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Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990.

Inspection

Α	For the	2013 calendar year, or tax year beginning	and	ending					
В	Check if applicable	C Name of organization			D Employer	identificat	ion number		
	Addres	BUDDHIST CHURCHES OF A	MERICA - ENDOWM	ENT					
	Name change	Doing Business As			9 <b>4</b> -285	57583			
	Initial return	Number and street (or P.O. box if mail is not deli	Room/suite	E Telephone					
	Termin	1/10 OCIAVIA SIREEI			ļ	<u>(415)</u>	<u>776-5068</u>	_	
Ļ	Amend	City or town, state or province, country, and .			G Gross receipts	\$	4,994,401	•	
L	Applic tion pendir	SAN FRANCISCO, CA 941			H(a) Is this a	group retui			
	<b>,</b> • • • • • • • • • • • • • • • • • • •	F Name and address of principal officer H1D		0.44.0	for subo		Yes X No	)	
_	-	1710 OCTAVIA STREET, SA			H(b) Are all subo			)	
					7		(see instructions)		
		e: HTTP://WWW.BUDDHISTCHU			H(c) Group ex			_	
	art I	organization: X Corporation Trust As: Summary	sociation Other	L Year	of formation: 1	9 2 9 M S	tate of legal domicile C	<u>A</u>	
		Briefly describe the organization's mission or most	acceptant actuation TO D	ромоль	JODO SI	TNCUI	J BUDDHISM	_	
õ	'	IN AMERICA.	significant activities 10 F	KOMOTE	ים סמסט זי	ттиопс	D BODDHISM		
nar	2		ntinued its operations or dispo	sed of more	than 25% of it	e not seco			
Governance	3	Number of voting members of the governing body		sea of more	e than 25% On t	3 1161 2336	1	R	
တိ	4	Number of independent voting members of the government of the gove				4	1		
اناد Activities &	5	Total number of individuals employed in calendar y				5		$\frac{1}{1}$	
/Itie	6	Total number of volunteers (estimate if necessary)				6	1		
Acti	7 a	Total unrelated business revenue from Part VIII, co	lumn (C), line 12			7a	0	_	
=_⋖		Net unrelated business taxable income from Form	• •			7b	0		
<i>N</i>			Dro		Prior Year		Current Year		
	8	Contributions and grants (Part VIII, line 1h)	REC	FIVEL	58,	013.	29,518	<u>.</u>	
Revenue	9	Program service revenue (Part VIII, line 2g)							
ૢૺૢૢૼ	10	Investment income (Part VIII, column (A), lines 3, 4,	and 7d)	8 8 2014	SB87,	768.	1,075,138	•	
ш.	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c	, 9c, 10c, and 14e)			0.	0		
	12_	Total revenue - add lines 8 through 11 (must equal	Part VIII, column (A), line 12)	A TOTAL	<u> 15445, </u>		1,104,656		
	1	Grants and similar amounts paid (Part IX, column (		- W	1,335,		1,533,712	_	
	1	Benefits paid to or for members (Part IX, column (A				0.	0		
ses	15	Salaries, other compensation, employee benefits (f		ļ	126,		105,372		
Expenses	16a	Professional fundraising fees (Part IX, column (A), li	·	_		0.	0	•	
Ä	b	Total fundraising expenses (Part IX, column (D), line	· · · <del></del>	0.	151,	161	152 220		
	''	Other expenses (Part IX, column (A), lines 11a-11d,	•	-		218.	153,320 1,792,404		
	1	Total expenses Add lines 13-17 (must equal Part II	, ,,,	·	-1,013,		-687,748		
7.0	3 B	Revenue less expenses Subtract line 18 from line	12	D.	eginning of Curre			·	
Net Assets or	20	Total assets (Part X, line 16)		1 00	20,142,		End of Year 27,215,019	_	
Ass	21	Total liabilities (Part X, line 26)			1,844,		7,625,356		
Set	22	Net assets or fund balances Subtract line 21 from	line 20		18,297,		19,589,663	_	
	art II	Signature Block				· · · · · · · · · · · · · · · · · · ·		Ť	
Une	der pena	ulties of perjury, I declare that I have examined this return,	including accompanying schedule	es and statem	nents, and to the b	est of my ki	nowledge and belief, it is	 }	
tru	e, correc	t, and complete. Declaration of prepara (other than office	er) is based on all information of w	hich prepare	r has any knowled	lge.			
								_	
Sig	ฐภ	Signature of officer			Date	<b>6</b> -1-5			
He	ere	HIDEAKI MIZUNO, OFFICE	R			UCT Z	13,2014		
		Type or print name and title		<del></del>	D-1-		11		
		Print/Type preparer's name	Preparer's signature		Date	Check	PTIN		
Pai		ELAINE LEUNG		<b>&gt;</b> l	10/16/2014		P00535713		
	parer		& CO, LLP		Firm's	EIN >	94-1341042	_	
US	e Only	Firm's address 1 EMBARCADERO CE	NTER STE 2410 A. 94111		Dha-	/ / 1 1	5\ /20 11 <sup>-</sup> //		
	+b = 11	SAN FRANCISCO, C RS discuss this return with the preparer shown abo	<del></del>		Pnone	no. (415			
				ione	-		Form <b>990</b> (201)		
332	001 10-2	9-13 LID FULL FAPELWOLK INCUDENCE INCU	,, see the separate mistruct				1 JHH 990 (201)	J)	

	990 (2013) BUDDHIST CHURCHES OF AMERICA - ENDOWMENT 94-2857583 Page 2
Pai	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission
	TO RAISE AND MANAGE FUNDS TO SECURE A SOUND FINANCIAL BASE FOR THE
	BUDDHIST CHURCHES OF AMERICA TO PROPAGATE JODO SHINSHU HONGWANJI-HA
	BUDDHISM IN THE CONTINENTAL UNITED STATES.
	DODDRIDE IN THE CONTINENTAL UNITED STATES.
	Dull the accomplished and deliberated as a fine of the second of the sec
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	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?
	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported
4a	(Code) (Expenses \$1,624,586. including grants of \$1,533,712.) (Revenue \$29,518.)
	FUNDING PROFESSIONAL CHAIRS, SCHOLARSHIPS, AND OTHER EDUCATIONAL
	PROGRAMS AND PROVIDES SUPPORT TO JODO SHINSHU MINISTERS IN AMERICA.
	TROGRAMS AND PROVIDES SUPPORT TO GODO SHINSHO MINISTERS IN AMERICA.
4b	(Code) (Expenses \$
71.7	(Code / (Expenses \$ ) (Revenue \$ )
4-	
4c	(Code) (Expenses \$
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
<u>4e</u>	Total program service expenses ► 1,624,586
	Form <b>990</b> (2013)

	•		Yes	No_
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes;" complete Schedule A	_1_	<u>X</u>	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_		77
	public office? If "Yes," complete Schedule C, Part I	3		<u> X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			v
_	during the tax year? If "Yes," complete Schedule C, Part II  Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4		X
5	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			- 23
Ū	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
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
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	·		
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	44.	x	
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11a	Λ	
b	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		
_	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 reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	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			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yea," and if the organization ensured "No" to fine 12s, then completing School up D. Perte VI and VII is entered.	401-		<b>.</b>
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	, <del>, , a</del>		<del></del>
_	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			17
46	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		v
10	1c and 8a? If "Yes," complete Schedule G, Part II  Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18		X
19	complete Schedule G, Part III	19		Х
20°>	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<del></del> -
			990	(2013)

