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SCANNED JUL 15 2010

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)

Open to Public

OMB No. 1545-0047

Inten		tue Service The organization may have to use a copy of this return					Inspection				
<u>A</u> _	A For the 2009 calendar year, or tax year beginning January 1 , 2009, and ending June 30 , 20 09										
В	B Check of applicable: Please C Name of organization The Bhutan Foundation D Employer identification numbers (IRS) Description Regions (IRS) Description										
	Address	change label or Dorrig Business As				13	3376290				
	Name change print or Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number										
	Specific Instruction City or town, state or country, and ZIP + 4										
	Amended return tons. Washington, DC 20037 G Gross receipts \$ 676,262										
_	Application pending F Name and address of principal officer: Dr. Bruce Bunting H(a) is this a group return for affiliates? Yes No										
	2100 Penn. Ave NW, # 525, Washington, DC 20037 H(b) Are all affiliates included? Yes No										
T	Tax-exe	empt status:	····				list. (see instructions)				
J	Websi	te: ► www.bhutanfound.org			1	exemption nur	- •				
	K Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of formation: 1986 M State of legal domicile: DC										
	art I	Summary		· · · · · ·			_ 				
			ethritics:	The Bhu	tan Four	dation's	mission is to help				
	1 Briefly describe the organization's mission or most significant activities: The Bhutan Foundation's mission is to help improve the quality of life of the Bhutanese people by enabling its citizens to pursue activities that benefit										
8	-	Bhutanese society and to increase knowledge of Bhutan and									
퉏	-	Distance occiety and to more doc knowledge of Distance and				Julio .					
Activities & Governance	_ ;	Check this box ▶ ☐ if the organization discontinued its operations or disposed	d of more t	han 2504 of	ite not seed						
ဗိ	l .	•		Mai 23 /0 Ui	IID HEL GOOD	 3	16				
حق	1	Number of voting members of the governing body (Part VI, line	-			4	15				
Ë		Number of independent voting members of the governing body	(Part VI,	line 1b)		5	5				
흊		Total number of employees (Part V, line 2a)				. 6					
ĕ		Total number of volunteers (estimate if necessary)					10				
		Total gross unrelated business revenue from Part VIII, column (C				7a 7b	0				
	D	Net unrelated business taxable income from Form 990-T, line 34			Prior Ye		Current Year				
		I _RECEI	VED	7-							
9		Contributions and grants (Part VIII, line 1h)		უ∪ —		980,315	675,662				
Revenue		Program service revenue (Part VIII, line 2g) . [] .		S		0	<u></u>				
ě	10	nvestment income (Part VIII, column (A), lines 🕄 4, and Yd)2.0	-2010	<u> </u> -		7,931					
_		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and		IN I		3,673	599				
		Total revenue—add lines 8 through 11 (must equal Part-VIII, column		15/1	•	991,919	676,262				
	13 (Grants and similar amounts paid (Part IX, column (A) lines 1=3)	I. UT			610,881	216,419				
	14	Benefits paid to or for members (Part IX, column (A), line 4)				0	0				
Expenses	15 3	Salaries, other compensation, employee benefits (Part IX, column (A)	, lines 5–	10)		250,965	179,230				
8	16a l	Professional fundraising fees (Part IX, column (A), line 11e)				0	0				
ă	b 1	Total fundraising expenses (Part IX, column (D), line 25) ▶	24,29	7							
	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) .				163,143	164,541				
	18 1	Total expenses. Add lines 13-17 (must equal Part IX, column (A)), line 25)	1,0	024,989	560,190				
		Revenue less expenses. Subtract line 18 from line 12				-33,070	116,072				
sets or				Beg	jinning of C		End of Year				
alar alar	20 1	Total assets (Part X, line 16)				424,827	474,676				
Net Ass Fund Ba	21	Total liabilities (Part X, line 26) 7				0	0				
2,3	22	Net assets or fund balances. Subtract line 21 from line 20	<u> </u>	<u>,</u>		424,827	474,676				
Pa	irt II	Signaturé Block	-								
		Under penalties of petury, I declare that I have examined this return, including an and belief, it is true, correct, and complete. Declaration of preparer (other than of	companyin	ng schedule:	s and staten	nents, and t	o the best of my knowledge				
		and design, it is deed, darlies and designation of property (oater district	011001) 15 D	200 011 011) (III					
Sig		WW + HT				MAY	13, 2010				
He	re	Signature of office			Date	e					
		PRESIDENT U									
		Type or print name and title									
		Preparer's	Date	Check self-	c of	Preparer's in	dentifying number				
Paic	1	signature			ryed ▶ 🔲	/acc manage	un wy				
	parer's										
	Only	Firm's name (or yours if self-employed),			EIN	<u> </u>					
		address, and ZIP + 4			Phone n	o. ► ()				
Ma	y the I	RS discuss this return with the preparer shown above? (see ins	structions	s)			. 🔲 Yes 🗌 No				

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



Cat. No. 11282Y

Form **990** (2009)



