Form **990**

Department of the Treasury

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.

2013
Open to Public Inspection

For the 2013 calendar year, or tax year beginning and ending D Employer identification number Check if applicable: C Name of organization LIBERTY IN NORTH KOREA Address change Doing Business As 73-1710135 Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite Telephone number Initial return 310-212-7190 1751 TORRANCE BLVD L Terminated City or town, state or province, country, and ZIP or foreign postal code TORRANCE 90501 1,488,118 Amended return G Gross receipts\$ Name and address of principal officer: Application pending H(a) Is this a group return for subordinates? HANNAH SONG 1751 TORRANCE BLVD H(b) Are all subordinates included? If "No," attach a list. (see instructions) TORRANCE CA 90501 **X** 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or Tax-exempt status: WWW.LIBERTYINNORTHKOREA.ORG Website: **H(c)** Group exemption number ▶ Form of organization: X Corporation Trust Year of formation: 2004 Association M State of legal domicile: CA Part I Summary 1 Briefly describe the organization's mission or most significant activities: REDEFINING NORTH KOREA BY FOCUSING ON THE PEOPLE WHILE RESCUING & PROVIDING Activities & Governance RESETTLEMENT SUPPORT TO NORTH KOREAN REFUGEES & PURSUING AN END TO THE NORTH KOREA CRISIS. 2 Check this box ▶ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 3 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 18 5 6 Total number of volunteers (estimate if necessary) 60 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, line 34. **Current Year** 997,678 1,373,207 **8** Contributions and grants (Part VIII, line 1h) Revenue 9 Program service revenue (Part VIII, line 2g) 0 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 0 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 56,034 32, 187 053,712 405,394 12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 426,929 516,692 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ► 76,807 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 620,218 688,131 1,047,147 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 1,204,823 6,565 19 Revenue less expenses. Subtract line 18 from line 12 200,571 20 Beginning of Current Year End of Year 156,682 319,685 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 37,568 22 Net assets or fund balances. Subtract line 21 from line 20 114 **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. Signature of officer Sign DIRECTOR OF OPERATIONS Here MICHAEL YUN Type or print name and title Print/Type preparer's name Preparer's signature Check Paid 08/18/14 self-employed MICHAEL P. GUASTAMACCHIO MICHAEL P. GUASTAMACCHIO P01280620 **Preparer** MICHAEL GUASTAMACCHIO CPA 27-4119830 Firm's EIN ▶ Firm's name **Use Only** 12792 VALLEY VIEW ST STE 210 562-508-2956 GARDEN GROVE, CA Firm's address May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No

	MANUEL COLUMN CONTRACTOR AND CONTRAC	r age z
۲	Part III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III	X
1		<u></u>
	REDEFINING NORTH KOREA BY FOCUSING ON THE PEOPLE WHILE RESCUING	E PROVIDING
	RESETTLEMENT SUPPORT TO NORTH KOREAN REFUGEES & PURSUING AN END	
	NORTH KOREA CRISIS.	
	NORTH ROREA CRISIS.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
_		Yes X No
	If "Yes," describe these new services on Schedule O.	165 21 110
3		
3		Yes X No
	If "Yes," describe these changes on Schedule O.	163 21 110
4		
7	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,	
	the total expenses, and revenue, if any, for each program service reported.	
	the total expenses, and revenue, if any, for each program service reported.	
4-	a (Code:) (Expenses \$ 468,825 including grants of \$) (Revenue \$ 1	.,075,130)
	CHANGING THE NARRATIVE: THROUGH RAISING AWARENESS ON WHAT WE CO BE THE MOST UNDER-REPRESENTED ISSUE TODAY, WE BELIEVE THAT A GLO	
	CONSCIOUSNESS PLAYS A VITAL ROLE IN THE FREEDOM OF THE NORTH KO	
	THROUGH OUR PROGRAMS IN 2013 AND OUR EFFORTS TO SHIFT THE NARRAY	
	NORTH KOREA AWAY FROM THE POLITICS AND ONTO THE PEOPLE, WE REACH	
	51,079 PEOPLE AT 782 VENUES THROUGHOUT 48 STATES. IT WAS THROUGH	
	COMPELLING MEDIA, RESEARCH AND GRASSROOTS EFFORTS THAT WE WERE	
	REACH SUCH AUDIENCES AND CONTINUE TO SHARE STORIES OF HOPE OF THE	
	KOREAN PEOPLE. RAISING OVER \$158,582 THROUGH OUR AWARENESS TOURS	
	PROGRAM HELPED RAISE IMPORTANT FUNDING FOR THE ORGANIZATION'S PI	
	INITIATIVES. LINK'S 318 RESCUE TEAMS WORLDWIDE ALSO PLAYED A VI	
-		***************************************
4t	b (Code:) (Expenses \$ 393,046 including grants of \$) (Revenue \$	<u> </u>
	FIELD: AS AN ORGANIZATION, LINK PROVIDES DIRECT HUMANITARIAN ASS	SISTANCE TO
	NORTH KOREAN REFUGEES. IN 2013, WE WERE ABLE TO ASSIST 85 REFUGI	
	JOURNEY TO FREEDOM, EVENTUALLY MAKING IT SAFELY TO COUNTRIES LI	KE SOUTH
	KOREA AND THE UNITED STATES WHERE THEY WERE RESETTLED. LINK CONT	
	WORKING WITH REFUGEES BY PROVIDING SUPPLEMENTARY ASSISTANCE WHIC	
	SERVICES SUCH AS TRANSLATION AND INTERPRETATION, ENGLISH LANGUA	
	MENTORSHIPS AND NETWORKING, FINANCIAL ASSISTANCE FOR HOUSING AND	
	NEEDS AS WELL AS EDUCATIONAL SCHOLARSHIPS, AND REFERRALS TO OTHE	
	PROVIDERS. THE ORGANIZATION ALSO BEGAN A STUDY ABROAD PROGRAM PI	
	RESETTLED NORTH KOREANS IN SOUTH KOREA THE OPPORTUNITY TO STUDY	
	SEMESTER IN AMERICA, WHILE ALSO RECEIVING CAREER MENTORING. 2013	
	·	
40	c (Code:) (Expenses \$ 56,302 including grants of \$) (Revenue \$)
	RESEARCH & STRATEGY: RESEARCH AND STRATEGY PLAYS A VITAL ROLE IN	N FULFILLING
(OUR MISSION. THROUGH REGULARLY REFUGEE INTERVIEWS AND ONGOING RE	ESEARCH,
]	LINK WORKS TO DEVELOP LONG-TERM, PEOPLE-FOCUSED STRATEGIES TO AC	CCELERATE
1	POSITIVE CHANGES INSIDE THE COUNTRY. BY WORKING TOGETHER AND ENG	GAGING
1	REGULARLY WITH EXPERTS, ACTIVISTS, PRACTITIONERS, JOURNALISTS, (GOVERNMENT
	OFFICIALS, NORTH KOREAN DEFECTORS AND OTHER NON-TRADITIONAL ACTO	
	CONTINUE TO DEVELOP A HOLISTIC UNDERSTANDING OF THE ISSUE IN ORI	
	TO CREATE AND IMPLEMENT THE BEST APPROACHES. WE ALSO UTILIZED TH	
	TO PROVIDE UPDATED INFORMATION AND IMPORTANT INSIGHTS ON THE ISS	
	PUBLIC.	
40	d Other program services. (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)
_	010 172	

