Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

► Go to www.irs.gov/Form990 for instructions and the latest information.

2019

DLN: 93493135028501 OMB No. 1545-0047

Open to Public Inspection

		enue Service									
			Calendar year, or tax year beg C Name of organization	ginning 07-01-2019 , and ending 06-	30-2	020			·		
		ipplicable:	KHYENTSE FOUNDATION				D Employ	er identifi	ication number		
□ Na		change					91-2167	7303			
☐ Ini		-	Doing business as								
☐ Fina	al retur	n/terminated	d			-	E Telephon	a numahar			
		d return	DO BOY 156648	f mail is not delivered to street address) Room/	il is not delivered to street address) Room/suite						
□Ар	plicati	on pending	9				(503) 4	75-0082			
			City or town, state or province, co SAN FRANCISCO, CA 94115	ountry, and ZIP or foreign postal code							
			·				G Gross re	ceipts \$ 44	1,701,033		
			F Name and address of princi	ipal officer:	Н	l(a) Is this	a group re	turn for			
			CANGIOLI CHE PO BOX 156648				inates?		□Yes 🗹 No		
			SAN FRANCISCO, CA 94115		_ н	l (b) Are all include		es	☐ Yes ☐No		
I Ta	x-exer	mpt status	: y 501(c)(3)	◄ (insert no.)				ist. (see	instructions)		
J W	ebsit	te:▶ W\	WW.KHYENTSEFOUNDATION.ORG		⊢ н	(c) Group		•	•		
						·	•				
K Forr	n of o	rganizatior	n: 🗹 Corporation 🔲 Trust 🔲 As	ssociation Other ►	L	Year of format	ion: 2001	M State WA	of legal domicile:		
								WA			
Pa	art I		nmary								
		Briefly de SEE SCHI	escribe the organization's mission	n or most significant activities:							
Ce	-	JEE JEH									
E E	-										
(ell	-										
Governance			nis box > if the organization of voting members of the gover	discontinued its operations or disposed of	more	e than 25%	of its net a	ssets. 3	13		
	l		-	• , , , ,	•			-	13		
Se	l		· -	of the governing body (Part VI, line 1b)				4	13		
ĝ	l		, ,	calendar year 2019 (Part V, line 2a) .				5	0		
Activities &	l		·	necessary)	•		•	6	100		
⋖	ı			art VIII, column (C), line 12				7a	0		
	b	Net unre	elated business taxable income fr	rom Form 990-T, line 39				7b	0		
						Prio	r Year		Current Year		
<u>9</u> :	8	Contribu	itions and grants (Part VIII, line 1	.h)			2,147,0	034	9,040,610		
Ţ,	9	Program	service revenue (Part VIII, line 2	2g)				0	0		
Ravenue	10	Investm	ent income (Part VIII, column (A)), lines 3, 4, and 7d)			1,982,5	503	1,343,197		
_	11	Other re	venue (Part VIII, column (A), line	es 5, 6d, 8c, 9c, 10c, and 11e)				0	0		
	12	Total rev	venue—add lines 8 through 11 (r	must equal Part VIII, column (A), line 12)			4,129,5	537	10,383,807		
	13	Grants a	and similar amounts paid (Part IX	, column (A), lines 1–3)			3,966,0	073	5,250,096		
	14	Benefits	paid to or for members (Part IX,	column (A), line 4)				0	0		
SS.	15	Salaries	, other compensation, employee	benefits (Part IX, column (A), lines 5-10)			80,6	520	71,433		
Expenses	16a	Professi	onal fundraising fees (Part IX, co	lumn (A), line 11e)				0	0		
D G	ь	Total fund	draising expenses (Part IX, column (D	o), line 25) ►21,634							
Щ	17	Other ex	penses (Part IX, column (A), line	es 11a-11d, 11f-24e)			212,5	585	245,211		
	l			equal Part IX, column (A), line 25)			4,259,2		5,566,740		
	l		e less expenses. Subtract line 18				-129,7	_	4,817,067		
× 0:						Beginning o			End of Year		
Σ S S S											
Net Assets or Fund Balances	20	Total ass	sets (Part X, line 16)				49,960,0)24	55,029,266		
ΣĘ.	21	Total lial	bilities (Part X, line 26)					0	10,557		
žΞ	22	Net asse	ets or fund balances. Subtract lin	e 21 from line 20			49,960,0	024	55,018,709		
Pa	rt II	Sigr	nature Block			<u> </u>					
				amined this return, including accompanying							
knowi any k			er, it is true, correct, and comple	ete. Declaration of preparer (other than of	ricer)	is pased on	all informa	ation of v	vnich preparer has		
		11									
		*****	** ture of officer			2021 Date	-05-14				
Sign		Sigila	ture or officer			Date					
Here	•		O NOAILLES TREASURER								
		<u> </u>	or print name and title								
			Print/Type preparer's name	Preparer's signature	Date	Chec		PTIN P00540880)		
Paid		 	p. 1 h			self-e	employed				
Pre	pare	er	Firm's name MCDONALD JACOBS	5 PC		Firm'	's EIN ▶ 93-	u900579			
Use	On	ıly 🕆	Firm's address ► 520 SW YAMHILL ST	STE 500		Phon	e no. (503)	227-0581			
			PORTLAND, OR 972	204			,				
	he In	S discus	s this return with the preparer sh						es 🗆 No		
			s this return with the preparer sr eduction Act Notice, see the s		•	Cat. No. 11	282V	¥ ك	Form 990 (2019)		
						-u. IVO. II			(4U17)		

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Pa	rt III Statement	of Program Service	e Accomplis	hments		
	Check if Sche	dule O contains a respo	onse or note to a	any line in this Part III		🗹
1	Briefly describe the o	rganization's mission:		•		
SEE :	SCHEDULE O					
2	Did the organization					
	the prior Form 990 o	r 990-EZ?				☐ Yes 🗹 No
	If "Yes," describe the	se new services on Sch	nedule O.			
3	Did the organization	cease conducting, or m	ake significant	changes in how it conduc	ts, any program	
	services?		🗌 Yes 🗹 No			
	If "Yes," describe the	se changes on Schedul	e O.			
4	Section 501(c)(3) an	ation's program service d 501(c)(4) organization ue, if any, for each pro	ons are required	to report the amount of	irgest program services, as meas grants and allocations to others,	
4 4a	Section 501(c)(3) an	d 501(c)(4) organizatio	ons are required	to report the amount of		
	Section 501(c)(3) an expenses, and reven	d 501(c)(4) organization ue, if any, for each pro	ons are required gram service re	to report the amount of ported.	grants and allocations to others,	the total
	Section 501(c)(3) an expenses, and reven	d 501(c)(4) organization ue, if any, for each pro	ons are required gram service re	to report the amount of ported.	grants and allocations to others,	the total
4a	Section 501(c)(3) an expenses, and reven (Code: See Additional Data	d 501(c)(4) organization ue, if any, for each pro) (Expenses \$	ons are required gram service re 939,011	to report the amount of ported. including grants of \$	grants and allocations to others, 939,011) (Revenue \$	the total
4a	Section 501(c)(3) an expenses, and reven (Code: See Additional Data (Code:	d 501(c)(4) organization ue, if any, for each pro) (Expenses \$	ons are required gram service re 939,011	to report the amount of ported. including grants of \$	grants and allocations to others, 939,011) (Revenue \$	the total
4a 4b	Section 501(c)(3) an expenses, and reven (Code: See Additional Data (Code: See Additional Data	d 501(c)(4) organization (ue, if any, for each pro (Expenses \$ (Expenses \$	939,011 1,156,597	to report the amount of ported. including grants of \$ including grants of \$	grants and allocations to others, 939,011) (Revenue \$ 1,156,597) (Revenue \$)
4a 4b	Section 501(c)(3) an expenses, and reven (Code: See Additional Data (Code: See Additional Data (Code:	d 501(c)(4) organization () (Expenses \$ () (Expenses \$ () (Expenses \$ () (Expenses \$	939,011 1,156,597	to report the amount of ported. including grants of \$ including grants of \$	grants and allocations to others, 939,011) (Revenue \$ 1,156,597) (Revenue \$)
4a 4b	Section 501(c)(3) an expenses, and reven (Code: See Additional Data (Code: See Additional Data (Code: See Additional Data	d 501(c)(4) organization ue, if any, for each pro) (Expenses \$) (Expenses \$) (Expenses \$ Fable ces (Describe in Schedu	939,011 1,156,597 880,869	to report the amount of ported. including grants of \$ including grants of \$ including grants of \$	grants and allocations to others, 939,011) (Revenue \$ 1,156,597) (Revenue \$)
4a 4b 4c	Section 501(c)(3) an expenses, and reven (Code: See Additional Data (Code: See Additional Data (Code: See Additional Data	d 501(c)(4) organization ue, if any, for each pro) (Expenses \$) (Expenses \$) (Expenses \$	939,011 1,156,597 880,869	to report the amount of ported. including grants of \$ including grants of \$ including grants of \$	grants and allocations to others, 939,011) (Revenue \$ 1,156,597) (Revenue \$)

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Par	tiv Checklist of Required Schedules			
			Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 2	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D,</i> Part I	6		No
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 2	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III	8		No
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		No
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		No
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.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 3	11a	Yes	
	assets reported in that X, line 10. If the some sendance by that VII 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	11b		No
	total assets reported in rainx, line 10: If res, complete schedule b, rain viii 2 :	11c		No
	in tack, the 10. If tes, complete schedule b, tack 2 1 1 1 1 1 1 1 1 1 1 1	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, 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	Yes	
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	Yes	

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX.

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Yes

Yes

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Nο

Nο

No

Nο

16

17

18

19

20a

20b

21

16

17

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19

rm s	990 (2019)			Page 4
Part	Checklist of Required Schedules (continued)			
			Yes	No
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L</i> ,Part III	27		No
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M \cdot	29		No
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
а	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
	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		No
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
ar	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>		<u> </u>
			Yes	No

1a

1b

1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .

 ${f b}$ Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .

 ${f c}$ Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

26

0

1c

Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
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	Yes	
b	If "Yes," enter the name of the foreign country: ►HK , IN			
5a	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
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		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and service provided to the payor?	5 7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	-		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a	4		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	-		
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources	1		
	against amounts due or received from them.)	┦		
	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.]		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
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]		
	Enter the amount of reserves on hand	」 		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15	_	No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No

Par	8a, 8b, or 10b below, describe the circur	osure For each "Yes" response to lines 2 nstances, processes, or changes in Sched or note to any line in this Part VI	lule O.	See instructions.	" respo	nse to	lines
Se	Section A. Governing Body and Managen	nent					
				,		Yes	No
1a	1a Enter the number of voting members of the go	verning body at the end of the tax year	1a	13			
	If there are material differences in voting rights body, or if the governing body delegated broad similar committee, explain in Schedule O.						
b	b Enter the number of voting members included	in line 1a, above, who are independent	1b	13			
2	2 Did any officer, director, trustee, or key employ officer, director, trustee, or key employee?	vee have a family relationship or a busine	ss rela	tionship with any other	2		No
3	3 Did the organization delegate control over man of officers, directors or trustees, or key employ				3		No
4	4 Did the organization make any significant chan	ges to its governing documents since the	prior F	orm 990 was filed? .	4		No
5	5 Did the organization become aware during the	year of a significant diversion of the orga	nizatio	n's assets? .	5		No
6	6 Did the organization have members or stockho	ders?			6		No
7a	7a Did the organization have members, stockhold members of the governing body?			' '	7a		No
b	b Are any governance decisions of the organization persons other than the governing body?		,	pers, stockholders, or	7b		No
8	8 Did the organization contemporaneously document the following:	nent the meetings held or written actions	undert	aken during the year by			
a	a The governing body?				8a	Yes	
b	b Each committee with authority to act on behalf	of the governing body?			8 b	Yes	
9				be reached at the			
	organization's mailing address? If "Yes," provid				9		No
Se	Section B. Policies (This Section B requests	s information about policies not requ	iired b	y the Internal Revenue	Code		
10-	O- Did the	h			10a	Yes	No
	Oa Did the organization have local chapters, branc	•			IUa		No
	b If "Yes," did the organization have written polic and branches to ensure their operations are co	nsistent with the organization's exempt p	urpose	s?	10b		
	1a Has the organization provided a complete copy form?				11a		No
	b Describe in Schedule O the process, if any, use	•					
	2a Did the organization have a written conflict of i				12a	Yes	
	b Were officers, directors, or trustees, and key exconflicts?				12b	Yes	
С	c Did the organization regularly and consistently Schedule O how this was done			If "Yes," describe in	12c	Yes	
13	3 Did the organization have a written whistleblow	ver policy?			13		No
14	4 Did the organization have a written document i	retention and destruction policy?			14	Yes	
15	5 Did the process for determining compensation persons, comparability data, and contemporant						
а	a The organization's CEO, Executive Director, or	top management official			15a	Yes	
b	b Other officers or key employees of the organization				15b	Yes	
	If "Yes" to line 15a or 15b, describe the proces	,					
16a	6a Did the organization invest in, contribute asset taxable entity during the year?		milar a • •	rrangement with a	16a		No
b	b If "Yes," did the organization follow a written p in joint venture arrangements under applicable status with respect to such arrangements?	federal tax law, and take steps to safegu	iard the	evaluate its participation e organization's exempt			
_	<u> </u>				16b		
<u>Se</u> 17	Section C. Disclosure 7 List the states with which a copy of this Form 9	90 is required to be filed					
1/	LIST THE STATES WITH WHICH A COPY OF THIS FORM S	FL , HI , M	ID , MS	, NH , NM , NC , PA , SC	, TN , ι	JT , VA	, WV
18	8 Section 6104 requires an organization to make only) available for public inspection. Indicate he						
	$lacktriangledown$ Own website $\ lacktriangledown$ Another's website $\ lacktriangledown$	Upon request \square Other (explain in Se	chedule	e O)			
19	policy, and financial statements available to the	public during the tax year.		,			
20	State the name, address, and telephone number MARCO NOAILLES 2914 NE 43RD AVENUE	er of the person who possesses the organ PORTLAND, OR 97213 (503) 475-0082	ization	s books and records:			

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

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, or 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. See instructions for the order in which to list the persons above.

See instructions for the order in which to list the										
Check this box if neither the organization no	r any related o	ganizat	ion c	omp	ens	ated a	ny c	current officer, direc	ctor, or trustee.	
(A) Name and title	(B) Average hours per week (list any hours for related		ne bo	ox, i n of or/t	t ch unle: ficer rust	ss pers r and a :ee)	son a	Reportable compensation from the organization (W-2/1099-	(E) Reportable compensation from related organizations (W-2/1099-	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	related organizations
(1) ISABEL PEDROSA	15.00	×						42 500	0	0
BOARDMEMBER		^						42,500	0	0
(2) LYNN HOBERG BOARDMEMBER	40.00	х						30,000	0	0
(3) MARC NOAILLES TREASURER	40.00			×				12,000	0	0
(4) DZONGSAR JAMYANG KHYENTSE RINPOCHE CHAIRPERSON	7.00	X		×				0	0	0
(5) ANGIE TSAI BOARDMEMBER	1.00	x						0	0	0
(6) ANITA LEE BOARDMEMBER	1.00	Х						0	0	0
(7) ANJA HARTMANN BOARDMEMBER	10.00	Х						О	0	0
(8) ASHA PILLAI-BALSARA BOARDMEMBER	1.00	х						О	0	0
(9) CAROLYN YEH BOARDMEMBER	10.00	Х						o	0	0
(10) CHRISTINE NG BOARDMEMBER	5.00	Х						0	0	0
(11) KRIS YAO BOARDMEMBER	1.00	x						0	0	0
(12) RICHARD CHANG BOARDMEMBER	1.00	х						0	0	0
(13) DRUBGYAD TENZIN RINPOCHE BOARDMEMBER	1.00	Х						0	0	0
(14) LISA DAVIDSON SECRETARY	3.00			Х				0	0	0
(15) CANGIOLI CHE EXECUTIVE DIRECTOR	40.00	х		х				0	0	0
										Form 990 (2019)

(A)

compensation from the organization \blacktriangleright 0

(B)

Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (F)

Page 8

	Name and title	Average hours per week (list any hours	Average hours per than one box, unless person week (list any hours any hours for related								ensation related izations		Estimated amount of other compensation from the organization and		
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		(71099- ISC)		,71099- ISC)		rganizati relati organiza	ed
				_											
				_											
c T	Sub-Total		Α.				*			84,500		0			0
2	Total number of individuals (including of reportable compensation from the			e liste	ed a	bov	e) who	rece	eived mo	re than :	\$100,000				_
	Billi i i i i i i i													Yes	No
3	Did the organization list any former of line 1a? <i>If "Yes," complete Schedule 3</i>	,			•		oyee,		-		eu empioye	e on	3		No
4	For any individual listed on line 1a, is organization and related organization individual												4		No
5	Did any person listed on line 1a receive services rendered to the organization		•						_				5		No
Se	ection B. Independent Contract	ors													
1	Complete this table for your five high- from the organization. Report comper												pensa	ation	
	Name a	(A) and business addre	ess							De	(B) escription of s	ervices		(C Compen	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

(C)

(D)

(E)

orm 9		Statement	of F	Revenue						Page 9
			dule	O contains a	a respo	onse or note to any	r line in this Part VIII (A) Total revenue	(B) Related or exempt	(C) Unrelated business	(D) Revenue excluded from
	1.							function revenue	revenue	tax under sections 512 - 514
nts nts	1 a	a Federated campaigns b Membership dues			1a					
oran Joui		c Fundraising even		L	1b 1c					
Contributions, Gifts, Grants and Other Similar Amounts		d Related organiza		Ļ	1d					
Gif	Ι,	e Government grants			1e					
ons, Sir	1	All other contribution and similar amounts								
outic her		above		L	1f	9,040,610				
Contributions, Gifts, Grants and Other Similar Amounts	'	g Noncash contribution lines 1a - 1f:\$	ons in	iciuaea in	1 g					
		h Total. Add lines	1a-1	f		>	9,040,610			
						Business Code				
	2a									
) Nue	b	-								
Program Service Revenue	ן י									
, vice	c									
S.	d									
gran	e									
Æ										
		All other program								
		Total. Add lines 2 Investment income				nterest and other	1	<u> </u>	<u> </u>	<u> </u>
	5	similar amounts) .			•	•	1,668,45	4		1,668,454
		Income from invest Royalties			mpt bo	ond proceeds	-			+
		,		(i) Rea	al	(ii) Personal				
	6a	Gross rents	6a							
	ь	Less: rental	6b							
	c	expenses Rental income	GD							
		or (loss)	6c				_			
	'	Net rental income	or	(ioss) (i) Securi	· ·	(ii) Other				+
	7a Gross amount from sales of 7a 33,991,9									
		from sales of assets other than inventory			991,969	,				
	b	Less: cost or	7b	34.1	217 226					
		other basis and sales expenses		34,3	317,226					
	c	Gain or (loss)	7c	-š	325,257	7				
		Net gain or (loss)					-325,25	7		-325,257
ne	8a	Gross income from fu (not including \$		of						
Other Revenue		contributions reporte See Part IV, line 18			8a					
Re	l b	Less: direct expen	ses		8b					
the	۰	: Net income or (los	s) fr	om fundrais	ing eve	ents 🕨	_			
	9a	Gross income from	gami	ing activities.						
	١.	See Part IV, line 19			9a 9b					
	l	Less: direct expen : Net income or (los				ies •				
		0 1 6								
	10	aGross sales of inve returns and allowa	ances	ry, iess s	10a					
	Ŀ	Less: cost of good	s sol	ld	10 b					
	_	Net income or (los Miscellaneo			invent I	ory ► Business Code				
	11		us K	evenue		Pasiliess Code	1			
	Ŀ	•								
	٥									
	_ ا	All other revenue								
		Total. Add lines 1				•				
	12	: Total revenue. S	ee ir	nstructions				_		
							10,383,80	/	0	0 1,343,197

Form 990 (2019)				Page 10
Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must co		_		ımn (A).
Check if Schedule O contains a response or note to an	y line in this Part IX			<u> L</u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	2,126,851	2,126,851		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	232,061	232,061		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	2,891,184	2,891,184		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	71,433		71,433	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal	9,075		9,075	
c Accounting	13,730		13,730	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees			<u> </u>	
q Other (If line 11q amount exceeds 10% of line 25, column	11,846		11,846	
(A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion	74 679		50.000	21.524
13 Office expenses	71,673		50,039	21,634
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	292		292	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings				
20 Interest	87		87	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	8,260		8,260	
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.)				
a BANK FEES	92,293		92,293	
b				
c			+	
d				_
e All other expenses	37,955		37,955	
25 Total functional expenses. Add lines 1 through 24e	5,566,740	5,250,096	295,010	21,634
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	3,300,740	5,250,050	255,010	21,004
Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).				