				(2013)
50	Note. All Form 990 filers are required to complete Schedule O	38	х	
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	31-		122
J/	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37-		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		<del> </del>
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	
25	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	256		
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
~-	Part V, line 1	34	X	V
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
0.0	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			\ <sub>V</sub>
••	Schedule N, Part II	32		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			177
	If "Yes," complete Schedule N, Part I	31	ļ	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			\ <b>v</b>
04	contributions? If "Yes," complete Schedule M	30		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation		<u> </u>	<sub>V</sub>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	ļ	X
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			,.
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	<u> </u>	X
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	<del> </del>	X
	instructions for applicable filing thresholds, conditions, and exceptions)	_		
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	of any of these persons? If "Yes," complete Schedule L, Part III	27	ļ	X
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			,,
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	1		
	complete Schedule L, Part II	26		X
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	Schedule L, Part I	25b		_X
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			₹.
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	05		<b>.</b>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		-
	any tax-exempt bonds?  Did the exemption set as an "an habelf of" yearer for hands suitstanding at any time during the year?	24c		-
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<del></del>
_	Schedule K If "No", go to line 25a	24a		<u>X</u>
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	04-		- V
248	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
04-	Schedule J	23_		X
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	~		v
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	1		
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX,			
	government on Part iX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	<u> X</u>	<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	•		Yes	No

Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
	Chook a contains a response of floor to any line in and a contains		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	0	163	NO
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	Ö		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	İ	1
<b>2</b> a	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	1	ĺ	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	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)?	4a		X
b	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			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	L	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		ļ
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 as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		<u> </u>
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		<u> </u>	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<b>.</b>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			,,
	to file Form 8282?	7c	<u> </u>	X
d	If "Yes," indicate the number of Forms 8282 filed during the year  Pld the graphystical receive any funds, directly to pay promiums on a personal herefit contract?	<b></b>		<b>.</b>
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f	<del></del>	Х
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-0	7 <u>g</u> 7h		X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	·		
Ū	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		x
9	Sponsoring organizations maintaining donor advised funds.			1
а	Did the organization make any taxable distributions under section 4966?	9a	İ	Х
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			
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?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		1	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		ļ	<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O		1	
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	_		
C	Enter the amount of reserves on hand		ऻ—	<del> </del>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b-	000	/CC 1 -
		rorm	1 <b>990</b>	(2013

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BUDDHIST CHURCHES OF AMERICA - ENDOWMENT

<u>94-2857583</u>

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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

	to the desired the discussion of the discussion			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	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 18			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 14			
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		X
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 governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		х
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	74		
	persons other than the governing body?	7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7.0		
_		0-	v	
a	The governing body?	8a	X	
þ	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			7.7
<u> </u>	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	ļ
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	_X_	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c	_X_	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	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		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	100		
<u> 17</u>	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 (Section 501(c)(3)s only) a	wailah	صا	
10	for public inspection. Indicate how you made these available. Check all that apply.	ıvallaD	ic	
40		J.C		
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	ıınar	iciai	
00	statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	ion 🕨	<b>'</b> —	
	HIDEAKI MIZUNO - (415)776-5068			
	1710 OCTAVIA STREET, SAN FRANCISCO, CA 94109			

•			
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BUDDHIST CHURCHES OF AMERICA - ENDOWMENT

94-2857583

Page 7

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

Check if Schedule O contains a response or note to any line 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.

(A)	(B)	y related organization compensat (B) (C)						(D)	(E)	(F)		
Name and Title	Average	(do	Position one than one					Reportable	Reportable	Estimated		
	hours per	box	box, unles		ox, unless person is both an ificer and a director/trustee)			s botl	han	compensation	compensation	amount of
	week		cer an	aaa	recto	r/trus	iee)	from	from related	other		
	(list any	recto						the	organizations	compensation		
	hours for related	D to a	<u>a</u>			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the		
	organizations	ruste	trus		<b>8</b> 2	npen		(44-27 1099-141130)		organization and related		
	below	laalt	tiona		oldu	st cor	_			organizations		
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations		
(1) MR. CHARLES OZAKI	2.00											
PRESIDENT				X				0.	0.	0.		
(2) MR. ROGER SUEKAMA	1.00											
SECRETARY				X				0.	0.	0.		
(3) MR. KEVIN YOSHIDA	2.00											
VICE PRESIDENT				X				0.	0.	0.		
(4) MR. RICHARD ENDO	2.00				İ			_	•			
TREASURER (CFO)			<u> </u>	X	ļ			0.	0.	0.		
(5) SEE STATEMENT (B) ATTACHED	2.00									_		
OTHER MEMBERS OF BOARD OF		<u> </u>	_	X				0.	0.	0.		
		<u> </u>			<u> </u>							
	-											
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	<del> </del>	_			-	<del> </del>						

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded from tax under sections 512 - 514 (C) (B) Related or Unrelated Total revenue exempt function business revenue revenue 1 a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c d Related organizations 1d Contributions, and Other Simi e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above Moncash contributions included in lines 1a-1f \$\_ Total. Add lines 1a-1f 29,518 **Business Code** Program Service Revenue f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 657,659 other similar amounts) 657,659 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (ii) Other (i) Securities assets other than inventory 3,969,224 338,000 b Less. cost or other basis and sales expenses 3,539,745 350,000 c Gain or (loss) 429,479 -12,000 d Net gain or (loss) 417,479. 417,479 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less. direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 **b** Less direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a d All other revenue e Total. Add lines 11a-11d Total revenue See instructions. 1,104,656, 1,075,138 332009 10-29-13 Form **990** (2013)

Oo not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	se or note to any line in t (A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
Grants and other assistance to governments and		expenses	general expenses	expenses
organizations in the United States. See Part IV, line 21	1,533,712.	1,533,712.		
2 Grants and other assistance to individuals in				<del></del>
the United States See Part IV, line 22				
3 Grants and other assistance to governments,				
organizations, and individuals outside the				
United States 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	96,933.		96,933.	
8 Pension plan accruals and contributions (include			,,,,,,,	<del></del>
section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	8,439.		8,439.	
D Payroll taxes	0, 200.		0, 200.	
1 Fees for services (non-employees)				
<sup>-</sup>	1,738.		1,738.	<del></del>
b Legal	50,390.	25,195.	25,195.	<del></del>
c Accounting d Lobbying	30,370.	23,133.	23,1930	
0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	<del></del>			
, , , , , , , , , , , , , , , , , , ,	65,679.	65,679.		
f Investment management fees	05,013.	03,073.		
g Other (If line 11g amount exceeds 10% of line 25,	75.		75.	
column (A) amount, list line 11g expenses on Sch 0.)	13.		13.	
Advertising and promotion	2,380.		2,380.	
Office expenses			2,300.	
If Revelting				<del></del>
5 Royalties	9,468.		9,468.	
6 Occupancy	7,949.		7,949.	
7 Travel	1,343.		1,343.	-
Payments of travel or entertainment expenses				
for any federal, state, or local public officials	1,273.		1 272	<del></del>
19 Conferences, conventions, and meetings	1,413.		1,273.	
20 Interest				
21 Payments to affiliates 22 Depreciation, depletion, and amortization				
	2,142.		2,142.	
	<u> </u>		4,144.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)	,			
ADDDATCAL PERC	5,594.		5,594.	,
b PROPERTY TAXES	4,609.		4,609.	
MET EDITORE	1,163.		1,163.	
d PAYROLL FEES	401.		401.	
	459.		459.	
e All other expenses	1,792,404.	1,624,586.	167,818.	(
Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization	-1117414040	1,041,000·		
reported in column (B) joint costs from a combined	ļ			
educational campaign and fundraising solicitation.				
cuucational campaign and fundraising solicitation.				