Pai	Statement of Program Service Accomplishments
1	Briefly describe the organization's mission: The Bhutan Foundation's mission is to help improve the quality of life of the Bhutanese people by enabling citizens of Bhutan to pursue activities that benefit Bhutanese society and to increase knowledge of Bhutan and its culture in the United States.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 283,010 including grants of \$ 182,686) (Revenue \$ 0) Sustainable Development - This program falls under the Bhutan Foundation's mission to promote sustainable development in Bhutan, primarily in the areas of health, education, and income generating programs. Major grants include: \$100,000 for the Emergency Medical Services program \$55,000 to the Youth Development Fund for special education \$17,553 to the Tarayana Foundation, a local Bhutanese NGO working in rural communities \$6,000 to the University of Oregon for scholarship program
4b	(Code:) (Expenses \$91,106 including grants of \$22,853) (Revenue \$0) Environment - This program falls under the Bhutan Foundation's mission to supports the conservation of the natural environment in Bhutan. Projects are particularly focused on species conservation, and supporting the Ugyen Wangchuck Institute of Conservation and Environment. Major grants include
	\$17,769 to the Royal Society for the Protection of Nature for human wildlife conflict program \$3,911 to Bumdeling National Park for a butterfly project
4c	(Code:) (Expenses \$ 28,726 including grants of \$ 0) (Revenue \$ 0) Awareness Programs - One of the Bhutan Foundation's mission is to promote awareness of and understanding of Bhutan in the United States and internationally. In the short fiscal year Jan - June 2009 the Bhutan Foundation participated and held various awareness programs including: A symposium on "The Four Pillars of Gross National Happiness" at the Asian Art Museum, San Francisco. "Bhutan and its Neighbors" a discussion the country's relations with India and China at the Arts Club in Chicago. "Gross National Happiness and the World's Youngest Democracy" at Tufts University in Boston. Featured the movie "Bhutan: Taking the Middle Path to Happiness" at GIFT Environment Film Festival in Taiwan. "Bhutan: Democracy's Dawn in the Last Shangri-La" a lecture at the Chicago Council on Global Affairs on Bhutan's transition to democracy
4d	Other program services. (Describe in Schedule O.) (Expenses \$ 53,059 including grants of \$ 9,237) (Revenue \$ 0)
40	Total program service expenses > 455 001

Pai	t 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	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	\	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		1
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6_		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	:	1
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		✓
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11		1
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.			
•	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.			
•	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.			
•	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.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12		1
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	✓	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	1	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	1	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16	✓	
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	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		✓
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		1
<u>20</u>	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Ż

E	Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations		Yes	No
21	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	✓	
22	Did the organization report more than \$5,000 of grants and 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	1	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	1	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.	24a		√
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 to defease any tax-exempt bonds?	24c		1
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III.	27		✓
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		✓
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		✓
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		✓
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
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		✓
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		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		✓
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	38	1	_

Pa	Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			1
Ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		1
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 3			<u> </u>
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	/	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by		ļl	
	this return?	3a	$oxed{oxed}$	1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	<u>3b</u>		<u> </u>
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	1	
b	If "Yes," enter the name of the foreign country: ▶ Bhutan			1
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
	Prohibited Tax Shelter Transaction?	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?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		✓
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		/
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		1
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		1
9 h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
••	required?	7h		1
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
-	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		1
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		1
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			l
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		,	1
11	Section 501(c)(12) organizations. Enter:		, ,	1
а	Gross income from members or shareholders		, 1	l
b	Gross income from other sources (Do not net amounts due or paid to other sources against			1
	amounts due or received from them.)		 	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b	12a		✓
		. 1	, ,	1

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.

