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Form 990

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)

OMB No 1545-0047

EEA

Form 990 (2010)

2010

Open to Public

			he Treasury e Service	▶ The	organization	n may have to us	se a copy of this r	eturn to	satisfy state rep	orting requiremen	nts	Consequently and the second
		_		lar year, or tax					, 2010, and e			, 20
				C Name of organ			PREACHING .	ASSOCI			П _{р. г}	Employer identification no.
1		-	oplicable									L-1695254
l f	===	Idress cl	-	Doing Business		of mail is not deliver	ad to etraet address)	<u> </u>		Room/suite	F	Felephone number
l I	=	me cha	-		WELLER :		ed to street address;			Roomsaile	۱۲ '	releptions number
!	=	tial retun										92,529
1	Ħ	minate		-	ate or country, a						ر ا	Gross receipts \$
	=	nended			·	al officer KUN	LIN CHEN					Gross receipts 4
,		plication	n pending			T, Seattle,				H(a) Is this a greatfiliates?	oup return f	for Yes X No
			nt status V	501(c)(3)	501(c) ()	(insert no)	4947(a)(1) or	527		H(b) Are all affil		
			pt status <u> X</u> ▶ N/A] 50 1(c)(3)	301(0)((iliseitilo)		JZ1		If "No," atta H(c) Group exe	ach a list (s	see instructions)
			·	Corporation	Trust Asso	ciation Other	>		ear of formation	<u> </u>	of legal do	***
	Par		ganization	1	Tidat Asso	ClaudiiOtrici	<u>-</u>	12,	ear or formation	111 01110	or rogar do	
		1	Summar Briefly descr	y	ration's miss	ion or most sign	ificant activities	RELIG	IOUS SERVIC	E		
		'	Drieny deser	ibo ino organia								
	A C G											
	c G t o						·					
	i v V e	2	Check this b	ox I if the	organization	discontinued its	operations or dis	sposed o	f more than 25%	of its net assets	;	
	i r						VI, line 1a) • •				3	O
	ia						ng body (Part VI,				4	0
	e n s c						2010 (Part V, line				5	
	e										6	<u>_</u>
l I	&											C
i I							n (C), line 12 · ·				7a	
İ		b	Net unrelate	d business tax	able income	from Form 990-	T, line 34 • • • •				7b	-
	R	1				44.5			}-	Prior Year	927	Current Year
i	e						• • • • • • • • •			102	,827	92,498
1	e e											21
ı	n	10					d 7d) • • • • •				83	31
	e	11					, 10c, and 11e) •					00.500
		12					t VIII, column (A),			102	,910	92,529
		13					ines 1-3) • • • •		• • • • • • •		-	
	E	14					ne <u>4) · · · · · · · · · · · · · · · · · · ·</u>		<u></u>	. <u>. </u>		
	x	15					IX, column AF	neb-9 🐶	<u>にひ・・・・</u> ・ - -			
	р e					column (A), line						(
400	n					lumn (D), line 2		10	2011		, ,	
2	è	17	Other exper	nses (Part IX, c	olumn (A), iı	nes 11a-11d, 11	f-24f	, . j . % .i	^{€.™} ''`•• } £ £} _		,504	70,931
6	S	18	Total expen	ses Add lines	: 13-17 (mus	t equal Part IX, o	column (A), line 2	5)	Dior of the last		,504	70,931
<i>⊗</i>		19	Revenue les	ss expenses	Subtract line	18 from line 12	·· · · · OG!)EN	الننالان	31	,406	21,598
	Net				•		The Contract of Co			Beginning of Current		End of Year
\equiv	Assets or	20	Total assets	s (Part X, line 1	6) • • • •				• • • • • • •	748	,770	760,121
	Fund	21	Total liabiliti	ies (Part X, line	26) • • •				• • • • • • • •		,464	308,217
SCANNED	Bal- ances	22	Net assets	or fund balance	es Subtract	line 21 from line	20		• • • • • • •	430	,306	451,904
Ż	Pai	am.	Signatu	ıre Block			-					
Z	Under	nenaltie	s of penury 1 de	clare that I have ex	amined this retu	m, including accomp	anying schedules and s s based on all informat	statements,	and to the best of m	y knowledge		
2	and be	elief, it is	true, correct, an	d complete Lieciar	auon or preparer	(other than officer) i	s based on an informat	1011 OI WING	i preparer nas any ki	lowledge		
Ñ					\supset \langle						7	15/11
,	Sigi	n	Signatu	ure of officer							Date	
ı	Her		KUN	LIN CHEN,	BOARD OF	F DIRECTOR						
		-		r pnnt name and titl								
			Print/Type n	reparer's name		Preparer's signature	e		Date	Check	ıf PTI	
	Paid	4	ALICE			A. 1	•	lo	7-13-2011	self-employ	red P	01060847
		u parei			SHEN AND	COMPANY P	3	I			H1614	
		Only				ELLER ST NO						3-0078
ı	USE	· Only	y Fillis addre			WA 98104						
	Mav	the IR	S discuss the	is return with th			ee instructions)				• • • •	· · Yes X No
1							,		_			

For Paperwork Reduction Act Notice, see the separate instructions.

