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Short Form Return of Organization Exempt From Income Tax

Department of the Treasury
Internal Revenue Service

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

► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.

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

OMB No 1545-1150

2008

Open to Public
Inspection

A	For the 2008 calendar year, or tax year beginning	July 1	, 2008, and ending	June 30
B	Check if applicable.			
<input type="checkbox"/>	Address change	C Name of organization		
<input type="checkbox"/>	Name change	D Employer identification number		
<input type="checkbox"/>	Initial return	20 4373593		
<input type="checkbox"/>	Termination			
<input type="checkbox"/>	Amended return			
<input type="checkbox"/>	Application pending			
E Specific Instructions.				
UNIFIED BUDDHIST CHURCH ENDOWMENT FOR THE TRAINING A				
Number and street (or P O box, if mail is not delivered to street address)		Room/suite		
5136 DORSEY HALL DRIVE				
City or town, state or country, and ZIP + 4				
ELLICOTT CITY, MD 21042				

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

G Accounting method: Cash Accrual
Other (specify) ►

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

I Website: ►

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

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

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$1,000,000 or more, file Form 990 instead of Form 990-EZ ► \$ 55,358

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

Revenue	1 Contributions, gifts, grants, and similar amounts received	1 6,889
	2 Program service revenue including government fees and contracts	2 0
	3 Membership dues and assessments	3 0
	4 Investment income	4 6,749
	5a Gross amount from sale of assets other than inventory	5a SCH 1 41,720
	b Less: cost or other basis and sales expenses	5b 0
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule)	5c 41,720
	6 Special events and activities (complete applicable parts of Schedule C. If any amount is from gaming, check here ► <input type="checkbox"/>)	
	a Gross revenue (not including \$ of contributions reported on line 1)	6a 0
	b Less: direct expenses other than fundraising expenses	6b 0
	c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c 0
	7a Gross sales of inventory, less returns and allowances	7a 0
	b Less: cost of goods sold	7b 0
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c 0
	8 Other revenue (describe ►)	8 0
	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9 55,358
Expenses	10 Grants and similar amounts paid (attach schedule)	10 64,000
	11 Benefits paid to or for members	11 0
	12 Salaries, other compensation, and employee benefits	12 0
	13 Professional fees and other payments to independent contractors	13 0
	14 Occupancy, rent, utilities, and maintenance	14 0
	15 Printing, publications, postage, and shipping	15 0
	16 Other expenses (describe ► BANK MAINTENANCE FEES)	16 538
	17 Total expenses. Add lines 10 through 16	17 64,538
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18 (9,180)
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19 1,281,121
	20 Other changes in net assets or fund balances (attach explanation)	20 SCH 2 (51,700)
	21 Net assets or fund balances at end of year. Combine lines 18 through 20	21 1,220,241

Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)		(A) Beginning of year	(B) End of year
22 Cash, savings, and investments		1,281,121 22	1,220,241
23 Land and buildings		0 23	0
24 Other assets (describe ►)		0 24	0
25 Total assets		1,281,121 25	1,220,241
26 Total liabilities (describe ►)		0 26	0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)		1,281,121 27	1,220,241

Part III Statement of Program Service Accomplishments (See the instructions for Part III.)

What is the organization's primary exempt purpose? SUPPORT OF MONASTERIES

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

Expenses

28 To provide food (rice) to approximately 450 monastics in Vietnam. These monastics are trained in the practice of engaged buddhism in the tradition of Thich Nhat Hanh (the Sangha).

(Grants \$ 64,000) If this amount includes foreign grants, check here 28a 64,000

29

(Grants \$) If this amount includes foreign grants, check here 29a

30

(Grants \$) If this amount includes foreign grants, check here ▶ 30a

31 Other program services (attach schedule)

If this amount includes foreign grants, check here ► 31a

32 Total program service expenses (add lines 28a through 31a) ► **32** **64,000**

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for Part IV.)

(a) Name and address (b) Title and average (c) Compensation (d) Contributions to (e) Expenses

Part IV | List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for Part IV.)

(a) Name and address

(b) Title and average hours per week devoted to position

(c) Compensation
(If not paid,
enter -)

(d) Contributions to employee benefit plans & deferred compensation

(e) Expense account and other allowances

SCHEDULE 3

Part V Other Information (Note the statement requirements in the instructions for Part VI.)

33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity

Yes	No
33	✓
34	✓

34 Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes

35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.

35a	✓
35b	

a Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?

36	✓
37b	✓

b If "Yes," has it filed a tax return on Form 990-T for this year?

36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N

37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ► 37a 0

37b	✓
38a	✓

b Did the organization file Form 1120-POL for this year?

38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?