Form 990 (2013) LIBERTY IN NORTH KOREA
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	_		v
4	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			х
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Λ
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	3		Λ
O	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	•		21
'	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	-		
Ü	complete Schedule D. Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a	Ů		
3	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
•	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
-	complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			77
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	4.0		37
00	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
<u> </u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form 990 (2013) LIBERTY IN NORTH KOREA

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			3,7
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	04-		
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	250		х
h	with a disqualified person during the year? If "Yes," complete Schedule L, Part I Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	25a		Λ
b	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Von " complete Cabadula I - Part I	25b		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	230		Λ
20	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified parsage? If so, complete Schodule I. Part II.	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	20		
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
00	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	00		v
27	related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	31		Λ.
30	19? Note. All Form 990 filers are required to complete Schedule O	38	х	
	10. Hatel 1 in 1 of 11 of 10 in 10 are required to confine te confedere of	- 50	- 43	

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Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Pa	rt V				Ш
		I I	_		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	<u>7</u> 0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	U			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and					37
•	reportable gaming (gambling) winnings to prize winners?			1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	0-	18			
L	Statements, filed for the calendar year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required federal employment tax re	2a		- Oh	X	
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction			2b	Λ	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	1115)		3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedul			3b		- 22
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other		ority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other		-			
	account)?		α.	4a		X
b	If "Yes," enter the name of the foreign country: ▶					
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financia	al Acc	ounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans	action	?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did	the				
	organization solicit any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions c	or			
	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	r good	s			
				7a		
b				7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it	was		_		
	required to file Form 8282?	1 1		7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cor If the organization received a contribution of qualified intellectual property, did the organization file					
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		•			
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporti		1110 4 1 01111 1000	· · · · · · · · · · · · · · · · · · ·		
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsori	_				
	organization, have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:	 				
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources	441				
40-	against amounts due or received from them.)	11b	1440			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of F	1 1	141?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?			13a	1	
а	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which					
~	the organization is licensed to issue qualified health plans	13b				
С	Enter the amount of reserves on hand	13c				
	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Sched					

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Section A. Governing Body and Management

000	Alon A. Governing Body and Management				V	NI.
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	6		Yes	No
ıu	If there are material differences in voting rights among members of the governing body, or	- iu		1		
	if the governing body delegated broad authority to an executive committee or similar					
	committee, explain in Schedule O.					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	5			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			7		
	any other officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct					
	supervision of officers, directors, or trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was fill	ed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint					
	one or more members of the governing body?			7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,					
	stockholders, or persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the	year by	the following	ıg:		
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at					
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X
Sec	ction B. Policies (This Section B requests information about policies not required by the	Interr	ıal Revenı	ue Co	de.)	
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a	X	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,					
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	Х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before fi	ling the	form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				37	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	rise to	conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			40-	v	
40	describe in Schedule O how this was done			12c	X	v
13	Did the organization have a written whistleblower policy?			13		X
14	Did the organization have a written document retention and destruction policy?			14		^
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision	1 2				
•	The organization's CEO, Executive Director, or top management official			15a		X
a b	Other affice and an incomplete and after a manufaction			15b		X
	Officers of key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			100		
16a						
	with a taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its					
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the					
	organization's exempt status with respect to such arrangements?			16b		
Sec	ction C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ► CA					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section					
	available for public inspection. Indicate how you made these available. Check all that apply.					
	X Own website X Another's website X Upon request Other (explain in Schedule O)					
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of in	terest p	oolicy, and			
	financial statements available to the public during the tax year.					
20	State the name, physical address, and telephone number of the person who possesses the books and records					
_	organization: ► MICHAEL YUN 1751 TORRANCE BLVI		04.4		<u> </u>	100
Л.	ORRANCE CA 905	υT	31()-21	Z- /	TAC

	,							. ~	9
Part VII	Compensation of (Officers, D	irectors,	Trustees, Ke	ey Employees,	Highest	Compensated	Employees,	and
	Independent Contr	ractore							

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation			
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1)MICHAEL YUN	50.00									
DIR. OF OPERATIONS	0.00			X				51,800	0	0
(2) JUSTIN WHEELER	F0 00									
VICE PRESIDENT	50.00			x				51,250	0	0
(3) HANNAH SONG								31/230		
PRESIDENT/CEO	50.00			x				40,000	0	0
(4)	0.00			Λ				40,000	0	0
(5)										_
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
DAA	1	1	1							200