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Page 11

000,088

10.557

54,261,706

55,018,709

55,029,266

Form 990 (2019)

757,003

26

27

28

29

30

31

32

33

49,684,818

49,960,024

49,960,024

275,206

Check if Schedule O contains a response or note to any line in this Part IX	

and other liabilities not included on lines 17 - 24).

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Organizations that follow FASB ASC 958, check here <a> \square and

Organizations that do not follow FASB ASC 958, check here ightharpoonup and

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

26

27

28

31

32

33

Fund Balances

ō 29

Assets 30

	Beginning or year		End of year
1 Cash-non-interest-bearing	548,388	1	778,942
2 Savings and temporary cash investments	402,182	2	465,995
3 Pledges and grants receivable, net		3	

Accounts receivable, net Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled 5

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B). 6 7 Notes and loans receivable, net Assets 8 Inventories for sale or use . . . Prepaid expenses and deferred charges . 9 10a Land, buildings, and equipment: cost or other 10a 880,000 basis. Complete Part VI of Schedule D 10b 10c b Less: accumulated depreciation 11 Investments—publicly traded securities . 49,009,454 11 52,904,329 12 Investments—other securities. See Part IV, line 11 . 12 13 13 Investments-program-related. See Part IV, line 11

14 14 Intangible assets . 15 15 Other assets. See Part IV, line 11 . . . 49,960,024 16 16 **Total assets.** Add lines 1 through 15 (must equal line 34) . 55,029,266 17 Accounts payable and accrued expenses . 17 18 18 Grants payable . 19 19 Deferred revenue . . . 20 Tax-exempt bond liabilities . . . 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D Liabilities 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 24 Unsecured notes and loans payable to unrelated third parties . 25 10,557 25 Other liabilities (including federal income tax, payables to related third parties,

Form	990 (2019)				Page 12
Pa	Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		10	,383,807
2	Total expenses (must equal Part IX, column (A), line 25)	2			566,740
3	Revenue less expenses. Subtract line 2 from line 1	3			817,067
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			,960,024
5	Net unrealized gains (losses) on investments	5			241,618
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			
_	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))			55	.018,709
	tXII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				✓
	check in Schedule & contains a response of note to any line in this fate Air 1 1 1 1 1 1 1 1	•	• •	Yes	No
	MODIFIED				
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 O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If `Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both:	basis,			
	☐ Separate basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O			

3a

3b

Νo

Form **990** (2019)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Software Version: EIN: 91-2167303

Name: KHYENTSE FOUNDATION

Form 990 (2019)

101111 330 (2013)

Form 990, Part III, Line 4a:

TEXT PRESERVATION: PRESERVATION OF BUDDHIST TEXT IS A FUNDAMENTAL ACTIVITY OF KHYENTSE FOUNDATION, WHICH SUPPORTS THE CONSERVATION INITIATIVES OF MANY LIKE-MINDED ORGANIZATIONS IN ORDER TO ENSURE THAT THE HERITAGE OF BUDDHIST WISDOM TRADITIONS IS PRESERVED AND MADE AVAILABLE FOR GENERATIONS TO COME.

Form 990, Part III, Line 4b: EDUCATION PROGRAMS: SUPPORT FOR WORLDWIDE EDUCATION INITIATIVES BASED ON BUDDHIST PRINCIPLES; PARTICULARLY FOR PROGRAMS WITH A LONG-TERM VISION FOR FUTURE GENERATIONS OF BUDDHIST STUDENTS AND PRACTITIONERS THROUGH INNOVATIONS IN EDUCATION SYSTEMS, ESPECIALLY FOR THE EDUCATION

OF CHILDREN.

Form 990, Part III, Line 4c: ACADEMIC DEVELOPMENT: TO EXPAND AND SUPPORT THE ACADEMIC STUDY OF BUDDHISM IN UNIVERSITIES AND BUDDHIST INSTITUTES AROUND THE WORLD. THIS INITIATIVE AIMS TO STRENGTHEN THE STUDY OF BUDDHISM AS A MAIOR PHILOSOPHY AND WORLD WISDOM HERITAGE WHICH WILL SIGNIFICANTLY INSPIRE AND

BENEFIT BUDDHIST STUDY AND PRACTICE IN THE LONG TERM.

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

SERIES OF MONASTIC COLLEGES IN CHINA, INDIA AND BHUTAN.

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code:) (Expenses \$ 388,168 including grants of \$ 388,168) (Revenue \$

TRANSLATIONS: TO TRANSLATE THE BUDDHA'S TEACHINGS INTO THE WORLD'S MAJOR MODERN LANGUAGES, THEREBY MAKING THEM NUMBER OF ONGOING AND CONSTANTLY EVOLVING PROGRAMS TO CARRY OUT THAT MISSION BY COLLABORATING WITH OTHER

AVAILABLE FREE OF CHARGE TOEVERYONE WHO WISHES TO USE THEM FOR STUDY AND PRACTICE. KF INITIATES, DEVELOPS, AND SUPPORTS A ORGANIZATIONS AND INDIVIDUAL TRANSLATORS WHO SHARE OUR ASPIRATION. KF NOW FUNDS THE TRANSLATION AND DISSEMINATION OF

BUDDHIST TEXTS IN POLISH, UKRAINIAN, AND MONGOLIAN, AMONG MANY OTHER LANGUAGES.

) (Expenses \$ 714,749 including grants of \$ 714,749) (Revenue \$

(Code:

TO MAINTAIN THE HERITAGE OF ACADEMIC EXCELLENCE IN HIGHER BUDDHIST STUDIES IN TRADITIONAL BUDDHIST SHEDRAS (MONASTIC

UNIVERSITIES), AND TO PROVIDE QUALIFIED BUDDHIST SCHOLARS AND TEACHERS TO SERVE THE WORLD, THE FOUNDAITON SUPPORTS A

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

others, the total expenses, and revenue, if any, for each program service reported. (Code:) (Expenses \$ 373,793 including grants of \$ 373,793) (Revenue \$

SCHOLARSHIPS: TO PROVIDE FUNDING THAT ENABLES STUDENTS WORLDWIDE TO PURSUE THEIR STUDY AND PRACTICE OF THE BUDDHADHARMA, ENSURING IT IS AVAILABLE TO ALL THOSE WHO SEEK IT. SCHOLARSHIPS ARE AWARDED ON MERIT AND NEED, REGARDLESS

(Code:) (Expenses \$ 371,033 including grants of \$ 371,033) (Revenue \$

OF NATIONALITY, ETHNIC ORIGIN OR CULTURAL BACKGROUND.

REVITALIZING BUDDHIST HERITAGE: SUPPORTING BUDDHIST EDUCATION IN TRADITIONALLY BUDDHIST COUNTRIES SUCH AS INDIA, CHINA,

AND COUNTRIES IN SOUTHE EAST ASIA WHICH IS ESSENTIAL TO ENSURE THE SURVIVAL OF DIFFERENT BUDDHIST SCHOOLS AND LINEAGES AND THE LONGEVITY OF THE BUDDHA'S TEACHINGS.

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code: (Expenses \$ 425,876 including grants of \$ 425,876) (Revenue \$

INCLUDES SUPPORT FOR TRAINING AND DEVELOPEMENT OF BUDDHIST LEADERS, AND VARIOUS SPECIAL GRANTS

efile GRAPHIC print - DO NO			t - DO NOT PROCES	S As Filed Data -		DLN: 93493135028501			
SCI	HED	ULE A	Dublic	Charity Statu	e and Dul	hlic Sunn	ort	OMB No. 1545-0047	
(Form 990 or 990EZ) Con			Complete if the	organization is a sect 4947(a)(1) nonexe ► Attach to Form	ion 501(c)(3) e empt charitable 990 or Form 99	organization or trust. 00-EZ.	r a section	2019	
		f the Treasury	► Go to <u>www.i</u>	<u>rs.gov/Form990</u> for i	nstructions and	I the latest info	ormation.	Open to Public Inspection	
Nam	e of th	he organiza DUNDATION	tion				Employer identific	ation number	
							91-2167303		
	rt I		for Public Charity Sta a private foundation becau				See instructions.		
1 1	organiz		onvention of churches, or	•	•		(A)(i)		
2		·	,						
_		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).							
3		·	•	-			•		
4	Ш	name, city,	esearch organization oper and state:	ated in conjunction with	a nospital descri	ibed in section :	1/U(b)(1)(A)(III). E	nter the hospital's	
5		_	ation operated for the bend (iv). (Complete Part II.)	efit of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170	
6		A federal, s	tate, or local government	or governmental unit de	scribed in sectio	on 170(b)(1)(A	\)(v).		
7	✓		ation that normally receive $\mathbf{0(b)(1)(A)(vi)}$. (Comple		s support from a	governmental ι	ınit or from the gener	al public described in	
8			ty trust described in secti	•	(Complete Part I	I.)			
9			ural research organization ant college of agriculture.					ege or university or a	
10		from activit investment	ation that normally receive ies related to its exempt f income and unrelated bus see section 509(a)(2).	unctions—subject to cer siness taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its s	upport from gross	
11		An organiza	ation organized and operat	ed exclusively to test fo	r public safety. S	See section 509	(a)(4).		
12		more public	ation organized and operat ly supported organization through 12d that describe	s described in section 5	09(a)(1) or se	ction 509(a)(2). See section 509(a		
a		Type I. A so	supporting organization op n(s) the power to regularly Part IV, Sections A and	erated, supervised, or co appoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by		
b		Type II. A manageme	supporting organization s nt of the supporting organ plete Part IV, Sections A	upervised or controlled i ization vested in the sar					
С		Type III f	unctionally integrated. Appropriate instruction in the contraction (s) (see instruction)	A supporting organizatio				ited with, its	
d		Type III n	on-functionally integra integrated. The organizate.). You must complete P	ted. A supporting organicion generally must satis	ization operated fy a distribution	in connection wi	th its supported orgai		
e		Check this	box if the organization rec or Type III non-functional	eived a written determir	nation from the I		pe I, Type II, Type II	I functionally	
f	Enter		of supported organization		-		<u> </u>		
g	Provi	ide the follow	ing information about the	supported organization(•	1	
	(i) N	Name of supp organizatior		(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
					Yes	No			
			<u> </u>						
Tota			tion Act Notice, see the	<u> </u>	Cat. No. 11285		 Schedule A (Form 9		

