For	m 9	90											I	OMB No. 1545-0047
1 01					-				t From I					2023
Dep Inter	artment	t of the Treasury venue Service		Do not er	nter social	security n	umbers	on this form	n as it may be nd the lates	made pu	blic.			Open to Public Inspection
Α	For t	he 2023 calendar	year, or tax		-	7/01			2023, and er		6/			, 20 2024
В	Check	if applicable: C										D Empl	oyer iden	tification number
	A	ddress change BU	DDHIST	GLOBAL	RELIE	EF							-2852	
	N		NJ NONE			RATION	1					E Telep	hone num	ber
	Ir		6 BROUG STER CI			1						60	9-864	-4054
	Fi	nal return/terminated	SIER CI	II, CA	94404	t								
	A	mended return											s receipts	_, ,
	A	pplication pending F	Name and add	tress of princip	al officer:	HILLA	RY C	HEN		. ,		÷ .		bordinates? Yes X No
		SA	ME AS C	C ABOVE				.		H(D)	Are all If "No,'	subordinat attach a li	es include st. See in	ed? Yes No structions.
<u> </u>			501(c)(3)	501(c) ()	(insert	<u> </u>	4947(a)	(1) or 52	27				
<u>J</u>	-		S://WWW		1			.ORG	1.			exemption		
ĸ			Corporation	Trust	Associa	tion	Other		L Year of fo	ormation:	200	8 10	State of	legal domicile: NJ
Pa	art I	Summary Briefly describe t	ha organiz	otion's mis	sion or n	post sign	vificant	activition:		יייד א ייד				
	-													UCATION AND
Sc		OTHER FORM												
'nar			<u>o or on</u>	<u>/////////////////////////////////////</u>	<u></u>	<u>101111</u>		<u>o 1 101 1</u>				<u></u>	<u></u>	
Governance	2	Check this box	if the	organizati	on disco	ntinued	its oper	rations or	disposed o	f more t	han 2	25% of it	s net as	
		Number of voting												11
ళ స	4	Number of indep												11
Activities	5	Total number of Total number of												4
Vct i	0 7a	Total unrelated b												100
-		Net unrelated but												0.
												Prior Yea		Current Year
-	8	Contributions and	d grants (P	art VIII, line	e 1h)						3	3,838,	371.	1,654,299.
Revenue	9	Program service			÷.									
eve	10	Investment incon	•									83,	037.	151,743.
£	11	Other revenue (F												1 000 010
	12	Total revenue –		-								3,921,		1,806,042.
	13	Grants and similar						-			2	2,043,	934.	1,754,500.
	14	Benefits paid to										0.0	1	105 101
es	15	Salaries, other co							-			90,	155.	105,161.
ense	16a	Professional fund												
Expense	b	Total fundraising		-		-	· _		96,33					
	17	Other expenses	-										089.	67,987.
	18	Total expenses.										2,189,		1,927,648.
	19	Revenue less exp	penses. Su	btract line	18 from	line 12.					1	L,732,	230.	-121,606.
ot Assets or nd Balances		-		-,								ng of Curr		End of Year
3set: Malar	20	Total assets (Par Total liabilities (F									2	2,759,		2,700,147.
Net As Fund P	21	-		•									536.	73,388.
_		Net assets or fur		. Subtract	line 21 fi	rom line	20				2	2,748,	365.	2,626,759.
	art II	Signature E												
Und com	er pena plete. D	Ities of perjury, I declare Declaration of preparer (e that I have ex other than offic	amined this re er) is based or	turn, includ n all informa	ing accomp ation of whi	oanying s ich prepa	chedules and rer has any k	statements, ar nowledge.	nd to the b	est of m	ny knowled	ge and bel	lief, it is true, correct, and

Sign	Signature of officer			Date						
Here	HILLARY C			TREASURER						
	Print/Type preparer	r's name	Preparer's signature	Date	Check if	PTIN				
Paid	BENJAMIN	T. CARROLL			self-employed	P01383349				
Preparer	Firm's name	STONE, RUDOLF								
Use Only	Firm's address	124 CENTER PC	Firm's EIN 62-0811623							
		CLARKSVILLE,	TN 37040		Phone no. (93	1) 648-4786				
May the IRS	May the IRS discuss this return with the preparer shown above? See instructions X Yes No									
BAA For Pa	AA For Paperwork Reduction Act Notice, see the separate instructions. TEEA0101L 08/23/23 Form 990 (2023)									