Pa	rt VII Section A. Officers	s, Directors, Tı	ruste	es,	Key	Em	ploy	/ees	, and Highest Compens	ated Employees (continu	ued)
	(A) Name and title	(B) Average hours per week (list any hours for	(C) Position (do not check more than obox, unless person is both officer and a director/truster						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1095-WIGG)	organization and related organizations
(12)							۵				
(13)											
(14)											
(15)											
(16)											
(17)											
(18)											
(19)											
С	Sub-total	eets to Part VII	, Se	ctio	ı A			> > >	143,050 143,050		
2	Total number of individuals (in reportable compensation from	ncluding but not	limit	ed to				abo			Yes No
3 4	Did the organization list any f employee on line 1a? If "Yes, For any individual listed on lin organization and related	" complete Schene 1a, is the sum ne 1a, is the sum nizations greate	edule n of r er tha	e J fo epor an \$1	r su table 50,0	ch ir e coi 000?	ndivid mper If "Y	dual nsat 'es,"	ion and other compensation complete Schedule J for	on from the such	3 X
5 Sec	Did any person listed on line for services rendered to the o tion B. Independent Contract	1a receive or ac organization? If "	crue	con	npen	satio	on fr	om a	any unrelated organization		5 X
1	Complete this table for your fi compensation from the organ	ive highest com lization. Report	pens com	ated	l inde	eper 1 for	dent	t cor	ndar year ending with or w	vithin the organization's tax	
	Name and	(A) d business address							Descrip	(B) bition of services	(C) Compensation
2	Total number of independent									0	

	11 L V	Check if Schedule		a respons	e or note to any li	ne in this Part VII	I	
20					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Gifts, Grant nilar Amount	1a b c d	Federated campaigns Membership dues Fundraising events Related organizations	1a 1b 1c 1d					
Program Service Revenue Contributions, Gifts, Grants	e f g h	Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a Total. Add lines 1a–1f	a-1f: \$	373,207	1,373,207			
ce Revenue	2a b			Busn. Code				
rogram Servi	c d e f	All other program service reve	enue					
	9	Total. Add lines 2a–2f	dividends, inte	rest,				
	b	Royalties		Personal				
	7a	Net rental income or (loss) Gross amount from sales of assets other than inventory Less: cost or other basis & sales exps.) Other				
enne	d	Gain or (loss) Net gain or (loss) Gross income from fundraising ever (not including \$		>				
Other Revenu		of contributions reported on line 1c See Part IV, line 18 Less: direct expenses Net income or (loss) from func	a	· >				
	b	Gross income from gaming activities See Part IV, line 19 Less: direct expenses Net income or (loss) from gam	a					
	b	Gross sales of inventory, less returns and allowances Less: cost of goods sold Net income or (loss) from sale	. a b	114,911 82,724		32,187		
	11a b c	Miscellaneous Revenue		Busn. Code				
		Total Add lines 11a–11d Total revenue See instruction			1 405 394	32 187	0	0

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

	Check if Schedule O contains a response or note to any line in this Part IX												
	ot include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising								
7b, 8	b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses								
1	Grants and other assistance to governments and												
	organizations in the U.S. See Part IV, line 21												
2	Grants and other assistance to individuals in												
	the U.S. See Part IV, line 22												
3	Grants and other assistance to governments,												
	organizations, and individuals outside the												
	U.S. See Part IV, lines 15 and 16												
4	Benefits paid to or for members												
5	Compensation of current officers, directors,												
	trustees, and key employees	143,050	55,082	61,156	26,812								
6	Compensation not included above, to disqualified												
	persons (as defined under section 4958(f)(1)) and												
	persons described in section 4958(c)(3)(B)												
7	Other salaries and wages	312,841	253,207	58,401	1,233								
8	Pension plan accruals and contributions (include												
	section 401(k) and 403(b) employer contributions)												
9	Other employee benefits	23,208 37,593	10,641	10,645	1,922 2,121								
10	Payroll taxes	37,593	23,746	11,726	2,121								
11	Fees for services (non-employees):												
а	Management												
b	Legal												
С	Accounting	14,836		14,836									
	Lobbying												
е	Professional fundraising services. See Part IV, line 1	7											
f	Investment management fees												
g	Other. (If line 11g amount exceeds 10% of line 25, column												
	(A) amount, list line 11g expenses on Schedule O.)	48,203	48,203										
12	Advertising and promotion	•	·										
13	Office expenses	72,260	49,519	19,496	3,245								
14	Information technology	7,207	4,581	2,271	355								
15	Royalties	•	·										
16	Occupancy	127,572	88,899	33,469	5,204								
17	Travel	24,225	16,177	2,574	5,474								
18	Payments of travel or entertainment expenses												
	for any federal, state, or local public officials												
19	Conferences, conventions, and meetings												
20	Interest	16,652		16,652									
21	Payments to affiliates												
22	Depreciation, depletion, and amortization	22,099	22,099										
23	Insurance	26,617	19,229	6,923	465								
24	Other expenses. Itemize expenses not covered												
	above (List miscellaneous expenses in line 24e. If												
	line 24e amount exceeds 10% of line 25, column												
	(A) amount, list line 24e expenses on Schedule O.)												
а	FIELD	204,163	204,163										
b	CHANGING THE NARRATIVE	124,297	91,259	3,062	29,976								
С													
d													
е	All other expenses												
25	Total functional expenses. Add lines 1 through 24e	1,204,823	886,805	241,211	76,807								
26	Joint costs. Complete this line only if the												
	organization reported in column (B) joint costs from a combined educational campaign and												
	fundraising solicitation. Check here												
	following SOP 98-2 (ASC 958-720)												
DAA					Form 990 (2013)								

