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Department of the Treasury

# **Return of Organization Exempt From Income Tax**

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

▶ The organization may have to use a copy of this return to satisfy state reporting requirements. A For the 2009 calendar year, or tax year beginning and ending B Check if applicable D Employer identification number C Name of organization

	Addres change	ss  abel or   BUDDHIST CHURCHES OF AMERICA - ENDO	WMENT		
	Name change	Doing Business As		94-28	57583
	Initial  return	10	Room/suite		
<u>_</u>	Termin	Instruct I/IU OCTAVIA STREET	l	(415)	776-5600
$\sqsubseteq$	Ameno	City or town, state or country, and ZIP + 4		.G Gross receipts \$	7,659,029.
<u> </u>	Application pendir	DAN TRANCIBEO, CA 54105		H(a) Is this a group ret	
	pendii	F Name and address of principal officer:		for affiliates?	Yes X No
		1710 OCTAVIA STREET, SAN FRANCISCO, CA		H(b) Are all affiliates inclu	
1 7	ax-exe	empt status: X 501(c) ( 3 ) ◀ (insert no.) 4947(a)(1) or 527		1	st. (see instructions)
		e: > HTTP://WWW.BUDDHISTCHURCHESOFAMERICA.		H(c) Group exemption	
		organization X Corporation	L Year	of formation: 1929 M	State of legal domicile CA
Pa	rt I	Summary	ромошт	TODO CHINGH	II DUDDUTCM
9		Briefly describe the organization's mission or most significant activities: TO P	KOMOTE	JODO SHINSH	O BODDHISM
a i		IN AMERICA.			
a F		Check this box I if the organization discontinued its operations or dispo	sed of more	1 1	
ာဝွ်		Number of voting members of the governing body (Part VI, line 1a)		3	15 15
್ಲೆಷ	i	Number of independent voting members of the governing body (Part VI, line 1b)		4	
i Sir		Total number of employees (Part V, line 2a)		5	2 1
⊃ઃૄ	ı	Total number of volunteers (estimate if necessary)		. 6	0.
<b>≱</b>	ı	Total gross unrelated business revenue from Part VIII, column (C), line 12		. 7a	0.
Revende Mile Dictor of Esternance	ь	Net unrelated business taxable income from Form 990-T, line 34	ı	7b	
3		0	<u> </u>	Prior Year 2,393,532.	Current Year 2,331,884.
	ı	Contributions and grants (Part VIII, line 1h)		2,393,332.	2,331,004.
Ű.Ş	l	Program service revenue (Part VIII, line 2g)		-456,110.	-500,061.
æ	ı	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-	-430,110.	-300,001.
	ł	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	$\vdash$	1,937,422.	1,831,823.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,826,416.	1,195,152.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		2,020,410.	1,195,152.
		Benefits paid to or for members (Partix, column (A), line 4)		121,845.	126,675.
Expenses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		121,045.	120,073.
ē		Professional fundrals highees (Bart IX, column A), line 11e)	-		
Ä		Total fundraising expenses (Part IX, Courn Atla), line 25)		215,680.	205,846.
		Other expenses (Part X column (A), lines (12-11d, 11f-24f)		3,163,941.	1,527,673.
		Total expenses. Additional Expenses. Addit		-1,226,519.	304,150.
	19	Revenue less expenses. Subtract time 18 from line 12	Do.		
Assets or Balances		Table and (Date Village 40)	DE	ginning of Current Year 16,997,140.	End of Year 20,288,001.
SSE	20	Total assets (Part X, line 16)		1,286,200.	1,453,939.
Net /		Total liabilities (Part X, line 26)	-	15,710,940.	18,834,062.
	22     11	Net assets or fund balances. Subtract line 21 from line 20  Signature Block		15/110/5404	10,034,002.
1 * 4	*1 + 71	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules a	ind 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	,	1
Sigi	•	N. Morran		11/1	2/10
Her		Signature of officer		Date	
	•	NOBORU HANYU TR	EASUR	ER	
		Type or print name and title	<u></u>		
		Preparer's Date			s identifying number
Paid	_	signature 11/4	set emورمد/	ployed	
	arer's	Firm's name (or FRANK, RIMERMAN & CO. LILP		EIN ▶	
use	Only	self-employed). ONE EMBARCADERO CENTER, SUITE 2	410		
		ZIP+4 SAN FRANCISCO, CA 94111		Phone no > (4	15) 439-1144
Mav	the If	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

Page 3

Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(5) or 4947(q)!) (other than a private foundation)?  1 If Yes, "complete Schedule organization required to complete Schedule B, Schedule G, Contributions?  2 Is the organization required to complete Schedule B, Schedule G, Contributions?  3 Dut the organization engage in direct or indirect organization engage in tobbying activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II  5 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II  5 Section 501(c)(4) 501(c)(6) and 501(c)(6) organizations. Is the organization behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II  6 Did the organization maintain and yolion or average funds or any sentile 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 II  7 Did the organization research or historic structures? If "Yes," complete Schedule D, Part II  8 Dut the organization report and amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, vior provide order continuelling, debt in amagement, credit repair, or eight individual services? If "Yes," complete Schedule D, Part IV  10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part IV  11 Is the organization report an amount for line display in a sease in Part X, line 10? If "Yes," complete Schedule D, Part X, IV  12 Did the organization report an amount for investments - program related in Part X, line 10? If "Yes," complete Schedule D, Part X, IV  13 Did the organization report an amount for investments - program related in Part X, line 10 for It yes, "complete Schedule D, Part X, IV  14 Did the organization report an amount for other buildings, and equipment in Part X, line 10 for It yes, "				Yes	No
2 Is the organization required to complete Schedule B, Schedule G Contributors? 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public officer if "Ves," complete Schedule C, Part II 4 Section 501 (e)(3) organizations. Did the organization along in lobbying activities? If "Yes," complete Schedule C, Part II 5 Section 501 (e)(4), 501 (e)(5), and 501 (e)(6) organizations. Did the organizations upon the organization subject to the section 603 (e)), 601 (e)(6), 601	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *I **Pes**, *complete Schedule C, Part II **Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Did the organization is provided to the section 603(c) notice and reporting requirement and proxy tax? If **Yes**, *complete Schedule C, Part II **Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 603(c) notice and reporting requirement and proxy tax? If **Yes**, *complete Schedule C, Part II **Did the organization maintain any donor advised funds or any smillar funds or accounts? If **Yes**, *complete Schedule D, Part I **Did the organization maintain any donor advised funds or any smillar funds or accounts? If **Yes**, *complete Schedule D, Part II **Did the organization maintain collections of works of art, instonate it resurces, or forth similar assets? If **Yes**, *complete Schedule D, Part II **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 II **Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If **Yes**, *complete Schedule D, Part VI.**		If "Yes," complete Schedule A	1		
public office? If Yes," complete Schedule C, Part II Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations is the organization subject to the section 6035(c) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advesded funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II Did the organization resorte 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 Did the organization report an amount in Part X, line 21; serve as a cuistodian for amounts not listed in Part X, or provide credit counseling, debit management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization divertly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part IV If Yes," complete Schedule D, Part IV Did the organization report an amount for investments or the scurities in Part X, line 10? If "Yes," complete Schedule D, Part IV Did the organization report an amount for investments or the scurities 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 IV Did the organization report an amount for other liabilities 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 IV Did the organization report an amount for other liabilities 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 X, VII Did the organization report an amount for other liabilities in Part X, line 15	2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
Section 501(c)(3) organizations. Dict the organization engage in lobbying activities? If "res," complete Schedule C, Part II    5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 603(c)(e) entotice and reporting requirement and proxy tax? If "res," complete Schedule C, Part III    6 Did the organization maintain any donor advised funds or any smillar funds or accounts where donors have the night to provide advice on the distribution or investment of amounts in such funds or accounts? If "res," complete Schedule D, Part II    7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, histonic land areas, or histonic structures? If "res," complete Schedule D, Part III    8 Did the organization maintain collections of works of art, histonical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV    8 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 negoliation services? If "Yes," complete Schedule D, Part IV    10 Did the organization's answer to any of the following questions "Yes?" If so, complete Schedule D, Part IV    11 Is the organization answer to any of the following questions "Yes?" If so, complete Schedule D, Part X, III    12 Did the organization report an amount for investments or other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI    12 Did the organization report an amount for investments or other securities in Part X, line 12 that is 5% or more of its total assests reported in Part X, line 16? If "Yes," complete Schedule D, Part X    13 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 X    14 Did the organization separate or consolidated financial statements for the tax year inclu	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
Section 501(c)(d), 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  Did the organization maintain any donor advessed funds or any smillar 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 II  Did the organization maintain collections of works of art, historical funds or accounts? If "Yes," complete Schedule D, Part III  Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide schedule D, Part III  Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed any Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV  Did the organization organization, directly or through a related organization, hold assets in Items, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part IV, III, IX, or X as applicable  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part IV, III.  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 IV.  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 IV.  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 X, V.  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		·			
reporting requirement and proxy tax/ if "Yes," complete Schedule C, Part III  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 II  Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures II "Yes," complete Schedule D, Part III  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part V  Is 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 VI  Is the organization's answer to any of the following questions "Yes" If so, complete Schedule D, Part VI, VI Is the organization report an amount for land, buildings, and equipment in Part X, line 10" If "Yes," complete Schedule D, Part VII.  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 VIII.  Did the organization report an amount for their 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 X VII.  Did the organization report an amount for their asset 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 X VII.  Did the organization report an amount for their asset in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16" If "Yes," complete Sch	4		4		<u>X</u>
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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 III  9 Did the organization 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 negoliation services? If "Yes," complete Schedule D, Part IV  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  11 Is the organization's answer to any of the following questions "Yes?" If so, complete Schedule D, Part V, If Yes, "complete Schedule D, Part V, If Yes," complete Schedule D, Part V, If Vis, If Yes, "complete Schedule D, Part VI, If Vis, If Yes," complete Schedule D, Part VI, If Vis, If Yes, "complete Schedule D, Part VII, If Vis, If Yes, "complete Schedule D, Part VIII, If Vis, If Yes, "complete Schedule D, Part VIII, If Vis, If Yes, "complete Schedule D, Part VIII, If Vis, If Yes, "complete Schedule D, Part VIII, If Vis, If Yes, If	6				v
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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 V 10 Did the organization, service or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts V, VII, VIII, IX, or X as applicable  9 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.  9 Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII.  9 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.  10 Did the organization report an amount for other labilities 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 X V.  11 Did the organization in substitution of other labilities 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 X V.  12 Did the organization in substitution of other labilities in Part X, line 25? If "Yes," complete Schedule D, Part X V.  13 Did the organization included in consolidated, independent audited financial statements for the tax year' If "Yes," complete Schedule D, Part X, X, X, and XIII. so phonal  13 Is the organization included in consolidated, independent audited financial statements for the tax year' If "Yes," complete Schedule D, Part X, X, X, and XIII is optional  14 Did the organization maintain an office, employees, or agents outside of the United States If X X  15 Did the organization maintain an office, employees, or agents o	8				v
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	20	·		<del>                                     </del>	-
	<u> </u>	DIG the organization operate one of more hospitals in Tes, complete schedule in		990	

#### Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the X United States on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II 21 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, 22 22 X column (A), line 2º If "Yes," complete Schedule I, Parts I and III 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 X Schedule J 23 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 X Schedule K If "No", go to line 25 24a 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a Х disqualified person during the year? If "Yes," complete Schedule L, Part I 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 X Schedule L. Part I 25b Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified Х person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 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 X 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): X a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was X an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c Х Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X contributions? If "Yes," complete Schedule M 30 31 Did the organization liquidate, terminate, or dissolve and cease operations? X 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 Х Schedule N, Part II 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I 33 X Was the organization related to any tax-exempt or taxable entity? X If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 34 Is any related organization a controlled entity within the meaning of section 512(b)(13)? X If "Yes," complete Schedule R, Part V, line 2 35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? X If "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization Х 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Х

Form 990 (2009)

Note. All Form 990 filers are required to complete Schedule O.

Page 5

Par	t V 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	0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming				
	(gambling) winnings to prize winners?		c		
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	2			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2	2Ь	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	<u>_3</u>	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	<u>_3</u>	3b		
4a	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)?	4	la		Х
b	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.				
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	_ 5	ā		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited				
	Tax Shelter Transaction?		<u>sc</u>		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization soli				v
_	any contributions that were not tax deductible?	_6	ia		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts		.		
-	were not tax deductible?	-	3b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		7a		Х
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	T-	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	F			
·	to file Form 8282?	7	7c		х
Ч	If "Yes," Indicate the number of Forms 8282 filed during the year	ļ <b>i</b>	-	······································	
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal				
•	benefit contract?	7	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7	7g		Х
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		7h		Х
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 holding	ngs			
	at any time during the year?	L	8		X
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the organization make any taxable distributions under section 4966?	_ [ 9	Эа		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		X
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				
11	Section 501(c)(12) organizations. Enter:				
а	Gross income from members or shareholders . 11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	11	2a		ļ
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b				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.

Sec	tion A. Governing Body and Management			
	1.1		Yes	No
1a	Enter the number of voting members of the governing body 1a 1.			
b	Enter the number of voting members that are independent 15	2		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	}		
	officer, director, trustee, or key employee?	2		<u> X</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Х
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		<u>X</u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	ļ	Χ
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8ь	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		,	
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	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?	10b	L	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	Х	
14	Does the organization have a written document retention and destruction policy?	14	Х	
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?	Ì		
а		15a	X	
	Other officers or key employees of the organization	15b	Х	
	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?	16a		X
ь	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		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶CA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	e for		
-	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,	and fina	ancial	
. 5	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 organiz	ation:	<b>&gt;</b>	
0	PHUNG KIM LE - (415) 776-5600			
	1710 OCTAVIA STREET, SAN FRANCISCO, CA 94109			
		Form	990	(2009
				'

932006 02-04-10

# 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.

X Check this box if the organization did not compensate any current officer, director, or trustee.										
(A)	(B)		(C)					(D)	(E)	(F)
Name and Title	Average		Position					Reportable	Reportable	Estimated
	hours	(ci	(check all that a			t apply)		compensation	compensation	amount of
	per	ctor						from	from related	other
	week	E	_			pa		the organization	organizations (W-2/1099-MISC)	compensation from the
		1 BE	uste	'	_	ensa		(W-2/1099-MISC)	(VV-22 1099-IVIISO)	organization
		Individual trustee or director	Institutional frustee		Key employee	Highest compensated employee		(** 2 .00000)		and related
	ļ	jý de	喜	Officer	y emp	phest	Former			organizations
		Ĕ	프	ð	Š	Į.	ъ			
MR. CHARLES OZAKI										
PRESIDENT	2.00			X				0.	0.	0.
MR. ROGER SUEKAMA										
SECRETARY	1.00			X				0.	0.	0.
MR. NOBORU HANYU										
TREASURER	15.00		1	X				0.	0.	0.
SEE STATEMENT (B) ATTACH										
OTHER MEMBERS OF BOARD O	2.00			Х				0.	0.	0.
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	<u> </u>	<u> </u>					<u> </u>	<u> </u>		

rai	T VII Section A. Officers, Directors, Tru	ustees, Key Er	mplo	yee	s, a	nd l	ligh	est						
	(A)	(B)		(C)					(D)	(E)		(F	<del>-</del> )	
	Name and title	Average			Pos				Reportable	Reportable	İ	Estin	nated	ł
		hours	(cl	heck	all t	that	арр	ly)	compensation	compensation compensation		amou	int of	f
		per	ē						from	from related		oth	ner	
		week	diac				_		the	organizations		ompe	nsatı	on
			individual trustee or director	28			Highest compensated employee		organization	(W-2/1099-MIS	C)	from	the	
			age .	Ĭ,		8	ag.		(W-2/1099-MISC)			organi		
			量	nsttutional trustee	. :	Kay amployee	Ş 25 12 8	<b>.</b>			1	and re	elate	d
			ě	1St tu	Officer	ey er	ig E	Former			0	rganiz	zatio	ns
		1	-#		Ľ	×	Τ.							
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1 b	Total	·····					<u> </u>		0.		0.			0.
2	Total number of individuals (including but r	not limited to th	nose	liste	ed al	bov	e) wi	no re	eceived more than \$100	0,000 in reportable	•			
	compensation from the organization	<del></del>												0
												Y	es	No
3	Did the organization list any former officer,	, director or tru	stee	, ke	y en	plo	yee,	or h	nighest compensated er	mployee on				
	line 1a? If "Yes," complete Schedule J for s	such individual				_					. [3	3		X
4	For any individual listed on line 1a, is the si	um of reportab	le co	omp	ensa	ation	n and	d otl	her compensation from	the organization				
	and related organizations greater than \$15									•		. ]	- 1	X
5	Did any person listed on line 1a receive or									ces rendered to				
	the organization? If "Yes," complete Scheo						,		<b></b>			, ]		X
Sec	tion B. Independent Contractors										<del> </del>		·····	
1	Complete this table for your five highest co	mnensated in	den	ende	ent c	ont	racto	ors t	that received more than	\$100,000 of com	nensatio	n from	m	
•	the organization. NONE	mponoacoa in	чор.	J.,			-	,,,,,	mat rocorrod more man	<b>4</b> 100,000 01 00111	pomodine	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	(A)								(B)	I		(C)		
	Name and business	address							Description of s	services	Com	pens	ation	
	· · · · · · · · · · · · · · · · · · ·	•							<u> </u>	+		•		
										1				
										<del>+</del>				
										1				
								$\dashv$		<del></del>	,			
2	Total number of independent contractors (		ot l	mıte	d to		_	stec	d above) who received n	nore than				
	\$100,000 in compensation from the organi	zation >					0							
											Fo	rm <b>9</b> 9	0 (2	009)