 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.	Sec	tion A. Governing Body and Management					
b Enter the number of voting members that are independent Did any officer, director, frustee, or key employee have a family relationship or a businesse relationship with any other officer, director, frustee, or key employee? Did the organization delegate control over management duties outstomanly performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization have syspificant changes to its organizational documents since the prior Form 990 was filed? Did the organization have members or stockholders? Did been organization have members or stockholders? Does the organization have members or stockholders? Does the organization thave members or stockholders? Does the organization thave members or stockholders? Did the organization thave members or stockholders? Did the organization contemporaneously document the meetings held or written actions undertaken during the year of a mention of the governing body? Death committee with authority to act on behalf of the governing body? Beach committee with authority to act on behalf of the governing body? Death committee with authority to act on behalf of the governing body? Death committee with authority to act on behalf of the governing body? Death committee with authority to act on behalf of the governing body? Death committee with authority to act on behalf of the governing body? Death committee with authority to act on behalf of the governing body? Death organization have block of the governing body? Death organization have block of the governing body? Death organization have block of the governing body and block of the governing block before filing the form? Did Tyes, does the organization have outlet policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent wit				Yes	No		
b Enter the number of voting members that are independent 2	1a	Enter the number of voting members of the governing body					
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustees, or key employee? 3 Did the organization delegate control over management duties customanly performed by or under the direct supervision of officers, directors or trustees, or key employees to a management of company or other person? 4 Did the organization become aware during the year of a material diversion of the organization sassets? 5 Did the organization have members or stockholders? 7a Does the organization have members or stockholders, or other persons who may elect one or more members of the governing body? 5 Did the organization of the governing body subject to approval by members, stockholders, or other persons? 7a Does the organization of the governing body? 5 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 7a The governing body? 7b Each committee with authority to act on behalf of the governing body? 8a V 8b V 8b V 8b I Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10a Does the organization have local chapters, branches, or affiliates, and branches to ensure their operations are consistent with those of the organization? 10a Does the organization have local chapters, branches, or affiliates? 10b H**Yes,** does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b Nave officers, directors or trustees, and key employees itself of the soft the organization? 10b Does the organization have a written when the organization to review this Form 990. 10c Does the organization have a written whatteblower policy? 11b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 10c	b	- · · · · · · · · · · · · · · · · · · ·			.		
any other officer, director, trustee, or key employee? 3 Did the organization designate control over management duties customanly performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its organizational documents since the pror form 990 was filed? 5 Did the organization become aware during the year of a material diversion of the organization sessets? 6 Does the organization have members or stockholders, or other persons who may elect one or more members of the governing body? 7 Does the organization become aware during the year of a material diversion of the organization the governing body? 8 Did the organization the governing body subject to approval by members, stockholders, or other persons? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 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 Section B, Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10a Does the organization have local chapters, branches, or affiliates? 10b If "Yes," does the organization have ventten policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 11 Has the organization have aware written operations are consistent with those of the organization? 12a Does the organization have a written operations are consistent with those of the organization? 12b A officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflict? 12b A officers or key employees of the organization to review this Form 990. 12c A officers or key employees	2	·					
3		and the self-self-self-self-self-self-self-self-	2		✓		
supervision of officers, directors or trustees, or key employees to a management company or other person? 3	3						
Did the organization make any significant changes to its organizations of the program set when the process of the organization have members or stockholders? Does the organization have members or stockholders? Does the organization have members or stockholders, or other persons who may elect one or more members of the operation have members or stockholders, or other persons who may elect one or more members of the operation have members or stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? Each committee with authority to act on behalf of the governing body? In the year by the following: The governing body? Each committee with authority to act on behalf of the governing body? In the year by the following: The governing body? Each committee with authority to act on behalf of the governing body? In the year by the following: The governing body? Each committee with authority to act on behalf of the governing body? In the organization in smalling address? If "Pes.," provide the names and addresses in Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Pose the organization have local chapters, branches, or affiliates? If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? Has the organization have a written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? If "Yes," does the organization have a written conflict of interest policy? If "No." go to line 13. Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Does the organization have a written docum							
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c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 13 Does the organization have a written whistleblower policy? 14 Does the organization have a written document retention and destruction policy? 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? a The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization if "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) 15b ✓ 15b ✓ 15b ✓ 15c ✓	b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give					
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describe in Schedule O how this is done 12c ▼ 13 Does the organization have a written whistleblower policy? 14 Does the organization have a written document retention and destruction policy? 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? a The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ District of Columbia 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Own website □ Another's website ☑ Upon request 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ Dr. Bruce Bunting, 2100 Pennsylvania Ave NW, Suite 525, Washington, DC 20037	С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes."					
Does the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ District of Columbia Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Own website ☐ Another's website ☑ Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ Dr. Bruce Bunting, 2100 Pennsylvania Ave NW, Suite 525, Washington, DC 20037	_		12c	✓_			
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? a The organization's CEO, Executive Director, or top management official	13	Does the organization have a written whistleblower policy?			✓		
independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	14	Does the organization have a written document retention and destruction policy?	14		/		
a The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 15b ✓ 16a ✓ 16a ✓ 16b ✓ 16a ✓ 16b ✓ 16c	15	Did the process for determining compensation of the following persons include a review and approval by			Ì		
b Other officers or key employees of the organization		independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			,		
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ District of Columbia 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. □ Own website □ Another's website ☑ Upon request 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ Dr. Bruce Bunting, 2100 Pennsylvania Ave NW, Suite 525, Washington, DC 20037	а	The organization's CEO, Executive Director, or top management official		✓			
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 12 List the states with which a copy of this Form 990 is required to be filed ▶ District of Columbia 13 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. □ Own website □ Another's website ☑ Upon request 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ Dr. Bruce Bunting, 2100 Pennsylvania Ave NW, Suite 525, Washington, DC 20037	b	Other officers or key employees of the organization	15b		✓		
with a taxable entity during the year?		If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)					
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ District of Columbia 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. ☐ Own website ☐ Another's website ☑ Upon request 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ Dr. Bruce Bunting, 2100 Pennsylvania Ave NW, Suite 525, Washington, DC 20037	16a				لـــا		
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the organization's exempt status with respect to such arrangements?	b						
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 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.	<u> 5ec</u>						
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 Own website ☐ Another's website ☑ Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► Dr. Bruce Bunting, 2100 Pennsylvania Ave NW, Suite 525, Washington, DC 20037 	18		e(8)(3)	only)			
 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: Dr. Bruce Bunting, 2100 Pennsylvania Ave NW, Suite 525, Washington, DC 20037 							
policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ Dr. Bruce Bunting, 2100 Pennsylvania Ave NW, Suite 525, Washington, DC 20037							
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► Dr. Bruce Bunting, 2100 Pennsylvania Ave NW, Suite 525, Washington, DC 20037	19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of inte	erest			
organization: ▶ Dr. Bruce Bunting, 2100 Pennsylvania Ave NW, Suite 525, Washington, DC 20037		· · · · · · · · · · · · · · · · · · ·					
	20	State the name, physical address, and telephone number of the person who possesses the books and reco	rds of	fthe			
		organization: ► Dr. Bruce Bunting, 2100 Pennsylvania Ave NW, Suite 525, Washington, DC 20037 Telephone: +1 (202) 609-7363					