, Form	990 (2010) WORLD BUDDHIST PREACHING ASSOCIATIO	91-1695254	Page 2
Par	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III		
1	Briefly describe the organization's mission		
-	RELIGIOUS SERVICE		
	NEEDGOOD DERVICE	·	
		-	
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	· · · · · · · · Yes	X No
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		_ .
	services?	· · · · · · [] Yes	X No
	If "Yes," describe these changes on Schedule O		
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expe		
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of g	grants and	
	allocations to others, the total expenses, and revenue, if any, for each program service reported		
4a	(Code) (Expenses \$53,569 including grants of \$) (Rever	nue \$)
	RELIGIOUS SERVICE	· · · · ·	
		·	
4b	(Code) (Expenses \$ including grants of \$) (Rever	nue \$)
			,
			-
4c	(Code) (Expenses \$ including grants of \$) (Rever	nue \$)
			
		• • •	
			
			<u> </u>
	Other program services (Describe in Schedule O)		
4d	(Expenses \$ including grants of \$) (Revenue \$)	
4-	E2 EC0	· · · · · · · · · · · · · · · · · · ·	
4e	Total program service expenses F		

Part M. **Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," X Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions) 2 2 Х Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 candidates for public office? If "Yes," complete Schedule C, Part I 3 X Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II Х Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, 5 or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Х 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," Х 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 Х Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Х Did the organization, directly or through a related organization, hold assets in term, permanent, or 10 X If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete 11a b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b Х c 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 11c X d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Х Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a Х b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional • • • • • • • • • • • 12b X Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E X 13 13 X Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, 14b business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any 15 organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV 15 Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance 16 16 X Did the organization report a total of more than \$15,000 of expenses for professional fundraising services 17 17 on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) X Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 18 Х Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 19 Х Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20a X If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions) 20b

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Pari	M. 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 United States on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II · · · · · · · · · · · · · · · · · ·	21		<u>X</u>
	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III · · · · · · · · · · · · · · · · ·	22		X
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		_X_
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? • • • • • • • • • • • • • • • • • • •	24b		X
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		*
	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 disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I · · · · · · · · · · · · · · · · · ·	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III · · · · · · · · · · · · · · · · ·	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	7		
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			•
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV · · · · · · · · · · · · · · · · · ·	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M · · · · · · · · · · · · · · · · · ·	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
•	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II · · · · · · · · · · · · · · · · · ·	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
•	III, IV, and V, line 1 · · · · · · · · · · · · · · · · · ·	34	1	Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
а	Did the organization receive any payment from or engage in any transaction with a			<u> </u>
•	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,		1	
	Part V, line 2 · · · · · · · · · · · · · · · · · ·			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
-	organization? If "Yes," complete Schedule R, Part V, line 2 · · · · · · · · · · · · · · · · · ·	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		†	† <u></u>
31	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI · · · · · · · · · · · · · · · · · ·	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			<u> </u>
-	402 Note: All Form 900 filers are required to complete Schedule O	38		x

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Part V

Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V		• • •	<u>. </u>
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable • • • • • • • • • • • • • • • • • • •			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable · · · · · · · · · · 1b			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	4-		
_	gaming (gambling) winnings to prize winners? · · · · · · · · · · · · · · · · · · ·	1c	_X	
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	2b		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? • • • • • • • • • • • • • • • • • • •	-20		<u>X</u>
a -	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	3a		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year? • • • • • • • • • • • • • • • • • • •	3b		X
b 4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	-30		<u> </u>
4a	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	1	İ	
	account)? · · · · · · · · · · · · · · · · · · ·	4a		Х
h	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	ŀ		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? • • • • • • • • • • • • • • • • • • •	5a		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? • • • • • • • • • • • • • • • • • • •	5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		- 4 \$
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
-	organization solicit any contributions that were not tax deductible?	6a	į	Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
-	gifts were not tax deductible? • • • • • • • • • • • • • • • • • • •	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
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		×,
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	İ		v
	required to file Form 8282? • • • • • • • • • • • • • • • • • • •	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year • • • • • • • • • • • • • • • • • • •			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		*
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? • • • • • • • • • • • • • • • • • • •	7f		×
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? ••	7g		<u>^</u>
h	If the organization received a contribution of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		^
9	Sponsoring organizations maintaining donor advised funds.	9a		·
а	Did the organization make any taxable distributions under section 4966? • • • • • • • • • • • • • • • • • •	9a 9b		~
b		30	-	
0_	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 · · · · · · · · · · · · · · · · · ·			
a	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities • • • • • • • • • • • • • • • • • • •			
b ∣1	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders · · · · · · · · · · · · · · · · · · ·			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them) · · · · · · · · · · · · · · · · · ·			
l2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? • • • • • • • • • • • • • • • • • • •	12a		×
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year • • • • • • • 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		۸
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand · · · · · · · · · · · · · · · · · · ·			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		×
	16 "Voo." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14h	l	I

Form 990 (2010)

Par	rt 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			
	Check if Schedule O contains a response to any question in this Part VI	• • •	• • •	<u>·</u>
<u>Sec</u>	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year · · · · · · · · · 1a 0			
b	Enter the number of voting members included in line 1a, above, who are independent · · · · · · · · 1b 0	1¢-		1
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> </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		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		7
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		1
6	Does the organization have members or stockholders?	6		1
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			1
	of the governing body?	7a		<u> </u>
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? • • • • • • • • • • • • • • • • • • •	7b		*
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following		<u> </u>	ļ
а	The governing body? • • • • • • • • • • • • • • • • • • •	8a		1
b	Each committee with authority to act on behalf of the governing body? • • • • • • • • • • • • • • • • • • •	8b		1
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			λ
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u> </u>
<u>Sec</u>	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		<u> </u>
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		*
11a				א
_	form?	11a		
р	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		*
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		<u> </u>
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		-
13	Does the organization have a written whistleblower policy?	13		7
14	Does the organization have a written document retention and destruction policy?	14		7
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?			ļ- <u>-</u>
a	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b	<u> </u>	7
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)	-		
16a		40-		<u>-</u> -
	with a taxable entity during the year?	16a		2
b				1
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	466		{;
	the organization's exempt status with respect to such arrangements?	16b		X
	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization KUN LIN CHEN			
	1007 S WELLER ST Seattle, WA 98104			

Form	agn	(201	l N

WORLD BUDDHIST PREACHING ASSOCIATIO

91-1695254

Page 7

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

Check if Schedule O contains a response to any question in this Part VII

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.