932009 02-04-10

### Part IX Statement of Functional Expenses

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

	All other organizations must comple				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundralsing expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	1,195,152.	1,195,152.		
2	Grants and other assistance to individuals in			1	
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.	•			
	See Part IV, lines 15 and 16				·····
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	100 744		100 744	
7	Other salaries and wages	108,744.		108,744.	
8	Pension plan contributions (include section 401(k)	}		İ	
_	and section 403(b) employer contributions)	17 021		17 021	
9	Other employee benefits	17,931.		17,931.	
10	Payroll taxes				
11	Fees for services (non-employees):				
a	Management				
b	Legal	55,400.	27,700.	27,700.	
c	Accounting	33,400.	21,700.	21,100.	
d	Lobbying				<del></del>
e	Professional fundraising services See Part IV, line 17	102,174.	102,174.		
f -	Investment management fees	102,114.	102,174.		
9					
12	Advertising and promotion .	4,342.		4,342.	
13	Office expenses	1,312.		1/312.	
14	Information technology				<del></del>
15 16	Royalties Cocupancy	9,468.		9,468.	
17	Travel	8,071.		8,071.	
18	Payments of travel or entertainment expenses	0,0.20		0,0,20	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,247.		1,247.	<del></del>
20	Interest				<del></del>
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	13,575.		13,575.	-
24	Other expenses Itemize expenses not covered				<del></del>
	above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total				
	expenses shown on line 25 below )	2 522		0 506	
а	PROPERTY TAXES	9,506.		9,506.	
Ь	TELEPHONE DELATIONS	1,116.		1,116.	
C	PUBLIC RELATIONS	800.		800.	
d	BANK FEES	147.		147.	
e					
f	All other expenses	1 527 572	1 225 026	202 647	0.
25	Total functional expenses. Add lines 1 through 24f	1,527,673.	1,325,026.	202,647.	<u> </u>
26	Joint costs. Check here				
	SOP 98-2 Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation	1		. <u>.                                   </u>	5 <b>000</b> (0000)

Par	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing		1	
	2	Savings and temporary cash investments	1,183,610.	2	857,692.
	3	Pledges and grants receivable, net	2,199,669.	3	3,165,919.
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key			
	İ	employees, and highest compensated employees. Complete Part II			
		of Schedule L		5	
	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		6	
;	7	Notes and loans receivable, net	3,500,000.	7	3,500,000
	8	Inventories for sale or use		8	
:	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 631,300.			
	ь	Less: accumulated depreciation 10b	631,300.	10c	631,300
	11	Investments - publicly traded securities		11	
	12	Investments - other securities See Part IV, line 11	9,482,561.	12	12,133,090
ļ	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	16,997,140.	16	20,288,001
	17	Accounts payable and accrued expenses	- · · · · · · · · · · · · · · · · · · ·	17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
,	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees,			
Liabilities		highest compensated employees, and disqualified persons. Complete Part II			
j		of Schedule L		22	·
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D	1,286,200.	25	1,453,939
	26	Total liabilities. Add lines 17 through 25	1,286,200.	26	1,453,939
		Organizations that follow SFAS 117, check here   X and complete			
2		lines 27 through 29, and lines 33 and 34.	,		
Net Assets of Fulld Balances	27	Unrestricted net assets	4,079,120.	27	1,559,319
3	28	Temporanly restricted net assets	2,275,763.	28	4,084,462
) }	29	Permanently restricted net assets	9,356,057.	29	13,190,281
5		Organizations that do not follow SFAS 117, check here			
5		complete lines 30 through 34.			
3	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ž	33	Total net assets or fund balances	15,710,940.	33	18,834,062
	34	Total liabilities and net assets/fund balances	16,997,140.	34	20,288,001
	<u> </u>		, , , , , ,		Form <b>990</b> (2009

Form **990** (2009)

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.

Form 990 (2009)

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X

Act and OMB Circular A-133? ...

#### **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

Inspection

Name of the organization

BUDDHIST CHURCHES OF AMERICA - ENDOWMENT

**Employer identification number** 

				T CHURCHES C						94	-2857	583	
Pa	rt I	Reason	for Public Char	<b>rity Status</b> (All organiz	zations mu	st comple	te this par	t.) See ins	tructions.				
The	organ	ization is not a	a private foundation	because it is: (For lines	1 through	11, check	only one b	юх.)					
1	X	A church, co	nvention of churche	s, or association of chur	ches desc	ribed in se	ection 170	(b)(1)(A)(i)	).				
2	Ш	A school des	scribed in section 1	<b>70(b)(1)(A)(ii).</b> (Attach Sc	hedule E.)								
3	Ш	A hospital or	a cooperative hosp	ital service organization	described	ın section	170(b)(1)	(A)(iii).					
4	Ш	A medical res	search organization	operated in conjunction	with a hos	spital desc	ribed in <b>s</b> e	ection 170	(b)(1)(A)(ī	ii). Enter th	ne hospital	's name,	
		city, and stat	te:										
5		An organizat	on operated for the	benefit of a college or us	niversity o	wned or op	perated by	a govern	mental un	rt describe	ed in		
		section 170	<b>(b)(1)(A)(iv).</b> (Compl	ete Part II.)									
6			•	nent or governmental uni									
7				ceives a substantial part	of its supp	ort from a	governme	ental unit o	or from the	general p	ublic desc	nbed in	
			<b>(b)(1)(A)(vi).</b> (Comple	•									
8	=	-		section 170(b)(1)(A)(vi).		•							
9				ceives: (1) more than 33									
				nctions - subject to certa	-	•	•				_		
				axable income (less sec	tion 511 ta	ex) from bu	sinesses	acquired b	y the orga	anization a	fter June 3	0, 1975.	
40			<b>509(a)(2).</b> (Complet	•				· · ·	4.				
10	H			perated exclusively to te									
11				perated exclusively for the						-	- ·		
				ations described in secti organization and compl				2). See <b>se</b>	ction 509(	(a)(3). Cne	CK the box	tnat	
		a Type		<del></del> '		e III - Func		tograted		4	Type III - C	Whor.	
е	$\Box$	• •		at the organization is not			-	-	r more die				
•				than one or more publicly									
f				tten determination from						J(4)(1) 01 3		(a)(z).	
			rganization, check t				po ., . , po	, , , ,				ſ	
g			_	organization accepted ar	ny gift or c	ontribution	from anv	of the foil	owina per	sons?			
				directly controls, either at			-					Yes N	lo
		the gove	erning body of the s	upported organization?						. ,	11g(i)		
		(ii) A family	member of a perso	n described in (i) above?						_	11g(ii)		
		(iii) A 35% d	controlled entity of a	a person described in (i) o	or (ii) abov	e <sup>?</sup>				-	11g(iii)		
h		Provide the f	ollowing information	about the supported or	ganızatıon	(s).							
			γ										
(i)	Name	of supported	(ii) EIN	(iii) Type of organization		organization			(vi) is organizati	s the	(vii) Am	nount of	
	orga	nization		(described on lines 1-9		sted in your document?		ion in col r support?	(i) organiz	ed in the	sup	port	
				above or IRC section		,			U S				
				(see instructions))	Yes	No	Yes	No	Yes	No			
		<del>,</del>			1								
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					ŀ								
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Tota	<u> </u>												

