group exemption number ▶ \_\_\_\_\_

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) ◀ (insert no.)  4947(a)(1) or  527

**J** Website: WWW.SNUAA.ORG

**K** Form of organization:  Corporation  Trust  Association  Other ▶ \_\_\_\_\_  
**L** Year of formation: 1994 **M** State of legal domicile: DE

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: CHARITABLE, EDUCATIONAL AND FRATERNAL			
	<b>2</b> Check this box <input type="checkbox"/>			
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	5	
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	4	
	<b>5</b> Total number of individuals employed in calendar year 2017 (Part V, line 2a)	<b>5</b>	0	
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>		
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0	
	<b>7b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>		
	<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
		<b>9</b> Program service revenue (Part VIII, line 2g)	188,520	254,081
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)		67,867	50,770	
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,100	1,246	
<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		257,487	306,097	
<b>Expenses</b>		<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2,000	17,300
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		0	
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	5,961	4,832	
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		0	
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 0			
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	210,767	190,293	
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	218,728	212,425	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	38,759	93,672		
<b>Net Assets or Fund Balances</b>		<b>Beginning of Current Year</b>	<b>End of Year</b>	
	<b>20</b> Total assets (Part X, line 16)	365,260	518,385	
	<b>21</b> Total liabilities (Part X, line 26)		41,842	
<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	365,260	476,543		

Form **990**  
 Department of the Treasury  
 Internal Revenue Service

**Return of Organization Exempt From Income Tax**  
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)  
 ▶ Do not enter social security numbers on this form as it may be made public  
 ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No 1545-0047  
**2018**  
 Open to Public Inspection

**A For the 2019 calendar year, or tax year beginning 07-01-2018, and ending 06-30-2019**

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return/terminated  
 Amended return  
 Application pending

**C** Name of organization: SEOUL NATIONAL UNIVERSITY ALUMNI ASSOCIATION IN USA  
 Doing business as:  
 Number and street (or P O box if mail is not delivered to street address): 869 SOUTH ST Room/suite:  
 City or town, state or province, country, and ZIP or foreign postal code: FITCHBURG, MA 01420

**D** Employer identification number: 13-3859506  
**E** Telephone number: (978) 835-0100  
**G** Gross receipts \$ 217,474

**F** Name and address of principal officer: SAMUEL YOON

**H(a)** Is this a group return for subordinates?  Yes  No  
**H(b)** Are all subordinates included?  Yes  No  
 If "No," attach a list (see instructions)  
**H(c)** Group exemption number ▶

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) ◀ (insert no )  4947(a)(1) or  527

**J** Website: ▶ WWW.SNUAA.ORG

**K** Form of organization:  Corporation  Trust  Association  Other ▶

**L** Year of formation 1994 **M** State of legal domicile DE

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities CHARITABLE, EDUCATIONAL AND FRATERNAL		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	5
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	4
	<b>5</b> Total number of individuals employed in calendar year 2018 (Part V, line 2a)	<b>5</b>	0
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>		
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	254,081	145,212
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	50,770	52,640
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,246	19,622
	<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	306,097	217,474
	<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	17,300
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)			0
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		4,832	4,938
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)			0
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 0			
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		190,293	210,279
<b>18</b> Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		212,425	217,917
<b>19</b> Revenue less expenses Subtract line 18 from line 12	93,672	-443	
<b>Net Assets or Fund Balances</b>		<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>20</b> Total assets (Part X, line 16)	518,385	536,071
	<b>21</b> Total liabilities (Part X, line 26)	41,842	77,582
<b>22</b> Net assets or fund balances Subtract line 21 from line 20	476,543	458,489	

Form **990**  
 Department of the Treasury  
 Internal Revenue Service

**Return of Organization Exempt From Income Tax**  
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)  
 ▶ Do not enter social security numbers on this form as it may be made public.  
 ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047  
**2019**  
 Open to Public Inspection

**A For the 2019 calendar year, or tax year beginning 07-01-2019, and ending 06-30-2020**

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return/terminated  
 Amended return  
 Application pending

**C** Name of organization: SEOUL NATIONAL UNIVERSITY ALUMNI ASSOCIATION IN USA  
 Doing business as: \_\_\_\_\_  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite: 158-14 NORTHERN BLVD 2FL UL-2  
 City or town, state or province, country, and ZIP or foreign postal code: FLUSHING, NY 11358