- 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, if any 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 neither the organization nor any related organizations compensated any current officer, director, or trustee

Name and Title	Average hours per week	Positi		heck	all the	ot analys				
	(describe hours for related organizations in Schedule O)	I t d nrı dur sec vec de o u o I r	t s t t t e	00	K	H c e m g p p e s n e e t e d		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(1) KUN LIN CHEN BOARD OF DIRECTOR				,						
(2)				X						
(3)										
(4)										
(5)										
(6)										
(7)										
(8)				-						
(9)										
(10)			_				-			
(11)		-								
(12)	-									
(13)					-					
(14)	-									
(15)										
(16)				ļ						

Pa	Section A. Officers, Directors, Trustees,	<u> </u>	yees,	and			st Con	pen		(continued)	
	(A)	(B)	_			C)			(D)	(E)	(F)
	. Name and Title	Average hours per week (describe hours for related organizations in Schedule O)	Position I dure to the control of th	I t nr su t s	O f i c e	K e y e m	at apply) H c e g mp e n g p e s t a e d	F o r m e r	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estmated amount of other compensation from the organization and related organizations
(17)										-	
(18)		-									
(19)		-									
(20)											
(21)											
(22)											
(23)		<u> </u>								<u></u>	
(24)											
(25)											
(26)											
(27)											
(28)					ļ <u>. </u>						
1b c d 2	Sub-total · · · · · · · · · · · · · · · · · · ·	A · ·							0 than \$100,000 in		0
3 4 5	Did the organization list any former officer, director or employee on line 1a? If "Yes," complete Schedule J for For any individual listed on line 1a, is the sum of report the organization and related organizations greater that individual	or such indivitable compensions \$150,000?	idual ensation If "Ye • • • • rom ar	on a es," o	nd o com	ther plete	comp Sche	ensa dule • •	ition from J for such	• • • • • • • •	r ₂ =2
<u>Sec</u>	tion B. Independent Contractors Complete this table for your five highest compensated compensation from the organization	i ındepender	nt cont	ract	ors	that	receiv	ed m	ore than \$100,000	O of	
	(A) Name and business address								(B) Description of s	ervices	(C) Compensation
								_			
_											
2	Total number of independent contractors (including but more than \$100,000 in compensation from the organic		to the	se l	liste	d ab	ove) w	ho re	eceived		-

Page 9

<u>Part V</u>	<u>/ 611,6</u>	Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
	1a	Federated campaigns · · · · · · 1a			1	I	
	b	Membership dues · · · · · · · · 1b					
ontri-	C	Fundraising events · · · · · · 1c		ļ			
utions, ifts,	d	Related organizations · · · · · · · 1d					
rants	e	Government grants (contributions) • • 1e	92,498				
nd her		All other contributions, gifts, grants,					
milar	•	and similar amounts not included above 1f					
mounts	a	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f	• • • • •	92,498			
		Bu	siness Code		·		
	2a			⁻			
	b						
rogram ervice	С						
evenue	d			·			-
	е						
	f	All other program service revenue · · · · · ·					
	g	Total. Add lines 2a-2f	· · · · · · · · · · · · · · · · · · ·				
		Investment income (including dividends, interest, and					
		other similar amounts)		31	31		
	4	Income from investment of tax-exempt bond proceeds	s ···▶ [
	5	Royalties · · · · · · · · · · · · · · · · · · ·	• • • • ▶				
		(ı) Real ((ii) Personal				
	6a	Gross Rents · · · · · ·					
	b	Less rental expenses · · · ·					
		Rental income or (loss)					
	d	Net rental income or (loss)	▶				
	7a	Gross amount from sales of (i) Secunties	(II) Other				
		assets other than inventory					
	ь	Less cost or other basis					
0		and sales expenses · · · ·				:	
t	1	Gain or (loss)					
h A	ļ.		• • • • • •		· · · - · · · - · · · -		
ř		Gross income from fundraising					
R		events (not including \$					
e		of contributions reported on line 1c)					
٧		See Part IV, line 18 · · · · · · · · a Less direct expenses · · · · · · · b					
n		Net income or (loss) from fundraising events · · ·					
u e	1	Gross income from gaming activities					
•	Ja	See Part IV, line 19 · · · · · · · · a					
	h	Less direct expenses · · · · · · · · b					
		Net income or (loss) from gaming activities · · · ·					
	l	ſ -	F				
	TUA	Gross sales of inventory, less returns and allowances · · · · · · · · a					
	h	Less cost of goods sold · · · · · · · b					
		Net income or (loss) from sales of inventory · · · ·	• • • • •				
	ا ا		siness Code				
	11a						
	ь						
	C		-				
		All other revenue · · · · · · · · · · · · · · · · · · ·					
		Total. Add lines 11a-11d · · · · · · · · ·	• • • • •				A.,
		Total revenue. See instructions · · · · · · · ·		92,529	31	C	