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- 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. 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 the organization did no (A)	(B)			(((D)	(E)	(F)
Name and Title	Average	Positi	Position (check all that apply)		Reportable	Reportable	Estimated			
	hours per week	individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
HM Ashi Tshering Pem Wangchuck	0.05								0	0
Co-Chair, Board of Directors	0.25	1						0		
Hon. Frank G. Wisner Co-Chair, Board of Directors	0.25	1						0	0	0
Dr. Bruce Bunting President, Board of Directors	40	1		1	1	1		115,334	0	0
Mrs. Lisina M. Hoch Vice President, Board of Directors	0.25	✓						0	0	0
Mr. Brian Menkes Treasurer, Board of Directors	0.25	1						0	0	0
Mr. Michael Mars Secretary, Board of Directors	0.25	1						0	0	0
Ms, Sharon Chang Member, Board of Directors	0.25	1						0	0	0
Ms. Gina Chu Member, Board of Directors	0.25	1						0	0	0
Mr. Marcos De Moraes Member, Board of Directors	0.25	1						0	0	0
Ms. Peggy Dulany Member, Board of Directors	0.25	/						0	0	0
Mrs. Lucy Goelet Member, Board of Directors	0.25	1						0	0	0
Mrs. Joy B Greenway Member, Board of Directors	0.25	1						0	0	0
Mr. Edward Pope Member, Board of Directors	0.25	1						0	0	0
Mr. Sonam Tobgay Member, Board of Directors	0.25	/						0	0	0
Amb. Lhatu Wangchuk Member, Board of Directors	0.25	1						0	0	0
Hon. Tim Wirth Member, Board of Directors	0.25	/			-			0	0	0

Part VII S	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
	(A) Name and title	(B) Average	Positi	on (d	•	C) k ali 1	that ap	ply)	(D) Reportable	(E) Reportab	le	(F) Estimate	d
		hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensat from relat organizatio (W-2/1099-N	ed ons	amount of other compensate from the organizate and relate organization	ion e on ed
						_		ļ					
						_							
								_					
				_				_					
4h Total								Ļ					
1b Total				•		<u>. </u>		<u>-</u>	<u> </u>				
2 Total numl reportable	ber of individuals (including but a compensation from the organiza	ation > No	ne	ose	IIST	ea a	above) WI	no receivea mo	ore than \$1	00,000		
employee	rganization list any former office on line 1a? If "Yes," complete S	chedule J	for su	ich .	indi	vidu	ıal .	٠.			. -	Yes 3	No
	dividual listed on line 1a, is the szation and related organizations	greater tha	ın \$15	50,0	00?	If "	Yes,"	cor	mplete Schedu			4	√
services re	erson listed on line 1a receive endered to the organization? If "	or accrue	comp	oen:	satio	on 1	rom a	any	unrelated org	anization fo		5	1
Section B. Inc	lependent Contractors												
	this table for your five highest couldn't from the organization.	ompensate	d ind	epe	nde	nt c	contra	cto	rs that receive	d more tha	n \$100	,000 of	
	(A) Name and business add	Iress							(B) Description of s	ervices	Co	(C) empensation	1
N/A								N/	Α				N/A
								-					
	ber of independent contractors (in \$100,000 in compensation from					to 1	those	liste	ed above) who	received		 	
inote man	THE TOO, OUT OF THE CONTROL TON	. ui o organ	سحمدان		v								