38b	0
39a	
39b	

b If "Yes," complete Schedule L, Part II and enter the total amount involved

39 Section 501(c)(7) organizations. Enter:

40a	
40b	✓

a Initiation fees and capital contributions included on line 9

40c	0
40d	0

b Gross receipts, included on line 9, for public use of club facilities

40e	✓
-----	---

40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:

section 4911 ► 0 ; section 4912 ► 0 ; section 4955 ► 0

b Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I

40f	✓
40g	0

c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958

40h	0
40i	0

d Enter amount of tax on line 40c reimbursed by the organization

40j	0
40k	✓

e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.

41 List the states with which a copy of this return is filed. ► MARYLAND

42a The books are in care of ► SR. THIEU NGHIEM (SISTER LIGHTNESS)

Telephone no. ► (845) 733-4959

Located at ► Blue Cliff Monastery, 3 Mindfulness Rd, Pine Bush, NY

ZIP + 4 ► 12566

42b	✓
42c	✓

b 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)?

If "Yes," enter the name of the foreign country: ►

See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.

c At any time during the calendar year, did the organization maintain an office outside of the U.S.?

If "Yes," enter the name of the foreign country: ►

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ► 43

43a	✓
43b	✓

44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ

44a	✓
44b	✓

45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ

Part VI Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46–49 and complete the tables for lines 50 and 51.

46 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

47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II

48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

49a Did the organization make any transfers to an exempt non-charitable related organization?

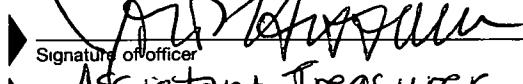
b If "Yes," was the related organization(s) a section 527 organization?

50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$100,000 ►	0			

51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		
Total number of other independent contractors each receiving over \$100,000 . . . ►	0	

Sign Here	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.		
		Date	2/15/10
	Signature of officer		
	Assistant Treasurer		
	Type or print name and title		

Paid Preparer's Use Only	Preparer's signature ►	Date	Check if self-employed ► <input type="checkbox"/>	Preparer's Identifying Number (See instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 ►		EIN ►	
			Phone no. ► ()	

May the IRS discuss this return with the preparer shown above? See instructions ► Yes No

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2008

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Name of the organization

Employer identification number

UNIFIED BUDDHIST CHURCH ENDOWMENT FOR THE TRAINING AND SUPPORT OF MONKS

20

4373593

Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

The organization is not a private foundation because it is: (Please check only one organization.)

1	<input type="checkbox"/> A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i) .												
2	<input type="checkbox"/> A school described in section 170(b)(1)(A)(ii) . (Attach Schedule E.)												
3	<input type="checkbox"/> A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii) . (Attach Schedule H.)												
4	<input type="checkbox"/> 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: _____												
5	<input type="checkbox"/> An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv) . (Complete Part II.)												
6	<input type="checkbox"/> A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v) .												
7	<input checked="" type="checkbox"/> An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) . (Complete Part II.)												
8	<input type="checkbox"/> A community trust described in section 170(b)(1)(A)(vi) . (Complete Part II.)												
9	<input type="checkbox"/> An organization that normally receives: (1) more than 33 1/3 % 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 33 1/3 % 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.)												
10	<input type="checkbox"/> An organization organized and operated exclusively to test for public safety. See section 509(a)(4) . (see instructions)												
11	<input type="checkbox"/> 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. <table border="0" style="margin-left: 20px;"> <tr> <td>a <input type="checkbox"/> Type I</td> <td>b <input type="checkbox"/> Type II</td> <td>c <input type="checkbox"/> Type III—Functionally integrated</td> <td>d <input type="checkbox"/> Type III—Other</td> </tr> </table>	a <input type="checkbox"/> Type I	b <input type="checkbox"/> Type II	c <input type="checkbox"/> Type III—Functionally integrated	d <input type="checkbox"/> Type III—Other								
a <input type="checkbox"/> Type I	b <input type="checkbox"/> Type II	c <input type="checkbox"/> Type III—Functionally integrated	d <input type="checkbox"/> Type III—Other										
e	<input type="checkbox"/> 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) .												
f	If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box <input type="checkbox"/>												
g	Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? <table border="0" style="margin-left: 20px;"> <tr> <td>(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?</td> <td style="border: 1px solid black; padding: 2px;"><input type="checkbox"/> Yes</td> <td style="border: 1px solid black; padding: 2px;"><input type="checkbox"/> No</td> </tr> <tr> <td>(ii) A family member of a person described in (i) above?</td> <td style="border: 1px solid black; padding: 2px;"><input type="checkbox"/> 11g(i)</td> <td style="border: 1px solid black; padding: 2px;"></td> </tr> <tr> <td>(iii) A 35% controlled entity of a person described in (i) or (ii) above?</td> <td style="border: 1px solid black; padding: 2px;"><input type="checkbox"/> 11g(ii)</td> <td style="border: 1px solid black; padding: 2px;"></td> </tr> <tr> <td></td> <td style="border: 1px solid black; padding: 2px;"><input type="checkbox"/> 11g(iii)</td> <td style="border: 1px solid black; padding: 2px;"></td> </tr> </table>	(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	(ii) A family member of a person described in (i) above?	<input type="checkbox"/> 11g(i)		(iii) A 35% controlled entity of a person described in (i) or (ii) above?	<input type="checkbox"/> 11g(ii)			<input type="checkbox"/> 11g(iii)	
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	<input type="checkbox"/> Yes	<input type="checkbox"/> No											
(ii) A family member of a person described in (i) above?	<input type="checkbox"/> 11g(i)												
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	<input type="checkbox"/> 11g(ii)												
	<input type="checkbox"/> 11g(iii)												
h	Provide the following information about the organizations the organization supports.												