Form 990 (2013)

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) End of year (A) Beginning of year 1 Cash - non-interest-bearing 1 2 Savings and temporary cash investments 103,889. 2 156,785. 1,375,465. 1,798,962. 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 3,500,000. 4,140,000. Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other 120,400. basis Complete Part VI of Schedule D 10a 482,400. 120,400. b Less: accumulated depreciation 10b 10c Investments - publicly traded securities 11 11 14,257,138. 21,422,369. Investments - other securities See Part IV, line 11 12 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 Other assets. See Part IV, line 11 15 15 20,142,389. 27,215,019. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 Accounts payable and accrued expenses 17 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L. 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of 1,844,616. Schedule D 25 <u>7,625,356.</u> 1,844,616. 7,625,356. Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 1,582,269. 2,256,808. 27 Unrestricted net assets 27 3,142,782. 13,572,722. 3,677,169. 28 Temporarily restricted net assets 28 13,655,686. 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 18,297,773. 33 19,589,663. 33 Total net assets or fund balances

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27,215,019.

Total liabilities and net assets/fund balances

20,142,389.

	990 (2013) BUDDHIST CHURCHES OF AMERICA - ENDOWMENT	94-	<u>-2857</u>	583	Pag	<sub>le</sub> 12
Par	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
			_			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1	<u>,10</u>	4,6	<u>56.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	,79	2,4	04.
3	Revenue less expenses. Subtract line 2 from line 1	3		-68		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		,29		
5	Net unrealized gains (losses) on investments	5	1	<u>,97</u>	9,5	<u> 38.</u>
6	Donated services and use of facilities .	6				
7	Investment expenses	7				
8	Prior period adjustments	8	,			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			1	00.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	1				
	column (B))	_10	<u> 19</u>	,58	9,6	<u>63.</u>
Par	t XIII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
					Yes	No
1	Accounting method used to prepare the Form 990.			\ \		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a				
	separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	<u> X</u>	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	<b>,</b>			
	consolidated basis, or both.					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt	,			
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	<u></u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule (	).			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sii	ngle Au	ıdıt			
	Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ired au	dıt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		<u> </u>
				Form	990	(2013)

## **SCHEDULE A**

Department of the Treasury

Internal Revenue Service

(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.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Name of	the organizati	on		-					Employer	identificat	ion nu	mber		
		BUDDHIS	T CHURCHES C	F AME	RICA	- END	OWMEN	T	9	4-2857	/583	j		
Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this part	) See inst	ructions						
The organ			because it is (For lines						·					
1 X			s, or association of chur					).						
2 🗀			<b>70(b)(1)(A)(ii).</b> (Attach Sc											
з 🗔	A hospital or	a cooperative hospi	tal service organization (	described	ın section	170(b)(1)	(A)(iii).							
4	A medical res	search organization	operated in conjunction	with a hos	pital desci	ribed in se	ction 170	(b)(1)(A)(	iii). Enter	the hospital	l's nam	ne,		
	city, and stat													
5			benefit of a college or ur	niversity o	wned or op	erated by	a govern	mental ur	nit describ	ed in				
		(b)(1)(A)(iv). (Compl	•											
6			ent or governmental uni				· · · · ·							
7	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)													
8 📙			section 170(b)(1)(A)(vi).											
9 💹			eives (1) more than 33 1											
			nctions - subject to certa											
			axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the org	anization	after June 3	30, 197	<sup>7</sup> 5		
		509(a)(2). (Complete	•											
10			perated exclusively to te											
11 📖			perated exclusively for the									or		
			ations described in secti				2) See sec	ction 509	<b>)(a)(3).</b> Ch	eck the box	that			
			organization and compl		-									
[]	a Type I		•		nctionally	•				n-functional		-		
e			at the organization is not									ın		
			han one or more publicly						)9(a)(1) or	section 509	}(a)(2)			
f			tten determination from t	tne IRS tha	atitis a Ty	pe I, Type	II, or Type	e III						
		rganization, check tl												
g			organization accepted ar					-				Τ		
			lirectly controls, either al	one or tog	etner with	persons c	iescribea i	n (ii) and	(III) below		Yes	No		
	_		upported organization?							11g(i)	┼	├		
			n described in (i) above?		-0					11g(ii)		<del> </del>		
L			person described in (i) o	٠,						11g(iii)		L		
h	Flovide the it	ollowing information	about the supported or	ganization	(S)									
(i) Name	of supported	/::> CIN	(:::) Tune of exceptantian	(IV) Is the (	organization	(v) Did voi	unotify the	(vi)	ls the					
	e of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1-9		sted in your			organizat	ls the tion in col.	(vii) Amount		netary		
U. y	amzation		above or IRC section	governing	document?	(i) of you	r support?	U.	ized in the S.?	Sup	port			
			(see instructions))	Yes	No	Yes	No	Yes	No					
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<u>otal</u>				<u> </u>				<u> </u>		<u> </u>				
HA For I	Paperwork Re	duction Act Notice	, see the Instructions f	or				Schedu	ıle A (For	m 990 or 99	30-EZ)	2013		

332021 09-25-13

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2013

Complete only if you checke fails to qualify under the tests	d the box on line 5	5, 7, or 8 of Part I o	r if the organization			-
Section A. Public Support		ass complete raft	··· <i>)</i>			
	4 1 0000		4 ) 0044	( 0 0040	1 1 2010	(n T ) 1
Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
<ol> <li>Gifts, grants, contributions, and membership fees received (Do not</li> </ol>					1	
include any "unusual grants ")						
				<del>                                     </del>		
2 Tax revenues levied for the organ- ization's benefit and either paid to				Į.		
or expended on its behalf		l .			į	
3 The value of services or facilities						
furnished by a governmental unit to		İ				
the organization without charge					1	
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			1			
on line 1 that exceeds 2% of the						
amount shown on line 11,		l				
column (f)						
6 Public support. Subtract line 5 from line 4		<u></u>			<u> </u>	
Section B. Total Support				·		
Calendar year (or fiscal year beginning in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(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			<u> </u>		_ <del></del>	<del></del>
9 Net income from unrelated business						
activities, whether or not the						
business is regularly carned on					1	
10 Other income. Do not include gain			1			
or loss from the sale of capital						
assets (Explain in Part IV.)				<del> </del>		
11 Total support. Add lines 7 through 10	L	I	<u>.</u>	<u>.                                    </u>	<del>                                     </del>	
12 Gross receipts from related activities					12	
13 First five years. If the Form 990 is for	-	's tirst, second, thi	ra, tourth, or titth t	tax year as a secti	on 50 I(c)(3)	
organization, check this box and sto Section C. Computation of Pub		ercentage				
14 Public support percentage for 2013			column (fl)		14	
15 D 11			coldinin (i))		15	
16a 33 1/3% support test - 2013. If the			on line 13, and line	14 is 33 1/3% or	<u> </u>	ox and
stop here. The organization qualifies				. 14 13 00 17070 01	more, encourting by	
b 33 1/3% support test - 2012. If the				d line 15 is 33 1/3	% or more check t	his box
and stop here. The organization qua				a 10 10 00 170	,	<b>▶</b> □
17a 10% -facts-and-circumstances tes				ne 13. 16a. or 16b.	and line 14 is 10%	or more.
and if the organization meets the "fa	`	-		· ·		•
meets the "facts-and-circumstances			-			▶ [
b 10% -facts-and-circumstances tes	-				17a, and line 15 is	10% or
more, and if the organization meets						
organization meets the "facts-and-cil				-		►□