Statement of Revenue Total	om tax
1a Federated campaigns 1a 0 1b 0 0 1b 0 0 0 0 0 0 0 0 0	or 514
Business Code	
Business Code	
Business Code	1
Business Code	
2a NA b c d Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6a Gross Rents O O O O O O O O O O O O O	
3 Investment income (including dividends, interest, and other similar amounts)	
3 Investment income (including dividends, interest, and other similar amounts)	
3 Investment income (including dividends, interest, and other similar amounts)	
3 Investment income (including dividends, interest, and other similar amounts)	
3 Investment income (including dividends, interest, and other similar amounts)	
3 Investment income (including dividends, interest, and other similar amounts)	
3 Investment income (including dividends, interest, and other similar amounts)	
other similar amounts)	
4 Income from investment of tax-exempt bond proceeds 5 Royalties	0
5 Royalties	<u>-</u>
6a Gross Rents	0
Od Gloss herits	
	{
b Less: rental expenses 0 0	
c Rental income or (loss) 0 0	
d Net rental income or (loss) ▶ 0 0 0	0
7a Gross amount from sales of (i) Securities (ii) Other	
assets other than inventory 0 0	
b Less: cost or other basis	1
and sales expenses . 0 0	
c Gain or (loss)	
d Net gain or (loss)	0
8a Gross income from fundraising events (not including \$	
of contributions reported on line 1c). See Part IV, line 18 a 0	
b Less: direct expenses b 0	
b Less: direct expenses b 0 c Net income or (loss) from fundraising events . ▶ 0 0	
9a Gross income from gaming activities.	
See Part IV, line 19 a0	
b Less: direct expenses b 0	
c Net income or (loss) from gaming activities . ▶ 0 0	0
10a Gross sales of inventory, less	
returns and allowances a0	
b Less: cost of goods sold b 0	
c Net income or (loss) from sales of inventory ▶ 0 0 0 Miscellaneous Revenue Business Code	
Defined	
b	
d All other revenue	
e Total. Add lines 11a-11d	
12 Total revenue. See instructions	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

ther organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).							
	o not include amounts reported on lines 6b, b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses			
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	6,000	6,000					
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	3,268	3,268					
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	207,151 0	207,151 0					
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	115,334	86,283	13,717	15,334			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	o	0			
7	Other salaries and wages	45,765	31,945	9,699	4,121			
8	Pension plan contributions (include section 401(k)							
	and section 403(b) employer contributions)	0	0	0	0			
9	Other employee benefits	8,659	8,247	412	0			
10	Payroll taxes	9,472	6,998	887	1,587			
11	Fees for services (non-employees):	24 252	24 252	ا	•			
a	Management	31,353	31,353	0	0			
b	Legal	1,939		1,939				
C	Accounting	0	0	0				
d	Lobbying	0			0			
e f	Professional fundraising services. See Part IV, line 17 Investment management fees	0	0	0	0			
_	Other	12,009	5,000	7,009	0			
12	Advertising and promotion	1,460	0	1,460	0			
13	Office expenses	9,105	0	9,105	0			
14	Information technology	694	0	694	0			
15	Royalties	0	0	0	0			
16	Occupancy	7,588	0	7,588	0			
17	Travel	26,835	11,954	14,881	0			
18	Payments of travel or entertainment expenses			İ				
	for any federal, state, or local public officials	0	0	0	0			
19	Conferences, conventions, and meetings .	5,140	51	5,089				
20	Interest	0	0	0	0			
21	Payments to affiliates	0	0	0	0			
22	Depreciation, depletion, and amortization.	59	0	59	0			
23	Insurance		U	0	0			
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)							
а	Program Expenses	33,587	33,587	286	0			
b	Fundraising Expenses	3,255	0	0	3,255			
C	Awareness Programs	23,633	23,633	0	0			
d	Account Fees	1,482	431	1,051	0			
e	Printing and Publications	6,116	0	6,116	0			
f	All other expenses Misc	286	0	286	0			
25	Total functional expenses. Add lines 1 through 24f	560,190	455,901	79,992	24,297			
26	Joint costs. Check here ▶ ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				5 990 (1990)			

Pa	irt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	424,827	1	474,676
	2	Savings and temporary cash investments	0	2	0
	3	Pledges and grants receivable, net		3	0
	4	Accounts receivable, net	0	4	0
	5	Receivables from current and former officers, directors, trustees, key			
	•	employees, and highest compensated employees. Complete Part II of			
		Schedule L	0	5	0
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
		Part II of Schedule L	0	6	0
ţ	7	Notes and loans receivable, net	0	7	0
Assets	8	Inventories for sale or use	0	8	0
Ä	9		0	9	0
	10a	Prepaid expenses and deferred charges			
	Ь	Less: accumulated depreciation 10b 0	0	10c	0
	11	Investments—publicly traded securities	0	11	0
	12	Investments—other securities. See Part IV, line 11		12	0
	13		0	13	0
	14	Intangible assets		14	0
	15	Other assets. See Part IV, line 11	0,	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	424,827	16	474,676
	17	Accounts payable and accrued expenses		17	0
	18	Grants payable		18	0
	19	Deferred revenue		19	0
	20	Tax-exempt bond liabilities		20	ō
ø	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	0
Liabilities	22	Payables to current and former officers, directors, trustees, key			
<u>=</u>	22	employees, highest compensated employees, and disqualified			
Ë		persons. Complete Part II of Schedule L	0	22	0
		The state of the s		23	0
	23			24	0
	25	Other liabilities. Complete Part X of Schedule D		25	0
	26	Total liabilities. Add lines 17 through 25		26	0
ances		Organizations that follow SFAS 117, check here ▶ □ and complete lines 27 through 29, and lines 33 and 34.			
a	27	Unrestricted net assets		27	
	28	Temporarily restricted net assets		28	
豆	29	Permanently restricted net assets		29	
or Fund Ba		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
20	30	Capital stock or trust principal, or current funds		30	
89	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ą	32	Retained earnings, endowment, accumulated income, or other funds	424,827	32	474,676
Net Assets	33	Total net assets or fund balances	424,827	33	474,676
Z	34	Total liabilities and net assets/fund balances	424,827	34	474,676