Р	Part III Support Schedule for Organizations Described in Section 509(a)(2)							
	(Complete only if you cl						er Part II. If	
S	the organization fails to ection A. Public Support	quality under	the tests listed i	pelow, please co	ompiete Part II.)			
30	Calendar year	() 2015	(1) 2016	() 2247	(1) 2010	() 2010	(O.T.)	
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not include any "unusual grants.").							
2	Gross receipts from admissions,							
	merchandise sold or services							
	performed, or facilities furnished in any activity that is related to the							
	organization's tax-exempt purpose							
3	Gross receipts from activities that are							
	not an unrelated trade or business							
4	under section 513 Tax revenues levied for the							
•	organization's benefit and either paid							
_	to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to							
	the organization without charge							
6	Total. Add lines 1 through 5							
7a	Amounts included on lines 1, 2, and							
L	3 received from disqualified persons Amounts included on lines 2 and 3							
D	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.)							
Se	ection B. Total Support		1				Г	
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	
9	Amounts from line 6							
10a	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties and income from similar sources.							
b	Unrelated business taxable income							
	(less section 511 taxes) from							
	businesses acquired after June 30, 1975.							
С	Add lines 10a and 10b.							
11	Net income from unrelated business							
	activities not included in line 10b,							
	whether or not the business is regularly carried on.							
12	Other income. Do not include gain or							
	loss from the sale of capital assets							
12	(Explain in Part VI.) Total support. (Add lines 9, 10c,							
13	11, and 12.).							
14	First five years. If the Form 990 is for	the organization	n's first, second, th	nird, fourth, or fift	h tax year as a sec	tion 501(c)(3) o	ganization <u>,</u>	
	check this box and stop here						▶ ⊔	
	ection C. Computation of Public S			! (6))		15		
15								
16		-	<u> </u>			16		
	ection D. Computation of Investr Investment income percentage for 201			line 13 column (f	:))	17		
17 10	Investment income percentage for 201	-		-		17		
18 10-	331/3% support tests—2019. If the		•			18 33 1/3% and lin	e 17 is not	
	more than 33 1/3%, check this box and s							
	more than 33 1/3%, check this box and s 33 1/3% support tests—2018. If the							
ט	not more than 33 1/3%, check this box	-			•		_	
20	Private foundation. If the organization	-	-					
	Frivate foundation. If the organization	ni ulu not check a	a DOX ON UNE 14, I	.a, or iad, check	, unis pox and see I	HSGRUCHONS	. 📂 📖	

Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete

6

7

8

the organization had excess business holdings).

Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,	
	describe the designation. If historic and continuing relationship, explain.	1

Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described

in section 509(a)(1) or (2). 2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.

3a Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination. 3b

Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.

Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below. 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support

3с

10b

Schedule A (Form 990 or 990-EZ) 2019

to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by

(c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported 5a amendment to the organizing document). Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b

5c Substitutions only. Was the substitution the result of an event beyond the organization's control?

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .

7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). 8

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI.

9a Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

organization had an interest? If "Yes," provide detail in Part VI.

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

9b Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

which the supporting organization also had an interest? If "Yes," provide detail in Part VI. 9c

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below. 10a

	edule A (101111 550 01 550 E2) 2015			age 3		
Pa	rt IV Supporting Organizations (continued)					
_			Yes	No		
	Has the organization accepted a gift or contribution from any of the following persons?					
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?					
		11a				
	A family member of a person described in (a) above?	11b				
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c				
S	ection B. Type I Supporting Organizations					
			Yes	No		
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1				
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that					
2	operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting					
	organization.	2				
S	ection C. Type II Supporting Organizations					
_			Yes	No		
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of					
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the	1				
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).					
S	ection D. All Type III Supporting Organizations		v			
_			Yes	No		
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing					
	documents in effect on the date of notification, to the extent not previously provided?	1				
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).					
_		2				
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax					
	year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3				
S	ection E. Type III Functionally-Integrated Supporting Organizations					
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions):				
	The organization satisfied the Activities Test. Complete line 2 below.					
	b					
•	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)			
2	Activities Test. Answer (a) and (b) below.	ſ	Yes	No		
•	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a				
ı	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's					
	involvement.	2b				
3	Parent of Supported Organizations. Answer (a) and (b) below.					
•	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a				
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard.	3h				

3b

1	Type III Non-Functionally Integrated 509(a)(3) Supporting O Check here if the organization satisfied the Integral Part Test as a qualifying true.			. Part VIV See
	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organization			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions	
7	Total annual distributions. Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9	Distributable amount for 2019 from Section C, line 6	

_6	Other distributions (describe in Part VI). See instruction			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to wh details in Part VI). See instructions			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019

7 Total annual distributions. Add lines 1 through 6.				
o∨ide				
10 Line 8 amount divided by Line 9 amount				
(ii) derdistributions Pre-2019	(iii) Distributable Amount for 2019			
derdistributions	Distributable			
0	vide			

8 Distributions to attentive supported organizations to widetails in Part VI). See instructions			
9 Distributable amount for 2019 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014			
b From 2015			
c From 2016			
d From 2017			

e From 2018. f Total of lines 3a through e

instructions)

See instructions.

e Excess from 2019.

\$

g Applied to underdistributions of prior years h Applied to 2019 distributable amount i Carryover from 2014 not applied (see

j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2019 from Section D, line 7:

a Applied to underdistributions of prior years **b** Applied to 2019 distributable amount c Remainder. Subtract lines 4a and 4b from 4. 5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI.

6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2020. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2015.

b Excess from 2016. c Excess from 2017. **d** Excess from 2018.

Schedule A (Form 990 or 990-EZ) (2019)

Additional Data

Software ID: Software Version:

EIN: 91-2167303

Name: KHYENTSE FOUNDATION

Part VI
Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

instructions).

Facts And Circumstances Test

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D**

As Filed Data -

DLN: 93493135028501

OMB No. 1545-0047

2019

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

Department of the Treasury Internal Revenue Service

(Form 990)

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

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Inspection
Inspection

	me of the organization ENTSE FOUNDATION				Em	ployer iden	tification	number
KIII	ENTSE FOUNDATION				91-	2167303		
Pa	rt I Organizations Maintaining Donor Advi	sed Funds or Ot	her S	Similar Fund	s or Ac	counts.		
	Complete if the organization answered "Ye	s" on Form 990, F			1	(b) Funds	and other	accounts
1	Total number at end of year	(a) Donor	auvis	eu lulius		(D) Fullus	and other a	accounts
2	Aggregate value of contributions to (during year)							
3	Aggregate value of grants from (during year)							
4	Aggregate value at end of year							
5	Did the organization inform all donors and donor adviso organization's property, subject to the organization's ex					funds are th		Yes 🗌 No
6	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor	onor advisors in writi or donor advisor, or	ng th for a	at grant funds o	an be us		issible	_
	private benefit?		• •					Yes L No
Pa	rt II Conservation Easements. Complete if the organization answered "Ye	s" on Form 990 F	Part T	V line 7				
1	Purpose(s) of conservation easements held by the organ							
_	Preservation of land for public use (e.g., recreation	•		Preservation of	an histo	rically impor	tant land a	rea
		Tor education)						ii ea
	☐ Protection of natural habitat		ш	Preservation of	a certifie	ed historic st	ructure	
	☐ Preservation of open space							
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year.	qualified conservation	on cor	ntribution in the	form of			f the Year
а	Total number of conservation easements				2a	пена ас	tne Ena o	the fear
b	Total acreage restricted by conservation easements							
c	Number of conservation easements on a certified histori				2c			
d	Number of conservation easements included in (c) acqui				2d			
-	structure listed in the National Register							
3	Number of conservation easements modified, transferre tax year ▶	d, released, extingu	ished,	, or terminated	by the o	ganization o	during the	
4	Number of states where property subject to conservation	n easement is locate	ed ►					
5	Does the organization have a written policy regarding the and enforcement of the conservation easements it holds				ng of vio		☐ Yes	□ No
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of vio	lation	ns, and enforcing	g conserv	ation easen		g the year
7	Amount of expenses incurred in monitoring, inspecting, \$ \$	handling of violation	ns, an	d enforcing con	servatior	easements	during the	year
8	Does each conservation easement reported on line 2(d) and section 170(h)(4)(B)(ii)?	above satisfy the re	quire	ments of section	n 170(h)	(4)(B)(i)	☐ Yes	□ No
9	In Part XIII, describe how the organization reports cons balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemen	footnote to the orga				,		
Par	Organizations Maintaining Collections Complete if the organization answered "Ye	of Art, Historica			ther S	imilar Ass	ets.	
1a	If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finar	public exhibition, ed	ucatio	on, or research	in furthe			
b	If the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for pub following amounts relating to these items:	6 (ASC 958), to repolic exhibition, educat	ort in ion, c	its revenue stat or research in fu	tement a irtheranc	e of public s	ervice, pro	vide the
(i) Revenue included on Form 990, Part VIII, line 1					. > \$		
(i	i)Assets included in Form 990, Part X					. ▶\$		
2	If the organization received or held works of art, historic following amounts required to be reported under SFAS	cal treasures, or oth	er sim	nilar assets for f			the	
а	Revenue included on Form 990, Part VIII, line 1					. > \$		
b	Assets included in Form 990, Part X					. > \$		