For Print

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")		100,000	1,098,542	38,429	6,889	1,243,860
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf		0	0	0	0	0
3 The value of services or facilities furnished by a governmental unit to the organization without charge		0	0	0	0	0
4 Total. Add lines 1-3	100,000	1,098,542	38,429	6,889	1,243,860	
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)						825,958
6 Public support. Subtract line 5 from line 4.						417,902

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4		100,000	1,098,542	38,429	6,889	1,243,860
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		570	14341	23,025	6,749	44,685
9 Net income from unrelated business activities, whether or not the business is regularly carried on		0	0	0	0	0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)		0	0	0	0	0
11 Total support. Add lines 7 through 10						1,288,545
12 Gross receipts from related activities, etc. (see instructions)					12	0
13 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) organization, check this box and stop here ► <input checked="" type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	%
16a 33½% support test—2008. If the organization did not check the box on line 13, and line 14 is 33½% or more, check this box and stop here . The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 33½% support test—2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33½% or more, check this box and stop here . The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2008. 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 ► <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2007. 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 ► <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>		

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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 1-5						
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 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
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.)						
14 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) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%
19a 33 1/3 % support tests—2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 33 1/3 % support tests—2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/>		

Part IV **Supplemental Information.** Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

**UNIFIED BUDDHIST CHURCH ENDOWMENT
FOR TRAINING AND SUPPORT OF MONASTICS, INC.
SUPPLEMENTAL SCHEDULES TO FORM 990-EZ
TAX YEAR ENDING 6/30/09
PAGE 1/2**

20-4373593

Schedule 1

Gross amount from sale of assets other than inventory

Part I, Line 5a

This amount represents short-term and long-term capital gain dividends received on investments in mutual funds during the tax year. There were no sales of investment securities during this period.

Schedule 2

Other changes in net assets or fund balances

Part I, Line 20

Change in unrealized gains and losses on investments –

Publicly traded securities (\$ 51,700)

Schedule 3

Current Officers, Directors, Trustees, and Key Employees

Part IV

The Directors and Officers of the Unified Buddhist Church Endowment are not compensated for their services. The Endowment does not have any employee benefit accounts, deferred compensation plans, expense accounts or other allowances.

Officers and Directors of the Endowment are as follows:

	Title, avg hours per week
Nguyen Xuan Bao (Thich Nhat Hanh) Eglise Bouddhique Unfiee 13 Martineau 33580 Dieulivol FRANCE	Director 0-1 hours
Cao Ngoc Phoung (Chan Khong, True Emptiness) Eglise Bouddhique Unfiee 13 Martineau 33580 Dieulivol FRANCE	President, Director 0-1 hours

**UNIFIED BUDDHIST CHURCH ENDOWMENT
FOR TRAINING AND SUPPORT OF MONASTICS, INC.
SUPPLEMENTAL SCHEDULES TO FORM 990-EZ
TAX YEAR ENDING 6/30/09
PAGE 2/2**

20-4373593

Schedule 3 (continued)

Annabel Harvey Laity (Chan Duc, True Virtue) Unified Buddhist Church Green Mountain Dharma Center South Meadow Farm Hartland Four Corners, VT 05049	Vice President, Director 0-1 hours
Trinh Ny Hoa (Chan Phap Dung, True Dharm Inclusiveness) Unified Buddhist Church Deer Park Monastery 2499 Melru Lane Escondido, CA 92029	Treasurer, Director 0-1 hours
Nguyen Thi Diem Xuan (Chan Dinh Nghiem, True Adornment with Concentration) Eglise Bouddhique Unfiee 13 Martineau 33580 Dieulivol FRANCE	Assistant Secretary, Director 0-1 hours
Pham Thu (Chan Phap an, True Dharma Seal) Eglise Bouddhique Unfiee Le Pay 24240 Thenac FRANCE	Secretary, Director 0-1 hours
John P. Hussman 5136 Dorsey Hall Drive Ellicott City, MD 21042	Assistant Treasurer, 1 hour
Brooke Steinau 5136 Dorsey Hall Drive Ellicott City, MD 21042	Assistant Secretary, 1 hour