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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)

- 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 \$500,000 and total assets less than \$1,250,000 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

Department of the Treasury
Internal Revenue Service

OMB No. 1545-1150

2009

Open to Public
Inspection

A For the 2009 calendar year, or tax year beginning

, and ending

B Check if applicable		C Name of organization		D Employer identification number	
<input type="checkbox"/>	Address change	Konchok Foundation		80-0056576	
<input type="checkbox"/>	Name change	Number and street (or P O box, if mail is not delivered to street address)		Room/suite	E Telephone number
<input type="checkbox"/>	Initial return	1345 Spruce Street			303-444-0190
<input type="checkbox"/>	Terminated	City, town, or country	State	ZIP + 4	F Group Exemption
<input type="checkbox"/>	Amended return	Boulder	CO	80302	Number ►
G Accounting Method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ►					

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

H Check ► if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)I Website: ► www.konchok.orgJ Tax-exempt status (check only one) — 501(c) (3) ◀ (insert no) 4947(a)(1) or 527K 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 Form 990-EZ or Form 990 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 \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$ 70,166

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	67,833
	2 Program service revenue including government fees and contracts	2	
	3 Membership dues and assessments	3	
	4 Investment income	4	0
	5a Gross amount from sale of assets other than inventory	5a	0
	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)	5c	0
	6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here ► <input type="checkbox"/>		
	a Gross revenue (not including \$ 1,773 of contributions reported on line 1)	6a	2,333
b Less direct expenses other than fundraising expenses	6b	1,185	
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	1,148	
7a Gross sales of inventory, less returns and allowances	7a		
b Less cost of goods sold	7b		
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	68,981	
Expenses	10 Grants and similar amounts paid (attach schedule)	10	0
	11 Benefits paid to or for members	11	
	12 Salaries, other compensation, and employee benefits	12	
	13 Professional fees and other payments to independent contractors	13	4,572
	14 Occupancy, rent, utilities, and maintenance	14	
	15 Printing, publications, postage, and shipping	15	
	16 Other expenses (describe ► See Attached Statement)	16	55,012
	17 Total expenses. Add lines 10 through 16	17	59,584
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	9,397
	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	28,619
	20 Other changes in net assets or fund balances (attach explanation)	20	0
	21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	38,016
	RECEIVED APR 27 2013 IRS OGDEN, UT		

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

22 Cash, savings, and investments	(A) Beginning of year	(B) End of year	
	48,619	22	58,016
		23	
		0	0
		24	0
		48,619	25
		20,000	26
23 Land and buildings		20,000	
24 Other assets (describe ►)			
25 Total assets	48,619	58,016	
26 Total liabilities (describe ► NP see schedule L and statement #2)	20,000	20,000	
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	28,619	38,016	

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

Form 990-EZ (2009)