Par	t III	Organizations Ma	aintaining Col	lections o	f Art, H	istori	cal T	reasu	ires, oi	r Other	Similar A	ssets (cont	inued)	
3		the organization's acq (check all that apply):		n, and other	records,	check a	any of	the fo	llowing t	hat are a	significant	use of its co	llection	
а		Public exhibition				d		Loan	or exch	ange pro	grams			
b		Scholarly research				e		Othe	r					
c		Preservation for future	e generations											
4		de a description of the	_	lections and	explain h	ow the	y furtl	her the	e organiz	zation's e	xempt purp	ose in		
5	During	g the year, did the org s to be sold to raise fur										☐ Yes		lo.
Pa	rt IV	Escrow and Cust Complete if the ord X, line 21.			" on Forr	n 990	, Part	IV, li	ne 9, o	r report	ed an amo			
1a	Is the includ	organization an agent led on Form 990, Part	t, trustee, custodi X?	an or other	intermedia	ary for	contri 	bution	s or othe	er assets 	not 	Yes	□ N	lo
b	If "Ye	s," explain the arrange	ement in Part XIII	and comple	te the foll	lowina	table:					Amount		_
c		ning balance		•		-				1c				_
d	_	ons during the year .								1d				_
e		butions during the year								1e				_
f		g balance								1f				
2a	Did th	ne organization include	an amount on Fo	rm 990, Par	t X, line 2	1, for	escrow	or cu	stodial a	ccount li	ability?	☐ Yes	□ N	– lo
b	If "Ye	s," explain the arrange	ement in Part XIII	. Check here	e if the ex	planati	on has	been	provide	d in Part	XIII	. 🗆		
Pa	rt V	Endowment Fund	ds.											
		Complete if the or	ganization ansv			n 990	, Part	IV, li			I. D. =1		_	
1 2	Reginni	ing of year balance .		(a) Currer	it year	(D) P	rior yea	ar i	(c) 1wo y	ears back	(a) Three ye	ears back (e)	rour yea	irs back
	_	outions						+						
		estment earnings, gair	ns and losses					-						
		or scholarships	13, 4114 103363					-						
	Other e	expenditures for facilities	es											
f	Admini	strative expenses .												
g	End of	year balance												
2	Provid	de the estimated perce	ntage of the curre	ent year end	balance ((line 1g	g, colu	mn (a))) held a	s:				
а	Board	designated or quasi-e	ndowment ►											
b	Perma	anent endowment ►												
c	Temp	orarily restricted endo	wment >											
	The p	ercentages on lines 2a	, 2b, and 2c shou	ld equal 100)%.									
3a		nere endowment funds ization by:	not in the posses	sion of the o	organizatio	on that	are h	eld an	d admin	istered fo	or the		Yes	No
	-	related organizations										3a(i)		
		elated organizations .										3a(ii)		
b		s" on 3a(ii), are the re										. 3b		
4	Descr	ibe in Part XIII the inte	ended uses of the	organizatio	n's endow	ment f	unds.							
Pa	rt VI	Land, Buildings, Complete if the or			" on Form	n 000	Dart	TV/ II	ne 115	Sec Ec	rm 990 Pr	art V line 1	0	
	Descri	ption of property	(a) Cost or oth (investme	ner basis	(b) Cost o						depreciation	· ·	Book valu	e
1a	Land						12	29,000						129,000
		gs					37	76,000						376,000
		old improvements					37	75,000						375,000
		nent												

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

880,000

Complete if the organization answered "Yes" on Form 990, (a) Description of security or category (including name of security)	(b) Book			thod of valuation: -of-year market value	
(including name or security)	value		Cost or end	-or-year market value	
Financial derivatives					
Other					
al. (Column (b) must equal Form 990, Part X, col. (B) line 12.) rt VIII Investments—Program Related.	•				
Complete if the organization answered 'Yes' on Form 990, (a) Description of investment	Part IV, li	ne 11c			·alvatian.
(a) Description of Investment			(b) Book valu	(c) Method of v Cost or end-of-year	ear market
)					
(Column (b) must equal Form 990, Part X, col.(B) line 13.)		•			
al. (Column (b) must equal Form 990, Part X, col.(B) line 13.) Other Assets. Complete if the organization answered 'Yes' on Form 990,	Part IV, lin		. See Form 990,		k value
al. (Column (b) must equal Form 990, Part X, col.(B) line 13.) art IX Other Assets. Complete if the organization answered 'Yes' on Form 990, (a) Description	Part IV, lin		. See Form 990,	Part X, line 15. (b) Boo	k value
al. (Column (b) must equal Form 990, Part X, col.(B) line 13.) art IX Other Assets. Complete if the organization answered 'Yes' on Form 990, (a) Description	Part IV, lin		. See Form 990,		k value
al. (Column (b) must equal Form 990, Part X, col.(B) line 13.) art IX Other Assets. Complete if the organization answered 'Yes' on Form 990, (a) Description	Part IV, lin		. See Form 990,		k value
al. (Column (b) must equal Form 990, Part X, col.(B) line 13.) art IX Other Assets. Complete if the organization answered 'Yes' on Form 990, (a) Description	Part IV, lin		. See Form 990,		k value
al. (Column (b) must equal Form 990, Part X, col.(B) line 13.) art IX Other Assets. Complete if the organization answered 'Yes' on Form 990, (a) Description	Part IV, lin		. See Form 990,		k value
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al. (Column (b) must equal Form 990, Part X, col.(B) line 13.) THE IX Other Assets. Complete if the organization answered 'Yes' on Form 990, (a) Description	Part IV, lin		. See Form 990,		k value
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al. (Column (b) must equal Form 990, Part X, col.(B) line 13.) Other Assets. Complete if the organization answered 'Yes' on Form 990, (a) Description Federal income taxes Other Liabilities. Cal. (Column (b) must equal Form 990, Part X, col.(B) line 15.) (a) Description of liability				m 990, Part X, line (b) Book value	
al. (Column (b) must equal Form 990, Part X, col.(B) line 13.) Other Assets. Complete if the organization answered 'Yes' on Form 990, (a) Description al. (Column (b) must equal Form 990, Part X, col.(B) line 15.) art X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, (a) Description of liability Federal income taxes DEPOSITS HELD				(b) Boo m 990, Part X, line (b) Book	
al. (Column (b) must equal Form 990, Part X, col.(B) line 13.) Other Assets. Complete if the organization answered 'Yes' on Form 990, (a) Description al. (Column (b) must equal Form 990, Part X, col.(B) line 15.) art X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, (a) Description of liability Federal income taxes DEPOSITS HELD				m 990, Part X, line (b) Book value	
al. (Column (b) must equal Form 990, Part X, col.(B) line 13.) Other Assets. Complete if the organization answered 'Yes' on Form 990, (a) Description bal. (Column (b) must equal Form 990, Part X, col.(B) line 15.) art X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, (a) Description of liability Federal income taxes DEPOSITS HELD				m 990, Part X, line (b) Book value	
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And Column (b) must equal Form 990, Part X, col.(B) line 13.) Other Assets. Complete if the organization answered 'Yes' on Form 990, (a) Description (b) Description (c) Description (d) Description (e) Description (f) Description (g) De				m 990, Part X, line (b) Book value	
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al. (Column (b) must equal Form 990, Part X, col.(B) line 13.) The state of the organization answered 'Yes' on Form 990, (a) Description The state of the organization answered in the organization of liability The property of the organization answered in the organization answered in the organization of liability The property of the organization answered in th				m 990, Part X, line (b) Book value	

Schedule D (Form 990) 2019

Page 4

	Complete if the organi	ization answered "Yes" on Form 990, Part	. IV, I	ine 12a.		_
1	Total revenue, gains, and other s	upport per audited financial statements			1	
2	Amounts included on line 1 but no	ot on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on i	nvestments	2a			
b	Donated services and use of facili	ties	2b			
c	Recoveries of prior year grants		2c			
d	Other (Describe in Part XIII.) $\ .$		2d			
е	Add lines 2a through 2d				2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.				3	
4	Amounts included on Form 990, F	Part VIII, line 12, but not on line 1:				
а	Investment expenses not include	d on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII.) .		4b			
C	Add lines 4a and 4b				4c	
5	Total revenue. Add lines 3 and 4	c. (This must equal Form 990, Part I, line 12.)			5	
Par		penses per Audited Financial Statem ization answered 'Yes' on Form 990, Part			Return	1.
1	Total expenses and losses per au	dited financial statements			1	
2	Amounts included on line 1 but no	ot on Form 990, Part IX, line 25:				
а	Donated services and use of facili	ties	2a			
b	Prior year adjustments		2b			
С	Other losses		2c			
d	Other (Describe in Part XIII.) .		2d			
е	Add lines 2a through 2d		•		2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.				3	
4	Amounts included on Form 990, F	Part IX, line 25, but not on line 1:				
а	Investment expenses not include	d on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.) .		4b			
С	Add lines 4a and 4b				4c	
5	Total expenses. Add lines 3 and 4	4c. (This must equal Form 990, Part I, line 18.) .		5	
Pai	t XIII Supplemental Info	ormation				
Pro	vide the descriptions required for P lines 2d and 4b; and Part XII, lines	art II, lines 3, 5, and 9; Part III, lines 1a and 4 s 2d and 4b. Also complete this part to provide	4; Par any a	t IV, lines 1b and 2b; Par additional information.	t V, line	4; Part X, line 2; Part
	Return Reference		Ex	planation		
See A	Additional Data Table					
		 				

chedule D (Form 990) 2019	Page 5
Part XIII Supplemental Information (continued)	
Return Reference Explanation	

Schedule D (Form 990) 2019

Additional Data

Software Version:

EIN: 91-2167303 Name: KHYENTSE FOUNDATION

HERE ARE NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO

Supplemental Informat				
	Supp	lemen	tal In	formati

ion

COMPLY WITH PROVISIONS OF THIS TOPIC.