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

# Schedule A (Form 990 or 990-EZ) 2013 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

quality under the tests listed bei	ow, piease comp	лете нап п )				
Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and	(a) 2003	(6) 2010	(6) 2011	(4) 2012	(6) 2010	(i) Total
membership fees received (Do not						
include any "unusual grants ")						
2 Gross receipts from admissions,					1	
merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the organization's tax-exempt purpose						1
3 Gross receipts from activities that					1	
are not an unrelated trade or bus-				•		
iness under section 513						
<del> -</del>						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to or expended on its behalf						
· · · · · · · · · · · · · · · · · · ·		<u></u>			<del> </del>	
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge	<del></del>				<del> </del>	
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons	<del></del>				1	
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		<u> </u>	<u>                                     </u>			
Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6		127 = 0.10	10) = 0	(0) = 0 . =	(0) 20 (0	(1) 10141
10a Gross income from interest,						
dividends, payments received on		İ				
securities loans, rents, royalties and income from similar sources		}				
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975			1			
c Add lines 10a and 10b						
11 Net income from unrelated business						-
activities not included in line 10b,						
whether or not the business is regularly carried on			1	1		
12 Other income Do not include gain		<del> </del>				· · · · · · · · · · · · · · · · · · ·
or loss from the sale of capital			1			
assets (Explain in Part IV)  13 Total support. (Add lines 9, 10c, 11, and 12)		1			<del> </del>	
14 First five years. If the Form 990 is for t	he organization'	s first, second, the	rd, fourth, or fifth t	ax vear as a secti	on 501(c)(3) organiz	ration.
check this box and stop here	organization	o., 5500na, till	. =, 10aran, or mart	, our us a scott	on our long, or gainz	
Section C. Computation of Public	Support Pe	ercentage	<del></del>		•	
15 Public support percentage for 2013 (lin		<del></del>	column (fl)		15	
16 Public support percentage from 2012 S		·=			16	
Section D. Computation of Invest						<del></del>
17 Investment income percentage for 201				<del></del>	17	
18 Investment income percentage from 20			10, 00101111 (1))	•	18	
19a 33 1/3% support tests - 2013. If the co			on line 14, and lin	e 15 is more than		17 is not
more than 33 1/3%, check this box and						., is not ▶□
b 33 1/3% support tests - 2012. If the c	•	•				. ►∟ and
line 18 is not more than 33 1/3%, chec						<u></u> [
		-			_	<b>T</b> H
20 Private foundation. If the organization	, did Hot check a	LOUX OF THE 14, 15	<u>ra, ur 190, check t</u>	nis dux.and see if	เอเเนตเดกเร	

Part IV	Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12 Also complete this part for any additional information (See instructions)
	•
<del></del>	

## 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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization

**Employer identification number** 

Par		of AMERICA - ENDOWMENT	Accounts Complete of the
L. <u> </u>	organization answered "Yes" to Form 990, Part IV, lin		Accounts. Complete if the
	Organization answered Tes to Form 990, Part IV, in	(a) Donor advised funds	(b) Funds and other accounts
	Total number at and of year	(a) Borior advised funds	(b) I died 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	<del>-</del>	
_	are the organization's property, subject to the organization's	_	Yes No
6	Did the organization inform all grantees, donors, and donor a		•
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose conf	
Par	impermissible private benefit?		Yes No
<u> </u>			/, line /
1	Purpose(s) of conservation easements held by the organizat	· — · · · · · · · · · · · · · · · · · ·	
	Preservation of land for public use (e.g., recreation or e	· —	
	Protection of natural habitat	Preservation of a certified	historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a	conservation easement on the last
	day of the tax year.		
	<del>-</del>		Held at the End of the Tax Year
а	Total number of conservation easements	•	2a
b	Total acreage restricted by conservation easements		2b
	Number of conservation easements on a certified historic str	· ·	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, re	eleased, extinguished, or terminated by the orga	anization 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		C., C.,
_	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		<del></del>
8	Does each conservation easement reported on line 2(d) about a service 170/EV/AVEV/32	ve satisfy the requirements of section 170(n)(4)	
^	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservat	•	·
	include, if applicable, the text of the footnote to the organiza	ition's financial statements that describes the c	organization's accounting for
Par	conservation easements t III   Organizations Maintaining Collections of	of Art Historical Treasures or Other	r Similar Assets
	Complete if the organization answered "Yes" to Form		Offinal Assets.
12	If the organization elected, as permitted under SFAS 116 (A)	<del>*</del>	and halance shoot works of art
10	historical treasures, or other similar assets held for public ex		
	the text of the footnote to its financial statements that described to the footnote to its financial statements that described the text of the footnote to its financial statements that described the footnote to its financial statements.		or public service, provide, in Part XIII,
b	If the organization elected, as permitted under SFAS 116 (A)		halance sheet works of art, historical
b	treasures, or other similar assets held for public exhibition, e		
	relating to these items:	saucation, or research in furtherance of public s	service, provide the following amounts
	_		<b>•</b> •
	(i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X		► \$ ► \$
•	If the organization received or held works of art, historical tre	ageurge or other cimilar accets for financial	
2		_	i, provide
_	the following amounts required to be reported under SFAS 1	TO POO 300) relating to these items:	<b>~</b> ¢
a	Revenues included in Form 990, Part VIII, line 1	-	► \$ ► \$
D	Assets included in Form 990, Part X		▶ ⊅

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 332051 09-25-13

Schedule D (Form 990) 2013

		r CHURCHES						3 Page <b>2</b>
Par	t III   Organizations Maintaining C	ollections of Ar	t, Historical Tre	easures, or Oth	er Simil	ar Asse	<b>ts</b> (contin	ued)
3	Using the organization's acquisition, accession	on, and other record	s, check any of the	following that are a s	significant	use of its	collection	ıtems
	(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	ollections and explain	n how they further th	ne organization's exe	empt purp	ose in Parl	t XIII.	
5	During the year, did the organization solicit or	r receive donations o	of art, historical treas	sures, or other simila	ar assets		_	
	to be sold to raise funds rather than to be ma						Yes	No
Par	t IV Escrow and Custodial Arrang		ete if the organization	n answered "Yes" to	Form 990	), Part IV, I	ine 9, or	
	reported an amount on Form 990, Par				A al al a al			
1a	Is the organization an agent, trustee, custodi	an or other intermed	lary for contribution	s or other assets no	t incluaea	Γ	٦.,	<b>г</b>
_	on Form 990, Part X?					L	<b>」Yes</b>	∟ No
ь	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing table.				A	<del></del>
							Amount	<del></del>
	Beginning balance				1c			
	Additions during the year				1d			
_	Distributions during the year				1e			
f O-	Ending balance	orm 000 Dort V line	010		1f	<u> </u>	Yes	□ No
	Did the organization include an amount on Fo If "Yes," explain the arrangement in Part XIII			provided in Part VIII		L	⊒ res	
Par								
	Eliasiment anas. compete	(a) Current year	(b) Prior year	(c) Two years back		years back	(a) Four	years back
10	Paginning of year balance		18,104,825.	18,881,020.		334,062.		
1a	Beginning of year balance Contributions	18,297,773.		828.974.		531,177.		710,940.
b	Net investment earnings, gains, and losses	29,518.	58,013. 1,689,594.	-539,345.		419,185.		331,884.
ی	Grants or scholarships	2,989,097. 1,524,281.	1,326,635.	836,572.		551 254.	_	216,738. 185,117.
	Other expenditures for facilities	1,524,201.	1,320,633.	030,372.	<u>_</u>	331,234.	<u>+</u> ,	105,117.
e	. '	0 431	8,405.	9.574.		8,673.		10,035.
f	and programs Administrative expenses	9,431. 193,013.	219,619.	219,678.		243,477.		230,348.
g	End of year balance	19,589,663.	18,297,773.	18,104,825.		881 020.		834,062.
2	Provide the estimated percentage of the curi				10,	001,020.	1. 1.0.	034,002.
a	Board designated or quasi-endowment	ent year end balane	%	ij) ficia as				
	Permanent endowment	%	_′°					
	Temporarily restricted endowment	% %						
C	The percentages in lines 2a, 2b, and 2c shou							
3a	Are there endowment funds not in the posse		ation that are held a	nd administered for	the organi	zation		
-	by				<b>3-</b>		Γ	Yes No
	(i) unrelated organizations						3a(i)	X
	(ii) related organizations	•		•			3a(ii)	Х
ь	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Schedule R?				3b	
4	Describe in Part XIII the intended uses of the	•					<u> </u>	
Pai	t VI Land, Buildings, and Equipm	nent.						
	Complete if the organization answere	d "Yes" to Form 990	, Part IV, line 11a. S	ee Form 990, Part X	, line 10.			
	Description of property	(a) Cost or o			Accumulat	ed	(d) Book	value
		basis (investr	', '	, , ,	epreciation	<u> </u>		
1a	Land .	120,	400.				120	0,400.
	Buildings							
	Leasehold improvements							
d	Equipment							
е	Other	<u> </u>						
Tota	. Add lines 1a through 1e. (Column (d) must e	gual Form 990, Part	X, column (B), line 1	10(c))			120	0,400.