Part IX Statement of Functional Expenses

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

	All other organizations must complete column	(A) but are not require	ed to complete column	s (b), (C), and (D)	
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
_	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				,
	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) · · · · ·				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
•	and section 403(b) employer contributions) · · · · ·				
9	Other employee benefits				
10	Payroll taxes · · · · · · · · · · · · · · · · · · ·				-
11	Management · · · · · · · · · · · · · · · · · · ·				
a	Legal · · · · · · · · · · · · · · · · · · ·				
b	Accounting · · · · · · · · · · · · · · · · · · ·				-
C	Lobbying				
d					
e	Professional fundraising services See Part IV, line 17 - Investment management fees				
f	Other · · · · · · · · · · · · · · · · · · ·				
_ g	Advertising and promotion	625	625		
12		625	625		
13	Office expenses · · · · · · · · · · · · · · · · · ·				
14	Royalties · · · · · · · · · · · · · · · · · · ·				
15 46	Occupancy · · · · · · · · · · · · · · · · · · ·	11,446	11,446		
16 47	Travel · · · · · · · · · · · · · · · · · · ·	11,440	11,440		
17	Payments of travel or entertainment expenses				
18	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings · · · · · ·	4,664	4,664	-	
20	Interest · · · · · · · · · · · · · · · · · · ·	12,387	1,001	12,387	
21	Payments to affiliates · · · · · · · · · · · · · · · · · · ·	12,50,		12,507	
22	Depreciation, depletion, and amortization · · · · · ·				
23	Insurance · · · · · · · · · · · · · · · · · · ·	11,543	9,793	1,750	
23 24	Other expenses Itemize expenses not covered		2,.23	2,.30	-
2-4	above (List miscellaneous expenses in line 24f If				
	line 24f amount exceeds 10% of line 25, column		ļ		
	(A) amount, list line 24f expenses on Schedule O)				\$. \$\frac{1}{2}
а	BANK CHARGE	298		298	
a b	REPAIR				
C	FREIGHT	5,013	5,013		
d	UTILITY	22,355	19,428	2,927	
e e	MISCELLANEOUS	2,600	2,600		
e	All other expenses				
	Total functional expenses. Add lines 1 through 24f · ·	70,931	53,569	17,362	0
25 26	Joint Costs. Check here	.0,551			
	SOP 98-2 (ASC 958-720) Complete this line		1		
	only if the organization reported in column				
	(B) joint costs from a combined educational				

Part	X	Balance Sheet			
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing · · · · · · · · · · · · · · · · · · ·	104,020	1	115,371
	2	Savings and temporary cash investments • • • • • • • • • • • • • • • • • • •		2	
	3	Pledges and grants receivable, net		3	
İ	4	Accounts receivable, net	10,761	4	10,761
Ì	5	Receivables from current and former officers, directors, trustees, key			
		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)), persons described in section 4958(c)(3)(B), and contributing			
A S		employers and sponsoring organizations of section 501(c)(9) voluntary			,
s e t		employees' beneficiary organizations (see instructions) · · · · · · · · · · · · · ·		6	
e	7	Notes and loans receivable, net		7	
s	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 633, 989			
	b	Less accumulated depreciation · · · · · · · · · · 10b	633,989	10c	633,989
	11	Investments - publicly traded securities · · · · · · · · · · · · · · · · · · ·		11	
	12	Investments - other securities See Part IV, line 11 · · · · · · · · · · ·		12	
	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)	748,770	16	760,121
	17	Accounts payable and accrued expenses · · · · · · · · · · · · · · · · · ·	139,281	17	132,276
	18	Grants payable · · · · · · · · · · · · · · · · · · ·		18	
L	19	Deferred revenue · · · · · · · · · · · · · · · · · · ·		19	
i	20	Tax-exempt bond liabilities · · · · · · · · · · · · · · · · · · ·		20	<u></u>
a b	21	Escrow or custodial account liability Complete Part IV of Schedule D · · · · · ·		21	
ĩ	22	Payables to current and former officers, directors, trustees, key			t ue
1		employees, highest compensated employees, and disqualified			
t		persons Complete Part II of Schedule L · · · · · · · · · · · · · · · · · ·		22	
i	23	Secured mortgages and notes payable to unrelated third parties · · · · · · · · ·	179,183	23	175,941
S	24	Unsecured notes and loans payable to unrelated third parties	. 	24	
	25	Other liabilities Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	318,464	26	308,217
		Organizations that follow SFAS 117, check here▶ ☐ and			
N F e u		complete lines 27 through 29, and lines 33 and 34.			
t n	27	Unrestricted net assets · · · · · · · · · · · · · · · · · · ·		27	
, d	28	Temporarily restricted net assets	• • • •	28	
A s B	29	Permanently restricted net assets		29	
s a		Organizations that do not follow SFAS 117, check here ▶ ∑			. * .
e I t a		and complete lines 30 through 34.		- <u>-</u> -	
s n	30	Capital stock or trust principal, or current funds		30	
о е	31	Paid-in or capital surplus, or land, building, or equipment fund	420.200	31	454 004
rs	32	Retained earnings, endowment, accumulated income, or other funds	430,306	32	451,904
	33	Total net assets or fund balances	430,306	33	451,904
	34	Total liabilities and net assets/fund balances · · · · · · · · · · · · · · · · · · ·	748,770	34	760,121

Form	990 (2010) WORLD BUDDHIST PREACHING ASSOCIATIO 91-169525	4	P	age 12
Par	Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI	• • •		•
1	Total revenue (must equal Part VIII, column (A), line 12) · · · · · · · · · · · · · · · · · · ·		92,	529
2	Total expenses (must equal Part IX, column (A), line 25)		70,	
3	Revenue less expenses Subtract line 2 from line 1 · · · · · · · · · · · · · · · · · ·		21,	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		430,	306
5	Other changes in net assets or fund balances (explain in Schedule O)	_		0
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,		-	
	column (B))		451,	904
Pai	Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII		• • • •	•
			Yes	No
1	Accounting method used to prepare the Form 990 X Cash Cash Other Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		>
b	Were the organization's financial statements audited by an independent accountant?	2b		×
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis		ļ	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		オ
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	3b		
	EEA	Form	1 990 (2010)