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

Schedule A (Form 990 or 990-EZ) 2009

932021 02-08-10

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not		İ				
ınclude any "unusual grants.")						
2 Tax revenues levied for the organ-					-	
ızatıon's benefit and either paid to						
or expended on its behalf						
3 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions						
by each person (other than a						
governmental unit or publicly						
supported organization) included			-			
on line 1 that exceeds 2% of the						
amount shown on line 11,						
column (f)			1			
6 Public support. Subtract line 5 from line 4						
Section B. Total Support				1		<b>.</b>
alendar year (or fiscal year beginning in)▶	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	<b>(e)</b> 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest,						
dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources						
9 Net income from unrelated business						
activities, whether or not the						
business is regularly carried on						
10 Other income. Do not include gain						
or loss from the sale of capital						
assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
2 Gross receipts from related activities,	etc. (see instructi	ons)			12	
3 First five years. If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth t	ax year as a sectio	on 501(c)(3)	_
organization, check this box and stop				···.		<u> </u>
Section C. Computation of Publi						
Public support percentage for 2009 (li	• • • • • • • • • • • • • • • • • • • •	•	column (t))		14	
Public support percentage from 2008	•	•			15	
6a 33 1/3% support test - 2009.If the or	-			14 is 33 1/3% or n	nore, check this bo	x and ⊾ Γ
stop here. The organization qualifies a		•		U 45 - 00 4 00		<b>-</b> L
<b>b 33 1/3% support test - 2008.</b> If the or	~		·	line 15 is 33 1/3%	or more, check th	ils box ► □
and stop here. The organization quali				10.1010!		
17a 10% -facts-and-circumstances test	-					
and if the organization meets the "fact			=	•	ιπ IV now the organ	nization ⊾ Г
meets the 'facts-and-circumstances'	-	•		-		<b>▶</b> L
b 10% -facts-and-circumstances test	-					
more, and if the organization meets th				•		e ⊾ Γ
organization meets the 'facts-and-circ		-	•			<b>₽</b> L ⊾Г
18 Private foundation. If the organization	i did not check a	box on line 13, 16	oa, 166, 1/a, or 17	o, check this box a	and see instruction	ıs ►L

Part III   Support Schedule for	r Organizations	Described in	Section 509(a	<b>)(2)</b> (Complete only	rf you checked the bo	ox on line 9 of Part 1)	
Section A. Public Support		_				r	
Calendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total	
1 Gifts, grants, contributions, and						:	
membership fees received. (Do not	;						
include any "unusual grants.")			ļ		<b>_</b>		
2 Gross receipts from admissions, merchandise sold or services per-							
formed, 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 bus-				1	i		
iness under section 513							
4 Tax revenues levied for the organ-	•		· · · · · · · · · · · · · · · · · · ·				
ization's benefit and either paid to							
or expended on its behalf							
5 The value of services or facilities					<u> </u>		
furnished by a governmental unit to	0						
the organization without charge			]				
6 Total. Add lines 1 through 5	-						
7a Amounts included on lines 1, 2, an	d						
3 received from disqualified persor							
<b>b</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)							
Section B. Total Support							
Calendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(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>b</b> Unrelated business taxable income		Ì	ł				
(less section 511 taxes) from business	as	İ					
acquired after June 30, 1975							
c Add lines 10a and 10b							
11 Net income from unrelated busines activities not included in line 10b, whether or not the business is	38						
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		's first second the	rd fourth or fifth t	ax vear as a secti	on 501(c)(3) organia	zation	
check this box and stop here	TOT THE OTGATIZATION	o mot, occoria, tin	14, 1001111, 01 111111 1	an your as a scott	on our (o)(o) organiz	<b>▶</b> □	
Section C. Computation of Pu	blic Support Pe	ercentage		<i>5.5.</i>			
15 Public support percentage for 200			column (fl)	-	15	%	
16 Public support percentage from 20					16	%	
Section D. Computation of Inv					1.5		
17 Investment income percentage for	-			· · · · · · · · · · · · · · · · · · ·	17	%	
18 Investment income percentage fro			110 10, 00,011111 (1),		18	<u>%</u>	
			on line 14, and line	e 15 is more than	<u> </u>		
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							
b 33 1/3% support tests - 2008. If t	=	- ,				and	
line 18 is not more than 33 1/3%, o	_					▶□	
20 Private foundation. If the organiza						<b>▶</b> □	
and the organization of garner			_, _, _,		hedule A (Form 99	0 or 990-EZ) 2009	

### Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions. OMB No 1545-0047 Open to Public Inspection

Name of the organization

BUDDHIST CHURCHES OF AMERICA

**Employer identification number** 94-2857583

Pa	rt I Organizations Maintaining Donor Advise		s or Accounts. Complete if the
L <u></u>	organization answered "Yes" to Form 990, Part IV, lir		of 7 to countries complete if the
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor adv	lead funds
3	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor	<del>-</del>	
U			•
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose	· — —
Pa	rt # Conservation Easements. Complete if the or	regarization answered 'Ves' to Form 990	Part IV line 7
			rativ, inte /.
1	Purpose(s) of conservation easements held by the organization	· — ' — ' · · · · · · · · · · · · · · ·	satamaalli, saaaastaat taad asaa
	Preservation of land for public use (e.g., recreation or	· · —	istorically important land area
	Protection of natural habitat	Preservation of a ce	rtified historic structure
_	Preservation of open space	and the same of th	
2	Complete lines 2a through 2d if the organization held a qual	ified conservation contribution in the form	n of a conservation easement on the last
	day of the tax year.		Hald all Production Washington
			Held at the End of the Tax Year
a	Total number of conservation easements		2a
ь	•		2b
c		<b>, ,</b>	2c
d			2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the	ne organization during the tax
_	year ▶		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe	- ',	
_	violations, and enforcement of the conservation easements		☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 17	······
	and section 170(h)(4)(B)(ii)?		☐ Yes ☐ No
9	In Part XIV, describe how the organization reports conserva	•	
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describes	s the organization's accounting for
	conservation easements		241 - 01 - 11 - 4
Pa	organizations Maintaining Collections		Janer Similar Assets.
	Complete if the organization answered "Yes" to Form	1 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116, no	-	
	treasures, or other similar assets held for public exhibition, e		ublic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these		
Ь	, ,		
	or other similar assets held for public exhibition, education,	or research in furtherance of public service	ce, provide the following amounts relating to
	these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financi	ial gaın, provide
	the following amounts required to be reported under SFAS	116 relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
b	Assets included in Form 990, Part X		<b>&gt;</b> \$

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2009

Sche	dule D (Form 990) 2009 BUDDHIS	r CHURCHES	OF AMERIC	A - ENDOWM	ENT 9	94-28	57583	Page 2
Par	t 祖 Organizations Maintaining C	ollections of Ar	t, Historical Tro	easures, or Oth	er Simila	r Asset	<b>ts</b> (contir	nued)
3	Using the organization's acquisition, accession	on, and other records	s, check any of the	following that are a	significant u	se of its	collection	items
	(check all that apply):							
а	Public exhibition	d	Loan or excl	nange programs				
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	llections and explain	how they further th	ne organization's ex	empt purpo	se in Part	XIV.	
5	During the year, did the organization solicit of	r receive donations o	of art, historical treas	sures, or other simil	ar assets		_	
	to be sold to raise funds rather than to be ma	untained as part of the	ne organization's co	llection?			Yes	No_
Par	<b>TIV</b> Escrow and Custodial Arran	- :	te if organization ar	swered "Yes" to Fo	rm 990, Pa	rt IV, line 9	9, or	
	reported an amount on Form 990, Par	t X, line 21.						
1a	Is the organization an agent, trustee, custodi	an or other intermed	iary for contribution	s or other assets no	ot included	_	_	
	on Form 990, Part X?						Yes	No
b	If "Yes," explain the arrangement in Part XIV	and complete the fol	lowing table:					
							Amount	
C	Beginning balance				1c			
d	Additions during the year				1d			
е	Distributions during the year				1e			
f	Ending balance				1f			
<b>2</b> a	Did the organization include an amount on Fo	orm 990, Part X, line	21?				Yes	No
	If "Yes," explain the arrangement in Part XIV.							
Par	t V Endowment Funds. Complete it	the organization and	swered "Yes" to Fo	rm 990, Part IV, line	10.			
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three y	ears back	(e) Four	years back
1a	Beginning of year balance	15,710,940.	20,267,516.					
b	Contributions	2331884.	2393532.		<u> </u>			
C	Net investment earnings, gains, and losses	2216738.	~3,920,037.					
d	Grants or scholarships	1185117.	2826416.		<u> </u>			
е	Other expenditures for facilities							
	and programs .	10,035.	20,368.		<u> </u>			<del></del>
f	Administrative expenses	230,348.	183,287.					······································
g	End of year balance	18,834,062.	15,710,940.		<u> </u>			
2	Provide the estimated percentage of the year		s:					
а	Board designated or quasi-endowment	8.28	_%					
b	Permanent endowment ► 70.03	%						
С	Term endowment ► 21.69	%						
За	Are there endowment funds not in the posse	ssion of the organiza	ation that are held a	nd administered for	the organiz	ation	_	
	by:							Yes No
	(i) unrelated organizations						3a(i)	<u>X</u>
	(ii) related organizations						3a(ii)	X
b	If "Yes" to 3a(II), are the related organizations	s listed as required o	n Schedule R?				3b	
4	Describe in Part XIV the intended uses of the							
Par	t VI Investments - Land, Building	s, and Equipme	ent. See Form 990	, Part X, line 10.				
	Description of investment	(a) Cost or of basis (investing	, , ,		Accumulate epreciation	d	(d) Book	value
	Lond	631,		(5.1,01)			631	1,300.
_	Land	031,		<del></del>			0.5	., 500 •
b	Buildings Leasehold improvements							<del></del>
C								
a -	Equipment .	-						<del></del>
	Other	gual Form 000 Part	Y column (R) line 1				631	1.300.