**D** Employer identification number: 13-3859506  
**E** Telephone number: (718) 463-3131  
**G** Gross receipts \$ 316,870

**F** Name and address of principal officer: E PETER SHIN  
**H(a)** Is this a group return for subordinates?  Yes  No  
**H(b)** Are all subordinates included?  Yes  No  
 If "No," attach a list. (see instructions)  
**H(c)** Group exemption number ▶ \_\_\_\_\_

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) ◀ (insert no.)  4947(a)(1) or  527

**J** Website: ▶ WWW.SNUAA.ORG

**K** Form of organization:  Corporation  Trust  Association  Other ▶ \_\_\_\_\_  
**L** Year of formation: 1994 **M** State of legal domicile: DE

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: CHARITABLE, EDUCATIONAL AND FRATERNAL		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	8	
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	0	
	<b>5</b> Total number of individuals employed in calendar year 2019 (Part V, line 2a)	0	
	<b>6</b> Total number of volunteers (estimate if necessary)	10	
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	0	
<b>7b</b> Net unrelated business taxable income from Form 990-T, line 39	0		
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	145,212	212,587
	<b>9</b> Program service revenue (Part VIII, line 2g)	52,640	102,465
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	19,622	1,818
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0
	<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	217,474	316,870
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2,700	0
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		0
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	4,938	48,800
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		0
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 0		
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	210,279	212,839	
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	217,917	261,639	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	-443	55,231	
<b>Net Assets or Fund Balances</b>		<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>20</b> Total assets (Part X, line 16)	536,071	551,592
	<b>21</b> Total liabilities (Part X, line 26)	77,582	13,852
<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	458,489	537,740	

Form **990**  
 Department of the Treasury  
 Internal Revenue Service

### Return of Organization Exempt From Income Tax

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

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

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

**Open to Public Inspection**

**A For the 2020 calendar year, or tax year beginning 07-01-2020, and ending 06-30-2021**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input checked="" type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization SEOUL NATIONAL UNIVERSITY ALUMNI ASSOCIATION IN USA	<b>D</b> Employer identification number 13-3859506
	Doing business as	<b>E</b> Telephone number (718) 463-3131
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 158-14 NORTHERN BLVD 2FL UL-2	<b>G</b> Gross receipts \$ 626,061
City or town, state or province, country, and ZIP or foreign postal code FLUSHING, NY 11358		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c)</b> Group exemption number ▶
<b>F</b> Name and address of principal officer: E PETER SHIN		
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J</b> Website: ▶ WWW.SNUAA.ORG		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: 1994 <b>M</b> State of legal domicile: DE

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: CHARITABLE, EDUCATIONAL AND FRATERNAL		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
		<b>3</b>	8
		<b>4</b>	0
		<b>5</b>	0
		<b>6</b>	10
		<b>7a</b>	0
		<b>7b</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	<b>9</b> Program service revenue (Part VIII, line 2g)	212,587	542,988
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	102,465	35,840
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,818	47,233
	<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	316,870	626,061
	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0
<b>Expenses</b>	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		0
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	48,800	48,000
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		0
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶0		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	212,839	186,490
	<b>18</b> Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	261,639	234,490
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	55,231	391,571	
<b>Net Assets or Fund Balances</b>		<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>20</b> Total assets (Part X, line 16)	551,592	966,779
	<b>21</b> Total liabilities (Part X, line 26)	13,852	0
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	537,740	966,779

Form **990**  
 Department of the Treasury  
 Internal Revenue Service

### Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)  
 Do not enter social security numbers on this form as it may be made public.  
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OMB No. 1545-0047  
**2021**  
 Open to Public Inspection

**A For the 2021 calendar year, or tax year beginning 07-01-2021, and ending 06-30-2022**

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return/terminated  
 Amended return  
 Application pending

**C** Name of organization: SEOL NATIONAL UNIVERSITY ALUMNI ASSOCIATION IN USA  
 Doing business as: \_\_\_\_\_  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite: 2410 JAMES M WOOD BLVD  
 City or town, state or province, country, and ZIP or foreign postal code: LOS ANGELES, CA 90006

**D** Employer identification number: 13-3859506  
**E** Telephone number: (213) 908-5586  
**G** Gross receipts \$ 638,710