Pai	rt)	Balance Sheet								
		Check if Schedule O contains a response or not	e to any line	in this Part X						
						(A)		(B)		
						Beginning of year		End of year		
	1	Cash—non-interest bearing				100,464	1	275,032		
	2	Savings and temporary cash investments					2			
	3	Pledges and grants receivable, net					3			
		Accounts receivable, net					4			
	5	Loans and other receivables from current and former of								
		trustees, key employees, and highest compensated er	nployees.							
		Complete Part II of Schedule L					5			
	6	Loans and other receivables from other disqualified pe	ersons (as d	efined under se	ction					
		4958(f)(1)), persons described in section 4958(c)(3)(B								
		sponsoring organizations of section 501(c)(9) voluntar								
ţ		organizations (see instructions). Complete Part II of So			6					
Assets	7	Notes and loans receivable, net					7			
Ž	8	Inventories for sale or use				4,965	8	4,965		
	9	Prepaid expenses and deferred charges			9					
1	10a	Land, buildings, and equipment: cost or								
		other basis. Complete Part VI of Schedule D	10a	108,	<u> 391</u>					
	b	Less: accumulated depreciation	10b	75,	<u> 123</u>	46,333	10c	33,268		
1		Investments—publicly traded securities					11			
1	12	Investments—other securities. See Part IV, line 11	estments—other securities. See Part IV, line 11							
1	13	Investments—program-related. See Part IV, line 11			13					
1	14	Intangible assets			14					
1	15	Other assets. See Part IV, line 11		4,920		6,420				
1		Total assets. Add lines 1 through 15 (must equal line	156,682	16	319,685					
1	17	Accounts payable and accrued expenses		4,559	17					
1	18	Grants payable					18			
1	19	Deferred revenue					19			
		Tax-exempt bond liabilities					20			
		Escrow or custodial account liability. Complete Part IV					21			
es 2	22	Loans and other payables to current and former office		,						
Ħ		trustees, key employees, highest compensated employees	yees, and							
Liabilities		disqualified persons. Complete Part II of Schedule L					22			
4		Secured mortgages and notes payable to unrelated this					23			
		Unsecured notes and loans payable to unrelated third				33,009	24			
2	25	Other liabilities (including federal income tax, payables								
		parties, and other liabilities not included on lines 17-24). Complete	Part X						
		of Schedule D				27 560	25	0		
2	26	Total liabilities. Add lines 17 through 25				37,568	26	0		
es		Organizations that follow SFAS 117 (ASC 958), ch		X and						
ž ,		complete lines 27 through 29, and lines 33 and 34				110 114		210 605		
Sale		Unrestricted net assets				119,114		319,685		
		Temporarily restricted net assets					28			
ᇣᆙ	29	Permanently restricted net assets		horo N			29			
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 9	оо), спеск	here ► ar	iu					
ts	20	complete lines 30 through 34.					20			
SSE		Capital stock or trust principal, or current funds					30 31			
¥ 3							32			
		- - 1 - 1 - 1 - 1				119,114		319,685		
						156, 682		319,685		
3	34	Total liabilities and net assets/fund balances				130,062	34	319,003		

Forn	990 (2013) LIBERTY IN NORTH KOREA 73-1710135			Paç	ge 12
Pε	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,40		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,20		
3	Revenue less expenses. Subtract line 2 from line 1	3		0,5	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	11	19,1	114
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	31	19,6	<u> 685</u>
Pε	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				ĺ
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u>	3b		

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

Open to Public

Department of the Treasury Internal Revenue Service

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

Name o	ame of the organization LIBERTY IN NORTH KOREA							Employer identification number 73–1710135					
Pai	rt I Reas	son for Public Cha	rity Status (All organization	ons mus	compl	ete this	s part.) See	instruc	ctions.			
The or 1	rganization is not A church, co A school de: A hospital or city, and sta An organiza section 170 A federal, st An organiza described in A communit An organiza receipts from acquired by An organiza purposes of 509(a)(3). Ca Type By checking other than for or section 50 If the organization Since Augus following per (i) A person or section 50 (ii) A person or section 50 (iii) A person or section 50 (iiii) A person or section 50 (iiii) A person or section 50 (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	son for Public Charter a private foundation be convention of churches, of scribed in section 170(In a cooperative hospital esearch organization operate: Ition operated for the bereful for the companization of the cooperative hospital esearch organization operated for the bereful for the cooperate of the cooperate, or local government on that normally receive a section 170(b)(1)(A)(v) of the cooperation organized in section that normally receive a crivities related to its a gross investment incorrection organized and operation o	prity Status (All organization accuse it is: (For lines 1 through 1 or association of churches describe (a)(1)(A)(ii). (Attach Schedule E.) deservice organization described in conjunction with a hospitated in conjunction with a conjunction with a conjunction in the conjun	1, check of ed in section 1 section 1 section 1 section in section in section in section in section in section (a)(2). (Composafety. Section perform in section 5 section and in supported of the section in supported of the section in section i	nly one be ion 170(b) (1) (ed in secondated by a secondate secondated by a secondate secondated by a secondate secondated by a secondate s	ox.) a)(1)(A)(iii). tion 17(a govern b)(A)(v). tal unit of tion 511 it ill.) a 509(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(priper from the members more that the from the fax) from the fax) from the fax) from the fax fax from the fax fax from the	A)(iii). E A)(iii). E Unit des An 33 1, An busin Arry out A)(2). Se Agh 11h Be III—Ne Be squalifi A section Apporting	Enter the construction of	e hospita n lic gross ss ion ionally in ons a)(1)			No
		member of a person de	sacribad in (i) abova?								1g(ii)		
			son described in (i) or (ii) above?								1g(iii)		
h										Ľ	ig(iii)		
(i) N	lame of supported organization	(ii) EIN	(iii) Type of organization(single) (iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the o	organization sted in your document?	the organ col. (i)	nization in	organizat (i) organi	Is the tion in col. zed in the S.?	(vii) Am	nount o		ary
(A)				1									
~)													
(B)													
(C)													
(D)													
(E)													
Γotal													