Page	12

	555 (2555)		u	90
Pa	t XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: 🗹 Cash 🔲 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		1
 b		2b		1
	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.]]		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			ł
	issued on a consolidated basis, separate basis, or both:			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		1
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.	3ь		
				Ь

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

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. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number The Bhutan Foundation Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33\% % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. b Type II c Type III-Functionally integrated e D By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? No Yes (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 11g(i) and (iii) below, the governing body of the supported organization? 11g(ii) (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? . |11g(iii) Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (iv) is the organization (v) Did you notify (vi) Is the (vii) Amount of organization (described on lines 1-9 in col (i) listed in your organization in col. the organization in troggue above or IRC section governing document? col. (i) of your (i) organized in the (see instructions)) US? support? Yes No Yes No Yes

Total

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support **(b)** 2006 Calendar year (or fiscal year beginning in) (a) 2005 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received. (Do not 254,064 184,564 516,801 980,316 675,662 2,611,407 include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on 0 0 0 0 0 0 its behalf The value of services or facilities furnished by a governmental unit to the 0 0 n n n n organization without charge 254,064 184,564 516,801 980,316 675,662 2,611,407 Total. Add lines 1 through 3 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 666,316 shown on line 11, column (f) Public support. Subtract line 5 from line 4. 1.945.091 Section B. Total Support (c) 2007 (e) 2009 (f) Total (a) 2005 Calendar year (or fiscal year beginning in) **(b)** 2006 (d) 2008 254.064 184,564 516,801 980,316 675.662 2,611,407 Amounts from line 4 . . Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 748 1,916 0 291 1 2,956 sources Net income from unrelated business activities, whether or not the business is 0 0 0 0 0 0 regularly carned on 10 Other income. Do not include gain or loss from the sale of capital assets 0 0 3,673 599 4,272 (Explain in Part IV.) 2.618.635 11 Total support. Add lines 7 through 10 . 0 12 Gross receipts from related activities, etc. (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 74.28 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 % 15 Public support percentage from 2008 Schedule A, Part II, line 14 331/6 % support test-2009. If the organization did not check the box on line 13, and line 14 is 331/6 % or more, check this box 331/3 % support test-2008. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3 % or more, check this 17a 10%-facts-and-circumstances test-2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

	dule A (Form 990 or 990-EZ) 2009	_					Page 3
Pa	Support Schedule for Orga (Complete only if you checked)				1)(2)		
	tion A. Public Support						
Ca	alendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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						
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					 	
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						
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)					<u></u>	<u> </u>
	tion B. Total Support		1 - 2 - 2 - 2 - 2	1 ()	r 	1	7 22 2
Ca	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 10a	Amounts from line 6						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С 11	Add lines 10a and 10b						
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.)	_					
14	First five years. If the Form 990 is for organization, check this box and stop	here					ion 501(c)(3) ▶ □
	tion C. Computation of Public Su	•				1 1	· · · · · · · · · · · · · · · · · · ·
15 16	Public support percentage for 2009 (lin Public support percentage from 2008 S	Schedule A, P	art III, line 15	ne 13, column		15 16	<u>%</u> %
	tion D. Computation of Investmen					T T	
17 18	Investment income percentage for 2009 Investment income percentage from 20	08 Schedule	A, Part III, line	17		17	<u>%</u> %
19a	33% % support tests – 2009. If the organization of the support tests – 2009. If the organization of the support tests – 2009. If the organization of the support tests – 2009. If the organization of the support tests – 2009. If the organization of the support tests – 2009. If the organization of the support tests – 2009. If the organization of the support tests – 2009. If the organization of the support tests – 2009. If the organization of the support tests – 2009. If the organization of the support tests – 2009. If the organization of the support tests – 2009. If the organization of the support tests – 2009. If the organization of the support tests – 2009. If the organization of the support tests – 2009. If the organization of the support tests – 2009. If the organization of the support tests – 2009. If the organization of the support tests – 2009. If the support tests – 2009. If the organization of the support tests – 2009. If th						

•	Schedule A (F	Page 4 Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.
		Part II, IIIe 17a of 17b, and Part III, line 12. Provide any other additional information. See instructions.
		•••••••••••••••••••••••••••••••••••••••
		······

Schedule F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047
2009
Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