Form	n 990 (2023) BUDDHIST GLOBAL RELIEF	26-2852923	Page 2
Par	statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission: <u>TO</u> ALLEVIATE SUFFERING, POVERTY AND OPPRESSION THROUGH DIRECT <u>TECHINICAL</u> ASSISTANCE, EDUCATION AND OTHER FORMS OF CHARITABLE IN NEED THROUGHTOUT THE WORLD		<u>_</u>
	Did the organization undertake any significant program services during the year which were not listed on the Form 990 or 990-EZ?	Yes	X No
	Did the organization cease conducting, or make significant changes in how it conducts, any program If "Yes," describe these changes on Schedule O.		X No
4	Describe the organization's program service accomplishments for each of its three largest program section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and alloca and revenue, if any, for each program service reported.	ations to others, the total e	expenses. xpenses,
4a	(Code:) (Expenses \$1,362,638. including grants of \$1,327,500. BUDDHIST GLOBAL RELIEF HAS MADE ADDITIONAL SMALLER GRANTS TO P VARIOUS COUNTRIES WORLDWIDE FOR: (1) EMERGENCY RELIEF FOR COMM NATURAL DISASTERS, (2) PROGRAMS TO PROMOTE ECONOMIC AND SOCIAL THROUGH ACCESS TO VOCATIONAL TRAINING AND SUSTAINABLE LIVELIHO ORGANIZATIONS PROVIDING MEALS AND NUTRITIONAL EDUCATION TO THE COMMUNITY FARM DEVELOPMENT WITH INSTRUCTION ON SUSTAINABLE AND METHODS TO PROVIDE INCREASED YIELDS AND SELF-EMPOWERMENT, AND EDUCATION.	ARTNER ORGANIZATI UNITIES SUFFERING EMPOWERMENT OF V ODS, (3) ASSISTAN HOMELESS AND POO ECOLOGICAL FARMI	G FROM VOMEN VCE TO DR, (4)
4b	O(Code:) (Expenses \$) SS_FOOD
4c	: (Code:) (Expenses \$142,394. including grants of \$140,000. BUDDHIST GLOBAL RELIEF WITH LONGTIME PARTNER ACTION AGAINST HU UNDERLYING CAUSES OF MALNUTRITION AMONG CHILDREN IN VILLAGES I THE DODOMA REGION BY INCREASING THE PRODUCTION OF NUTRIENT-RIC CONSUMPTION OF THESE FOODS TO IMPROVE DIETARY DIVERSIFICATION. GLOBAL RELIEF ALSO WORKS WITH ACTION AGAINST HUNGER TO ADRESS MYANMAR ETHIOPIA AND UKRAINE.	N MPWAPWA DISTRIC H CROPS AND THE ADDITIONALLY, BU	CT_OF
	I Other program services (Describe on Schedule O.) SEE SCHEDULE O (Expenses \$ 99,522. including grants of \$ 97,000.) (Revenue	\$)
4e BAA	Total program service expenses 1,799,494. TEEA0102L 08/23/23	Form	n 990 (2023)

Form 990 (2023) BUDDHIST GLOBAL RELIEF

Par	t IV Checklist of Required Schedules		V	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes X	No
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>	3		Х
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	Х	
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? <i>If "Yes," complete Schedule C, Part III</i>	5		х
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, Part I</i>	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> .	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		х
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? <i>If "Yes," complete Schedule D</i> , <i>Part VI</i>	11a		Х
b	Did the organization report an amount for investments – other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		Х
С	Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
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)? <i>If "Yes," complete Schedule D, Part X</i>	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		Х
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (Å), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions.	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Х	
BAA				(2023)

Page 3

Part IV Checklist of Required Schedules (continued) Yes No 22 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 Х Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current 23 and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Х Schedule J.... 23 **24a** Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.* Х 24a **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?..... 24b c 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 25a 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..... Х 25a **b** Is the organization aware that it engaged in an excess benefit transaction with a disgualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L. Part I 25h Х 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 Х 26 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key 27 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 Х persons? If "Yes," complete Schedule L, Part III..... 27 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions). 28 a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV..... Х 28a **b** A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV..... Х 28b c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV. 28c Х Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M..... Х 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 contributions? If "Yes," complete Schedule M. 30 Х Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part 1..... Х 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 Schedule N, Part II Х 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I.* 33 Х 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, 34 Х and Part V, line 1..... 34 **35a** Did the organization have a controlled entity within the meaning of section 512(b)(13)?.... Х 35a **b** 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 36 Х 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 37 Х Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 38 Х Note: All Form 990 filers are required to complete Schedule O. 38 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V..... Yes No **1a** Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 0 **b** Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable..... 1b 0 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming С Х (gambling) winnings to prize winners? 1c

Form 990 (2023) BUDDHIST GLOBAL RELIEF

BAA

26-2852923

Page 4

Form	990 (2023) BUDDHIST GLOBAL RELIEF 26-285292	3	F	Page 5							
Part	art V Statements Regarding Other IRS Filings and Tax Compliance (continued)										
			Yes	No							
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State- ments, filed for the calendar year ending with or within the year covered by this return 2a 4										
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х								
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х							
b	b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule 0.										
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		х							
b	If "Yes," enter the name of the foreign country										
	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		X							
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х							
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>							
	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		Х							
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b									
7	Organizations that may receive deductible contributions under section 170(c).										
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Х								
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х								
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Х							
d	If "Yes," indicate the number of Forms 8282 filed during the year										
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х							
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х							
5	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g									
	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									
	Section 501(c)(7) organizations. Enter:										
	Initiation fees and capital contributions included on Part VIII, line 12 10a										
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b										
	Section 501(c)(12) organizations. Enter:										
	Gross income from members or shareholders. 11a Gross income from other sources. (Do not net amounts due or paid to other sources 11a										
	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? If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a									
	Section 501(c)(29) qualified nonprofit health insurance issuers.										
	Is the organization licensed to issue qualified health plans in more than one state?	13a									
	Note: See the instructions for additional information the organization must report on Schedule O.	100									
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans										
с	Enter the amount of reserves on hand										
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х							
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b									
	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		х							
	If "Yes," see the instructions and file Form 4720, Schedule N.	10		X							
	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									
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17									
	If "Yes," complete Form 6069.										

2	Did any officer, director, trustee, or key employee have a family relationship or a dusiness relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents			
	since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	Х	
	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses on Schedule O</i>	9		Х
ec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	eveni	ue C	ode.)
		_	Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe on Schedule O how this was done</i> SEE. SCHEDULE .Q	12c	х	
3	Did the organization have a written whistleblower policy?	13		Х
4	Did the organization have a written document retention and destruction policy?	14		Х
5	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		Х
b	Other officers or key employees of the organization.	15b		Х
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
	tion C. Disclosure	105	l	1
eri				
	List the states with which a copy of this Form 990 is required to be filed <u>SEE_SCHEDULE</u> O			

Section A. Governing Body and Management

- - - - -

X Own website

the public during the tax year.