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

Schedule A (Form 990 or 990-EZ) 2013

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

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

Sec	tion A. Public Support							
Caler	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201	3	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")							
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3							
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4.							
Sec	tion B. Total Support							
Caler	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201	3	(f) Total
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)							
11	Total support. Add lines 7 through 10							
12	Gross receipts from related activities, etc.	. (see instructions)				12	
13	First five years. If the Form 990 is for the	e organization's fir	rst, second, third,	fourth, or fifth tax	year as a section !	501(c)(3)		
	organization, check this box and stop he							
Sec	tion C. Computation of Public							
14	Public support percentage for 2013 (line	6, column (f) divide	ed by line 11, colu	ımn (f))			14	%
15	Public support percentage from 2012 Sci	hedule A, Part II, li	ne 14				15	%
16a	33 1/3% support test—2013. If the orga	anization did not ch	neck the box on lir	ne 13, and line 14	is 33 1/3% or mor	e, check this	3	
	box and stop here. The organization qua							▶ ∟
b	33 1/3% support test—2012. If the orga	anization did not ch	neck a box on line	13 or 16a, and lin	e 15 is 33 1/3% o	r more,		
	check this box and stop here. The organ	nization qualifies a	s a publicly suppo	rted organization				
17a	10%-facts-and-circumstances test—2	.013. If the organiz	ation did not chec	k a box on line 13	, 16a, or 16b, and	line 14 is		
	10% or more, and if the organization mee	ets the "facts-and-o	circumstances" te	st, check this box	and stop here. E	xplain in		
	Part IV how the organization meets the "lorganization							>
b	10%-facts-and-circumstances test—2							
	15 is 10% or more, and if the organizatio Explain in Part IV how the organization m				-			
	a una auto d'ava a sinatia a			•	•			.
18	Private foundation. If the organization of	did not check a hov		 16h 17a or 17h <i>i</i>	chack this boy and			
10	instructions							>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	695,494	742,916	985, 989	997,678	1,373,207	4,795,284
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose		,	57,240	98,847	114,911	270,998
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	695,494	742,916	1,043,229	1,096,525	1,488,118	5,066,282
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
500	tion B. Total Support						5,066,282
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	695,494	742,916	1,043,229	1,096,525	1,488,118	5,066,282
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	093,494	742,910	1,043,229	1,090,323	1,400,110	3,000,282
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	695,494	742,916	1,043,229	1,096,525	1,488,118	5,066,282
14	First five years. If the Form 990 is for the		t, second, third, fo	ourth, or fifth tax ye	ear as a section 5	601(c)(3)	. \Box
<u></u>	organization, check this box and stop he						
	etion C. Computation of Public S			(f))		45	100.00/
15 16	Public support percentage for 2013 (line 8 Public support percentage from 2012 Sch	3, column (f) alviae	a by line 13, colur	nn (f))		15	100.00%
	etion D. Computation of Investm					10	100.00%
17	Investment income percentage for 2013 (3 column (f))		17	%
18	Investment income percentage for 2013 (4.0	
19a	33 1/3% support tests—2013. If the org			ne 14, and line 15	is more than 33 1		70
b	17 is not more than 33 1/3%, check this b 33 1/3% support tests—2012. If the org	oox and stop here.	The organization	qualifies as a pub	licly supported or	ganization	> X
	line 18 is not more than 33 1/3%, check the						▶ □
20	Private foundation. If the organization d	id not check a box	on line 14, 19a, o	r 19b, check this b	ox and see instru	ictions	

Schedule A (F	Form 990 or 990-EZ)	2013 LIBERTY	IN NORTH	KOREA	73-171	L 0135 Page 4
Part IV	Supplemental Part III, line 12	2013 LIBERTY I Information. Proceeds to the complete to the co	rovide the explar this part for any a	nations required b additional informa	by Part II, line 10; Part ation. (See instructions	I, line 17a or 17b; and
		•	-			

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

L	IBERTY IN NORTH KOREA		73-1710135
	rt I Organizations Maintaining Donor Advised F	unds or Other Similar Funds o	
	Complete if the organization answered "Yes" to	Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing the	nat the assets held in donor advised	
	funds are the organization's property, subject to the organization's ex	clusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors		
	only for charitable purposes and not for the benefit of the donor or do	nor advisor, or for any other purpose	
	conferring impermissible private benefit?		Yes No
Pε	rt II Conservation Easements.		
	Complete if the organization answered "Yes" to	Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (che	ck all that apply).	
	Preservation of land for public use (e.g., recreation or education)		portant land area
	Protection of natural habitat	Preservation of a certified historic	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified cons	servation contribution in the form of a cons	servation
	easement on the last day of the tax year.		Held at the End of the Tax Yea
а			
	Total acreage restricted by conservation easements		
c	Number of conservation easements on a certified historic structure in	ucluded in (a)	2c
	Number of conservation easements included in (c) acquired after 8/1		
_	historia atmost use listed in the National Desister		2d
3	Number of conservation easements modified, transferred, released,	extinguished or terminated by the organiz	
3	tax year	extinguished, or terminated by the organiz	ation during the
4	Number of states where property subject to conservation easement is	s located >	
5	Does the organization have a written policy regarding the periodic mo		
J	violations, and enforcement of the conservation easements it holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enfo		
6	Starr and volunteer riours devoted to monitoring, inspecting, and enic	ording conservation easements during the	year
7	Amount of expenses incurred in monitoring, inspecting, and enforcing	a concernation accoments during the vector	
7		g conservation easements during the year	
_	►\$		
8	Does each conservation easement reported on line 2(d) above satisf		
_	(i) and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation ease		
	balance sheet, and include, if applicable, the text of the footnote to the organization's accounting for conservation easements.	e organization's financial statements that	describes the
D۶	irt III Organizations Maintaining Collections of Ai	rt Historical Trassuras or Othe	or Similar Assats
ГС	Complete if the organization answered "Yes" to		ei Siiiliai Assets.
10	If the organization elected, as permitted under SFAS 116 (ASC 958),		l balanca aboat
ıa	works of art, historical treasures, or other similar assets held for publi		
	•		
h	public service, provide, in Part XIII, the text of the footnote to its finantif the organization elected, as permitted under SEAS 116 (ASC 958)		
D	If the organization elected, as permitted under SFAS 116 (ASC 958),	•	
	works of art, historical treasures, or other similar assets held for public services provide the following amounts relating to those items:	ic exhibition, education, or research in tun	merance or
	public service, provide the following amounts relating to these items:		. Φ
	(i) Revenues included in Form 990, Part VIII, line 1		S
_	(ii) Assets included in Form 990, Part X	;	\$
2	If the organization received or held works of art, historical treasures,		provide the
	following amounts required to be reported under SFAS 116 (ASC 958		
	Revenues included in Form 990, Part VIII, line 1		\$
h	Assets included in Form 990 Part X		P C