Schedule D (Form 990) 2013

Complete if the organization answered "Yes" to (a) Description of security or category (including name of security)	(b) Book value		., iine 12. on. Cost or end-of-year market value
Financial derivatives	(b) Book value	(C) Method of Valuation	on. Cost of end-or-year market value
Closely-held equity interests			
Other			
(A) MUTUAL FUNDS	21,322,369.	FND_OF_VEAR	MARKET VALUE
(B) INVESTMENT IN ANNUITY	77,000.	END-OF-YEAR	
(C) CASH SURRENDER VALUE OF	77,000.	DND OI IHM	THRUIGH VILLOR
(D) LIFE INSURANCE	23,000.	END-OF-YEAR	MARKET VALUE
(E)	23,333		VIII VIII VIII VIII VIII VIII VIII VII
(F)			
(G)			
(H)		· · · · · · · · · · · · · · · · · · ·	
art VIII Investments - Program Related.	21,422,369.	· · · · · · · · · · · · · · · · · · ·	
Complete if the organization answered "Yes" to		1c See Form 990, Part X	, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation	on Cost or end-of-year market value
(1)			
(2)			
(3)		··· <del>-</del> · · · · · · · · · · · · · · · · · · ·	
(4)		- <del></del>	
(5)		<del></del>	
(6)			· · · · · · · · · · · · · · · · · · ·
(7)			·····
(8)			
art IX Other Assets.			
al (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ art IX Other Assets.  Complete if the organization answered "Yes" to (a) □	o Form 990, Part IV, line 1 escription	1d See Form 990, Part X	(, line 15 (b) Book value
al (Col. (b) must equal Form 990, Part X, col. (B) line 13.)  art IX Other Assets.  Complete if the organization answered "Yes" to (a) D	<del></del>	1d See Form 990, Part X	
al (Col. (b) must equal Form 990, Part X, col. (B) line 13.)  art IX Other Assets.  Complete if the organization answered "Yes" to (a) D	<del></del>	1d See Form 990, Part X	
(a) Col. (b) must equal Form 990, Part X, col. (B) line 13.) The last IX Other Assets.  Complete if the organization answered "Yes" to (a) D	<del></del>	1d See Form 990, Part X	
al (Col. (b) must equal Form 990, Part X, col. (B) line 13.)  art IX Other Assets.  Complete if the organization answered "Yes" to (a) D  (1) (2) (3) (4)	<del></del>	1d See Form 990, Part X	
al (Col. (b) must equal Form 990, Part X, col. (B) line 13.) art IX Other Assets.  Complete if the organization answered "Yes" to (a) D (1) (2) (3)	<del></del>	1d See Form 990, Part X	
al (Col. (b) must equal Form 990, Part X, col. (B) line 13.)  art IX Other Assets.  Complete if the organization answered "Yes" to (a) D  (1) (2) (3) (4) (5)	<del></del>		
al (Col. (b) must equal Form 990, Part X, col. (B) line 13.)  art IX Other Assets.  Complete if the organization answered "Yes" to (a) D  (1) (2) (3) (4) (5) (6)	<del></del>		
al (Col. (b) must equal Form 990, Part X, col. (B) line 13.)  art IX Other Assets.  Complete if the organization answered "Yes" to (a) D  (1) (2) (3) (4) (5) (6) (7)	<del></del>		
al (Col. (b) must equal Form 990, Part X, col. (B) line 13.) The art IX Other Assets.  Complete if the organization answered "Yes" to (a) D (1) (2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col. (B) line	escription		
al (Col. (b) must equal Form 990, Part X, col. (B) line 13.)  art IX Other Assets.  Complete if the organization answered "Yes" to (a) D  (1) (2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities.	Description	•	(b) Book value
al (Col. (b) must equal Form 990, Part X, col. (B) line 13.)  art IX Other Assets.  Complete if the organization answered "Yes" to (a) D  (1) (2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col. (B) line (art X) Other Liabilities.  Complete if the organization answered "Yes" to (b) Interest (complete if the organization answered "Yes" to (complete if the organization answered "Yes"	escription  15)  o Form 990, Part IV, line 1	1e or 11f See Form 990,	(b) Book value
al (Col. (b) must equal Form 990, Part X, col. (B) line 13.)  art IX Other Assets.  Complete if the organization answered "Yes" to (a) D  (1) (2) (3) (4) (5) (6) (7) (8) (9)  tal. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities.  Complete if the organization answered "Yes" to (a) Description of liability	escription  15)  o Form 990, Part IV, line 1	•	(b) Book value
al (Col. (b) must equal Form 990, Part X, col. (B) line 13.)  art IX Other Assets.  Complete if the organization answered "Yes" to (a) D  (1) (2) (3) (4) (5) (6) (7) (8) (9)  tal. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities.  Complete if the organization answered "Yes" to (a) Description of liability  (1) Federal income taxes	0escription 15) o Form 990, Part IV, line 1	1e or 11f See Form 990, b) Book value	(b) Book value
art IX Other Assets.  Complete if the organization answered "Yes" to (a) D  (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) (2) (1) (2) (1) (2) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (2) (1) (2) (1) (2) (1) (2) (1) (2) (1) (2) (1) (2) (3) (4) (4) (5) (6) (7) (8) (9) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	0escription 15) o Form 990, Part IV, line 1	1e or 11f See Form 990,	(b) Book value
art IX Other Assets.  Complete if the organization answered "Yes" to (a) D  (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (2) (1) (2) (1) (2) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (1) (2) (1) (1) (2) (1) (1) (2) (1) (1) (2) (1) (1) (2) (1) (2) (1) (2) (1) (2) (3) (4) (4) (5) (6) (7) (8) (9) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	0escription 15) o Form 990, Part IV, line 1	1e or 11f See Form 990, b) Book value	(b) Book value
Al (Col. (b) must equal Form 990, Part X, col. (B) line 13.)  The property of the organization answered "Yes" to (a) D  (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) (1) (1) (1) (1) (2) (1) (1) (1) (2) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	0escription 15) o Form 990, Part IV, line 1	1e or 11f See Form 990, b) Book value	(b) Book value
art IX Other Assets.  Complete if the organization answered "Yes" to (a) D  (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) (1) (1) (1) (2) (1) (1) (2) (1) (1) (2) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	0escription 15) o Form 990, Part IV, line 1	1e or 11f See Form 990, b) Book value	(b) Book value
al (Col. (b) must equal Form 990, Part X, col. (B) line 13.)  art IX Other Assets.  Complete if the organization answered "Yes" to (a) D  (1) (2) (3) (4) (5) (6) (7) (8) (9)  tal. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities.  Complete if the organization answered "Yes" to (a) Description of liability  (1) Federal income taxes (2) AGENCY FUNDS (3) (4) (5) (6)	0escription 15) o Form 990, Part IV, line 1	1e or 11f See Form 990, b) Book value	(b) Book value
al (Col. (b) must equal Form 990, Part X, col. (B) line 13.)  art IX Other Assets.  Complete if the organization answered "Yes" to (a) D  (1) (2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities.  Complete if the organization answered "Yes" to (a) Description of liability  (1) Federal income taxes (2) AGENCY FUNDS (3) (4) (5) (6) (7)	0escription 15) o Form 990, Part IV, line 1	1e or 11f See Form 990, b) Book value	(b) Book value
tal (Col. (b) must equal Form 990, Part X, col. (B) line 13.)  Complete if the organization answered "Yes" to (a) D  (1) (2) (3) (4) (5) (6) (7) (8) (9) Ital. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.  Complete if the organization answered "Yes" to (a) Description of liability  (1) Federal income taxes (2) AGENCY FUNDS (3) (4) (5) (6) (7) (8)	0escription 15) o Form 990, Part IV, line 1	1e or 11f See Form 990, b) Book value	(b) Book value
tal (Col. (b) must equal Form 990, Part X, col. (B) line 13.)  Part IX Other Assets.  Complete if the organization answered "Yes" to (a) D  (1) (2) (3) (4) (5) (6) (7) (8) (9)  Part X Other Liabilities.  Complete if the organization answered "Yes" to (a) Description of liability (1) Federal income taxes (2) AGENCY FUNDS (3) (4) (5) (6) (7)	15) o Form 990, Part IV, line 1	1e or 11f See Form 990, b) Book value	(b) Book value