Schedule D (Form 990) 2009

<del></del>	Form 990, Part X, line 12.			
(a) Description of security or category (including name of security)	(b) Book value	• -	lethod of valuated ind-of-year mark	
inancial derivatives			<del>.</del>	· · · · · · · · · · · · · · · · · · ·
Closely-held equity interests				
Other	740 720	END OF VEAD	MADEE	VAT UE
JS GOVERNMENT OBLIGATIONS	749,730.	END-OF-YEAR		VALUE VALUE
COMMON STOCKS	7,997,077.	END-OF-YEAR END-OF-YEAR		VALUE
NUTUAL FUNDS	2,197,894. 1,088,389.	END-OF-YEAR		VALUE
CORPORATE BONDS		END-OF-YEAR		VALUE
INVESTMENT IN ANNUITY	60,000.	END-OL-1EAR	PARKET	VALIOE
CASH SURRENDER VALUE OF LIFE	40,000.	END-OF-YEAR	маркет	WALIE
INSURANCE	40,000.	END-OF-TEAK	PIARRET	VALIOE
Total. (Col (b) must equal Form 990, Part X, col (B) line 12 )	12,133,090.			
Part VIII Investments - Program Related. Se		3.	- 1	
(a) Description of investment type	(b) Book value	(c) N	lethod of valua	
(a) Description of investment type		Cost or e	end-of-year mar	ket value
·				
Fotal. (Col (b) must equal Form 990, Part X, col (B) line 13 ) ▶				
Part IX Other Assets. See Form 990, Part X, line				#ND 1
(a) [	Description			(b) Book value
		· · · · · ·		
		<del></del>		
				***
Total. (Column (b) must equal Form 990, Part X, col (B) line	15.)		. ▶	
Part X Other Liabilities. See Form 990, Part X, I			-	
1. (a) Description of liability		(b) Amount		
Federal Income taxes				
AGENCY FUNDS		1,453,939.		
		1		

<sup>2.</sup> FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48. 932053 02-01-10

Schedu	ule D (Form 990) 2009 BUDDHIST CHURCHES OF AMERIC	:A –	ENDOW	MENT	94-	2857583	Page 4
Part	XI Reconciliation of Change in Net Assets from Form 990 to	Audite	ed Finance	cial State	emen		
1 T	otal revenue (Form 990, Part VIII, column (A), line 12)			1		1,831	,823.
	otal expenses (Form 990, Part IX, column (A), line 25)			2		1,527	,673.
	excess or (deficit) for the year. Subtract line 2 from line 1			3	•		,150.
	let unrealized gains (losses) on investments			4		2,818	
	Onated services and use of facilities			5			
	nvestment expenses	•		6			
	•	-		7		<del>- a</del>	
	Prior period adjustments						
	Other (Describe in Part XIV.)			8		2,818	072
	otal adjustments (net). Add lines 4 through 8			9		3,123	122
	excess or (deficit) for the year per audited financial statements. Combine lines 3 and		th Dave	10			122.
	XII Reconciliation of Revenue per Audited Financial Statemer	nts w	tn Kever	iue per r		1 4 5 2 0	F 0.7
	otal revenue, gains, and other support per audited financial statements				1	4,538	,587.
2 A	mounts included on line 1 but not on Form 990, Part VIII, line 12:						
a N	let unrealized gains on investments	2a	2,81	8,972.	4 1		
b D	Oonated services and use of facilities	2b					
c F	Recoveries of prior year grants	2c					
d C	Other (Describe in Part XIV.)	2d					
e A	add lines 2a through 2d				2e	2,818 1,719	,972.
<b>3</b> S	Subtract line 2e from line 1				3	1,719	,615.
4 A	mounts included on Form 990, Part VIII, line 12, but not on line 1:						
	nvestment expenses not included on Form 990, Part VIII, line 7b	4a	10	2,173.			
	Other (Describe in Part XIV.)	4b	1	0,035.	,		
	Add lines 4a and 4b			•	4c	112	,208.
	otal revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	-			5	1,831	
Part	XIII Reconciliation of Expenses per Audited Financial Stateme	nts W	/ith Expe	nses ner			, 0201
		,,,,,		po.	1.010	1,415	465
	otal expenses and losses per audited financial statements	• •		••	<b>!</b>	1,113	, 103.
	Amounts included on line 1 but not on Form 990, Part IX, line 25:	0-					
	Onated services and use of facilities	2a			-		
	Prior year adjustments	2b			-		
	Other losses .	2c	·	· · · · · · · · · · · · · · · · · · ·	4		
	Other (Describe in Part XIV.)	2d			┨		^
e A	Add lines 2a through 2d			••	2e	1 415	465
	Subtract line 2e from line 1			-	3	1,415	,465.
4 A	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1	1.0				
	nvestment expenses not included on Form 990, Part VIII, line 7b	4a		2,173.			
<b>b</b> 0	Other (Describe in Part XIV.)	4b	1	0,035.	<u>.</u>		
c A	Add lines 4a and 4b				4c		,208.
5 T	otal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)				5	1,527	<u>,673.</u>
Part	XIV Supplemental Information						
Comple	ete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III,	, lines 1	a and 4; Pa	rt IV, lines 1	b and	2b; Part V, line	4; Part
X, line 2	2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also compl	lete this	part to pro	vide any ad	iditiona	information.	
	T V, LINE 4: THE ENDOWMENT FUND IS INTENDE						
CHA	IRS, SCHOLARSHIPS, AND OTHER EDUCATIONAL P	ROG	RAMS T	HAT SU	JPPO	RT JODO	
SHI	NSHU MINISTERS SPONSORED AND ORGANIZED BY	BUD	DHIST	CHURCH	IES	OF AMER	ICA.
PART	T XII, LINE 4B - OTHER ADJUSTMENTS:						
DIO	יים מבתונדגאים בומגדשת אם מארזיים מחדום מודום מחדום מחדום מחדום מודום מודום מחדום מחדום מחדום מחדום מחדום מחדום מחדום מחדום מח	יהדאהונ	העעד אים	TEC. 1	เกกร	5	
חדפ.	FRIBUTIONS TO CHARTIABLE REMAINDER TRUST E	) CIVE	LICIAN	TEO:	1003	<i>.</i>	
חסעם	r XIII, LINE 4B - OTHER ADJUSTMENTS:						
<u> 1 VV </u>	ATTI, HIGH 4D OTHER ADOUGHERID.				Schee	dule D (Form 9	90) 2009

Schedule D (Form 990) 200 Part XIV Supplement	<sub>9</sub> ntal l	BUDDHIS!	CHURCHES	OF AMI	ERICA -	ENDOWMEN	IT94-2857583	Page 5
DISTRIBUTIONS				TRUST	BENEFI	CIARIES:	10035.	
	-							
							,	
	-							
						·		
1								·
							<del></del>	
								<del></del>
						<u>.                                    </u>		