Pε	ırt III	Organizations Maintaini	ing Collections	of Art, H	istorica	l Treasure	es, or O	ther S	imila	ır Ass	ets (co	<u>ntin</u>	ued)
3	Using the collection	e organization's acquisition, acces n items (check all that apply):	ssion, and other reco	ords, check a	any of the	following tha	t are a sig	nificant	use of	its			
а	Publi	c exhibition	d	Loan or ex	change pro	ograms							
b	Scho	larly research	е 🗌	Other									
С	Prese	ervation for future generations											
4	Provide a	a description of the organization's	collections and exp	lain how the	y further th	ne organizatio	on's exem _l	ot purpo	se in I	² art			
5	During th	e year, did the organization solici	t or receive donation	ns of art, hist	orical trea	sures, or oth	er similar						
	-	be sold to raise funds rather than									Ye	es	No
Pa	irt IV	Escrow and Custodial A	Arrangements.										
		Complete if the organizati 990, Part X, line 21.	ion answered "Y	es" to For	m 990,	Part IV, lin	e 9, or r	eporte	ed an	amou	nt on F	orm	1
1a	-	ganization an agent, trustee, custo on Form 990, Part X?	odian or other interm	-							□ Ye	es 「	No
b		explain the arrangement in Part X										_	_
			•	· ·							Amoun	t	
С	Beginning	g balance							1c				
d	Additions	during the year							1d				
е	Distributi	ons during the year							1e				
f	Ending b	alance							1f				
2a	Did the o	rganization include an amount on	Form 990, Part X, li	ine 21?							Ye	es [No
b	If "Yes," (explain the arrangement in Part X											
Pε	irt V	Endowment Funds.											
		Complete if the organization	ion answered "Y	<u>es" to For</u>	m 990, l	<u>Part IV, lin</u>	e 10.						
			(a) Current year	(b) P	rior year	(c) Two ye	ars back	(d) Th	ree year	s back	(e) Fou	r years	back
		g of year balance											
		tions											
	losses	stment earnings, gains, and											
d	Grants or	r scholarships											
е	Other exp	penditures for facilities and											
f	Administr	rative expenses											
g		ear balance											
2		he estimated percentage of the c	urrent year end bala	nce (line 1g	, column (a	a)) held as:							
а	Board de	signated or quasi-endowment	%										
b	Permane	ent endowment ▶ %											
С	Tempora	rily restricted endowment 🕨	%										
	The perc	entages in lines 2a, 2b, and 2c sh	nould equal 100%.										
3a	Are there	e endowment funds not in the pos	session of the organ	ization that	are held aı	nd administe	red for the	!					1
	organizat	-										Yes	No
	. ,										3a(i)		
											3a(ii)		
b		o 3a(ii), are the related organization									3b		
4		in Part XIII the intended uses of		ndowment fu	nds.								
P	irt VI	Land, Buildings, and Eq			000	D . N / P			_	00 D			_
		Complete if the organizati								<u>90, Pa</u>			0.
		Description of property	(a) Cost or other		(b) Cost or		` '	ccumulate			(d) Book	value	
			(investmen	L)	(oth	iei)	de	preciation					
										4			
b	Buildings									+			
		ld improvements											
		nt				00 221			10	_		-	0.00
						08,391			, 12				268
Fota	 Add line 	s 1a through 1e. (Column (d) mus	st equal Form 990, F	art X, colun	nn (B), line	10(c).)			<u></u>	<u> </u>		<u>აკ,</u>	268

Schedule D (I	Form 990) 2013 LIBERTY IN NORTH KOR	EA	73-1710135	Page
Part VII	Investments—Other Securities.			
	Complete if the organization answered "Yes" t	o Form 990, Part	IV, line 11b. See Form 990, Pa	rt X, line 12.
	(a) Description of security or category	(b) Book value	(c) Method of valuation	
	(including name of security)		Cost or end-of-year marke	t value
(1) Financial				
	eld equity interests			
(3) Other				
				_
(H)	nn (b) must equal Form 990, Part X, col. (B) line 12.) ▶			
Part VIII	Investments—Program Related.			
Fait VIII	Complete if the organization answered "Yes" to	o Form 990 Part	IV line 11c See Form 990 Pa	rt X line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation	
	(a) Description of investment	(b) Book value	Cost or end-of-year market	
(1)			,	
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				-
(8)				
(9)				
Total. (Colum	nn (b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX	Other Assets.			
	Complete if the organization answered "Yes" t	o Form 990, Part	IV, line 11d. See Form 990, Pa	rt X, line 15.
-	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	nn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities.		>	
Part X	Complete if the organization answered "Yes"	to Form 000 Bort	IV line 11e or 11f Coe Form 0	00 Dort V
	line 25.	lo Foiiii 990, Fait	iv, line Tie of Til. See Follif 9	90, Fait A,
1	(a) Description of liability	(b) Book value		
(1) Federal	income taxes	(b) Book value		
(2)	income taxes			
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	on (b) must equal Form 990. Part X. col. (B) line 25.)			

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ...