	fule D (Form 990) 2013 BUDDHIST CHURCHES OF AMERI			94-2	2857583	Page 4
Par	XI Reconciliation of Revenue per Audited Financial Stateme	ents With F	Revenue per R	eturn	-	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.					
1	Total revenue, gains, and other support per audited financial statements			1	3,009	,184.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12					
а	Net unrealized gains on investments	2a 1	,979,538.			
b	Donated services and use of facilities	2b		]		
С	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIII)	2d	100.	]		
е	Add lines 2a through 2d			2e	1,979	,638.
3	Subtract line 2e from line 1			3	1,029	,546.
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	65,679.			
b	Other (Describe in Part XIII.)	4b	9,431.	]		
С	Add lines <b>4a</b> and <b>4b</b>			4c	75	,110.
_5_	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,104	,656.
Par	t XII Reconciliation of Expenses per Audited Financial Statem	ents With	Expenses per	Retu	rn.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a					
1	Total expenses and losses per audited financial statements			1	1,717	,294.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25					
а	Donated services and use of facilities	2a				
b	Prior year adjustments	2b		1		
С	Other losses .	2c		]		
d	Other (Describe in Part XIII)	2d		1		
е	Add lines 2a through 2d	-		2e		0.
3	Subtract line 2e from line 1			3	1,717	,294.
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	65,679.			
b	Other (Describe in Part XIII)	4b	9,431.	1		
С	Add lines 4a and 4b		-	4c	75	,110.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	1,792	,404.
Par	t XIII Supplemental Information.					
Provi	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part	IV, lines 1b a	nd 2b, Part V, line	4, Part	X, line 2, Part	XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add	litional informa	ation			
			··			
PAF	T V, LINE 4:				·	
					_	
EXI	LANATION: THE ENDOWMENT FUND IS INTENDED	TO FUND	PROFESSI	ONAI	_ CHAIR	<u>s,                                    </u>
COT	OIADGUIDG AND ORUGE REUGARIONAL DECODANG	M113 M C	TIDDODM TO	DO (	**********	
SCI	OLARSHIPS, AND OTHER EDUCATIONAL PROGRAMS	THAT S	OPPORT JO	נ טענ	SHINSHU	
MTN	TEMPRE CRANCARD AND ARCANTARD BY BUILDING	m cumc	UEC OF AM	י ד מיטו	~ ~	
MITI	ISTERS SPONSORED AND ORGANIZED BY BUDDHIS	1 CHURC	HES OF AM	IEKT (	_A •	
						<del></del>
DΔI	T XI, LINE 2D - OTHER ADJUSTMENTS:					
1 771	I AL, DINE 2D OTHER ADOUDTHERTS.					
TNT	ESTMENT INCOME ADJUSTMENT					100.
<u> </u>	EDIMENT TREOME ADVODIMENT					100.
PAT	T XI, LINE 4B - OTHER ADJUSTMENTS:					
					··	
DIS	TRIBUTIONS TO CHARITABLE REMAINDER TRUST	BENEFIC	IARIES		9	,431.
					<u>-</u>	<u> </u>
PAI	T XII, LINE 4B - OTHER ADJUSTMENTS:				<del></del>	
33205 09-25-	13			Sched	ule D (Form 9	990) 2013

Schedule D (Form 990) 201 Part XIII   Supplement	3 ıtal l	BUDDHIST nformation (contin	CHURCHES	OF AME	ERICA -	ENDOWMEN'	<u> 194-28575</u>	83 Page 5
DISTRIBUTIONS	то	CHARITABLE	REMAINDER	TRUST	BENEFI	CIARIES		9,431.
					<del></del>			·
								<del> </del>
					<del> </del>			
							<del></del>	
				· · · · · · · · · · · · · · · · · · ·		•		
								<del></del>
	****							
						- · · · · · · · · · · · · · · · · · · ·		
			P#		<del></del>		···· - ·- ·	

Schedule D (Form 990) 2013

SCHEDULEI (Form 990)

Department of the Treasury

Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ■ Attach to Form 990. ▶ Information about Schedule I (Form 990) and its instructions is at www.irs gov/form990.

OMB No 1545-0047

Open to Public Inspection

2 Employer identification number 94-2857583 (h) Purpose of grant or assistance X Yes 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 1 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 (g) Description of non-cash assistance NEW BUILDING AND ARIOUS PROGRAMS FROM CHARITABLE ROM CHARITABLE LLOCATION FOR ALLOCATION FOR DISTRIBUTION DISTRIBUTION PROFESSORAL REMAINDER REMAINDER NITRUST NITRUST CHAIRS (f) Method of valuation (book, FMV, appraisal, other) ୗ o 0 (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States - ENDOWMENT recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (d) Amount of cash grant 561 4.140 333,650 1,181,537 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table OF AMERICA (c) IRC section if applicable 503(C)3 503(C)3 BUDDHIST CHURCHES 94-1498382 94-1700607 94-6651309 93-6262039 General Information on Grants and Assistance (b) EiN criteria used to award the grants or assistance? 1 (a) Name and address of organization TANINO 1992 CHARITABLE REMAINDER KAZUO/BETTY FURUSHO CHARITABLE INSTITUTE FOR BUDDHIST STUDIES BUDDHIST CHURCHES OF AMERICA or government SAN FRANCISCO, CA 94109 Name of the organization REMAINDER UNITRUST BERKELEY CA 94704 2140 DURANT AVE. 1710 OCTAVIA ST. UNITRUST Part Part II