**F** Name and address of principal officer: MYONG HO RO  
**H(a)** Is this a group return for subordinates?  Yes  No  
**H(b)** Are all subordinates included?  Yes  No  
 If "No," attach a list. See instructions.  
**H(c)** Group exemption number ▶ \_\_\_\_\_

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) ◀(insert no.)  4947(a)(1) or  527

**J** Website: WWW.SNUAA.ORG

**K** Form of organization:  Corporation  Trust  Association  Other ▶ \_\_\_\_\_  
**L** Year of formation: 1994 **M** State of legal domicile: DE

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: CHARITABLE, EDUCATIONAL AND FRATERNAL		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	11
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	0
	<b>5</b> Total number of individuals employed in calendar year 2021 (Part V, line 2a)	<b>5</b>	0
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	15
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0
<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>		
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	542,988	516,720
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	35,840	121,990
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	47,233	0
	<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	626,061	638,710
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		0
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	48,000	12,500
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		0
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 0		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	186,490	306,330
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	234,490	318,830	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	391,571	319,880	
<b>Net Assets or Fund Balances</b>		<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>20</b> Total assets (Part X, line 16)	966,779	1,307,009
	<b>21</b> Total liabilities (Part X, line 26)		0
<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	966,779	1,307,009	

Form **990**

**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

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

**2022**

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

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

**A For the 2022 calendar year, or tax year beginning 07-01-2022, and ending 06-30-2023**

- B** Check if applicable:
- Address change
  - Name change
  - Initial return
  - Final return/terminated
  - Amended return
  - Application pending

**C** Name of organization  
SEOUL NATIONAL UNIVERSITY ALUMNI ASSOCIATION IN USA

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
2410 JAMES M WOOD BLVD

City or town, state or province, country, and ZIP or foreign postal code  
LOS ANGELES, CA 90006

**D** Employer identification number  
13-3859506

**E** Telephone number  
(213) 908-5586

**G** Gross receipts \$ 405,320

**F** Name and address of principal officer:  
MYONG HO RO

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

**H(b)** Are all subordinates included?  Yes  No  
If "No," attach a list. See instructions.

**H(c)** Group exemption number ▶

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) ◀ (insert no.)  4947(a)(1) or  527

**J** Website: ▶ WWW.SNUAA.ORG

**K** Form of organization:  Corporation  Trust  Association  Other ▶

**L** Year of formation: 1994 **M** State of legal domicile: DE

**Part I Summary**

Activities & Governance

**1** Briefly describe the organization's mission or most significant activities:  
CHARITABLE, EDUCATIONAL AND FRATERNAL

**2** Check this box  if the organization discontinued its operations or disposed of more than 25% of its net assets.

<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	11
<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	0
<b>5</b> Total number of individuals employed in calendar year 2022 (Part V, line 2a)	0
<b>6</b> Total number of volunteers (estimate if necessary)	
<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	0
<b>7b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	

Revenue

	Prior Year	Current Year
<b>8</b> Contributions and grants (Part VIII, line 1h)	516,720	298,815
<b>9</b> Program service revenue (Part VIII, line 2g)	121,990	81,505
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)		25,000
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0
<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	638,710	405,320

Expenses

<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		0
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	12,500	6,000
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		0
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 0		
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	306,330	445,306
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	318,830	451,306
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	319,880	-45,986

Net Assets or Fund Balances

	Beginning of Current Year	End of Year
<b>20</b> Total assets (Part X, line 16)	1,307,009	1,203,098
<b>21</b> Total liabilities (Part X, line 26)		0
<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	1,307,009	1,203,098

Form **990**

**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

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.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**2023**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

**A For the 2023 calendar year, or tax year beginning 07-01-2023, and ending 06-30-2024**

- B** Check if applicable:
- Address change
  - Name change
  - Initial return
  - Final return/terminated
  - Amended return
  - Application pending

**C** Name of organization  
SEOUL NATIONAL UNIVERSITY ALUMNI ASSOCIATION IN USA

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
2416 JAMES M WOOD BLVD B

City or town, state or province, country, and ZIP or foreign postal code  
LOS ANGELES, CA 90006