Schedule I (Form 990) 2009 **Employer identification number** Š 94-2857583 Open to Public OMB No 1545-0047 Inspection (h) Purpose of grant or assistance X Yes 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

(d) Method of recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed

(d) Description of realization of received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed

(d) Description of received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed

(d) Description of received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed

(d) Description of received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed

(d) Description of received more approached more a 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 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 KEW BUILDING AND VARIOUS PROGRAMS FROM CHARITABLE FROM CHARITABLE ALLOCATION FOR ALLOCATION FOR DISTRIBUTION DISTRIBUTION PROFESSORAL REMAINDER REMAINDER NITRUST NITRUST CHAIRS Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ö ö ö ö Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ▶ Attach to Form 990. ENDOWMENT 4,718 195,000 990,117 5,317 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. ı AMERICA Enter total number of section 501(c)(3) and government organizations 503(C)3 503(C)3 OF. BUDDHIST CHURCHES 94-1700607 94-1498382 93-6262039 94-6651309 General Information on Grants and Assistance criteria used to award the grants or assistance? Enter total number of other organizations 1 (a) Name and address of organization TANINO 1992 CHARITABLE REMAINDER INSTITUTE FOR BUDDHIST STUDIES KAZUO/BETTY FURUSHO CHARITABLE BUDDHIST CHURCHES OF AMERICA SAN FRANCISCO, CA 94109 Name of the organization REMAINDER UNITRUST BERKELEY, CA 94704 2140 DURANT AVE. 1710 OCTAVIA ST. Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) UNITRUST Part Part II

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. BUDDHIST CHURCHES OF AMERICA - ENDOWMENT Schedule I (Form 990) 2009 Part III

94-2857583

Page 2

1.

(f) Description of non-cash assistance (book, FMV, appraisal, other) Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. AS FINANCIAL SUPPORTS TO ITS RELATED ENTITIES. THESE RELATED ENTITIES ARE THE ENDOWMENT FOUNDATION PROVIDES GRANTS (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients 2: (a) Type of grant or assistance LINE PART I, ĭ SCHEDULE Part IV

ZI

THAT JODO SHINSHU BUDDHISM

THESE FUNDS TOWARD ACTIVITIES

TO USE

REQUIRED

AMERICA.

932102 02-02-10

#### SCHEDULE M (Form 990)

# **Noncash Contributions**

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990.

Employer identification number 94-2857583

Schedule M (Form 990) 2009

	BUDDHIST CHU	RCHES	OF AMERIC	A - ENDOWMENT	94-2	857	583	
Pa								
		(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of de revent	etermın	Ing	
1	Art - Works of art							
2	Art - Historical treasures					-		
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes					•		
8	Intellectual property							
9	Securities - Publicly traded	X	13	53,758.	GROSS PROCE	EEDS	-	
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate · Commercial							
17	Real estate · Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()							
28	Other (	<u> </u>	<u> </u>					
29	Number of Forms 8283 received by the organi	ızatıon durin	g the tax year for o	contributions				
	for which the organization completed Form 82	83, Part IV,	Donee Acknowled	gment 29				
							Yes	No
30a	During the year, did the organization receive b	-						
	at least three years from the date of the initial	contribution	, and which is not	required to be used for exer	npt purposes for			
	the entire holding period?					30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that r	equires the review	of any non-standard contrib	outions?	31	X	
32a	Does the organization hire or use third parties	or related or	rganızatıons to solı	cit, process, or sell noncash	l			
	contributions?		-			32a		X
b	If "Yes," describe in Part II							
33	If the organization did not report revenues in o	column (c) fo	r a type of propert	y for which column (a) is che	ecked,			
	describe in Part II.							

LHA

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

# **SCHEDULE O**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Information to Form 990**

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

BUDDHIST CHURCHES OF AMERICA - ENDOWMENT

Employer identification number 94-2857583

BOBBIIDI ONORONED OI IZIERRIORI ELIBORIORI ELIBORIORI
FORM 990, PART VI, SECTION B, LINE 11: FORM 990 AND RELATED FILINGS ARE
MADE AVAILABLE TO THE BOARD OF DIRECTORS BEFORE THE FILING DUE DATE. ANY
QUESTIONS OR COMMENTS ABOUT THE TAX RETURNS ARE RAISED BY THE BOARD MEMBERS
AT BOARD MEETINGS. FORM 990 IS FILED WHEN ALL DIRECTORS AGREE ON THE
INFORMATION REPORTED ON TAX RETURNS.
FORM 990, PART VI, SECTION B, LINE 12C: SEE STATEMENT (C)
FORM 990, PART VI, SECTION B, LINE 15: SEE STATEMENT (D)
FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS, CONFLICT OF
INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON
REQUEST. AN ANNUAL REPORT THAT INCLUDES ALL OF THE MENTIONED DOCUMENTS IS
COMPILED AT THE END OF THE YEAR. THIS ANNUAL REPORT IS DISTRIBUTED TO ALL
THE CHURCHES AND BUDDHIST CHURCHES OF AMERICA RELATED ENTITIES.
ANY INDIVIDUAL WHO WOULD LIKE TO GET A COPY CAN CONTACT THE BOARD OF
DIRECTORS AND WILL BE ABLE TO OBTAIN A COPY OF THE ANNUAL REPORT.
THE ORGANIZATION DID NOT CHANGE EITHER ITS OVERSIGHT PROCESS OR
SELECTION PROCESS OF ITS INDEPENDENT ACCOUNTANT.
THE BOARD OF DIRECTORS IS RESPONSIBLE FOR OVERSIGHT OF THE AUDIT,
REVIEW, OR COMPLIATION OF THE FINANCIAL STATEMENTS AND SELECTION OF AN
INDEPENDENT ACCOUNT. THIS PROCESS HAS BEEN CONSISTENT FROM PRIOR YEARS.

27

#### BCA Endowment Foundation Board of Directors (List updated on Feb 01, 2010 - PKL)

Mr. Charles Ozaki (4)\*
BCAEF Board President
1131 Sunset Drive
Broomfield, CO 80020
(H) Phone: (303) 465-9121
(H) Fax: (303) 404-9288
(W) Phone: (303) 438-6300
chasoza@aol.com

Mr. Michael Jones (2)
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(H) Phone: (408) 446-9944
(Cell) (408) 930-7886
michael.f.jones@sbcglobal.net

Mr. Ralph Sugimoto (4)
Interim Treasurer
19 Southlite Circle
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(W) Phone: (916) 929-1006
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RSugimoto@TPBS.com

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Assistant Treasurer
6215 Meridian Avenue
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(H) Phone: (408) 268-5043
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tomn@cheerful.com

Mr. Roger Suekama (1)
Board Secretary
1105 N. Northwest Highway
Park Ridge, IL 60068
(H) (847) 825-4635
(W) (630) 783-8900, ext. 8248
RSuekama@samuelstrapping.com
(W) Fax (630) 783-8901

#### **BCAEF Board Directors**:

James Aoki (4) 1229 Oak Street Ogden, UT 84401 (H) (621-1052 Cell ( (801) 920-3576 james.aoki@ampf.com

Dr. Daryl Doi (1) 5152 W. Spruce Avenue Fresno, CA 93722-3463 (H) (559) 271-1517 Cell (559) 360-4598 ddoidesu@yahoo.com

Mr. Jeff Folick (1) 13601 Belle Rive Santa Ana, CA 92705 (H) Phone: (714) 573-9774 jfolick@aol.com Ms. Pauline K. Sakuma (2) 2111 Westlake Ave. North, # 402 Seattle, WA 98109 (H) (206) 282-6389 Sakufuji7@comcast.net

Mr. Koichi Sayano (3) 2004 San Antonio Drive Montebello, CA 90640 (H) (323) 722-8337 (W) (310) 642-7975, ext. 206 KSayano@earthlink.net

Mrs. Sumiye Tanabe (2) 6498 Bibel Avenue San Jose, CA 95129 (H) (408) 253-6191 atanabe@hotmail.com

Mr. Ken Tanimoto (3) 3728 Valera Drive Soquel, CA 95073 (H) Phone: (831) 476-4175 (W) Phone: (831) 688-2105 mojaybo98@gmail.com

Mr. David Unruhe (3) 12565 Crimson Court Auburn, CA 95603 (530) 888-9266 cell (530) 906-5448 davicki@wizwire.com

Rev. Haruo Seigen Yamaoka (3) 14981 Portofino Circle San Leandro, CA 94578 (H) Phone: (510) 351-2052 saeemi@aol.com cell (510) 209-3581

Kevin G. Yoshida (4) 2870 Timberchase Trail Highland Ranch, CO 80126 (W) (303) 738-0300 Kevin\_Yoshida@watershedinvest.com

#### **BCAEF Board Advisors:**

Mr. Noboru Hanyu (Retired EF Treasurer) 1450 Post Street, # 401 San Francisco, CA 94109-6500 (H) Phone/Fax (415) 345-8050 (Cell) (415) 385-3074

Mr. Hiroji Kariya (Retired IBS Chair) 205 Kittoe Drive Mountain View, CA 94043 (H) Phone: (650) 968-0104 (H) Fax: (650) 968-9529 Hiro YasKar@aol.com

Note: (x) number of years left in term as Board Director.