SCHEDULE A (Form 990 or 990-EZ)

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. 2010

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

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-5.00 N	losp	ecti	on	

WOR	ш.	BUDDHIST PREAC	HING ASSUCIA	T10					91-	1695254			
Pa	rtel.	Reason for	Public Charity	y Status (All organiz	ations mu	st complete	e this part) See inst	ructions				
The				ause it is (For lines 1 th	•	•	•						
1	X			ssociation of churches		ın section	170(b)(1)	(A)(i).					
2		A school described	in section 170(b)(1)(A)(ii). (Attach Sched	ule E)								
3				rvice organization descri		•							
4			organization opera	ited in conjunction with	a hospital	described	n section	170(b)(1)	(A)(iii). En	ter the hos	pital's na	ame,	
		city, and state		<u> </u>									
5				fit of a college or univers	sity owned	or operate	d by a gov	vernmenta	I unit desc	ribed in			
		section 170(b)(1)(A		•									
6	\sqcup			r governmental unit des									
7		An organization that	normally receives	a substantial part of its	support fro	om a gove	rnmental ι	unit or fron	n the gene	ral public			
		described in section	n 170(b)(1)(A)(vi).	(Complete Part II)									
8				n 170(b)(1)(A)(vi) . (Cor	•	•							
9		An organization that	normally receives	(1) more than 33 1/3%	of its sup	port from c	ontribution	ns, membe	ership fees	, and gross	•		
		receipts from activit	es related to its ex	empt functions - subjec	t to certain	exception	s, and (2)	no more t	han 33 1/3	% of its			
		support from gross	investment income	and unrelated business	s taxable ır	ncome (les	s section :	511 tax) fr	om busine	sses			
		acquired by the orga	anization after June	e 30, 1975 See section	n 509(a)(2)	. (Complet	e Part III)	ı					
10		An organization orga	anized and operate	ed exclusively to test for	public safe	ety See se	ection 509	9(a)(4).					
11		An organization orga	anized and operate	ed exclusively for the be	nefit of, to	perform th	e function	s of, or to	carry out t	he			
		purposes of one or i	more publicly supp	orted organizations des	cribed in s	ection 509	(a)(1) or s	ection 509	(a)(2) See	esection			
		509(a)(3). Check the	e box that describe	s the type of supporting	organizati	ion and coi	mplete line	es 11e thro	ough 11h				
		a Type I	ь 🔲 Тур	ell c [Type III	-Functiona	ılly ıntegra	ted	d	Type I	II-Other		
е		By checking this box	x, I certify that the	organization is not conti	rolled direc	tly or indire	ectly by on	e or more	disqualifie	ed .			
		persons other than t	foundation manage	ers and other than one o	or more pul	blicly supp	orted orga	nizations	described i	n section			
		509(a)(1) or section	509(a)(2)										
f		If the organization re	eceived a written de	etermination from the IF	RS that it is	a Type I,	Type II, or	Type III s	upporting				
		organization, check	this box · · · ·										• • [
g		Since August 17, 20	06, has the organi	zation accepted any gift	t or contrib	ution from	any of the	:					
		following persons?											
		(i) A person who	directly or indirectly	controls, either alone of	or together	with perso	ns descrit	oed in (ii)			[Yes	No
		and (III) below,	the governing bod	y of the supported orga	nization?						11g(i)		
		(ii) A family memb	er of a person des	cribed in (i) above? • •							11g(ii)		
		(iii) A 35% controll	ed entity of a perso	on described in (i) or (ii)	above? •						11g(iii)		
h		` '	•	t the supported organization							<u> </u>		
	(i) N	lame of supported	(ii) EIN	(iii) Type of organization	(iv) Is the o	organization	(v) Did y	ou notify	(vi)	s the	(vii) A	Amount o	 of
		organization		(described on lines 1-9	in col (i) li	-	the organ		organizati		Su	pport	
				above or IRC section (see instructions)	governing	document?		of your port?	(i) organiz	sed in the S?			
				(, ,	Yes	No	Yes	No	Yes	No			
(A)											-		
•													
(B)													
(C)											_		
(D)													
_													
(E)													
							* 49 gr	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	******	A 1/4			
Tota	al		PARTER	ŀ.\$r.,		, ,	1		3				

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under

•		, . , .				, .,			0.90		anoa to t	quum,	
Part II	II If the	e organ	ization :	fails to d	gualify un	der the	tests li	sted below	/ please	complete	Part III	١	

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organizations 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)						
6	Public support. Subtract line 5 from In 4		L	L		""""	
	tion B. Total Support		\	. 			
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 8	Amounts from line 4		MK				
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 .		<u> </u>			-	
12	Gross receipts from related activities, etc. (see instructions)				12	<u> </u>
13	First five years. If the Form 990 is for the organization, check this box and stop here	organization's firs	t, second, third, fo	urth, or lifth tax ye	ar as a section 50	1(c)(3)	▶□
	tion C. Computation of Public Su					- 	
14	Public support percentage for 2010 (line 6,		•			· 14	
15	Public support percentage from 2009 Sche					· 15	%
16a							. —
	and stop here. The organization qualifies a				1		• • • • • • • • • • • • • • • • • • •
D	33 1/3% support test - 2009. If the organiz				\	•	. —
47-	box and stop here. The organization qualif		• •		1		• • • • • • • • • • • • • • • • • • •
17a	10%-facts-and-circumstances test - 2010				1		
	more, and if the organization meets the "fac				1		, r—
L	organization meets the "facts-and-circumst						
b	10%-facts-and-circumstances test - 2009				•		
	more, and if the organization meets the "facts and circumst						▶ □
18	organization meets the "facts-and-circumst Private foundation. If the organization did						
							