Return Reference Explanation PART X, LINE 2: THE ORGANIZATION FOLLOWS THE PROVISIONS OF FASB ASC TOPIC ACCOUNTING FOR UNCERTAINTY IN IN COME TAXES. MANAGEMENT HAS EVALUATED THE ORGANIZATION'S TAX POSITIONS AND CONCLUDED THAT T

Software ID:

SCHEDULE F Form 990)	State	OMB No. 1545-0047				
F01111 990)	► Comp	lete if the organi		Yes" to Form 990, Part IV, I to Form 990.	ine 14b, 15, or 16.	2019
Department of the Treasury	•	► Go to <i>www.irs.</i>		nstructions and the latest in	nformation.	Open to Public Inspection
nternal Revenue Service lame of the organization					Employer ide	ntification number
(HYENTSE FOUNDATION					91-2167303	
	nformation Part IV, line		Outside the U	Jnited States. Comple	ete if the organization a	answered "Yes" on
1 For grantmakers	. Does the or	rganization mai	intain records to	substantiate the amoun	t of its grants and	
,	•	,	-	stance, and the selection		
to award the grant	ts or assistan	ce?				☑ Yes ☐ No
2 For grantmakers outside the United		Part V the orga	anization's proce	dures for monitoring the	use of its grants and ot	her assistance
3 Activites per Region	. (The followin	ng Part I, line 3	table can be dupli	cated if additional space is	s needed.)	
(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
See Add'l Data						
3a Sub-total		(0			2,891,184
b Total from continuat Part I	ion sheets to					
c Totals (add lines 3a	and 3b)		0 0 0			2,891,184
			•	•		· · · · · · · · · · · · · · · · · · ·

Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.										
(a) Name of organization	(b) IRS code section	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash	(g) Amount of noncash	(h) Description of noncash	(i) Method of valuation		
and FIN (if disbursement assistance assistance (book FI										

organization	and EIN (if applicable)	grant	cash grant	disbursement	assistance	assistance	(book, FMV, appraisal, other)
See Add'l Data							

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as taxexempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 32 Schedule F (Form 990) 2019

Schedule F (Form 990) 2019							Page 3
Part IIII Grants and Oth				ed States. Complete i	f the organization an	swered "Yes" on Form !	990, Part IV, line 16.
Part III can be d	uplicated if addit	ional space is n	eeded.	,	,	_	
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
See Add'l Data							
		I		I		School	dule F (Form 990) 2019

Sche	dule F (Form 990) 2019		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)		
		∐ Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)		
	Corporations. (see Instructions for Form 5471)	☐Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621).	Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships		
	(see Instructions for Form 8865)	☐Yes	✓ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form		
	5713; don't file with Form 990)	☐Yes	✓ No

, ,	Form 990) 2019 Page 5
Part V	Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.
990 Sched	dule F, Supplemental Information
Return Reference	Explanation
Reference	

990 Schedule F, Supplemental Information Return Reference Explanation

PART III ACCOUNTING METHOD:

Additional Data

SOUTH ASIA

Software ID: Software Version:

EIN: 91-2167303

Name: KHYENTSE FOUNDATION

ISUPPORT

1,083,716

Form 990 Schedule F Part I - Activities Outside The United States										
(-) D i	(1) 11 6	() 1	/ d\	() 76 () 1 1 1 1 ()	(C) T					

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EUROPE (INCLUDING ICELAND & GREENLAND)	0		GRANTS, PROGRAM SERVICES	SUPPORT	522,303

0 GRANTS, PROGRAM

SERVICES

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the reaion) EAST ASIA AND THE PACIFIC 0 IGRANTS, PROGRAM SUPPORT 1,029,507 SERVICES NORTH AMERICA (CANADA 0 | GRANTS, PROGRAM SUPPORT 159,915 AND MEXICO, BUT NOT U.S.) ISERVICES

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the reaion) RUSSIA AND THE NEWLY 0 IGRANTS, PROGRAM SUPPORT 3,858 INDEPENDENT STATES SERVICES SOUTH AMERICA 0 IGRANTS, PROGRAM SUPPORT 2.485 ISERVICES

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (e) If activity listed in (d) (f) Total expenditures (d) Activities conducted offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of reaion agents in fundraising, program services, grants to service(s) in region reaion recipients located in the reaion) MIDDLE EAST AND NORTH 0 IGRANTS, PROGRAM SUPPORT 89,400 AFRICA SERVICES

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 48,800 WIRE TRANSFER EAST ASIA TRANSLATION AND THE ISTUDIES-PACIFIC MILINDA PROJECT AND IKUMARAJIVA **IPROJECT** EAST ASIA VISITING 13.000 WIRE TRANSFER IAND THE **IPROFESSOR**

PACIFIC

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(if organization cash grant non-cash grant disbursement assistance appraisal, applicable) assistance other) EAST ASIA TRANSLATOR 53,457 WIRE TRANSFER IAND THE TRAINING FOR PACIFIC IKUMARAJIVA PROJECT EAST ASIA SUPPORT FOR 28.130 WIRE TRANSFER IAND THE GRANTEE'S PACIFIC OFFICE TO IBECOME A WORKABLE &

SUSTAINABLE WORKSPACE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(if organization grant cash grant non-cash assistance disbursement appraisal, applicable) assistance other) LEAST ASIA ISOCIAL 34,000 WIRE TRANSFER IAND THE **IRESPONSIBILITY** PACIFIC **IPROJECT** EAST ASIA **IMATCHING** 18.000 WIRE TRANSFER IAND THE ISCHOLARSHIP PACIFIC IPROGRAMME TO SUPPORT MONKS IAND NUNS STUDIES AT IBC-IYR 4

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) EAST ASIA l2020 MILINDA 21,289 WIRE TRANSFER IAND THE IPROGRAM PACIFIC IEAST ASIA ISETTING UP OF 280.136 WIRE TRANSFER

IAND THE IBLUE LION

IPRESCHOOL

PACIFIC

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation section (e) Amount of (a) Name of (d) Purpose of (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant non-cash grant assistance disbursement appraisal, applicable) assistance other) 50,061 WIRE TRANSFER EAST ASIA SUPPORT FOR IAND THE lBUDDHIST PACIFIC PRIMARY SCHOOLS IN CAMBODIA AND IPROMOTING. IBUDDHISM IN PREY VENG IPROVINCE. EAST ASIA TEACHING FUND 48,682 WIRE TRANSFER IAND THE FOR VISITING PACIFIC |PROFESSORS

AND LECTURERS

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation section (d) Purpose of (e) Amount of (a) Name of of (c) Region (book, FMV, cash non-cash organization and EIN(if grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) EAST ASIA SUPPORT FOR 89,483 WIRE TRANSFER IAND THE FULL-TIME PACIFIC IFACULTY OF TIBETAN BUDDHISM AND AWARDS FOR EXCELLENCE IN IBUDDHIST ISTUDIES 46.835 WIRE TRANSFER IEAST ASIA TIBETAN IAND THE IBUDDHISM.

PACIFIC

LECTURER

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (a) Name of section (d) Purpose of (e) Amount of (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) **IEUROPE** TRANSLATION OF 8,300 WIRE TRANSFER (INCLUDING LIFE AND TIMES ICELAND & IOF CHOKYI GREENLAND) LODRO INTO IFRENCH **I**EUROPE ISUPPORT OF 61,364 WIRE TRANSFER (INCLUDING IBUDDHIST ISTUDIES CENTRE ICELAND &

IGREENLAND)

- YEAR 4 OF 5

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) FUROPE ITRANLATING 5.700 WIRE TRANSFER (INCLUDING lbuddhsit ICELAND & IBOOK FROM GREENLAND) ENGLISH TO **IPOLISH** EUROPE TRANSCRIBE & 7.500 WIRE TRANSFER (INCLUDING ITRANSLATE ICELAND & ITEACHINGS OF GREENLAND) KHEN APPEY-YR 12 OF 2

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (g) Amount of (h) Description (g)(b) IRS code (f) Manner of valuation (a) Name of (d) Purpose of (e) Amount of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant non-cash grant disbursement assistance appraisal, applicable) assistance other) EUROPE IDHARMACHAKRA 20.000 WIRE TRANSFER (INCLUDING ITRANSLATIONS ICELAND & COMMITTEE FOR GREENLAND) TRANSLATION OF BUDDHIST TEXT IYR 2 OF 3 EUROPE SUPPORT FOR 5.750 WIRE TRANSFER (INCLUDING ICHILDREN'S ICELAND & IPROGRAMME-YR 2

IGREENLAND)

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) **IEUROPE** REVISITING THE 7,500 WIRE TRANSFER (INCLUDING IWORK OF CTR ICELAND & CONFERENCE IN IGREENLAND) IVIENNA 22.515 WIRE TRANSFER **IEUROPE** ISUPPORT FOR (INCLUDING ITHE BUDDHIST ICELAND & FORUM AND IGREENLAND) lbuddhism INSIDEOUT -YEAR 3 OF 3

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) EUROPE KHYENTSE 158,776 WIRE TRANSFER (INCLUDING ICENTER FOR ICELAND & TIBETAN GREENLAND) BUDDHIST TEXTUAL SCHOLARSHIP ARPI-II AND KC-TBTS GRANT EUROPE READER IN 19,217 WIRE TRANSFER (INCLUDING IBUDDHIST ICELAND & ISTUDIES-YR 1 OF GREENLAND)

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST ISUPPORT FOR 70,000 WIRE TRANSFER AND NORTH FIRST YEAR OF AFRICA lbuddhist ISTUDIES IPROGRAM. NORTH SUPPORT FOR 25,483 CHECK & WIRE AMERICA ISEA TO SKY TRANSFER (CANADA AND IRETREAT MEXICO, BUT CENTER (SSRC) INOT U.S.)