19

20

BAA

If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad

authority to an executive committee or similar committee, explain on Schedule O.

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

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

1a Enter the number of voting members of the governing body at the end of the tax year.....

b Enter the number of voting members included on line 1a, above, who are independent.....

- Annally and all

and the state of t

Х

No

Yes

11

11

State the name, address, and telephone number of the person who possesses the organization's books and records.

SEE SCHEDULE O

HILLARY CHEN 506 BROUGHTON LANE FOSTER CITY CA 94404 609-864-4054

X Upon request

Describe on Schedule 0 whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to

Another's website

Other (explain on Schedule O)

Page 6

2	6-	2	Q	5	2	a	2	3
	σ-	Z	о	Э	Z.	3	Z.	Э

1a

1b

Form 990 (2023) BUDDHIST GLOBAL RELIEF	26-2852923	Page 7
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Independent Contractors	Compensated Employe	es, and
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 Compensate	ed Employees	
 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending v organization's tax year. List all of the organization's current officers, directors, trustees (whether individuals or organization) 		

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the

organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

			(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						
(A) Name and title	(B) Average	box,				s both a	n Reportable	(E) Reportable compensation from	(F) Estimated amount of other
	hours per week (list any hours for related organiza- tions below dotted	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	 the organization (W.2/1099- MISC/1099-NEC) 	related organizations (W-2/1099- MISC/1099-NEC)	compensation from the organization and related organizations
	line)	ň	itee			Isate			
(1) KIM BEHAN	30					<u>a</u>			
EXECUTIVE DIREC	0			Х			40,000.	0.	0.
(2) PATRICIA PRICE	20						,		
DEPUTY DIRECTOR	0			Х			22,500.	0.	0.
(3) VEN. BHIKKHU BODHI	2								
CHAIRMAN	0	Х		Х			0.	0.	0.
(4) W. DAVID BRAUGHTON	5								
VICE CHAIRMAN	0	Х		Х			0.	0.	0.
(5) DANIEL BLAKE	1								
SECRETARY	0	Х		Х			0.	0.	0.
(6) GEORGE CLAPP	6								
DIRECTOR	0	Х					0.	0.	0.
(7) CHARLES_ELLIOTT	1.5							_	
DIRECTOR	0	Х					0.	0.	0.
(8) JESSIE BENJAMIN	4								-
SECRETARY	0	Х					0.	0.	0.
(9) <u>SYLVIE SUN</u>	2								
DIRECTOR	0	Х					0.	0.	0.
(10) VEN. AYYA DHAMMADIPA	2								0
DIRECTOR	0	Х					0.	0.	0.
(11) VEN. JIN CHUAN	1						0	0	0
DIRECTOR	0	Х					0.	0.	0.
(12) HILLARY CHEN TREASURER	<u>- 8</u> 0	Х		Х			0	0.	0
(13) PAT TALLMAN	1.5	Λ	ŀŀ	Λ		\vdash	0.	0.	0.
DIRECTOR	$-\frac{1.5}{0}$	Х					0.	0.	0.
(14)	0	^					0.	0.	0.
<u> </u>	-	•							
RAA	TEEAC	107	00/02/	(22		1 1		1	Form 990 (2023)

Form 990 (2023) BUDDHIST GLOBAL RELIEF

26-2852923 Page 8

Fai	t VII Section A. Officers, Directors, Tru	stees, I	ney i	-	(C)	es,	and	a nignest Con		oyees	(contin	nuea)
	(A) Name and title	(B) Average hours	age irs					(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	0	(F) ated amo f other nsation f	
		per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Officer Institutional trustee	Key employee	Highest compensated employee	Former	(W-2/1099- MISC/1099-NEC)	related organizations (W-21099- MISC/1099-NEC)	the o	rganization related anization	on
(15)												
(16)												
(17)												
(18)												
(19)												
(20)												
(21)												
(22)												
(23)												
(24)												
(25)												
	Subtotal							62,500.	0.			0.
	Total from continuation sheets to Part VII, Section							0.	0.			0.
	Total (add lines 1b and 1c) Total number of individuals (including but not limited							62,500.	<u>0.</u>	onaction		0.
	from the organization 0	to those i		ibove)	WHO	recer	veu	more man \$100,00		ensation		
3	Did the organization list any former officer, direct	tor, truste	e, key	/ emp	loye	e, or	high	nest compensated	employee	3	Yes	No
4	on line 1a? If "Yes, "complete Schedule J for such For any individual listed on line 1a, is the sum of the organization and related organizations greate									. 3		Х
5	Such individual									. 4		Х
	for services rendered to the organization? If "Yes	s," comple	ete Sc	hedu	le J i	for su	ch p	person		. 5		Х
<u>Sec</u> 1	tion B. Independent Contractors Complete this table for your five highest compension from the organization. Report compension	sated inde	epend the ca	ent co lendar	ontra ^r vea	ictors r endi	tha ng v	t received more the or	han \$100,000 of ganization's tax year			
	(A) Name and business addr				<u> </u>			(B) Description of	, í	(C) Compensation		
2	Total number of independent contractors (including b \$100,000 of compensation from the organization	ut not limi 0	ited to	those	liste	d abo	ve)	who received more	than			