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2013)

26

(f) Description of non-cash assistance (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed EXPLANATION: THE ENDOWMENT FOUNDATION PROVIDES GRANTS AS FINANCIAL SUPPORTS TO ITS RELATED ENTITIES. THESE RELATED ENTITIES ARE REQUIRED TO USE THESE Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information (d) Amount of non-cash assistance FUNDS TOWARD ACTIVITIES THAT JODO SHINSHU BUDDHISM IN AMERICA. (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance PART I, LINE 2: Part III

Schedule I (Form 990) (2013)

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Page 2

94-2857583

ENDOWMENT

BUDDHIST CHURCHES OF AMERICA

Schedule I (Form 990) (2013)

## SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

➤ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

BUDDHIST CHURCHES OF AMERICA - ENDOWMENT   94-285/583
FORM 990, PART VI, SECTION B, LINE 11:
EXPLANATION: 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:
EXPLANATION: SEE STATEMENT (C)
FORM 990, PART VI, SECTION B, LINE 15:
EXPLANATION: SEE STATEMENT (D)
FORM 990, PART VI, SECTION C, LINE 19:
EXPLANATION: 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.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:
INVESTMENT INCOME ADJUSTMENT 100.

FORM 990, PART XII, LINE 2C:

LHA For Paperwork Reduction Act-Notice, see the Instructions for Form 990 or 990-EZ. 332211 09-04-13

Schedule O (Form 990 or 990-EZ) (2013)

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization  BUDDHIST CHURCHES OF AMERICA - ENDOWMENT	Employer identification number 94-2857583
EXPLANATION: THE BOARD OF DIRECTORS IS RESPONSIBLE FOR OV	ERSIGHT OF THE
AUDIT, REVIEW, OR COMPLIATION OF THE FINANCIAL STATEMENTS	AND SELECTION
OF AN INDEPENDENT ACCOUNT. THIS PROCESS HAS BEEN CONSISTE	NT FROM PRIOR
YEARS.	
-	
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	<del>,</del>
	<u> </u>

SCHEDULE R (Form 990)

Name of the organization Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

Open to Public Inspection

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

► See separate instructions.

▶Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

BUDDHIST CHURCHES OF AMERICA - ENDOWMENT

Employer identification number 94-2857583

Name, address, and EN (if applicable)							
vx-Exempt Organizations Complete if year  year    EIN   Primary	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state of foreign country)				(f) Direct controlling entity
x-Exempt Organizations Complete if year ( EIN Primary on Primary ( SHINSHU CHURC - 94-1700607 HIGHER EDUCAT							
x-Exempt Organizations Complete if year  year  - 94-1498382  HEADQUARTER F SHINSHU CHURC - 94-1700607  HIGHER EDUCAT							
year year  Selv  Primary  Primary  HEADQUARTER F  SHINSHU CHURC  HIGHER EDUCAT							
year  year  EIN  94-1498382  HEADQUARTER F SHINSHU CHURC  - 94-1700607  HIGHER EDUCAT							
(a) (b) (c) (d) (e) (e) (d) (e)		ations Complete if the organization ar	nswered "Yes" on Form 990	ı, Part IV, line 34 be	scause it had one	or more related tax-exel	mpt
- 94-1498382  HEADQUARTER FOR JODO  SHINSHU CHURCHES  - 94-1700607  HIGHER EDUCATIONAL STUDIES CALIFORNIA  503(C)3  PF	(a) Name, address, and EIN of related organization		(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section \$12(b)(13) controlled entity?
- 94-1700607  HIGHER EDUCATIONAL STUDIES CALIFORNIA 503(C)3 PF  FIGHER EDUCATIONAL STUDIES CALIFORNIA 503(C)3 PF	OF AMERICA -	HEADQUARTER FOR JODO			1		
CA 94704 HIGHER EDUCATIONAL STUDIES CALIFORNIA 503(C)3 PF		SHINSHU CHURCHES	CALLFORNIA	503(C)3	±4	N/A	G .
	CA CA		CALIFORNIA	503(C)3	PF	N/A	×
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	or Paperwork Reduction Act Notice, see the Instruction	ns for Form 990.				Schedule R	Schedule R (Form 990) 2013

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94-2857583

Page 2

Schedule R (Form 990) 2013 BUDDHIST CHURCHES OF AMERICA - ENDOWMENT

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

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(a) Name, address, and EIN of related organization	(b) Primary activity	Legal Legal domicile (state or foreign	(u) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)		Share of total income	Share of end-of-year assets	Dispri	Code 20 of 8 K-1 (Fo		Perc
									:		
-											
Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.	izations Taxable	as a Corpo	ration or Trust Co	omplete if the	organization	answered "Ye	s" on Form 990	, Part IV, line	34 because it ha	ad one or mo	re related
(a) Name, address, and EIN of related organization		Prim	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	ling Type of entity (C corp. S corp, or trust)		(f) Share of total Income	(g) Share of end-of-year assets	(h) Percentage ownership	(I) Section 512(b)(13) controlled entity?
KAZUO/BETTY FURUSHO CHARITABLE REMAINDER UNITRUST - 94-6651309		MANAGEMENT	E	CA		TRUST		4,561,	55,760	100,008	×
TANINO 1992 CHARITABLE REMAINDER UNITRUST 93-6262039		MANAGEMENT	F	WA		TRUST		4,140,	54,501	100,00%	×

Schedule R (Form 990) 2013

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332162 09-12-13

# Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36

Note Complete ing 1 if any autity is listed in Darte II III or IV of this schadule				`	Vec	١.
Note: Complete line in any drinky is instead in a to it, in, or you are selected or with one or more related organizations listed in Parts II-IV?  1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more re	ated organizations listed in	רויון Parts II-IV?			1 1
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				<u>.</u>	×	- 1
<b>b</b> Gift, grant, or capital contribution to related organization(s)				<b>P</b>	×	- 1
c Gift, grant, or capital contribution from related organization(s)				<b>1</b>	×	١
d Loans or loan quarantees to or for related organization(s)				₽	×	
				<u>1</u>	×	l
						1
f Dividends from related organization(s)				<b>+</b>	×	
				7	×	I
				<u> </u>	<b>:</b> >	1
h Purchase of assets from related organization(s)				≣ ;	<b>4</b> >	1
i Exchange of assets with related organization(s)				=	∢:	ı
j Lease of facilities, equipment, or other assets to related organization(s)				=	×	-1
k Lease of facilities, equipment, or other assets from related organization(s)				¥	×	i
I Performance of services or membership or fundraising solicitations for related organization(s)	ınızatıon(s)			=	×	- 1
m Performance of services or membership or fundraising solicitations by related organization(s)	nization(s)			£	×	ı
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	on(s)			t.	×	- 1
<ul> <li>Sharing of paid employees with related organization(s)</li> </ul>				9	×	- 1
p Reimbursement paid to related organization(s) for expenses				4	×	- 1
q Reimbursement paid by related organization(s) for expenses				10	×	- 1
				<u>-</u>	< >	1
,,				SL	4	1
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	who must complete th	is line, including covered r	elationships and transaction thresholds.			1
(a) Name of related organization	(b) Transaction type (a·s)	( <b>c</b> ) Amount involved	( <b>d</b> ) Method of determining amount involved	volved		
BUDDHIST CHURCHES OF AMERICA - (1) HEADQUARTERS	В	1,186,037.				1 1
(2) INSTITUTE OF BUDDHIST STUDIES	В	338,245.				1
(3)						
(4)						l 1
(5)						- 1
(9)						
332163 08-12-13	32		Schedule R (Form 990) 2013	R (Form 9	90) 2013	l m

