

1.) CORPORATION NAME:

Japanese Americans' Care Fund

DUE DATE: **3/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**TAKAKO JITSUKAWA
FRED M. PACKARD CENTER
4022-B HUMMER RD**

SCC ID NO: **F1578899**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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ANNANDALE, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

FAIRFAX COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DC

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2007 WYOMING AVE NW

CITY/ST/ZIP: WASHINGTON, DC 20009

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	YUKIYO MOORMAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	2007 WYOMING AVENUE NW		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20009		
NAME:	ERIKO MURRAY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	2007 WYOMING AVE, N.W		
CITY/ST/ZIP/CO:	WASHINGTON,, DC 20009		
NAME:	YUKARI TSUCHIYA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	2007 WYOMING AVE, N.W		
CITY/ST/ZIP/CO:	WASHINGTON,, DC 20009		
NAME:	YUMIKO DECARLI	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	2007 WYOMING AVE NW		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20009		
NAME:	NOBUE HAMAMOTO	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	2007 WYOMING AVE, N.W		
CITY/ST/ZIP/CO:	WASHINGTON,, DC 20009		
NAME:	MAYUMI GRAGG	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2007 WYOMING AVE NW		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20009		

NAME: MARIKO IKEHARA TITLE: DIRECTOR ADDRESS: 2007 WYOMING AVE, N.W CITY/ST/ZIP/CO: WASHINGTON,, DC 20009	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: YOKO KAGAWA TITLE: DIRECTOR ADDRESS: 2007 WYOMING AVE, N.W CITY/ST/ZIP/CO: WASHINGTON,, DC 20009	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: IKUKO TURNER TITLE: DIRECTOR ADDRESS: 2007 WYOMING AVE, N.W CITY/ST/ZIP/CO: WASHINGTON,, DC 20009	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: NAOKI NISHIO TITLE: DIRECTOR ADDRESS: 2007 WYOMING AVE, N.W CITY/ST/ZIP/CO: WASHINGTON,, DC 20009	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: YOSHIE ROZALI TITLE: DIRECTOR ADDRESS: 2007 WYOMING AVE, N.W CITY/ST/ZIP/CO: WASHINGTON,, DC 20009	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ YUKIYO MOORMAN SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	YUKIYO MOORMAN, PRESIDENT PRINTED NAME AND CORPORATE TITLE	1/31/2014 DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		