Form 990 (2023) BUDDHIST GLOBAL RELIEF

Part VIII Statement of Revenue

26-2852923

Page 9

art		Statement of Revenue Check if Schedule O contains	a resp	oonse or note to an	y line in this Part VI	IL		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from ta: under sections 512-514
s, ts	1a	Federated campaigns	1a					
noun	b	Membership dues	1b					
۳ ۲	С	Fundraising events	1c	66,297.				
	d	Related organizations	1d					
S, i		Government grants (contributions)	1e					
computions, Girls, Grants, and Other Similar Amounts		All other contributions, gifts, grants, and similar amounts not included above	1f	1,588,002.				
and Oth	5	Noncash contributions included in lines 1a-1f.	1g	39,324.				
	h	Total. Add lines 1a-1f		Business Code	1,654,299.			
Program Service Revenue	2-		·	Business Code				
eve	2a b							
e B	U C							
<u>S</u>	с С							
Š	u							
ran	f	All other program service revenu	IA					
<u>b</u>		Total. Add lines 2a-2f						
	3	Investment income (including divid						
	3	other similar amounts)			151,743.			151,743
	4	Income from investment of tax-e	t bond proceeds	/			,	
	5	Royalties						
		(i) R	eal	(ii) Personal				
	6a	Gross rents 6a						
	b	Less: rental expenses 6b						
	С	Rental income or (loss) 6c						
	d	Net rental income or (loss)						
	7a	Gross amount from (i) Secu	urities	(ii) Other				
		sales of assets						
	b	Less: cost or other basis						
		and sales expenses 7b						
		Gain or (loss) 7c						
	d	Net gain or (loss)						
e e	8a	Gross income from fundraising events						
۲ ۵		(not including \$ 66,29	7.					
ē		of contributions reported on line 1c).						
Ľ.		See Part IV, line 18	8					
Other Revenue		Less: direct expenses	8					
-		Net income or (loss) from fundra	using (events				
	9a	Gross income from gaming activities. See Part IV, line 19.	9	a				
	h	Less: direct expenses	9					
		Net income or (loss) from gamin	-					
_				100				
1	Ua	Gross sales of inventory, less returns and allowances	10	a				
	b	Less: cost of goods sold	10					
		Net income or (loss) from sales						
	-			Business Code				
Revenue	1a							
Revenue	b							
S.	с							
ž	d	All other revenue						
	e	Total. Add lines 11a-11d	، 					
1	2	Total revenue. See instructions.			1,806,042.	0.	0.	151,743

Part IX Statement of Functional Expenses

Sec	tion 501(c)(3) and 501(c)(4) organizations must con Check if Schedule O contains a r	1			<u> </u>
		(A)	(B)	(C)	(D)
Do 1 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and for- eign individuals. See Part IV, lines 15 and 16	1,754,500.	1,754,500.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	62,500.	27,500.	3,750.	31,250.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	34,221.	14,294.	2,586.	17,341.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	54,221.	11,231.	2,300.	17,041.
9	Other employee benefits				
10	Payroll taxes	8,440.	3,200.	1,022.	4,218.
11	Fees for services (nonemployees):				·
а	Management				
	Legal				
	Accounting	34,188.		19,500.	14,688.
	Lobbying	54,100.		10,000.	14,000.
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column				
9	(A), amount, list line 11g expenses on Schedule 0.)	2,686.		2,686.	
12	Advertising and promotion.	1,575.			1,575.
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	968.		968.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	DUES_AND_FEES	13,905.		872.	13,033.
	REGISTRATIONS_AND_FILINGS	9,783.		•••••	9,783.
c		3,589.			3,589.
d		891.		30.	861.
	All other expenses	402.		402.	001.
25		1,927,648.	1,799,494.	31,816.	96,338.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following	1, 927, 040.	1,799,494.	51,010.	
	SOP 98-2 (ASC 958-720)				
					Carren 000 (2022)

TEEA0110L 08/23/23

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Form 990 (2023) BUDDHIST GLOBAL RELIEF

Page 11

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
1	Cash – non-interest-bearing		1	1,638,679
2	Savings and temporary cash investments.		2	1,033,451
3	Pledges and grants receivable, net.	· · ·	3	, ,
4	Accounts receivable, net	2,626.	4	6,560
5	Loans and other receivables from 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		5	
6	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		7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	2,086.	9	450
1 0 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
b	Less: accumulated depreciation 10b		10c	
11	Investments – publicly traded securities		11	
12	Investments – other securities. See Part IV, line 11		12	
13	Investments – program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11		15	21,007
16	Total assets. Add lines 1 through 15 (must equal line 33)	2,759,901.	16	2,700,147
17	Accounts payable and accrued expenses	. 36.	17	888
18	Grants payable	11,500.	18	72,500
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
21 22	Loans and other 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		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
26	Total liabilities. Add lines 17 through 25.	11,536.	26	73,388
	Organizations that follow FASB ASC 958, check here X and complete lines 27, 28, 32, and 33.			,
27	Net assets without donor restrictions	2,648,365.	27	2,626,759
28	Net assets with donor restrictions	100,000.	28	
27 28 29 30 31 32 33	Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.			
29	Capital stock or trust principal, or current funds		29	
30	Paid-in or capital surplus, or land, building, or equipment fund		30	
1	Retained earnings, endowment, accumulated income, or other funds		31	
31	J, , , , , , , , , , , , , , , , , , ,		-	
31 32	Total net assets or fund balances	2,748,365.	32	2,626,759