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (g) Amount of valuation (e) Amount of (f) Manner of (a) Name of section (d) Purpose of (c) Region (book, FMV, non-cash and EIN(if organization cash grant cash disbursement non-cash grant assistance appraisal, applicable) assistance other) INORTH SCHOLARSHIP 25,000 CHECK AMERICA FOR ONE PHD (CANADA AND STUDENT PER YR MEXICO, BUT - YR 1 OF 4 INOT U.S.) 45,192 WIRE INORTH GRANT TO THE AMERICA DEPT. OF ASIAN TRANSFER/CHECKS (CANADA AND ISTUDIES-MEXICO, BUT KHYENTSE INOT U.S.) TIBETAN PROGRAMME AND AWARDS FOR EXCELLENCE EXECELLENCE IN BUDDHIST

STUDIES

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, cash non-cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) NORTH ENGAGING 20,000 CHECK AMERICA IEDUCATION IN (CANADA AND IBUDDHIST MEXICO, BUT ISTUDIES (EEBS) NOT U.S.) IPROJECT ISOUTH ASIA ICENTER FOR 21,996 WIRE TRANSFER ISTUDY & PRACTICE OF ANCIENT INDIAN WISDON

TRADITIONS

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 52,000 WIRE TRANSFER ISOUTH ASIA FOOD AND **IMEDICAL IEXPENSES FOR IMONASTERY** SOUTH ASIA 751,554 WIRE TRANSFER IKUNGA **WANGCHUK** CORPUS FUND FOR DKCLI, IVARIOUS **IPROGRAMS**

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (a) Name of (d) Purpose of (e) Amount of section (c) Region non-cash (book, FMV, cash and EIN(if organization arant cash grant non-cash disbursement appraisal, assistance applicable) assistance other) SOUTH ASIA V\SITING 25,105 WIRE TRANSFER PROFESSOR PROGRAM & VARIOUS WORKSHOPS INCLUDING PALI SOUTH ASIA LIGHTING THE 105,357 WIRE TRANSFER MAHABODHI PROJECT, BUDDHA PADA PROGRAMMES, SI INDIA, DEER PARK

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S										
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)			
DEVELOPMENT	EAST ASIA AND THE PACIFIC	8	40,404	WIRE TRANSFER						
TRAINING -	EAST ASIA AND THE PACIFIC	7	27,215	WIRE TRANSFER						

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (d) Amount of (e) Manner of cash (f) Amount of (g) Description of (h) Method of (c)Number assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) **BUDDHIST** 4,644 WIRE TRANSFER **LEAST ASIA** TEACHINGS AND IAND THE PRACTICES SUPPORT PACIFIC 20 SCHOLARSHIPS AND 69.500 WIRE TRANSFER **IEAST ASIA** AWARDS IAND THE PACIFIC

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S									
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)		
TRANSLATIONS	EAST ASIA AND THE PACIFIC	9	139,851	WIRE TRANSFER					
BUDDHIST TEACHER TRAINING - MILINDA/EBS/OTHER	EUROPE (INCLUDING ICELAND & GREENLAND)	10	42,284	WIRE TRANSFER					

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S									
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)		
TEACHINGS AND PRACTICES	EUROPE (INCLUDING ICELAND & GREENLAND)	4	34,700	WIRE TRANSFER					
PROGRAM SUPPORT	EUROPE (INCLUDING ICELAND & GREENLAND)	1	10,281	WIRE TRANSFER					

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S									
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)		
AWARDS	EUROPE (INCLUDING ICELAND & GREENLAND)	14	65,630	WIRE TRANSFER					
	EUROPE (INCLUDING ICELAND & GREENLAND)	5	45,363	WIRE TRANSFER					

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S									
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)		
TRANSLATIONS	MIDDLE EAST AND NORTH AFRICA	4	19,400	WIRE TRANSFER					
BUDDHIST TEACHER TRAINING - MILINDA/EBS/OTHER	NORTH AMERICA (CANADA AND MEXICO, BUT NOT U.S.)	1	1,286	WIRE TRANSFER					

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (e) Manner of cash (f) Amount of (g) Description of (h) Method of (d) Amount of assistance of cash grant disbursement non-cash non-cash valuation (book, recipients assistance FMV, appraisal, assistance other) 7,618 CHECKS BUDDHIST INORTH TEACHINGS AND IAMERICA PRACTICES SUPPORT (CANADA AND IMEXICO, BUT NOT U.S.) EDUCATION FOR 7,500 CHECK INORTH CHILDREN IAMERICA (CANADA AND MEXICO, BUT INOT U.S.)

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount (e) Manner of (f) Amount of (g) Description of (h) Method of assistance of of cash grant cash non-cash non-cash valuation (book, recipients FMV, appraisal, disbursement assistance assistance other) SCHOLARSHIPS AND 24,400 CHECKS INORTH AMERICA AWARDS (CANADA AND lMEXICO. BUT INOT U.S.) BUDDHIST TEACHER WIRE TRANSFER RUSSIA AND THE TRAINING -INEWLY MILINDA/EBS/OTHER IINDEPENDENT ISTATES

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (e) Manner of (f) Amount of (g) Description of (h) Method of (d) Amount assistance of cash grant cash non-cash non-cash valuation (book, of recipients FMV, appraisal. disbursement assistance assistance other) TRANSLATIONS 3.222 WIRE TRANSFER RUSSIA AND THE INEWLY INDEPENDENT ISTATES **BUDDHIST TEACHER** WIRE TRANSFER ISOUTH AMERICA TRAINING -MILINDA/EBS/OTHER

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S									
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)		
TEACHINGS AND	SOUTH AMERICA	1	300	WIRE TRANSFER					
CUITI DDEN	SOUTH AMERICA	1	1,700	WIRE TRANSFER					

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S										
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)			
ACADEMIC DEVELOPMENT	SOUTH ASIA	2	25,040	WIRE TRANSFER						
BUDDHIST TEACHER TRAINING - MILINDA/EBS/OTHER	SOUTH ASIA	1	48,118	WIRE TRANSFER						

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (h) Method of (a) Description of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) SCHOLARSHIPS AND

26 51,320 WIRE TRANSFER ISOUTH ASIA

AWARDS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule I

(Form 990)

Department of the

Treasury

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

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Open to Public

DLN: 93493135028501

Inspection

nternal Revenue Service						Employer identific			
Name of the organization KHYENTSE FOUNDATION									
CHTENTSE FOUNDATION						91-2167303			
Part I General Inform	nation on Grants	and Assistance							
 Does the organization main the selection criteria used 					for the grants or assistanc	e, and	☑ Yes ☐ No		
2 Describe in Part IV the org	•	_	_						
			and Domestic Governme ditional space is needed.	ents. Complete if the o	rganization answered "Yes"	on Form 990, Part IV, line	21, for any recipient		
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance		
(1) See Additional Data									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
		-					24		
For Paperwork Reduction Act Noti				Cat. No. 5005			nedule I (Form 990) 2019		
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3,050

48,621

66,187

2,095

(1) SCHOLARSHIPS AND AWARDS 105,958 (2) TRAINING AND DEVELOPMENT 2,250

3,900

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Schedule I (Form 990) 2019

(3) EDUCATION FOR CHILDREN

(5) ACADEMIC DEVELOPMENT

(6) TRANSLATIONS

(7) MONASTIC SUPPORT

(4) DEATH ROW DHARMA PROJECT

Part III

Page **2**

Schedule I (Form 990) 2019

(7)											
Part IV Suppler	mental Informatio	rmation. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.									
Return Reference	Explanation	on									
PART I, LINE 2:	GRANT PRO THERE ARE AGREE TO F ACTIVITIES	JECTS/ACTIVITIES ANY CHANGES IN OPERMIT REPRESENT , TO CONDUCT SIT	AND THE USE OF THE GR CIRCUMSTANCES OR CON ATIVES OF THE FOUNDAT E VISITS AND OTHERWIS	ANT FUNDS. IN THE GRA IDITIONS THAT MIGHT IN FION UPON REQUEST TO E TO VERIFY THE PROGR	E END OF THE FUNDING PERIOD INT AGREEMENT THE GRANTTEE ITERFERE WITH THE AGREED-UF REVIEW AND AUDIT ALL FINANG ESS OF THE PROJECTS AND ACT LFILL THE AGREEMENTS LISTED	: IS REQUIRED TO NOTIFY KH PON USAGE OF THE FUNDS. T CIAL AND OTHER RECORDS O TIVITIES AND USE OF THE FO	YENTSE FOUNDATION IF THE GRANTEE ALSO OF THE PROJECTS AND				

Additional Data

(a) Name and address of

AMERICAN ACADEMY OF

ATLANTA, GA 30329

ASIAN CLASSICS INPUT

6490 STATE ROUTE 179

SEDONA, AZ 86351

PROJECT (ACIP)

825 HOUSTON MILL ROAD

RELIGION

Software Version: **EIN:** 91-2167303 Name: KHYENTSE FOUNDATION Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(b) EIN

20-5478525

04-3728043

organization	if applicable	grant	cash	(book, FMV, appraisal,
or government			assistance	other)

501 (C) (3)

501 (C) (3)

(c) IRC section

Software ID:

or government		assistance	other)

organization	l applicable	y grant	Casii	[(DOOK, FINV, applaisal,
or government			assistance	other)

organization	l abblicable	l Alant	Lasii	[(DOOK, FINV, applaisal,
or government			assistance	other)

organization	1	ir applicable	grant	casn	(book, FMV, appraisai,
or government				assistance	other)
					·

(d) Amount of cash (e) Amount of non- (f) Method of valuation

10.000

388,840

(g) Description of

non-cash assistance

(h) Purpose of grant

SUPPORT FOR TIBETAN

or assistance

& HIMALAYAN

PARTICIPATION & ATTENDANCE AT THE AAR ANNUAL MEETING FOR TWO YEARS

SCHOLARS'

DIGITIZING,

ARCHIVING AND

MAKING ACCESSIBLE

TIBETAN BUDDHIST WOODBLOCK PRINTS AT THE NATIONAL LIBRARY OF MONGOLIA IN PARTNERSHIP WITH BDRC - PHASE 3

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 04-3491680 501 (C) (3) 517.041 BUDDHIST DIGITAL YEAR THREE SUPPORT RESOURCE CENTER (BDRC) OF THE FPL 1430 MASSACHUSETTS DIGITIZATION PROJECT AND VARIOUS OTHER

AVENUE 5TH FLOOR FLOOR PROJECTS CAMBRIDGE, MA 02138 BUDDHIST INSIGHTS 81-2982652 501 (C) (3) 15.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ARVERNE, NY 11692

FUTURE FEMALE MEDITATION INC TEACHERS PROJECT 504 BEACH 68TH STREET

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) DHARMAKAYA CENTER FOR 83-1706815 501 (C) (3) 21,000 RETREAT EXPENSES WELLBEING

191 CRAGSMOOR ROAD PINE BUSH, NY 12566					
HEAD OF THE TRIBETAN NYINGMA MEDITATION CENTER (SARNATH INTL	23-7072008	501 (C) (3)	50,000		PUBLICATION OF RIMED ENCYCLOPEDIA OF THE KAGYUR

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

BERKELEY, CA 94704

NYINGMA INST) 2425 HILLSIDE AVENUE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (C) (3)

DERRELLI, CA 94/09	LIGHT OF BUDDHARMA FOUNDATION INTL 2018 ALLSTON WAY BERKELEY, CA 94709	56-2316197	501 (C) (3)	68,000				DHARMA TRAINING WHEEL PROJECT IN INDIA
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TULKU URGYEN

PROJECT

TREKCHO COMPILATION

AND PRESERVATION

15.500l

LOTUS TREASURE

BOULDER, CO 80302

FLOOR

1345 SPRUCE STREET 2ND

47-2021435

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) 501 (C) (3) 56.050 SUPPORT FOR THINK MIDDLE WAY EDUCATION 82-3730873 PO BOX 1321 TANK & HUB FOR BUDDHIST FOUCATION WOODSTOCK, NY 12498 IFOR CHILDREN WORLDWIDE

501 (C) (3) 699,600 MIDDLE WAY SCHOOL 83-0862436 CONTINUED SUPPORT FOR THEIR 268 WEST SAUGERTIES ROAD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SAUGERTIES, NY 12477 SECOND/THIRD YEAR OF A COMPREHENSIVE MODEL OF EDUCATION ROOTED IN CLASSICAL BUDDHIST WISDOM TRADITIONS.