Pa	rt XI Reconciliation of Revenue per Audited Financial Sta	tements With Re	venue per Return.	
	Complete if the organization answered "Yes" to Form 99			
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1		
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1			
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	Investment expenses not included on Form 990, Part VIII, line 7b			
	Other (Describe in Part XIII.)	4b		
	Add lines 4a and 4b		4c	
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			
F	rt XII Reconciliation of Expenses per Audited Financial St Complete if the organization answered "Yes" to Form 99			
_	Total expenses and losses per audited financial statements			
2				
	Donated services and use of facilities	2a		
a h	Prior year adjustments	2b		
C	Prior year adjustments Other losses	2c		
d	Other losses Other (Describe in Part XIII.)	2d		
	Add lines 2a through 2d	[24]	2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part XIII.)			
c	Add lines 4a and 4b		4c	
U				
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	
5 Pa	I ofal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) In XIII Supplemental Information		5	
Pa Provi	Intal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Intal XIII Supplemental Information Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III, lines 1a	art IV, lines 1b and 2b;	Part V, line 4; Part X, line	
Pa Provi	I ofal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) In XIII Supplemental Information	art IV, lines 1b and 2b;	Part V, line 4; Part X, line	
Pa Provi	Intal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Intal XIII Supplemental Information Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III, lines 1a	art IV, lines 1b and 2b;	Part V, line 4; Part X, line	
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Pa Provi	Intal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Intal XIII Supplemental Information Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III, lines 1a	art IV, lines 1b and 2b;	Part V, line 4; Part X, line	
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Pa Provi	Intal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Intal XIII Supplemental Information Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III, lines 1a	art IV, lines 1b and 2b;	Part V, line 4; Part X, line	
Pa Provi	Intal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Intal XIII Supplemental Information Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III, lines 1a	art IV, lines 1b and 2b;	Part V, line 4; Part X, line	
Pa Provi	Intal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Intal XIII Supplemental Information Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III, lines 1a	art IV, lines 1b and 2b;	Part V, line 4; Part X, line	
Pa Provi	Intal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Intal XIII Supplemental Information Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III, lines 1a	art IV, lines 1b and 2b;	Part V, line 4; Part X, line	
Pa Provi	Intal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Intal XIII Supplemental Information Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III, lines 1a	art IV, lines 1b and 2b;	Part V, line 4; Part X, line	
Pa Provi	Intal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Intal XIII Supplemental Information Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III, lines 1a	art IV, lines 1b and 2b;	Part V, line 4; Part X, line	
Pa Provi	Intal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Intal XIII Supplemental Information Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III, lines 1a	art IV, lines 1b and 2b;	Part V, line 4; Part X, line	
Pa Provi	Intal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Intal XIII Supplemental Information Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III, lines 1a	art IV, lines 1b and 2b;	Part V, line 4; Part X, line	
Pa Provi	Intal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Intal XIII Supplemental Information Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III, lines 1a	art IV, lines 1b and 2b;	Part V, line 4; Part X, line	
Pa Provi	Intal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Intal XIII Supplemental Information Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III, lines 1a	art IV, lines 1b and 2b;	Part V, line 4; Part X, line	
Pa Provi	Intal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Intal XIII Supplemental Information Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III, lines 1a	art IV, lines 1b and 2b;	Part V, line 4; Part X, line	
Pa Provi	Intal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Intal XIII Supplemental Information Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III, lines 1a	art IV, lines 1b and 2b;	Part V, line 4; Part X, line	
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Pa Provi	Intal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Intal XIII Supplemental Information Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III, lines 1a	art IV, lines 1b and 2b;	Part V, line 4; Part X, line	
Pa Provi	Intal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Intal XIII Supplemental Information Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III, lines 1a	art IV, lines 1b and 2b;	Part V, line 4; Part X, line	
Pa Provi	Intal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Intal XIII Supplemental Information Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III, lines 1a	art IV, lines 1b and 2b;	Part V, line 4; Part X, line	

Schedule D (Fo	orm 990) 2013	LIBERTY	IN NORTH	KOREA	73-1710135	Page 5
Part XIII	Suppleme	ntal Informati	ion (continued)			
	• •		,			
• • • • • • • • • • • • • • • • • • • •						
• • • • • • • • • • • • • • • • • • • •						

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ See separate instructions.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

2013 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

LIBERTY IN NORTH KOREA

Employer identification number 73-1710135

Pi		General Information		Outside the Ur	nited States.	Complete if the org	anization ans	swered "Yes" on
1	For grantr	makers. Does the organ, the grantees' eligibility t	ization maintain record for the grants or assis	tance, and the sele	ection criteria use			Yes X No
2	_	nakers. Describe in Par outside the United State	_	procedures for mo	nitoring the use	of its grants and other		
3	Activities p	er Region. (The following	g Part I, line 3 table ca	an be duplicated if	additional space	is needed.)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities or region (by ty fundraising, prog investm grants to re located in the	pe) (e.g., ram services, ents, cipients	(e) If activity listed ir a program servic describe specific ty service(s) in regi	ce, /pe of	(f) Total expenditures for and investments in region
S	OUTHEAS!							
(1) B1	EDIIDI TC	OF KOREA	. 2	RESEARCH &	FIELD WR	RESETTLEMENT	ASSIST.	253,086
(2)	FLOPPIC	OF ROREA 1	. 4	RESEARCH &	STRATEGY	RESETTLEMENT	ASSIST.	108,414
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
<u>(11)</u>								
(12)								
(13)								
<u>(14)</u>								
<u>(15)</u>								
<u>(16)</u>								
(17)	\b	2		:				361 500
b T	otal from continu	ation	6	1				361,500
сТ	otals (add nes 3a and 3		6	;				361,500

Schedule F (Form 990) 2013 LIBERTY IN NORTH KOREA Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No

Schedule F (Form 990) 2013

Part V	Supplemental	Information
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Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

PART I, LINE 3 - ACTIVITIES PER REGION								
REGION	EXPENDITURES		INVESTMENTS					
SOUTHEAST ASIA	\$	253,086	\$	0				
REPUBLIC OF KOREA	\$	108,414	\$	0				