(600) 15

Part III Statement of Program Service Accomplishments (See the instructions for Part III)				Expenses (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)
What is the organization's primary exempt purpose? <u>see statement #3</u>				
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, and other relevant information for each program title				
<p>28 Education and support for Chokyi Senge, Trungpa Rinpoche XII who is being trained to be the main teacher of the Surmang monastery</p> <p>(Grants \$ 0) If this amount includes foreign grants, check here ► <input type="checkbox"/> 28a 6,000</p>				
<p>29 Support for basic living expenses for approximately 30 monastic teachers & students at Surmang Monastery</p> <p>(Grants \$ 0) If this amount includes foreign grants, check here ► <input type="checkbox"/> 29a 3,405</p>				
<p>30 Sixth year of construction for the school (shedra) in remote Surmang Valley. This houses 72 teachers and students. This included waterproofing, plastering & flooring, exterior stucco work & the construction of a retaining wall. This contributed to the local subsistence economy as well.</p> <p>(Grants \$ 0) If this amount includes foreign grants, check here ► <input type="checkbox"/> 30a 25,903</p>				
<p>31 Other program services (attach schedule)</p> <p>(Grants \$ 0) If this amount includes foreign grants, check here ► <input type="checkbox"/> 31a 14,692</p>				
<p>32 Total program service expenses. (add lines 28a through 31a) ► 32 50,000</p>				
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 -0-)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Mipham J. Mukpo SMC 4921 County Rd 68C Red Feather Lakes CO 80	Title President Hr/WK 5.00	0	0	0
Diana Mukpo 160 Slater Avenue Providence RI 02906	Title Vice-Pres Hr/WK 2.00	0	0	0
Mitchell Levy 160 Slater Avenue Providence RI 02906	Title Hr/WK 1.00	0	0	0
Richard Reoch Flat 4 , 53 Tollington Park London N4 3QP England	Title Vice-Pres Hr/WK 2.00	0	0	0
Peter Volz 3657 Hazelwood Boulder CO 80304	Title Secretary Hr/WK 10.00	4,500	0	0
Lyndon Comstock PO Box 28 Bolinas CA 94924	Title Treasurer Hr/WK 10.00	0	0	0
David Bolduc 1107 Pearl Street Boulder CO 80302	Title Hr/WK 2.00	0	0	0
Alexander Halpern 1426 Pearl St #420 Boulder CO 80302	Title Hr/WK 1.00	0	0	0
Derek Kolleeny 32 Palmer Avenue Sleepy Hollow NY 10591	Title Hr/WK 1.00	0	0	0
David Garrett 2088 Bauer Street Halifax B3K 3W3 Canada	Title Hr/WK 2.00	0	0	0
Robert King 2200 Topaz Boulder CO 80304	Title Hr/WK 5.00	0	0	0
Lindy King 2200 Topaz Boulder CO 80304	Title Hr/WK 5.00	0	0	0
Landon Mallory 5841 Chain Rock Drive Halifax B3H 1A2 Canada	Title Hr/WK 3.00	0	0	0
Virginia Lipson 2880 Stephens Rd Boulder CO 80305	Title Hr/WK 20.00	0	0	0
Holly Gayley 65 Valley View Dr Nederland CO 80466	Title Hr/WK 5.00	0	0	0
Khenpo Choying Namgyal 1185 #D Bear Mountain Drive Boulder CO 80305	Title Hr/WK 00	0	0	0
	Title Hr/WK 00	0	0	0
	Title Hr/WK .00	0	0	0

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

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	X
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34	X
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 why the organization did not report the income on Form 990-T	35a	X
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35b	
b If "Yes," has it filed a tax return on Form 990-T for this year?	36	X
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	37a	0
b Did the organization file Form 1120-POL for this year?	37b	
38 a 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 outstanding at the end of the period covered by this return?	38a	X
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	20,000
39 Section 501(c)(7) organizations Enter	39a	
a Initiation fees and capital contributions included on line 9	39b	
b Gross receipts, included on line 9, for public use of club facilities		
40 a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ► _____, section 4912 ► _____, section 4955 ► _____	40b	X
b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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	40c	
c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	40d	
d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization	40e	0
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 ► _____		
42 a The organization's books are in care of ► Virginia Lipson Telephone no ► 303-444-0190		
Located at ► 2880 Stephens Road City Boulder ST CO ZIP + 4 ► 80305		
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)?	42b	X
If "Yes," enter the name of the foreign country ► _____	42c	
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 N/A		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	X
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	45	X

Part VI

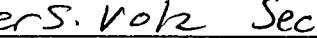
Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46–49b and complete the tables for lines 50 and 51.

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	Yes	No
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	46	✗
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	47	✗
49a	Did the organization make any transfers to an exempt non-charitable related organization?	48	✗
b	If "Yes," was the related organization a section 527 organization?	49a	✗
49b		49b	
50	Complete this table for the organization's 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."		

f Total number of other employees paid over \$100,000 . ► _____

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

d Total number of other independent contractors each receiving over \$100,000 . . . ►

Sign Here	<p>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.</p> <p> <input checked="" type="checkbox"/> <i>Peter A. Cof</i> 1X 9/21/2010 Signature of officer Date </p> <p> <input checked="" type="checkbox"/> <i>Peters. Votz</i> <i>Secretary to the Board of Directors</i> Type or print name and title </p>			
	Paid Preparer's Use Only	Preparer's signature 	Date 4/14/10	Check if self-employed <input checked="" type="checkbox"/>
Paid Preparer's Use Only	Firm's name (or yours if self-employed), address, and ZIP + 4 	Felice Owens	EIN <input type="checkbox"/>	Phone no <input type="checkbox"/> 303-444-1448
May the IRS discuss this return with the preparer shown above? See instructions <input type="checkbox"/> Yes <input type="checkbox"/> No				