Part III

Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

_			· / F ·	, ,			
	tion A. Public Support		,		1	,	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus under sec 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf · · · · · · · · · · · · · · · · · · ·						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5 · · · · · ·						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons • • • •						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year · · ·			M			
С	Add lines 7a and 7b · · · · · · ·						
8	Public support (Subtract line 7c from line 6) · · · · · · · · · · · · · · · · · ·						
Sec	tion B. Total Support						
	endar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Amounts from line 6 · · · · · · · ·			*	<u> </u>		
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	**************************************					
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b · · · · · · ·		·				
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12) · · · · · · · · · · · · · · ·						
14	First five years. If the Form 990 is for the o organization, check this box and stop here	rganızatıon's first,	second, third, four	rth, or fifth tax yea	ar as a section 501	(c)(3)	▶ 🗀
Sec	ction C. Computation of Public Su	pport Percen	tage			1.5	
15	Public support percentage for 2010 (line 8,					15	
16	Public support percentage from 2009 Sched					16	<u> </u>
	ction D. Computation of Investme	nt Income Per	rcentage	column (f)		17	
17	Investment income percentage for 2010 (lin Investment income percentage from 2009 S					18	9/
18							7
	33 1/3% support tests - 2010. If the organi 17 is not more than 33 1/3%, check this box	and stop here.	The organization q	ualifies as a publi	cly supported orga	nization • • • •	▶ □
b	33 1/3% support tests - 2009. If the organiline 18 is not more than 33 1/3%, check this	zation did not che box and stop he	ck a box on line 14 ere. The organization	t or line 19a, and on qualifies as a p	line 16 is more tha publicly supported o	n 33 1/3%, and organization	▶ 📋
20	Private Foundation: If the organization did						

Schedule A (Fon	n 990 or 990-EZ) 2010	Page 4
Parit IM	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10,	
	Part II, line 17a or 17b, or Part III, line 12 Also complete this part for any additional information. (See instructions)	
•		
	 	<u>-</u>
		
		_
		
		

SCHEDULE D (Form 990)

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2010

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. ▶ See separate instructions.

Open to Public Inspection

MIN	COLUMN CONSTRUCTION	Employer Identification number
<u>IOI</u>	RLD BUDDHIST PREACHING ASSOCIATIO	91-1695254
Pa	organizations Maintaining Donor Advised Funds or Other Similar Fund the organization answered "Yes" to Form 990, Part IV, line 6	
	(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 advis	sed
	funds are the organization's property, subject to the organization's exclusive legal control?	· · · · · · · · · · · · · · · Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be	
	used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other	er
	purpose conferring impermissible private benefit?	· · · · · · · · · · · · · · · · · · ·
Pa	rt II Conservation Easements. Complete if the organization answered "Yes" to Form 990), Part IV, line 7
1	Purpose(s) of conservation easements held by the organization (check all that apply)	
	Preservation of land for public use (e.g., recreation or education)	torically important land area
	Protection of natural habitat Preservation of a certif	fied historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form	of a conservation
	easement on the last day of the tax year	
		Held at the End of the Tax Year
а	Total number of conservation easements · · · · · · · · · · · · · · · · · · ·	· · · 2a
þ	Total acreage restricted by conservation easements • • • • • • • • • • • • • • • • • • •	· · · 2b
С	Number of conservation easements on a certified historic structure included in (a)	· · · 2c
d	Number of conservation easements included in (c) acquired after 8/17/06 and not on a historic	
	structure listed in the National Register	· · · 2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the	e organization during
	the tax year	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?	· · · · · · · · · · · · · · · Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements de	uring the year
	<u> </u>	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during	the year
	▶ \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section	
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	· · · · · · · · · · · · · · · · · · ·
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expens	
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statem	ents that describes
	the organization's accounting for conservation easements	
Pa	Organizations Maintaining Collections of Art, Historical Treasures, or	Other Similar Assets.
4-	Complete if the organization answered "Yes" to Form 990, Part IV, line 8	ment and halance shoot warks of
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue state art, historical treasures, or other similar assets held for public exhibition, education, or research in furt	
	, , , , , , , , , , , , , , , , , , , ,	inerance of public service,
_	provide, in Part XIV, the text of the footnote to its financial statements that describes these items	at and balance sheet works of art
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement historical treasures, or other similar assets held for public exhibition, education, or research in furtheral	
	·	arice of public service,
	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 · · · · · · · · · · · · · · · · · ·	
_		
2	If the organization received or held works of art, historical treasures, or other similar assets for financi following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	ar gam, provide tile
_	Revenues included in Form 990, Part VIII, line 1 · · · · · · · · · · · · · · · · · ·	
a	A set of ded to Form 000 Bert V	
þ	Assets included in Form 330, Fait A ***********************************	· · · · · · · · · · · · · · · · · · ·