#### **STATEMENT B**

Mr. Tom Ynki, *IBS Chair* P.O. Box 567 Los Gatos, CA 95030 (W) (408) 356-1478

#### BCA Ministers' Association Appointee:

Rev. David Ryoe Matsumoto, Director Center for Contemp. Shin Buddhist Studies drmatsumoto@shin-ibs.edu

#### **BCAEF Board Ex-Officio Members:**

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Chair, BCA Ministers' Association
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BCA President
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BCA Endowment Foundation 1710 Octavia Street, 3rd Floor San Francisco, CA 94109-4341 Phone: (415) 776-5068 Fax: (415) 776-5065

PhungKim Le

BCAEF Executive Director

PhungKLe@aol.com

Hiroko Yamaoka Assistant to EF Treasurer/ Bookkeeper

# **STATEMENT C**

# CONFLICT OF INTEREST POLICY FOR BCA ENDOWMENT FOUNDATION

The Board of Directors of the BCA Endowment Foundation hereinafter referred to as "BCAEF" has the responsibility of administering the affairs of the BCAEF honestly and economically and, of exercising their best care, skill, and judgment to carry out the mission of BCAEF. Therefore, it is imperative that those individuals who, by virtue of their positions, can influence the actions of or commit BCAEF or its related agencies in financial and confidential dealings be ever mindful of potential conflicts between the duties imposed by their position and their other interests.

The purpose of this statement is to clarify the duties and obligations required by the Board of Directors, Officers of the Foundation, Executive Director, among others, in the context of the conflict of interest problem. With respect to actual or potential conflicts of interest, this statement sets forth the procedure by which such conflicts must be disclosed and establishes the policy concerning resolution of such conflicts that arise within the provisions of the policy.

I,

#### Persons concerned.

This statement is directed to the Board of Directors, Officers, Executive Director and employees of the BCAEF. These persons are referred to herein as "individuals".

II.

#### Areas in Which Conflict May Arise.

Conflicts of interest may arise in relations with entities which may affect the financial or other activities of BCAEF including by way of example:

- 1. Suppliers of goods and services;
- 2. Entities with which BCAEF is dealing or plans to deal in connection with the lease, purchase or sale of real or personal property;
- 3. Donors or other persons giving to BCAEF;
- 4. Other entities which affect the operation of BCAEF.

III.

#### Nature of Conflicting Interest

If any individual's relations with the persons, firms or entities mentioned above exist, a material conflict of interest may be defined as an interest which may affect, or may be thought by others to affect, the judgment or conduct of the individual, such as but not limited to:

- 1. Owning stock or other proprietary interest;
- 2. Holding debt or debt securities;
- 3. Holding office, serving on the Board of Directors, participating in management or being otherwise employed or formally employed;
- 4. Receiving remuneration for services with respect to individual transactions;
- Receiving gifts or unsecured loans. (Receipt of any gift is disapproved except gifts of nominal value which would be courteously refused. No gifts of money should ever be accepted);
- 6. Obtaining an interest in real estate securities or other property which BCAEF is considering buying or leasing; and
- 7. Disclosing or using information relating to BCAEF's operations for the personal profit or advantage of the individual.

IV.

#### Other Interests.

An individual would also be considered to have an interest in a firm or transaction which may affect the operation of BCAEF with respect to influencing the actions of or committing BCAEF in financial other dealings where any of the following may have an interest:

- 1. The immediate family of the individual;
- 2. The estate or trust of which the individual or member of the individual's family is a beneficiary, personal representative or trustee; or
- 3. A company of which a member of the family of the individual is an officer, director or employee in which the family member has a stock interest or other proprietary interest.

V.

# Interpretation of the Statement of Policy

The areas of conflicting interest listed in Section II, the nature of the conflicting interests listed in Section III, and other interest relationships listed in Section IV are not offered as exhaustive expositions. It is conceivable that conflicts may arise in other areas or through other activities or through other relations. The individual is responsible for recognizing such areas, activities, and relations by analogy. The fact that one of the interests described in Section III exists does not mean necessarily that a conflict exists or that conflict, if it exists is material enough to be of financial importance. However, it is the policy of BCAEF's Board of Directors that the existence of any interest such as are described in Sections III and IV shall be disclosed and that the authorization of the Board of Directors shall be required before any transactions involving an interest as described in Sections III or IV is consummated. It shall be a continuing responsibility of recipients of this statement to scrutinize their activities and transactions for potential conflicts and make appropriate disclosures.

## STATEMENT D

# Policy on the Process for Determining Compensation

This <u>Policy on the Process for Determining Compensation</u> of the BCA Endowment Foundation (BCAEF) applies to the compensation of the following persons employed by the Organization:
The Organization's chief employed executive (CHECK IF APPLICABLE) Other Officers or Key Employees of the Organization by title:
BCAEF is a voluntary organization with only paid staff members and does not have paid officers.

<sup>&</sup>lt;sup>1</sup> Chief employed executive – The CEO (i.e., chief Executive Officer), executive director, or top management official (i.e., a person who has ultimate responsibility for implementing the decisions of the Organization's governing body or for supervising the management, administration, or operations of the Organization).

<sup>&</sup>lt;sup>2</sup> Officer — A person elected or appointed to manage the Organization's daily operations, such as a president, vice-president, secretary or treasurer. The officers of the Organization are determined by reference to its organizing document, bylaws, or resolutions of its governing body, or as otherwise designated consistent with state law, but at a minimum include those officers required by applicable state law. Include as officers the Organization's top management official and top financial official (the person who has ultimate responsibility for managing the Organization's finances).

<sup>&</sup>lt;sup>3</sup> Key Employee – An employee of the Organization who meets all three of the following tests: (a) \$150,000 Test: receives reportable compensation from the Organization and all related organizations in excess of \$150,000 for the year; (b) Responsibility Test: the employee: (i) has responsibility, powers, or influence over the Organization as a whole that is similar to those of officers, directors, or trustees; (ii) manages a discrete segment or activity of the Organization that represents 10% or more of the activities, assets, income, or expenses of the Organization, as compared to the Organization as a whole; or (iii) has or shares authority to control or determine 10% or more of the Organization's capital expenditures, operating budget, or compensation for employees; and (c) Top 20 Test: is one of the 20 employees (that satisfy the \$150,000 Test and Responsibility Test) with the highest reportable compensation from the Organization and related organizations for the year.

SCHEDULER

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

SCHEDULE R	ULER		Related Organizations	Related Organizations and Unrelated Partnerships			
(Form 990)	(06)	■ Comple	► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.	es" to Form 990, Part IV, line 3	3, 34, 35, 36, or 37.		SOOZ
Departmer Internal Re	Department of the Treasury internal Revenue Service		► Attach to Form 990.	► See separate instructions.	ns.		Inspection
Name o	Name of the organization	tion BUDDHIST CHURCHES OF	HES OF AMERICA - ENDOWMENT	DOWMENT		Em	Employer identification number 94-2857583
Parti	Identification	on of Disregarded Entities (Complete		o Form 990, Part IV, line 33.)			
		(a)	(q)	(c)	(p)	(0)	<b>(</b> )
	Nam of c	Name, address, and EIN of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controlling entity
N/A					0.	0.	
	•						
						r	
			-				
Part ≝		Identification of Related Tax-Exempt Organizations (Complete organizations during the tax year.)		if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt	t IV, line 34 because	e it had one or more i	elated tax-exempt

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (f section 501(c)(3))	(f) Direct controlling entity
BUDDHIST CHURCHES OF AMERICA - 94-1498382 1710 OCTAVIA ST. SAN FRANCISCO, CA 94109	HEADQUARTER FOR JODO SHINSHU CHURCHES	CALIFORNIA	503(C)3	4d	N/A
INSTITUTE OF BUDDHIST STUDIES - 94-1700607 2140 DURANT AVE, BERKELEY, CA 94704	HIGHER EDUCATIONAL STUDIES CALIFORNIA	CALIFORNIA	503(C)3	PF	W/A

LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 990.