Form	n 990 (2023) BUDDHIST GLOBAL RELIEF 26-2	2852923		Pa	ge 12
Par	rt XI Reconciliation 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	1,8	06,0)42.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,9	27,6	548.
3	Revenue less expenses. Subtract line 2 from line 1	3	-1	21,6	506.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,7	48,3	365.
5	Net unrealized gains (losses) on investments	5			
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 on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	2,6	26,7	759.
Par	rt XII Financial Statements and Reporting	•	/		
	Check if Schedule O contains a response or note to any line in this Part XII				. П
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe separate basis, consolidated basis, or both. Separate basis Consolidated basis Both consolidated and separate basis	ed on a			
h	Were the organization's financial statements audited by an independent accountant?		2b	Х	
-	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa basis, consolidated basis, or both. X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.				
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Guidance, 2 C.F.R. Part 200, Subpart F?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required auc or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
BAA	TEEA0112L 08/23/23		Form	990 ((2023)

			oort	OMB No. 1545-0047						
	HEDULE A m 990)	Con	plete if the organiza	tion is a section 501(c) a)(1) nonexempt charita	(3) orgai	nization		2023		
_			Attac		Open to Public Inspection					
Depar Intern	tment of the Treasury al Revenue Service	G	Go to www.irs.gov/Form990 for instructions and the latest information.							
Name			LOBAL RELIEF OFIT CORPORATI	ION			Employer identifica 26-285292			
Par	t I Reason fo	or Public Cha	rity Status. (All o	organizations must	comple	ete this	s part.) See instruc	ctions.		
The	organization is no	t a private found	lation because it is: (For lines 1 through 12,	check o	nly one	box.)			
1				hurches described in sec		b)(1)(A)((i).			
2				tach Schedule E (Form						
3				ization described in sec						
4	A medical re name, city, a			unction with a hospital		d in sec	ction 170(b)(1)(A)(iii). ⊢	nter the hospital's		
5	An organizat	ion operated for b)(1)(A)(iv). (Co	the benefit of a colle mplete Part II.)	ege or university owned	or oper	ated by	a governmental unit de	escribed in		
6 7	A federal, sta	ate, or local gov	ernment or governme	ental unit described in s	ection 1	70(b)(1))(A)(v).			
/	An organization in section 17	on that normally r '0(b)(1)(A)(vi). (eceives a substantial p Complete Part II.)	part of its support from a	governm	ental un	it or from the general pul	olic described		
8	A community	v trust described	in section 170(b)(1)(A)(vi). (Complete Part	l.)					
9		or a non-land-grai		ction 170(b)(1)(A)(ix) oper e (see instructions). Enter						
10	from activitie investment ir	ion that normall s related to its ncome and unre	y receives (1) more t exempt functions, sub	han 33-1/3% of its supp bject to certain exception e income (less section	ns; and	(2) no r	more than 33-1/3% of i	ts support from gross		
11	An organizat	ion organized a	nd operated exclusive	ely to test for public saf	ety. See	sectior	1 509(a)(4).			
12	or more publ	icly supported o	rganizations describe	ely for the benefit of, to ed in section 509(a)(1) of upporting organization	or sectio	n 509(a)(2). See section 509(a	ut the purposes of one)(3). Check the box on		
а	organization(s	porting organizati s) the power to re rt IV, Sections A	gularly appoint or elect	d, or controlled by its sup t a majority of the directo	ported o rs or trus	rganizat stees of t	ion(s), typically by giving the supporting organizati	the supported on. You must		
b	management	pporting organiz of the supporting ete Part IV, Sect	organization vested in	controlled in connection the same persons that c	with its ontrol or	support manage	ted organization(s), by the supported organizat	having control or ion(s). You		
С	Type III functi	onally integrated	A supporting organiza	tion operated in connectio plete Part IV, Sections	n with, a	nd functio	onally integrated with, its	supported		
d	Type III non-f functionally i	unctionally integ ntegrated. The o	rated. A supporting orgonization generally	panization operated in cor must satisfy a distribu must and D, and Part V.	nection	with its a	supported organization(s) that is not		
e	Check this be	ox if the organiz	ation received a writt	en determination from supporting organization		that it is	s a Type I, Type II, Typ	e III functionally		
f			-							
g		-	n about the supporte		r					
	(i) Name of supported	organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organizat in your g	s the ion listed overning nent?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
					Yes	No				
(A)										
(B)										
(C)										
(D)										
(E)										

Total

OMB No. 1545-0047

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Cale begi	ndar year (or fiscal year nning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support		1	Т		•	
	ndar year (or fiscal year nning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activ	ities, etc. (see in	structions)			12	
13	First 5 years. If the Form 990 is a organization, check this box and	for the organizati stop here	on's first, second	l, third, fourth, or	fifth tax year as a	section 501(c)(3)	
Sec	tion C. Computation of Pul	olic Support F	Percentage				
14	Public support percentage for 20						
15	Public support percentage from 2	2022 Schedule A	, Part II, line 14.			15	
16a	33-1/3% support test–2023. If the and stop here. The organization	ne organization d qualifies as a pu	id not check the blicly supported of	box on line 13, ar organization	id line 14 is 33-1/3	3% or more, chec	k this box
b	33-1/3% support test–2022. If th and stop here. The organization	e organization di qualifies as a pu	d not check a bo blicly supported	x on line 13 or 16 organization	a, and line 15 is 3	3-1/3% or more, o	check this box
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the facts-	meets the facts-a	and-circumstance	s test, check this	box and stop here	e. Éxplain in Part	VI how
b	10%-facts-and-circumstances te or more, and if the organization organization meets the facts-and	meets the facts-a	and-circumstance	s test, check this	box and stop here	e. Explain in Part	VI how the