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# - ENDOWMENT Schedule R (Form 990) 2013 BUDDHIST CHURCHES OF AMERICA

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on 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

( <del>X</del>	intage irship																			
=	or Perce			 		 				 						_	 	 $\downarrow$		
3	General managin partner	Yes No		 	_	 		 		 									 	
(6)	Dispropor- Code V-UBI General or Percentage tonate amount in box 20 managing ownership of Schedule K-1 partner?	(Form 1065)																		
Ξ	spropor- tionate ocations?	Yes No	-		-  -	 		 		 										_
	<u>a                                    </u>	٤		 		 	 	 	_		,		 		 					
(6)	Share of end-of-year	assets																		
€	Share of total	Income																		
(e)	Are all partners sec 501(c)(3) orgs?	es No															 	 <u> </u>	 	
	ax, ax	·514) Y		 		 		 _			-		 					 -		
(d)	Predominant income parties sec (related, unrelated, 501(c)(3) excluded from tax	under section 512																		
(c)	e g	country)												,						
(a)	Primary activity																			
(a) (b) (c) (d) (d) (d) (d)	Name, address, and EIN of entity																			

Schedule R (Form 990) 2013

Dart VII	(Form 990) 2013   BUDDHIST CHURCHES OF AMERICA - ENDOWMENT 94 - 2857583   Page 5   Supplemental Information
rait VII	Supplemental information
	Provide additional information for responses to questions on Schedule R (see instructions)
	•
<u>-, , ,</u>	
<del></del>	

## **BCA ENDOWMENT DIRECTORS**

## As of December 31, 2013

		Street	City/State/Zip	
Officer	Mr. Charles Ozakı	1131 Sunset Drive	Broomfield, CO 80020	President
Officer	Mr Kevın Yoshida	2870 Timberchase Trail	Highland Ranch, CO 80126	Vice President
Officer	Mr. Richard Endo	1158 Crespi Drive	Sunnyvale, CA 94086	Treasurer (CFO)
Officer	Mr Roger Suekama	1105 N. Northwest Highway	Park Ridge, IL 60068	Secretary
	Mr Tom Nishikawa	6215 Meridian Avenue	San Jose, CA 95120-4916	
	Mr. James Aokı	3611 Taylor Avenue	Ogden, UT 84403	
	Mr Jeff Folick	13601 Belle Rive	Santa Ana, CA 92705	
	Rev. Dr David Matsumoto	2140 Durant Avenue	Berkeley, CA 94704-1589	
	Mr. Billy Saeki	5847 W 77th Place	Los Angeles, CA 90045	
	Mr. Koichi Sayano	2004 San Antonio Drive	Montebello, CA 90640	
	Mr. Sam Sunada	810 Vineyard Court	Pleasant Hill, CA 94523	
	Ms. Sumiye Tanabe	6498 Bibel Avenue	San Jose, CA 95129	
	Mr. Ken Tanımoto	3728 Valera Drive	Soquel, CA 95073	
	Mr. Steve Terusakı	825 Carmel Avenue	Albany, CA 94706	
	Mr. David Unruhe	12565 Crimson Court	Auburn, CA 95603	
	Mr. Richard Uyematsu	591 Iris Street	Watsonville, CA 95076	
	Mr. Everett Watada	1190 E. Egbert St.	Brighton, CO 80601	
	Rev Haruo Seigen Yamaoka	14981 Portofino Cırcle	San Leandro, CA 94578	

## 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".

Π.

## 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;
- 5. 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.

Bhuddist Churches of America- Endowment (BCAEF) 94-2857583
Statement D

Policy on the Process of Determining Compensation

The Organization's chief employed executive

**Executive Director** 

Executive Director's compensation is determined and approved by the Board of Directors

Other Officers or Key Employees of the Organization by title:

Bookkeeper

Bookkeeper's compensation is also determined and approved by the Board of Directors

BCAEF is a voluntary organization with only paid staff members and does not have paid officers.

Form 8868 (Rev 1-2014)					Page 2
If you are filing for an Additional (Not Automatic) 3-Month	Extension,	complete only Part II and check the	s box	<del></del>	<b>▶</b> X
Note. Only complete Part II if you have already been granted a	n automatic	3-month extension on a previously f		8868.	, <u>-</u>
If you are filing for an Automatic 3-Month Extension, comp    Dort			-1 /		-lN
Part II Additional (Not Automatic) 3-Month	Extensio				<del></del>
	<del> </del>	Enter filer's	identifyii	ng number, s	see instructions
Type or Name of exempt organization or other filer, see inst	ructions		Employe	r identificatio	n number (EIN) o
print	<b>0.3</b> 5.	ATT OF THE THE		04 00	
File by the due date for Number street, and room or suite BO how				94-28	
Number, street, and room or suite no If a P O box filing your return See 1710 OCTAVIA STREET	, see instruc	tions.	Social se	curity numbe	er (SSN)
instructions City, town or post office, state, and ZIP code For a	foreign add	fress, see instructions.			
SAN FRANCISCO, CA 94109					
Enter the Return code for the return that this application is for (	file a separa	te application for each return)			0 1
Application	Return	Application		···-	Return
ls For	Code	Is For			Code
Form 990 or Form 990-EZ	01				
Form 990-BL	02	Form 1041-A			08
Form 4720 (individual)	03	Form 4720 (other than individual)			09
Form 990-PF	04	Form 5227			10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above)	06	Form 8870		<del></del>	12
STOP! Do not complete Part II if you were not already grant		natic 3-month extension on a prev	iously file	ed Form 886	8.
HIDEAKI MIZUN		and printeress	a. 0.4	100	
• The books are in the care of $\triangleright$ 1710 OCTAVIA	STREET		CA 94	109	
Telephone No ► (415)776-5068		Fax No •			<u> </u>
If the organization does not have an office or place of busing     If the organization of the organiz			£ 415.0 .0 £-		
<ul> <li>If this is for a Group Return, enter the organization's four dig box</li> <li>If it is for part of the group, check this box</li> </ul>	<del></del>			_	•
box ► If it is for part of the group, check this box ► I request an additional 3-month extension of time until		ach a list with the names and EINs on BER 15, 2014	all memb	ers the exter	ision is for.
5 For calendar year 2013, or other tax year beginning	HOVE	, and endin	a		
-6 If the tax year entered in line 5 is for less than 12 months	check reas		Fınalı	eturn	<del></del>
Change in accounting period	, onoon rouc			Ctairi	
7 State in detail why you need the extension					
THE ORGANIZATION HAS NOT COM	PLETED	AN ANNUAL FINANCI	AL AU	DIT. W	E
RESPECTFULLY REQUEST ADDITION					
8a If this application is for Forms 990-BL, 990-PF, 990-T, 472	20, or 6069,	enter the tentative tax, less any			
nonrefundable credits. See instructions			8a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 60	69, enter an	y refundable credits and estimated			
tax payments made Include any prior year overpayment	allowed as	a credit and any amount paid			
previously with Form 8868			8b	\$	0.
C Balance due. Subtract line 8b from line 8a. Include your	payment wi	th this form, if required, by using			
EFTPS (Electronic Federal Tax Payment System) See ins			8c	\$	0.
——————————————————————————————————————		st be completed for Part II o	•		
Under penalties of perjury, I declare that I have examined this form, incli it is true, correct, and complete, and that I am authorized to prepare this	luding accom s form.	panying schedules and statements, and t	the best o	of my knowledç	ge and belief,
Signature ▶ Title ▶	- CPA		Date	•	
		· · · · · · · · · · · · · · · · · · ·	Date		

Form 8868 (Rev. 1-2014)