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990, Inspection

Name of the organization

Employer identification number

LIBERTY IN NORTH KOREA	73-1710135
FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHM	ENT
FULFILLING OUR MISSION AS WE EMPOWERED PEOPLE TO	O CHANGE THE NARRATIVE ON
NORTH KOREA AND RAISE FUNDS TO ASSIST NORTH KOR	EAN REFUGEES IN THEIR LOCAL
COMMUNITIES. RESCUE TEAMS WERE RESPONSIBLE FOR	RAISING \$95,927 TO RESCUE
NORTH KOREAN REFUGEES.	
FORM 990, PART III, LINE 4B - SECOND ACCOMPLISH	MENT
SUCCESSFUL LAUNCH OF THIS PROGRAM AND THE NUMBER	R OF APPLICANTS TO THE
PROGRAM HAVE SINCE MORE THAN DOUBLED. THROUGH O	UR PROGRAMS, WE HAVE STRIVE
TO EMPOWER NORTH KOREANS NOT ONLY TO FULFILL TH	EIR POTENTIAL, BUT TO ALSO
PLAYING IMPORTANT ROLES AS AGENTS OF CHANGE ON	THIS ISSUE.
FORM 990, PART VI, LINE 7A - ELECTION OF MEMBER	S AND THEIR RIGHTS
THE GOVERNING BOARD RESERVES THE RIGHT TO APPOI	NT AND RECRUIT OTHER BOARD
MEMBERS AS STATED IN OUR BOARD BYLAWS.	
FORM 990, PART VI, LINE 11B - ORGANIZATION'S PRO	OCESS TO REVIEW FORM 990
THE OFFICERS OF THE ORGANIZATION HAVE REVIEWED	THE FORM 990 FOR ANY KNOWN
ERRORS TO ENSURE THE ORGANIZATION'S INTEGRITY.	
FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CO	NFLICTS POLICY
THE BOARD REVIEWS THE CONFLICT OF INTEREST POLICE	CY ON A REGULAR BASIS AND
EACH BOARD MEMBER SIGNS AN AGREEMENT STATING TH	AT THEY UNDERSTAND AND WILL

ABIDE BY THE POLICY.

Name of the organization	Employer identification number						
LIBERTY IN NORTH KOREA	73–1710135						
NO MORE THAN 49% OF THE GOVERNORS SERVING AT ANY ONE TIME MAY BE							
"INTERESTED PERSONS."							
FORM 990, PART VI, LINE 19 - GOVERNING DOCUM	ENTS DISCLOSURE EXPLANATION						
WE PROVIDE ANNUAL REPORTS ON OUR WEBSITE DATING BACK TO 2007. 990'S ARE							
PUBLIC INFORMATION AND WE UPDATE THESE ON WWW.GUIDESTAR.ORG							

Form **4562**

Depreciation and Amortization

(Including Information on Listed Property)

OMB No. 1545-0172

tachment 17

Department of the Treasury Internal Revenue Service (9

► See separate instructions.

► Attach to your tax return.

Name(s) shown on return

LIBERTY IN NORTH KOREA

Identifying number 73–1710135

	ess or activity to which this form relates	TON						
01010101010101	NDIRECT DEPRECIAT Int I Election To Expe		perty Under Sect	ion 179				
	Note: If you have				u complete	Part I.		
1	Maximum amount (see instruction						1	500,000
2	Total cost of section 179 property	placed in service (s	ee instructions)				2	
3	Threshold cost of section 179 pro	perty before reduction	on in limitation (see inst	ructions)			3	2,000,000
4	Reduction in limitation. Subtract I		· ·				4	
5	Dollar limitation for tax year. Subtract	line 4 from line 1. If zero				ons	5	
6	(a) Description	n of property	(b) C	ost (business use	only) (c) Elected cost		
7	Listed property. Enter the amoun	t from line 29		<u></u>	7		1 _	
8	Total elected cost of section 179	property. Add amour	nts in column (c), lines 6	and 7			8	
9	Tentative deduction. Enter the sr	naller of line 5 or line	8				9	
10	Carryover of disallowed deductio						10	
11	Business income limitation. Enter						11	
12	Section 179 expense deduction.						12	
13 Note	Carryover of disallowed deductions: Do not use Part II or Part III belo				13			
				riation (Do	not includ	a listed n	ronei	ty.) (See instructions
14	Special depreciation allowance for		•			c listed pi	Горсі	ty.) (Occ manachoris
	during the tax year (see instruction						14	4,518
15	Property subject to section 168(f)						15	1,010
16	Other depreciation (including AC	RS)					16	
	irt III MACRS Deprecia						1 .0	l .
		(2011)	Section A	,,, (5555				
17	MACRS deductions for assets pla	aced in service in tax	years beginning before	2013			17	16,817
18	If you are electing to group any assets plac					. \square		,
	Section B—As	sets Placed in Serv	vice During 2013 Tax	Year Using th	ne General Do	epreciation	Syst	em
	(2) Observing a few and	(b) Month and year	(c) Basis for depreciation	(d) Recovery	(1) 0	(O. 14.11		(a) December of the desire
	(a) Classification of property	placed in service	(business/investment use only–see instructions)	period	(e) Convention	(f) Meth	nod	(g) Depreciation deduction
19a	3-year property							
b	5-year property		2,09		HY	200		420
С	7-year property		2,41	8 7.0	HY	200	DB	344
d	10-year property							
е_	15-year property	_						
f	20-year property							
g	25-year property			25 yrs.		S/L		
h	Residential rental			27.5 yrs.	MM	S/L		
	property			27.5 yrs.	MM	S/L		
i	Nonresidential real			39 yrs.	MM	S/L		
	property	. 5	D : 00/07 V		MM	S/L		
		ets Placed in Servic	ce During 2013 Tax Ye	ear Using the	Alternative			stem
	Class life	-		10		S/L		
	12-year			12 yrs.	,	S/L		
	40-year	otructions \		40 yrs.	MM	S/L	_	
	art IV Summary (See in							
21	Listed property. Enter amount fro		lines 10 and 00 in 1				21	
22	Total. Add amounts from line 12,	_					20	22 000
23	and on the appropriate lines of your for assets shown above and place				s		22	22,099
۷3	portion of the basis attributable to	_	me current year, enter	u i C	23			
	שטינוטוו טו נווכ טמטוט מנוווטענמטופ נכ	2000 COSIS			20			I .