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

% %

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support (b) 2020 (c) 2021 Calendar year (or fiscal year beginning in) (a) 2019 (d) 2022 (e) 2023 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants."). P.T. VI 817,746 975,340. 1,447,006. 2,060,832. 1,654,299 6,955,223. 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose... 0. 3 Gross receipts from activities that are not an unrelated trade or business under section 513. 0. Tax revenues levied for the organization's benefit and either paid to or expended on 0. its behalf... The value of services or facilities furnished by a governmental unit to the organization without charge ... n Total. Add lines 1 through 5... 817,746 975, 340 1 447,006 2,060,832 654 299 6 955 22 3 Amounts included on lines 1, 7a 2, and 3 received from disqualified persons... 0 0 450,000 700,000 0 1,150,000. **b** Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year. 0 0 0 0 n n c Add lines 7a and 7b..... 0 0 450,000 700,000 0 1,150,000. 8 Public support. (Subtract line 7c from line 6.). 5,805,223 Section B. Total Support (a) 2019 (c) 2021 (e) 2023 (b) 2020 (d) 2022 Calendar year (or fiscal year beginning in) (f) Total 9 Amounts from line 6..... 817,746 975,340 1, 447,006. 2,060,832. 654,299 6,955,223. 1 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 156 192 187 151,743 83,037 235,315. b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975... c Add lines 10a and 10b 192 83,037 156 187 151,743 235,315 11 Net income from unrelated business activities not included on line 10b. whether or not the business is regularly carried on 0. 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in 0. Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 817,902. 975,532. 1,447,193. 2,143,869. 7,190,538. 1,806,042. First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 14 organization, check this box and stop here. Section C. Computation of Public Support Percentage 15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f)...... % 15 80.73 16 Public support percentage from 2022 Schedule A, Part III, line 15. 16 Ŷ 78.05 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))..... 17 3.27 ە/ە 0\0 18 Investment income percentage from 2022 Schedule A, Part III, line 17..... 18 1.38 19a 33-1/3% support tests-2023. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 Х is not more than 33-1/3%, check this box and stop here. The organization gualifies as a publicly supported organization **b** 33-1/3% support tests - 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization gualifies as a publicly supported organization ... Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions..... 20

BAA

26-2852923

Page 4

 Part IV
 Supporting Organizations

 (Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete 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		
2	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		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
t	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		
c	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.	3c		
4 a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
Ł	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 supervised by or in connection with its supported organizations.	4b		
c	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 to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported 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 amendment to the organizing document).	5a		
Ł	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the			
c	organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?	5b 5c		
6	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? <i>If "Yes," provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	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		
Ł	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
c	: Did a disqualified person (as defined on 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.	9с		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.	10a		
t	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	1 0 b		

11 Has the organization accepted a gift or contribution from any of the following persons?

a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?

BUDDHIST GLOBAL RELIEF

b A family member of a person described on line 11a above?

c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.

Section B. Type I Supporting Organizations

- 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, 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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that 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.

Section C. Type II Supporting Organizations

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 supporting organization was vested in the same persons that controlled or managed the supported organization(s).

Section D. All Type III Supporting Organizations

- 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 1 organization's governing documents in effect on the date of notification, to the extent not previously provided? 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 2
- 3 By reason of the relationship described on line 2, above, 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.

Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
 - The organization satisfied the Activities Test. Complete line 2 below. а
 - The organization is the parent of each of its supported organizations. Complete line 3 below. h
- The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions). С

2 Activities Test. Answer lines 2a and 2b below.

- 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.
- b Did the activities described on line 2a, above, 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.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b 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? *If "Yes" or "No," provide details in Part VI.*
- 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.

3b Schedule A (Form 990) 2023

2a

2b

3a

Yes No 1 2

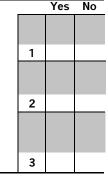
Yes

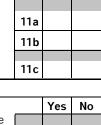
1

No

No

Yes





Yes

No

Page 6

Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	st on No	v. 20. 1970 (explain ir	n Part VI). See through E.
Section A – Adjusted Net Income	(B) Current Year (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 Year (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):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
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 0.015 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 0.035.	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 0.85 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		

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). 7

BAA

Schedule A (Form 990) 2023

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Su	pporting Organiza	itions (continue	d)	
Sec	tion D – Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exempt put	rposes		1	
2	Amounts paid to perform activity that directly furthers exempt purposes of				
	in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purposes of su	pported organizations		3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required – provide	details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the organization in Part VI). See instructions.	on is responsive (provide	detalls	8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2023		(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required – <i>explain in Part VI</i>). See instructions.				
3	Excess distributions carryover, if any, to 2023				
a	From 2018				
	P From 2019				
	From 2020				
	From 2021				
e	Prom 2022				
	f Total of lines 3a through 3e				
ç	Applied to underdistributions of prior years				
ł	Applied to 2023 distributable amount				
	Carryover from 2018 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D, line 7: \$				
a	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j and 4c.				
8	Breakdown of line 7:				
a	Excess from 2019				
	Excess from 2020				
C	Excess from 2021				
C	Excess from 2022				
e	Excess from 2023				

BAA

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023	BUDDHIST GLOBAL RELIEF	26-2852923	Page 8
B, lines 1 and 2; F 3a, and 3b; Part V	Information. Provide the explanations required by , Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, art IV, Section C, line 1; Part IV, Section D, lines 2 and line 1; Part V, Section B, line 1e; Part V, Section D, li Also complete this part for any additional information.	1 3; Part IV, Section E, lines 1c, 2a, 2b, nes 5, 6, and 8; and Part V, Section E,	
PART III, LINE 1 - UNUSU	AL GRANTS		

 2019	2020		2021		2022		2023		 TOTAL	
\$ 0.	\$	225,000.	\$	400,000.	\$	1,777,540.	\$		0.	\$ 2,402,540.