932161 02-04-10

Schedule R (Form 990) 2009

94-2857583

Page 2

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Schedule R (Form 990) 2009 BUDDHIST CHURCHES OF AMERICA - ENDOWMENT

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

Part III

	(a)	(q)	(0)	(p)	(e)	€	(6)	3	8	5
2 -	Name, address, and EIN of related organization	Primary activity	omiclie a or gn	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total Income	Share of end-of-year assets	Disproportion- ate allocations?	Code V-UBI amount in box 20 of Schedule	
			country)		sections 512-514)			Yes No	K-1 (Form 1065)	Yes No
N/A						0.	0	×	N/A	×
								-		
										_
Part IV	Part 1V Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	anizations Taxable as a Co	orporation or ax year.)	Trust (Complete if t	he organization answere	d "Yes" to Form 99	0, Part IV, line 34	because it	had one or more r	elated

	, , , , , , , , , , , , , , , , , , , ,						
(a)	(q)	(3)	(D)	(G	E	(6)	ε
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership
RAZUO/BETTY FURUSHO CHARITABLE REMAINDER UNITRUST -							
94-6651309	MANAGEMENT	CA		TRUST	-5,355.	65,891.	100.00%
					i		
TANINO 1992 CHARITABLE REMAINDER UNITRUST -							
93-6262039	MANAGEMENT	WA	,	TRUST	-4,779.	63,086.	100.00%
		:					

Schedule R (Form 990) 2009

1,

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.) Schedule R (Form 990) 2009 BUDDHIST CHURCHES OF AMERICA - ENDOWMENT

		ļ.,
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. 1 Durno the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		Les No
		1a X
<ul> <li>b clift, grant, or capital contribution from other organization(s)</li> <li>c Gift, grant, or capital contribution from other organization(s)</li> </ul>		+
d Loans or loan guarantees to or for other organization(s)		1d X
e Loans or loan guarantees by other organization(s)		1e X
f Sala of assats to other organization(s)		1+ X
g Purchase of assets from other organization(s)		X gt
h Exchange of assets	•	
i Lease of facilities, equipment, or other assets to other organization(s)		;= ×
j Lease of facilities, equipment, or other assets from other organization(s)	:	1 <sub>1</sub> X
k Performance of services or membership or fundraising solicitations for other organization(s)		¥ = ×
m Sharing of facilities, equipment, mailing lists, or other assets		
n Sharing of paid employees		d d
Reimbursement paid to other organization for expenses     Reimbursement paid to other organization for expenses		ot 1
<ul> <li>q Other transfer of cash or property to other organization(s)</li> <li>r Other transfer of cash or property from other organization(s)</li> </ul>		19 X
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	ansaction thresholds	
(a) Name of other organization(s)	(b) Transaction type (a-r)	(c) Amount involved
(1) BUDDHIST CHURCHES OF AMERICA - HEADQUARTERS	В	238,880.
(2) INSTITUTE OF BUDDHIST STUDIES	В	195,000.
(3) BUDDHIST CHURCHES OF AMERICA - HEADQUARTERS	Q	3,500,000.
(9)		
(9)		
932163 02-04-10	Sch	Schedule R (Form 990) 2009

**:** "

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue)

that was not a related organization. See instructions regarding exclusion for certain investment partnerships.	ision for certain investment partners	ships.					
(e)	(q)	(2)	9	(0)	E	(6)	(F)
Name, address, and EIN	Primary activity	Legal domicile	Are all partners section 501(c)(3)	Share of end-of-	Dispropor- tionate	Code V-UBI amount in box 20	General or managing
כן פונוגל			Yes No	ליכם משפע	Yes No	of Schedule K-1 (Form 1065)	1 1
			_				
							·
					-		

Schedule R (Form 990) 2009

• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box    Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.   Part II	Form 8868	3 (Rev 4-2009)	<u></u>			Page 2				
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).    Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).    Name of Exempt Organization	• If you a	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check t	his box			ightharpoons				
Part   Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).	Note. On	ly complete Part II if you have already been granted an automatic 3-month extension on a previously	filed Fo	rm 88	68.					
Name of Exempt Organization  BUDDHIST CHURCHES OF AMERICA — ENDOWMENT  BUDDHIST CHURCHES OF AMERICA — ENDOWMENT  Portion  BUDDHIST CHURCHES OF AMERICA — ENDOWMENT  Portion  BUDDHIST CHURCHES OF AMERICA — ENDOWMENT  Portion  Budder of the statement of the state	• If you a	are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).								
Type or BUDDHIST CHURCHES OF AMERICA — ENDOWMENT    Subdition   S	Part # Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).									
SUDDHIST CHURCHES OF AMERICA	Type or	Name of Exempt Organization	E	mploy	er identificat	ion number				
Number, street, and room or suite no. If a P.O. box, see instructions.    To OCTAVIA STREET   City, town or post office, state, and ZIP code. For a foreign address, see instructions.   SAN FRANCISCO, CA 94109   Check type of return to be filed (File a separate application for each return):   XI Form 990	-	BUDDHIST CHURCHES OF AMERICA - ENDOWMENT		94-	-285758	3				
City, town or post office, state, and ZIP code. For a foreign address, see instructions.    SAN FRANCISCO, CA 94109	extended due date for		F	or IRS	use only					
X   Form 990	return See			••••						
PHUNG KIM LE  The books are in the care of ▶ 1710 OCTAVIA STREET, SAN FRANCISCO, CA − 94109  Telephone No.▶ (415)776-5600 FAX No.▶  If the organization does not have an office or place of business in the United States, check this box	X Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A Form 5227 Form 8870									
The books are in the care of ► 1710 OCTAVIA STREET, SAN FRANCISCO, CA − 94109  Telephone No. ► (415) 776-5600  If the organization does not have an office or place of business in the United States, check this box  If this is for a Group Return, enter the organization's four digit group Exemption Number (GEN) If this is for the whole group, check this box  If it is for part of the group, check this box  A lirequest an additional 3-month extension of time until NOVEMBER 15, 2010.  For calendar year 2009, or other tax year beginning and ending and ending and ending  If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period  State in detail why you need the extension THE ORGANIZATION HAS NOT COMPLETED AN ANNUAL FINANCIAL AUDIT	STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.									
THE ORGANIZATION HAS NOT COMPLETED AN ANNUAL FINANCIAL AUDIT.  WE RESPECTFULLY REQUEST ADDITIONAL TIME TO FILE THE TAX RETURN.  8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.  8 If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868  8 S  C Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.  Signature and Verification  Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form	<ul> <li>The books are in the care of ▶ 1710 OCTAVIA STREET, SAN FRANCISCO, CA - 94109         Telephone No. ▶ (415) 776-5600</li></ul>									
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.  8a \$  b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868  c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.  Signature and Verification  Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form	7 Sta	State in detail why you need the extension THE ORGANIZATION HAS NOT COMPLETED AN ANNUAL FINANCIAL AUDIT.								
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tax payments made Include any prior year overpayment allowed as a credit and any amount paid  previously with Form 8868  Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.  Signature and Verification  Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form		••	1	3a   9	\$					
previously with Form 8868  c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.  Signature and Verification  Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form	b If th	nis application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated								
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 8c \$ N/A Signature and Verification  Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form	tax	payments made Include any prior year overpayment allowed as a credit and any amount paid	ļ							
with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 8c \$ N/A  Signature and Verification  Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form	pre	eviously with Form 8868		3ь :	\$					
Signature and Verification  Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form	c Ba	lance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposi	t							
Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form	wit	h FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instruc	tions.	3c	\$	N/A				
It is true, correct, and complete, and that I am authorized to prepare this form	Signature and Verification									
Signature ▶ Title ▶ Date ▶										
	Signature	► Tritle ►		Date 🕨	<u> </u>					

Form 8868 (Rev 4-2009)