(a) Name and address of (b) EIN (c) IRC section (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) NIADODA LINIT/EDCITY 94-1020229 EU1 (C) (3) ומכח חק CLIDDODT FOR TWO

2130 ARAPAHOE AVENUE BOULDER, CO 80302	04-1029220	301 (C) (3)	70,079		VISITING MONASTIC SCHOLARS FROM 1/1/20-12/31/20
NORTHWESTERN UNIVERSITY 1801 MAPLE AVENUE SUTIE 2410	36-2167817	501 (C) (3)	25,000		FIRST YEAR OF FOUR YEAR GRANT SUPPORTING PHD

EVANSTON, IL 60208 ISTUDENTS IN BUDDHIST STUDIES

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) RANGJUNG YESHE INSTITUTE 95-4619361 501 (C) (3) 46.954 RYI KF JOINT FOUNDATION INC SCHOLARSHIPS (NEPAL) YEAR 3 PO BOX 162

CULTURE AND VISITING SCHOLAR FUNDS

LEGGETT, CA 95585 RICE UNIVERSITY 74-1109620 501 (C) (3) 18.250 6100 MAIN STREET

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

YEAR TWO GRANT FOR COURSES IN HOUSTON, TX 77005 BUDDHIST/TIBETAN LANGUAGE AND

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (C) (3)

THE DHARMA BUMS

4144 CAMPUS AVENUE

SAN DIEGO, CA 92103

27-1128167

SAMADHI CENTER 122 CLINTON AVENUE KINGSTON, NY 12401	83-1754981	501 (C) (3)	10,000		SUPPORT SERVICES FOR INDIVIDUALS WITH SUBSTANCE ABUSE OR RELATED DISORDERS

SUPPORT FOR

PROGRAMMING

OPERATING COSTS AND

20.000

if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) 74-2652689 501 (C) (3) 70,537 THE UNIVERSITY OF ARIZONA IDOCTORAL SUTDENT 1303 E UNIVERSITY BLVD BOX SCHOLARSHIPS,

(e) Amount of non-

(f) Method of valuation

(g) Description of

(h) Purpose of grant

OF ASIAN LANGUAGES & CULTURES

3 TUCSON, AZ 85719				SUPPORT FOR BUDDHIST LECTURE SERIES, AND BANGZHOU BUDDHIST PROJECT

501 (C) (3) 10.000 THE UNIVERSITY OF 38-6006309

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

ANN ARBOR, MI 48109

(b) EIN

GRANT FOR LUIS MICHIGAN IGOMEZ MEMORIAL

500 S STATE STREET LECTURE FUND, DEPT.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government

ISUPPORT FOR THE

ICHOGYAM TRUNGPA

IRINPOCHE LIBRARY

IDISTRIBUTION PROJECT

8.0001

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (C) (3)

46-2809149

THE VIDYADHARA
FOUNDATION
522 ARAPAHOE AVENUE

BOULDER, CO 80302

22	105,958			
22	105,958			
1	2,250			
1	3,900			
L		22 105,958 1 2,250	·	22 105,958 1 2,250

3,050

48,621

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

DEATH ROW DHARMA PROJECT

ACADEMIC DEVELOPMENT

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.					
TRANSLATIONS	4	66,187			
TRANSLATIONS	4	66,187			

2,095

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493135028501 OMB No. 1545-0047 **SCHEDULE O** Supplemental Information to Form 990 or 990-EZ (Form 990 or 990-Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. EZ) ▶ Attach to Form 990 or 990-EZ. Open to Public ▶ Go to www.irs.gov/Form990 for the latest information. Inspection Department of the Treasury Namel Betherofeamization **Employer identification number** KHYENTSE FOUNDATION 91-2167303 990 Schedule O. Supplemental Information **Explanation** Return Reference KHYENTSE FOUNDATION IS A NONPROFIT ORGANIZATION INCORPORATED IN THE STATE OF WASHINGTON, I FORM 990. PART I, LINE N NOVEMBER 2001. KHYENTSE FOUNDATION IS DEDICATED TO THE SUPPORT AND ENHANCEMENT OF BUDDHI ST STUDY, PRACTICE AND SCHOLARSHIP THROUGHOUT THE WORLD. FOUNDED BY DZONGSAR KHYENTSE RINP OCHE. ITS PRIMARY AIM IS TO EXTEND THE BUDDHA'S WISDOM AND COMPASSION AS WIDELY AS POSSIBL E, IN ORDER TO BENEFIT ALL BEINGS. SIMILARLY, THIS MISSION TO PRESERVE, PROPAGATE, AND MAK E FREELY AVAILABLE THE BUDDHA'S TEACHINGS IS COMPLETELY NON-SECTARIAN IN ITS APPROACH. TO DATE. THE FOUNDATION HAS INITIATED OR CONTRIBUTED TO NUMEROUS PROJECTS IN THIRTY COUNTRIES . DIRECTLY IMPACTING THE LIVES OF THOUSANDS OF PEOPLE. THESE PROJECTS INCLUDE THE FOUNDING OF THE CHAIRS OF BUDDHIST STUDIES AT THE UNIVERSITY OF CALIFORNIA AT BERKELEY AND AT THE UNIVERSITY OF MICHIGAN: THE DIGITIZATION OF TIBETAN BUDDHIST TEXTS FOR UNIVERSAL ACCESS: T HE FUNDING OF TRADITIONAL MONASTIC COLLEGES IN ASIA: AND A WORLDWIDE SCHOLARSHIP PROGRAM. OPEN TO BOTH LAY AND MONASTIC APPLICANTS. KHYENTSE FOUNDATION ALSO PLAYED A PIVOTAL ROLE I N ESTABLISHING 84000: TRANSLATING THE WORDS OF THE BUDDHA - ANOTHER NONPROFIT ORGANIZATION WHOSE VISIONARY, 100-YEAR MISSION IS TO TRANSLATE THE ENTIRE CANON OF BUDDHIST TEACHINGS TO MODERN LANGUAGES. WHILE MAINTAINING A GLOBAL FOCUS, KHYENTSE FOUNDATION REMAINS A GRASS ROOTS ORGANIZATION, OPERATED BY AN ALMOST ALL-VOLUNTEER STAFF AND SUPPORTED BY HUNDREDS OF DONORS, MANY OF WHOM GIVE JUST A FEW DOLLARS EACH MONTH, LIKE DROPS OF WATER MAKING UP AN OCEAN, THE FOUNDATION AND ITS DONORS COMBINE TO SUPPORT THOUSANDS OF PRACTITIONERS, STUDE NTS, AND MONASTICS, THEREBY REESTABLISHING THE AGE-OLD TRADITION OF BUDDHIST PATRONAGE FOR CONTEMPORARY TIMES. ENTERING ITS THIRD DECADE, THE FOUNDATION EXPECTS TO SIGNIFICANTLY EX PAND THE SCOPE AND SCALE OF ITS ACTIVITIES. SPECIAL EMPHASIS IS MADE ON TWO MAJOR ACTIVITY AREAS WHICH FORM THE FRAMEWORK OF KHYENTSE FOUNDATION'S SYSTEM OF PATRONAGE TO SUPPORT BU DDHIST STUDY AND PRACTICE: NURTURING THE SOURCE (MONASTIC EDUCATION, TEXT PRESERVATION, RE VITALIZE TRADITIONS, TRANSLATIONS) AND TRAINING FOR THE FUTURE (SCHOLARSHIPS, LEADERSHIP &

TEACHER TRAINING, EDUCATION PROGRAMS, ACADEMIA DEVELOPMENT).

Return Explanation
Reference

990 Schedule O, Supplemental Information

LINE 11B

FORM 990, THE TREASURER WILL REVIEW FORM 990 BEFORE IT IS FILED.
PART VI, SECTION B.

Return Explanation
Reference

990 Schedule O, Supplemental Information

FORM 990,	THE EXECUTIVE DIRECTOR AND THE TREASURER CONSISTENTLY MONITOR THE RECIPIENTS OF EXPENDITUR
PART VI,	ES FOR ANY CONFLICT OF INTEREST. THE BOARD ANNUALLY REVIEWS WHETHER ANY CONFLICT OF INTERE
SECTION B,	ST HAS OCCURRED.
LINE 12C	

Return Explanation
Reference

990 Schedule O, Supplemental Information

FORM 990,	ANY COMPENSATION FOR OFFICERS IS DETERMINED BY THE EXECUTIVE COMMITTEE IN CONSULTATION WIT
PART VI.	H A VOLUNTEER WHO IS FAMILIAR AND UP TO DATE WITH CURRENT STANDARDS.
SECTION B,	
LINE 15	

Return Explanation

FORM 990, VARIOUS DOCUMENTS ARE AVAILABLE ON THE KF WEBSITE, OTHERS ARE AVAILABLE UPON REQUEST.

PART VI,
SECTION C.

990 Schedule O, Supplemental Information

LINE 19

Return Explanation
Reference

THE ORGANIZATION USES MODIFIED CASH ACCOUNTING METHOD

990 Schedule O, Supplemental Information

FORM 990.

PART XII, LINE 1:

Return Explanation Reference

FORM 990. THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

PART XII, LINE 2C:

990 Schedule O, Supplemental Information