The Bhutan Foundation

Inspection

Employer Identification number

13 3376290

Pa	rt I General Informa "Yes" to Form 990,			e the United States.	Complete if the organization	zation answered
1	For grantmakers. Does to assistance, the grantees' of the grants or assistance?	eligibility for th			tion criteria used to awa	
2	For grantmakers. Describ United States.	e in Part IV the	e organization	's procedures for monit	oring the use of grant for	unds outside the
3	Activities per Region. (Use	Schedule F-1	(Form 990) if	additional space is need	ded.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Sou	ith Asia - Bhutan	1	3	Fundralsing		2,113
				Grants to Recipients		207,151
				Program Services	Environment, Educa	30,269
				Program Services	GIFT Environment	1,635
				Program Services	Consultant Educatio	6,353
				Maintaining employe		8,146
				Maintaining offices		16,727
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Tota	als	1	3			272,394

Page 2

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000. Schedule F (Form 990) 2009
Part II Grants a

	(f) Method of valuation (book, FMV, appraisal, other)	0	0	0	0	0	0					
	(h) Description of non-cash assistance	0	0	0	0	0	0					
	(g) Amount of non-cash assistance	0	0	0	0	0	0					
	(f) Manner of cash disbursement	Check	Check	Check	Check	Check	Check					
	(e) Amount of cash grant	55,000	100,000	7,554	17,769	10,000	11,595					
space is needed.	(d) Purpose of grant	Youth- YDF	Heaith	Tarayana	Environment	Tarayana - Ge	Doctors Train					
Use Schedule F-1 (Form 990) if additional space i	(c) Region	South Asia - Bhutan	South Asia - Bhutan	South Asla - Bhutan	South Asia - Bhutan	South Asia - Bhutan	South Asia - Bhutan					
ule F-1 (Form	(b) IRS code section and EIN (if applicable)											
Use Sched	1 (a) Name of organization											

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities N က Schedule F (Form 990) 2009

Schedule F (Form 990) 2009

Page 3

Page 5

Page 5

Page 6

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.

	(h) Method of valuation (book, FMV, appraisal, other	0						! !			
ļ	(g) Description of non-cash assistance	0									
	(f) Amount of non-cash assistance	0						`			
	(e) Manner of cash disbursement	Check									
	(d) Amount of cash grant	6,353									
s needed.	(c) Number of reciplents	1									
Use Schedule F-1 (Form 990) if additional space is needed.	(b) Region	South Asia - Bhutan									
Use Schedule F-1 (F	(a) Type of grant or assistance	Consultant - Kim McCormack									

Schedule F (Form 990) 2009

redule F (Form 990) 2009	Page 4

Contradic 1 (1 or	111 330) 2003
Part IV	Supplemental Information Complete this part to provide the information required in Part I, line 2, and any additional information.
PART 1 QU	ESTION 1
The Bhutar	Foundation gives grants to individuals and organizations through board approved grant making procedures.
Generally g	rants are given to partner organizations in Bhutan that are officially registered local nonprofit organizations
in Bhutan.	They have complied with specific standards and regulations to become a partner organization of the
Bhutan Fo	undation and therefore are eligible for grants. All registered nonprofits in Bhutan are required to be
audited an	nually by the Royal Audit Authority, Government of Bhutan.
The Bhutar	Foundation signs a Grant Agreement with all its grantee organizations and individuals. The Grant Agreement
describes t	he purpose of the grant, objectives, budget, approved funding, and expected outcomes. The Grant Agreement
also includ	es terms for monitoring and reporting on the grant activities. The grantee is also responsible for providing a
detailed fin	ancial report on expenditures and a descriptive project report on the program outputs and outcomes at the
end of the	project, as well as at specified reporting dates in the Grant Agreement.
PART 1 QU	ESTION 2
The Bhutar	r Foundation gives grants to individuals and organizations in Bhutan, through the Bhutan Foundation
Country of	lice located in Thimphu, Bhutan. The Bhutan office uses the same grantmaking procedures, using
similar doc	umentation such as Grant Agreements, and acknowledgement of Grant Payment.
The Bhutar	n Foundation Country office undergoes an annual audit by the Royal Audit Authority, Government
of Bhutan.	
The use of	grants are reported at the end of the year, or at the end of the project period as agreed in the
Grant Agre	ement by the grantee and the Bhutan Foundation. Grants given for a partner organization's general fund
must subm	it an Annual Report and a copy of their organization's audit. Grants given for specific projects require
a project re	port which includes a statement of financial income and expense, audit from the Royal Audit Authority for
the organiz	ation, and a descriptive project report.