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

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

Name of the organization

Konchok Foundation

Employer identification number

80-0056576

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 (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)**.
- 4 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 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 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 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 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
- 9 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 An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.
- 11 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

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 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
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(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	No
(ii) A family member of a person described in (i) above?	<input type="checkbox"/>	Yes	No
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	<input type="checkbox"/>	Yes	No
- h Provide the following information about the supported organization(s)

	Yes	No
11g(i)		X
11g(ii)		X
11g(iii)		X

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?	(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U.S?	(vii) Amount of support
				Yes	No		
							0
							0
							0
							0
							0
Total							0

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) 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")	191,399	221,145	225,302	126,671	70,166	834,683
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0				0
3 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0				0
4 Total. Add lines 1 through 3	191,399	221,145	225,302	126,671	70,166	834,683
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)						131,432
6 Public support. Subtract line 5 from line 4						703,251

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	191,399	221,145	225,302	126,671	70,166	834,683
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	0	0	0	0		0
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						834,683
12 Gross receipts from related activities, etc (see instructions)					12	
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 type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	84 25%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	84 00%
16a 33 1/3% support test-2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization	► <input checked="" type="checkbox"/>	
b 33 1/3% support test-2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% 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-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	► <input type="checkbox"/>	
b 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	► <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"/>	

N/A

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) 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")	0	0				0
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	0	0				0
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0				0
6 Total. Add lines 1 through 5	0	0	0	0	0	0
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
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						0
c Add lines 7a and 7b	0	0	0	0	0	0
8 Public support (Subtract line 7c from line 6)						0

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	0	0	0	0	0	0
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c Add lines 10a and 10b	0	0	0	0	0	0
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	0	0				0
13 Total support. (Add lines 9, 10c, 11, and 12)	0	0	0	0	0	0
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 2009 (line 8, column (f) divided by line 13, column (f))	15	0.00%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	0.00%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	0.00%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	0.00%
19a 33 1/3% support tests-2009. 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-2008. 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"/>

statement #1

Part I, Line 16 (990-EZ) - Other Expenses

		55,012
1	Travel	1
2	Meals and entertainment	2
3	Fundraising	3
4	Amortization	4
5	Conferences, conventions, and meetings	5
6	Depreciation	6
7	Depletion	7
8	Equipment rental and maintenance	8
9	Interest	9
10	Supplies	10
11	Telephone	11
12	Unrelated business income taxes	12
13	Legal & Accounting	13
14	Promotion	14
15	Miscellaneous Costs	15
16	Program Costs	16

statement #2

Part II, Line 26 (990-EZ) - Liabilities

	Description	Beginning	End
1	NP see schedule L	20,000	20,000
2			
3			
4			
5			
6			
7			
8			
9			
10			

statement #3

Function

Total:

0

1	To provide educational support and to protect and promote the religious freedom of the	1
2	Eastern Tibetan people of China	2
3		3
4		4
5		5

Part III, Line 31 (990-EZ) - Other Program Services

			Program Service Expenses
The initial phase of educational programming focused on providing basic education to low income ical children, serving between 50-100 children in the Surmang Valley in 2009			
(Grants and allocations \$	<u>0</u>) If this amount includes foreign grants, check here	<input type="checkbox"/>	14,692
(Grants and allocations \$	<u>0</u>) If this amount includes foreign grants, check here	<input type="checkbox"/>	0
(Grants and allocations \$	<u>0</u>) If this amount includes foreign grants, check here	<input type="checkbox"/>	0
(Grants and allocations \$	<u>0</u>) If this amount includes foreign grants, check here	<input type="checkbox"/>	0
(Grants and allocations \$	<u>0</u>) If this amount includes foreign grants, check here	<input type="checkbox"/>	0
(Grants and allocations \$	<u>0</u>) If this amount includes foreign grants, check here	<input type="checkbox"/>	0
(Grants and allocations \$	<u>0</u>) If this amount includes foreign grants, check here	<input type="checkbox"/>	0
(Grants and allocations \$	<u>0</u>) If this amount includes foreign grants, check here	<input type="checkbox"/>	0
(Grants and allocations \$	<u>0</u>) If this amount includes foreign grants, check here	<input type="checkbox"/>	0
(Grants and allocations \$	<u>0</u>) If this amount includes foreign grants, check here	<input type="checkbox"/>	0
Total	0		Total 14,692