Sched	ule D (Form 990) 2010 WORLD BUDDHIST PREA	CHING ASS	OCIATIO				91-16952	54		Page 2
Pai	t III Organizations Maintaining Colle	ections of	Art, Histo	rical Tı	reasures, or	Othe	er Similar Ass	ets (ontinu	ed)
3	Using the organization's acquisition, accession, and									
	collection items (check all that apply)									
а	Public exhibition	d Loa	n or exchang	je progra	ms					
b	Scholarly research	e Othe	er							
С	Preservation for future generations									
4	Provide a description of the organization's collections	and explain h	now they furt	her the o	rganization's ex	empt r	ourpose in			
	Part XIV	•	•		0					
5	During the year, did the organization solicit or receive	donations of	art. historica	l treasure	es. or other sım	ılar				
-	assets to be sold to raise funds rather than to be mai							. \Box	Yes	No
Pai	t IV Escrow and Custodial Arranger									<u></u>
	Part IV, line 9, or reported an amount on F						,			
1a	Is the organization an agent, trustee, custodian or oth	ner intermedia	ry for contrib	utions or	other assets n	ot				
	included on Form 990, Part X?							. \sqcap	Yes	No
b	If "Yes," explain the arrangement in Part XIV and cor									
	3						Amo	unt		
С	Beginning balance · · · · · · · · · · · · · · · · · · ·					1c				
d	Additions during the year · · · · · · · · · · ·					1d				
e	Distributions during the year · · · · · · · · ·					1e	· · · · · · · · · · · · · · · · · · ·			
f	Ending balance · · · · · · · · · · · · · · · · · · ·					1f				
2a	Did the organization include an amount on Form 990							. 🗀	Yes	No
	If "Yes," explain the arrangement in Part XIV	, , , , , , , , , , , ,	,						163	
	t V Endowment Funds. Complete if the	organization a	nswered "Ye	es" to For	rm 990 Part IV	line 1				
Га						1		(2) 5.		
1a	Beginning of year balance	Current year	(b) Pnor	year	(c) Two years bad	ж <u>(</u>	d) Three years back	(e) Fo	ur years	Dack
b	Contributions · · · · · · · · · · · · · · · · · · ·									
	Net investment earnings, gains, and losses					-				
c d	Grants or scholarships · · · · · · · · ·									
_	Other expenditures for facilities					-				
е	and programs · · · · · · · · · · · · · · · · · · ·									į
	Administrative expenses							<u> </u>		
' ~	End of year balance							*		
9	Provide the estimated percentage of the year end ba	lance held as						l	.	
2										
a	Board designated or quasi-endowment	%								
D	Permanent endowment \(\rightarrow \) \(\rightarrow \)									
C	Term endowment ▶ %	46	46-4 6			. 41				
за	Are there endowment funds not in the possession of	the organization	on that are n	eid and a	administered foi	tne			<u> </u>	Τ
	organization by							0.4	Yes	No
	(i) unrelated organizations · · · · · · · · · ·		• • • • • •	• • • •		• • •		3a(i		<u> </u>
	(ii) related organizations · · · · · · · · · · · · · · · · · · ·					• • •		3a(ii	<u> </u>	—
	If "Yes" to 3a(ii), are the related organizations listed a	•		7		• • •		3b		<u> </u>
4	Describe in Part XIV the intended uses of the organiz									
Pa	t VI Land, Buildings, and Equipmen	t. See Form	990, Part X	line 10						
	Description of investment	(a) Cost or oth (investme		(b) Cost basis	or other (other)		cumulated reciation	(d) Bo	ok value	•
1a	Land · · · · · · · · · · · · · · · · · · ·									
b	Buildings									
С	Leasehold improvements · · · · · · · · · · ·									
d	Equipment · · · · · · · · · · · · · · · · · · ·		<u> </u>							
е	Other · · · · · · · STMD1E ·		633,989						633	3,989
Tota	1. Add lines 1a through 1e (Column (d) must equal Fo	orm 990, Part	X, column (E	3), line 10)(c)) · · · ·		▶		633	3,989

Part VII	Investments - Other Securities.	See Form 990, Part X, line 12	·	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuat Cost or end-of-year marke	
(1) Financial o	derivatives · · · · · · · · · · · · · · · · · · ·	•		
(2) Closely-he	eld equity interests	•		
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				<u>, , , , , , , , , , , , , , , , , , , </u>
(F)				
(G)				
(H)				
(1)				
	b) must equal Form 990, Part X, col (B) line 12)			
Part VIII	Investments - Program Related.	See Form 990, Part X, line 13		
	(a) Description of investment type	(b) Book value	(c) Method of valuat Cost or end-of-year marke	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	b) must equal Form 990, Part X, col (B) line 13) Other Assets. See Form 990, Part X, line	0.15		
Part IX	•			
(1)	(8)	Description		(b) Book value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)			- 	
(9)				
(10)				
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line	15)	• • • • • • • • • • • • • • • •	
Part X	Other Liabilities. See Form 990, Part X,	line 25		
1.	(a) Description of liability	(b) Amount		
(1) Federal	income taxes			
(2)				
(3)				
(4)			_	<u>.</u>
(5)				-
(6)				
(7)			_	
(8)			_	
(9)			_	
(10)			_	
(11)			_	
	b) must equal Form 990, Part X, col (B) line 25)		<u></u>	
2. FIN 48 (AS	SC 740) Footnote In Part XIV, provide the text of	f the footnote to the organization	's financial statements that reports t	he