**D** Employer identification number  
13-3859506

**E** Telephone number  
(918) 616-3386

**G** Gross receipts \$ 539,913

**F** Name and address of principal officer:  
SANG GANG LEE

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

**H(b)** Are all subordinates included?  Yes  No  
If "No," attach a list. See instructions.

**H(c)** Group exemption number

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) (insert no.)  4947(a)(1) or  527

**J** Website: WWW.SNUAA.ORG

**K** Form of organization:  Corporation  Trust  Association  Other

**L** Year of formation: 1994 **M** State of legal domicile: DE

**Part I Summary**

Activities & Governance

**1** Briefly describe the organization's mission or most significant activities:  
CHARITABLE, EDUCATIONAL AND FRATERNAL

**2** Check this box  if the organization discontinued its operations or disposed of more than 25% of its net assets.

<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	3	11
<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	4	0
<b>5</b> Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	0
<b>6</b> Total number of volunteers (estimate if necessary)	6	
<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
<b>7b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	

Revenue

	Prior Year	Current Year
<b>8</b> Contributions and grants (Part VIII, line 1h)	298,815	370,580
<b>9</b> Program service revenue (Part VIII, line 2g)	81,505	155,705
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	25,000	13,628
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0
<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	405,320	539,913

Expenses

<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		0
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	6,000	60,600
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		0
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) 0		
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	445,306	249,623
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	451,306	310,223
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	-45,986	229,690

Net Assets or Fund Balances

	Beginning of Current Year	End of Year
<b>20</b> Total assets (Part X, line 16)	1,203,098	1,406,527
<b>21</b> Total liabilities (Part X, line 26)		0
<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	1,203,098	1,406,527