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization amswered "Yes" to Form 990,

Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

Employer Identification number

Open to Public Inspection

Name of the organization

Denartment of the Treasury

Internal Revenue Service

13 3376290 The Bhutan Foundation **Questions Regarding Compensation** Yes Nο 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions Payments for business use of personal residence ☐ Tax indemnification and gross-up payments Health or social club dues or initiation fees ☐ Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2 officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. ☑ Compensation committee ☐ Written employment contract ☐ Compensation survey or study ☐ Independent compensation consultant Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: 4b **b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement?.... 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. 5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5a a The organization?.......... 5b If "Yes" to line 5a or 5b, describe in Part III. 6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a 6b If "Yes" to line 6a or 6b, describe in Part III. 7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed. Schedule J (Form 990) 2009
Part II Officers.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name	ı	(f) Base compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred	benefits	(a)-(j)(a)	reported in prior Form 980 or Form 980-EZ
Dr. Bruce Bunting	€ €	75,000	2,834		37,500****	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	115,334	***190,334
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SCHEDULE 1

OMB No. 1545-0047

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(Form 990)		Ğ	Grants and Governments	Other Assista and Individua	Grants and Other Assistance to Organizations, overnments, and Individuals in the United States	zations, ed States		2009
Department of the Treasury Internal Revenue Service		0	omplete if the orga	nization answered "Yes" to Form ▶ Attach to Form 990.	Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ➤ Attach to Form 990.	line 21 or 22.		Open to Public Inspection
Name of the organization The Bhutan Foundation	loi						Employer Ident	Employer Identification number
Part I General In	nformation o	General Information on Grants and Assista	Assistance					
 Does the organization maintain records to substantiate the at the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoria 	zation maintair eria used to av IV the organiz:	records to subs ward the grants of ation's procedure		nt of the grants or as	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	s' eligibility for the gre	ants or assistance, ar	ind . 🗹 Yes 🗀 No
Part II Grants an Form 990, Part IV and	id Other Ass Part IV, line d Schedule I	istance to Go 21, for any rec -1 (Form 990) if	Grants and Other Assistance to Governments and Organizatio Form 990, Part IV, line 21, for any recipient that received more the Part IV and Schedule I-1 (Form 990) if additional space is needed	Organizations in the ded more than \$5,01 e is needed	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	complete if the orgalif no one recipient	unization answered received more than	"Yes" to \$5,000. Use
1 (a) Name and address of organization or government	organization ant	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	•	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Oregon Eugene, OR		936015767	501 c 3	9009	0	0	0	Scholarship
			:					
2 Enter total number of section 501(c)(3) and government org. 3 Enter total number of other organizations	or of section 50 are of other ore	1(c)(3) and govern	ment organizations	-				-
"-	perwork Reduc	tion Act Notice, s	ee the Instructions	for Form 990.		Cert. No. 50055P		Schedule I (Form 990) 2009

- 000000	consequence of the contract					
Part III	Grants and (Part III Grants and Other Assistance to Individuals in the United States. Complete if the org	ividuals in the	United State	s. Complete	if the org
	Use Part IV a	Use Part IV and Schedule I-1 (Form 990) if additional space is needed.	90) if additional	space is nee	ded.	

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Complete this	te this part to pr	part to provide the information required in Part I, line	on required in Part	, line 2, and any other	and any other additional information.
The Bhutan Foundation signs a Grant Agreement with all its grantee organizations and individuals. The Grant Agreement describes the purpose of the grant,	with all its grante	e organizations and	Individuals. The Gra	nt Agreement describes	the purpose of the grant,
objectives, budget, approved funding, and expected out	ed outcomes. The	Grant Agreement al	so includes terms fo	r monitoring and report	toomes. The Grant Agreement also includes terms for monitoring and reporting on the grant activities. The
grantee is also responsible for providing a detailed financial report on expenditures and a descriptive project report on the program outputs and outcomes at the end	d financial report	on expenditures and	l a descriptive projec	t report on the program	outputs and outcomes at the end
of the project, as well as at specified reporting dates in	tes in the Grant Agreement.	greement.			
For scholarship Grants, the Bhutan Foundation requires		rship recipients to su	bmlt proof of enrollr	nent, and provide transc	all scholarship recipients to submit proof of enroliment, and provide transcripts at the end of each academic
period. Scholarship grants are disbursed accordingly at	ngly after the tran	scripts are approved	, and all scholarship	grants are made out dli	fter the transcripts are approved, and all scholarship grants are made out directly to the University or College.
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			

SCHEDULE 0 (Form 990)

Supplemental Information to Form 990

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

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

The Bhutan Foundation

► Attach to Form 990. Name of the organization

Employer identification number

13 3376290

The organization changed its financial year from a calendar year to a fiscal year of July 1 to June 30.
Part III line 4d: Other Program Services of \$53,059 in expenses including \$9,237 in grants and \$0 in revenue were provided.
to support programs dealing with the preservation of culture and good governance.
Part VI Section A line 11a: The Form 990 is reviewed by the Treasurer and President of the organization.
Part VI Section B line 12c: The organization regularly monitors and enforces compliance with its written conflict of interest
policy by requiring all directors, officers and key employees to submit a signed copy of our conflict of interest policy.
Part VI Section C line 19: If requested the organization will make its governing documents, conflict of interest policy, and
financial statements available to the public.
Part VI Section B line 15a: Compensation for the President of the organization was determined by an independent
board committee based on a number of factors including the President's education, job experience, familiarity with the
country of Bhutan, working relationships wth partner organizations, prior salary history at other nonprofit organizations
and comparability data from similar nonprofit organizations.

Schedule O (Form 990) 2009	Page 2
Name of the organization	Employer identification number
	<u> </u>

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