Sched	ule D (Form 990) 2010 WORLD BUDDHIST PREACHING ASSOCIATIO	91-1695254	Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Sta	tements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1 · · · · · · · · · · · · · · · · · ·	3	
A	Net unrealized gains (losses) on investments • • • • • • • • • • • • • • • • • • •	4	
5	Donated services and use of facilities · · · · · · · · · · · · · · · · · · ·	5	
6	Investment expenses · · · · · · · · · · · · · · · · · ·	6	
_	Prior period adjustments · · · · · · · · · · · · · · · · · · ·	7	
7	Other (Describe in Part XIV)		
8	Total adjustments (net) Add lines 4 through 8 · · · · · · · · · · · · · · · · · ·	8	
9		9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	
	TXII Reconciliation of Revenue per Audited Financial Statements With Revenue per		
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments · · · · · · · · · · · · · · · · · · ·	4.64	
þ	Donated services and use of facilities · · · · · · · · · · · · · · · · · · ·	<u> </u>	
С	Recoveries of prior year grants · · · · · · · · · · · · · · · · · · ·		
d	Other (Describe in Part XIV) · · · · · · · · · · · · · · · · · ·	7 12	
е	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·	2e	
3	Subtract line 2e from line 1 · · · · · · · · · · · · · · · · · ·	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	· · · · · · · · · · · · · · · · · · ·	
а	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · · 4a		
b	Other (Describe in Part XIV) · · · · · · · · · · · · · · · · · ·		
С	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Pa	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Return	
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1. S	
а	Donated services and use of facilities · · · · · · · · · · · · · · · · · 2a		
b	Prior year adjustments · · · · · · · · · · · · · · · · · · ·		
С	Other losses · · · · · · · · · · · · · · · · · ·		
d	Other (Describe in Part XIV) · · · · · · · · · · · · · · · · · ·		
е	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·	2e	
3	Subtract line 2e from line 1 · · · · · · · · · · · · · · · · · ·	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · · 4a	15.	
b	Other (Describe in Part XIV) · · · · · · · · · · · · · · · · · ·		
С	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
	TXIV Supplemental Information		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1		-
and 2	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete	ı	
	part to provide any additional information		
		· · · · · · · · · · · · · · · · · · ·	
	<u> </u>		
		····	
			

·	Federal Supporting Statements	2010 _{PG01}
Name(s) as shown on return		FEIN
WORLD BUDDHIST	PREACHING ASSOCIATIO	91-1695254

Form 990, Schedule D, Part VI, Line 1e

Investments - Other

Description of Investment	Cost/basis (Investment)	Cost/basis (Other)	Depr	Book Value
BUILDING	612,554	 0	0	612,554
VEHICLE	1,672	0	0	1,672
FURNTIURE	19,763		0	19,763
Total	633,989	<u></u>	0	633,989

Form 8868

(Rev January 2011)

Application for Extension of Time to File an **Exempt Organization Return**

Department of the Treasury

Internal Revenue	Service	► File a	a separate ap	plication for each return.				
If you are f	iling for an			Part I and check this box · · · · ·			· · ▶ 🗓	
				on, complete only Part II (on page 2 of t			لكما	
				matic 3-month extension on a previously		3868.		
Electronic fili a corporation 8868 to reque Return for Tra	ing (e-file) required to est an exter insfers Ass	. You can electronically file Form 8 file Form 990-T), or an additional (nsion of time to file any of the forms ociated With Certain Personal Ben	868 if you nee (not automation s listed in Part efit Contracts	ed a 3-month automatic extension of time; 3-month extension of time. You can eled to rear II with the exception of Form 8, which must be sent to the IRS in paper www.irs.gov/efile and click on e-file for Ch	e to file (6 m ectronically 1 870, Informa r format (see	onths for file Form ation		
The second second	 	·		submit original (no copies neede				
	required to	file Form 990-T and requesting an	automatic 6-	month extension - check this box and co	omniete			
		• • • • • • • • • • • • • • • • • • • •		·····				
All other corpo	orations (in	cluding 1120-C filers), partnerships		nd trusts must use Form 7004 to request	an extensio	n of time		
to file income			, , , , , , , , , , , , , , , , , , , ,	is also much use I sam 7004 to request	an extensio	ii oi tiille		
Type or		exempt organization			Empleyer:	-		
print	1	Interest exempt organization Employer identific PRED BUDDHIST PREACHING ASSOCIATIO 91-1695254					n number	
		per, street, and room or suite no. If a P.O. box, see instructions				91-1693234		
File by the due date for	1007 S. WELLER ST							
filing your		City, town or post office, state, and ZIP code. For a foreign address, see instructions						
return See instructions		SEATTLE, WA 98104						
1134 404013	SEATTI	E, WA 98104						
Enter the Retu	ırn code fo	r the return that this application is f	or (file a sepa	rate application for each return) • • •	• • • • • •		\cdot q 1	
Application			Return	Application		·	Return	
ls For			Code	Is For			Code	
Form 990			01	Form 990-T (corporation)		_	07	
Form 990-BL			02	Form 1041-A			08	
Form 990-EZ			03	Form 4720			09	
Form 990-PF			04	Form 5227			10	
Form 990-T (sec 401(a) or 408(a) trust)			05	Form 6069				
Form 990-T (trust other than above)			06	Form 8870			11	
1 01111 330-1	(trast othe	than above,	1 00	1 01111 0070			12	
The books	are in the o	care of KUN LIN CHEN 10	07 S WELL	ER ST Seattle, WA 98104	·			
Telephone No ▶			FAX No ▶					
If the organ	ization doe	es not have an office or place of bu	siness in the	United States, check this box · · · ·			▶□	
		eturn, enter the organization's four			If this is		, (
		k this box · · · · · ▶			and attach			
		EINs of all members the extension		• .	_			
1 I reques	t an autom	atic 3-month (6 months for a corpo	ration require	d to file Form 990-T) extension of time				
until	08-			return for the organization named above	The extens	ion is		
for the o	rganization	s's return for	•	•				
	-	ar 20 10 or						
	ax year beg		. 20	, and ending	, 20			
		red in line 1 is for less than 12 mon				_		
,	•	unting period	,		-			
0	.go 2000	aning panea						
3a If this ap	plication is	for Form 990-BL, 990-PF, 990-T,	4720, or 6069), enter the tentative tax, less any				
nonrefundable credits. See instructions 3a \$						\$		
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 3b \$								
c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS								
(Electronic Federal Tax Payment System) See instructions 3c \$								
				Form 8868, see Form 8453-EO and For				
payment instru						•		
				 				