- Not available at IRS homepage yet

Form <b>990</b> Department of the Treasury Internal Revenue Service	<b>Return of Organization Exempt From Income Tax</b> 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. Go to <a href="http://www.irs.gov/Form990">www.irs.gov/Form990</a> for instructions and the latest information.	OMB No. 1545-0047 <b>2024</b> <b>Open to Public Inspection</b>																								
<b>A For the 2024 calendar year, or tax year beginning 07/01/24, and ending 06/30/25</b>																										
<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>SEOUL NATIONAL UNIVERSITY ALUMNI ASSOCIATION IN USA</b> Doing business as Number and street (or P.O. box if mail is not delivered to street address) <b>2416 JAMES M WOOD BLVD #B</b> City or town, state or province, country, and ZIP or foreign postal code <b>LOS ANGELES CA 90006</b>	<b>D</b> Employer identification number <b>13-3859506</b> <b>E</b> Telephone number <b>918-616-3386</b> <b>G</b> Gross receipts\$ <b>505,270</b>																								
<b>F</b> Name and address of principal officer: <b>SANG GANG LEE</b>		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions																								
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>J</b> Website: <b>WWW.SNUAA.ORG</b> <b>H(c)</b> Group exemption number <b>3784</b>																								
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		<b>L</b> Year of formation: <b>1994</b> <b>M</b> State of legal domicile: <b>DE</b>																								
<b>Part I Summary</b>																										
<b>1</b> Briefly describe the organization's mission or most significant activities: <b>CHARITABLE, EDUCATIONAL AND FRATERNAL</b>																										
<b>Activities &amp; Governance</b>	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. <b>3</b> Number of voting members of the governing body (Part VI, line 1a) <b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) <b>5</b> Total number of individuals employed in calendar year 2024 (Part V, line 2a) <b>6</b> Total number of volunteers (estimate if necessary) <b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 <b>7b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="width:10%;"><b>3</b></td><td style="text-align: right;"><b>11</b></td></tr> <tr><td><b>4</b></td><td style="text-align: right;"><b>0</b></td></tr> <tr><td><b>5</b></td><td style="text-align: right;"><b>0</b></td></tr> <tr><td><b>6</b></td><td style="text-align: right;"><b>0</b></td></tr> <tr><td><b>7a</b></td><td style="text-align: right;"><b>0</b></td></tr> <tr><td><b>7b</b></td><td style="text-align: right;"><b>0</b></td></tr> </table>	<b>3</b>	<b>11</b>	<b>4</b>	<b>0</b>	<b>5</b>	<b>0</b>	<b>6</b>	<b>0</b>	<b>7a</b>	<b>0</b>	<b>7b</b>	<b>0</b>												
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<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h) <b>9</b> Program service revenue (Part VIII, line 2g) <b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) <b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) <b>12</b> Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;"></th> <th style="width:45%;">Prior Year</th> <th style="width:45%;">Current Year</th> </tr> </thead> <tbody> <tr><td><b>8</b></td><td style="text-align: right;"><b>370,580</b></td><td style="text-align: right;"><b>374,915</b></td></tr> <tr><td><b>9</b></td><td style="text-align: right;"><b>155,705</b></td><td style="text-align: right;"><b>48,980</b></td></tr> <tr><td><b>10</b></td><td style="text-align: right;"><b>13,628</b></td><td style="text-align: right;"><b>81,375</b></td></tr> <tr><td><b>11</b></td><td style="text-align: right;"><b>0</b></td><td style="text-align: right;"><b>0</b></td></tr> <tr><td><b>12</b></td><td style="text-align: right;"><b>539,913</b></td><td style="text-align: right;"><b>505,270</b></td></tr> </tbody> </table>		Prior Year	Current Year	<b>8</b>	<b>370,580</b>	<b>374,915</b>	<b>9</b>	<b>155,705</b>	<b>48,980</b>	<b>10</b>	<b>13,628</b>	<b>81,375</b>	<b>11</b>	<b>0</b>	<b>0</b>	<b>12</b>	<b>539,913</b>	<b>505,270</b>						
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<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3) <b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) <b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) <b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) <b>b</b> Total fundraising expenses (Part IX, column (D), line 25) <b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) <b>18</b> Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) <b>19</b> Revenue less expenses. Subtract line 18 from line 12	<table border="1" style="width:100%; border-collapse: collapse;"> <tbody> <tr><td><b>13</b></td><td style="text-align: right;"><b>0</b></td><td style="text-align: right;"><b>30,000</b></td></tr> <tr><td><b>14</b></td><td style="text-align: right;"><b>0</b></td><td style="text-align: right;"><b>0</b></td></tr> <tr><td><b>15</b></td><td style="text-align: right;"><b>60,600</b></td><td style="text-align: right;"><b>70,100</b></td></tr> <tr><td><b>16a</b></td><td style="text-align: right;"><b>0</b></td><td style="text-align: right;"><b>0</b></td></tr> <tr><td><b>b</b></td><td style="text-align: right;"><b>0</b></td><td style="text-align: right;"><b>0</b></td></tr> <tr><td><b>17</b></td><td style="text-align: right;"><b>249,623</b></td><td style="text-align: right;"><b>247,615</b></td></tr> <tr><td><b>18</b></td><td style="text-align: right;"><b>310,223</b></td><td style="text-align: right;"><b>347,715</b></td></tr> <tr><td><b>19</b></td><td style="text-align: right;"><b>229,690</b></td><td style="text-align: right;"><b>157,555</b></td></tr> </tbody> </table>	<b>13</b>	<b>0</b>	<b>30,000</b>	<b>14</b>	<b>0</b>	<b>0</b>	<b>15</b>	<b>60,600</b>	<b>70,100</b>	<b>16a</b>	<b>0</b>	<b>0</b>	<b>b</b>	<b>0</b>	<b>0</b>	<b>17</b>	<b>249,623</b>	<b>247,615</b>	<b>18</b>	<b>310,223</b>	<b>347,715</b>	<b>19</b>	<b>229,690</b>	<b>157,555</b>
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<b>Part II Signature Block</b>																										
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.																										
<b>Sign Here</b>	Signature of officer <b>SANG GANG LEE</b> Type or print name and title <b>PRESIDENT</b>	Date																								
<b>Paid Preparer Use Only</b>	Preparer's name <b>STEVE S NOH</b> Preparer's signature <b>STEVE S NOH</b> Firm's name <b>Lee, Oh &amp; Noh, CPAs, PLLC</b> <b>7004 Little River Tpke Ste O</b> <b>Annandale, VA 22003-3201</b>	Date <b>09/22/25</b> Check <input type="checkbox"/> if self-employed <input type="checkbox"/> if PTIN <b>P00497802</b> Firm's EIN <b>20-1409574</b> Phone no. <b>703-533-7200</b>																								
May the IRS discuss this return with the preparer shown above? See instructions <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																										
For Paperwork Reduction Act Notice, see the separate instructions. <span style="float: right;">Form <b>990</b> (2024)</span>																										