SCHEDULE C	Political Campaign and L	obbying Acti	vities	OMB No. 1545-0047
(Form 990)	2023			
Department of the Treasury Internal Revenue Service	Complete if the organization is described below Go to www.irs.gov/Form990 for instruct	Open to Public Inspection		
 Section 501(c)(3) c Section 501(c) (oth 	wered "Yes" on Form 990, Part IV, line 3, or Form 990 rganizations: Complete Parts I-A and B. Do not comp er than section 501(c)(3)) organizations: Complete Pa zations: Complete Part I-A only.	lete Part I-C.		
If the organization ans • Section 501(c)(3) org • Section 501(c)(3) org Part II-A.	wered "Yes" on Form 990, Part IV, line 4, or Form 990 ganizations that have filed Form 5768 (election under sect rganizations that have NOT filed Form 5768 (election	ion 501(h)): Complete under section 501(h	Part II-A. Do not complet)): Complete Part II-B. [e Part II-B. Do not complete
 (Proxy Tax) (see separ Section 501(c)(4), 	wered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (ate instructions), then: (5), or (6) organizations: Complete Part III.	see separate instru	ctions) or Form 990-EZ,	Part V, line 35C
Name of organization BUD A N	DHIST GLOBAL RELIEF J NONPROFIT CORPORATION		Employer identific 26-285292	
Part I-A Complet	e if the organization is exempt under section	on 501(c) or is a	section 527 organi	zation.
	tion of the organization's direct and indirect political c or definition of "political campaign activities."	ampaign activities in	n Part IV.	
2 Political campaig3 Volunteer hours f	n activity expenditures. See instructions		\$	·
	e if the organization is exempt under section			
1 Enter the amount	of any excise tax incurred by the organization under	section 4955	ć	0.
	t of any excise tax incurred by organization managers			
	n incurred a section 4955 tax, did it file Form 4720 for			
	made?			····· Yes No
b If "Yes," describe			-++	
	e if the organization is exempt under section directly expended by the filing organization for section	•••		
2 Enter the amount	of the filing organization's funds contributed to other	organizations for se	ction	
	ion activities			
line 17b			\$	
	anization file Form 1120-POL for this year?			
organization mad amount of political	addresses, and employer identification number (EIN) e payments. For each organization listed, enter the a contributions received that were promptly and directly del or a political action committee (PAC). If additional spa	mount paid from the ivered to a separate p	filing organization's fun political organization, such	ds. Also enter the as a separate
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
BAA For Paperwork Re	duction Act Notice, see the Instructions for Form 990 or	990-EZ.	Sche	dule C (Form 990) 2023

Schedule C	C (Form 990) 2023 BUDDHIST G	26-2852923		
Part II-	-A Complete if the organizatio section 501(h)).	n is exempt under section 501(c)(3) and	filed Form 5768 (ele	ction under
A Char B Cha	eck if the filing organization belor address, EIN, expenses, ar	ngs to an affiliated group (and list in Part IV each affiliat nd share of excess lobbying expenditures). ked box A and "limited control" provisions apply.	ed group member's name,	
	Limits on Lobb (The term "expenditures" me	ying Expenditures ans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Tot	tal lobbying expenditures to influence pr	ublic opinion (grassroots lobbying)		
b Tot	tal lobbying expenditures to influence a	legislative body (direct lobbying).		
c Tot	tal lobbying expenditures (add lines 1a	and 1b)	0.	0.
d Oth	her exempt purpose expenditures		1,927,648.	
e Tot	tal exempt purpose expenditures (add li	ines 1c and 1d)	1,927,648.	0.
	bbying nontaxable amount. Enter the ar lumns.	nount from the following table in both	246,382.	
lf th	he amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
not	over \$500,000,	20% of the amount on line 1e.		
over	er \$500,000 but not over \$1,000,000,	\$100,000 plus 15% of the excess over \$500,000.		
over	er \$1,000,000 but not over \$1,500,000,	\$175,000 plus 10% of the excess over \$1,000,000.		
over	r \$1,500,000 but not over \$17,000,000,	\$225,000 plus 5% of the excess over \$1,500,000.		
over	r \$17,000,000,	\$1,000,000.		
5		of line 1f)	61,596.	0.
h Su	btract line 1g from line 1a. If zero or les	ss, enter -0	0.	0.
i Su	btract line 1f from line 1c. If zero or less	s, enter -0	0.	0.
		r line 1h or line 1i, did the organization file Form 4720 r		Yes No
		4-Year Averaging Period Under Section 501(h)	and the all of the first	

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period								
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total			
2a Lobbying nontaxable amount		203,163.	259,459.	246,382.	709,004.			
 b Lobbying ceiling amount (150% of line 2a, column (e)) 					1,063,506.			
c Total lobbying expenditures					0.			
d Grassroots nontaxable amount		50,791.	64,865.	61,596.	177,252.			
e Grassroots ceiling amount (150% of line 2d, column (e))					265,878.			
f Grassroots lobbying expenditures					0.			

BAA

Schedule C (Form 990) 2023

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	۲ filec	l Form	5768		
	(a	I)	(k)	
For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	Yes	No	Amo	ount	
 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? 					
 c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? 					
 f Grants to other organizations for lobbying purposes?					
 j Total. Add lines 1c through 1i. 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912. c If "Yes," enter the amount of any tax incurred by organization managers under section 4912. d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? 					
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501 section 501(c)(6).		, or			
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the 			2	Yes	No
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) answered "Yes."	(c)(5)	, or sea	ction 50)1(c)	
1 Dues, assessments and similar amounts from members		1			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
a Current year.b Carryover from last year.		2a 2b			
c Total3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		2c 3			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?		4			
5 Taxable amount of lobbying and political expenditures. See instructions		5			

BUDDHIST GLOBAL RELIEF

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

26-2852923

Page 3

Schedule C (Form 990) 2023

SCHEDULE D	Sup	plemental Financial State	ments	ļ	OMB No.	1545-0047
(Form 990)	Form 990) 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.					
Department of the Treasury Internal Revenue Service		Attach to Form 990. gov/Form990 for instructions and the		Open to Public Inspection		
Name of the organization				Employer id	lentification n	umber
BUDDHIST GLOBA A NJ NONPROFIT				26-285	2923	
Part I Organia	zations Maintaining Do	nor Advised Funds or Other S nswered "Yes" on Form 990, Pa	imilar Funds or A			
		(a) Donor advised funds		unds and o	othor accou	unte
1 Total number at e	end of year		(0) -	unus anu o		JIIIS
	ntributions to (during year).					
	ants from (during year)					
	at end of year					
00 0	2	nor advisors in writing that the assets	held in donor advised	funds		
are the organizat	ion's property, subject to the	organization's exclusive legal control?	?		Yes	No
for charitable pur	poses and not for the benefit	rs, and donor advisors in writing that a of the donor or donor advisor, or for	any other purpose cor	nferring	7.	
					Yes	No
	vation Easements	nswered "Yes" on Form 990, P	art IV/ line 7			
		the organization (check all that apply				
_ ()	of land for public use (for exam		Preservation of a histo	rically imp	ortant land	larea
	natural habitat		Preservation of a certi	5 1		
	of open space			neu mstorit	Siluciule	
		neld a qualified conservation contribution	in the form of a concor	votion acco	mont on the	<u>^</u>
last day of the ta	x year.					
				leld at the	End of the	e Tax Year
		·····	-			
0	2	ments				
c Number of conse	rvation easements on a certi	fied historic structure included on line	2a 2c			
		on line 2c acquired after July 25, 2006 ster				
3 Number of conserv tax year	vation easements modified, trai	nsferred, released, extinguished, or termin	nated by the organization	on during th	e	
4 Number of states	where property subject to co	onservation easement is located				
5 Does the organiz	ation have a written policy re	garding the periodic monitoring, inspe	ection, handling of viol	ations,	7	—
		nts it holds? inspecting, handling of violations, and en				No No
	, nouro dorotod to monitoring,				ing the jet	
7 Amount of expense	es incurred in monitoring, inspe	ecting, handling of violations, and enforcing	ng conservation easem	ents during	the year	
8 Does each conse	 rvation easement reported o	n line 2d above satisfy the requiremen	its of section 170(h)(4)(B)(i)	_	_
and section 170(n)(4)(B)(ii)?				Yes	No
9 In Part XIII, desc include, if applica conservation eas	able, the text of the footnote	oorts conservation easements in its re- to the organization's financial stateme	ents that describes the	organizati	on's accou	inting for
Part III Organiz	zations Maintaining Co	llections of Art, Historical Trea	sures, or Other S	Similar A	ssets	
Comple	te if the organization a	nswered "Yes" on Form 990, P	art IV, line 8.			
historical treasure	es, or other similar assets he	r FASB ASC 958, not to report in its ru ld for public exhibition, education, or r Il statements that describes these iten	research in furtheranc	l balance s e of public	heet works service, pi	s of art, rovide in
historical treasures following amount	s, or other similar assets held f s relating to these items.	r FASB ASC 958, to report in its rever or public exhibition, education, or researc	ch in furtherance of pub	lic service, p	provide the	
(i) Revenue incl	uded on Form 990, Part VIII,	line 1		\$		
(ii) Assets includ	led in Form 990, Part X			\$		
2 If the organization amounts required	received or held works of art, I	nistorical treasures, or other similar asset ASC 958 relating to these items.	s for financial gain, pro	vide the foll	owing	
a Revenue included	d on Form 990, Part VIII, line	1		\$		
b Assets included i	n Form 990, Part X			\$		
BAA For Paperwork R	eduction Act Notice, see the	Instructions for Form 990.	TEEA3301L 07/20/23	Sched	ule D (Fori	m 990) 2023

Schedule D (Form 990) 2023 BUDDHIST GLO			26-2852		Page 2
Part III Organizations Maintaining Co	ollections of Art, His	storical Treasures, or	r Other Similar As	ssets (conti	inued)
3 Using the organization's acquisition, accession, items (check all that apply).	and other records, check a	ny of the following that mak	e significant use of its	collection	
a Public exhibition	d Loan	or exchange program			
b Scholarly research	e Other				
c Preservation for future generations					
4 Provide a description of the organization's collect Part XIII.	tions and explain how they	y further the organization's e	exempt purpose in		
5 During the year, did the organization solicit of to be sold to raise funds rather than to be made	r receive donations of ar aintained as part of the c	t, historical treasures, or or or ganization's collection?.	other similar assets	Yes	No
Part IV Escrow and Custodial Arrang Complete if the organization a Form 990, Part X, line 21.	jements inswered "Yes" on F	Form 990, Part IV, line	e 9, or reported a	n amount c	n
1a Is the organization an agent, trustee, custodi on Form 990, Part X?	an, or other intermediary	/ for contributions or other	assets not included	Yes	No
b If "Yes," explain the arrangement in Part XIII an					
				Amount	
c Beginning balance			. 1c		
d Additions during the year			. 1d		
e Distributions during the year			. 1e		
f Ending balance			. 1f		
2a Did the organization include an amount on F			-		No
b If "Yes," explain the arrangement in Part XII	. Check here if the expla	nation has been provided	in Part XIII	· · · · · · · · · · · · · .	
Part V Endowment Funds			. 10		
Complete if the organization a	inswered "Yes" on F	form 990, Part IV, IIn	e 10.		
(a) Currei	nt year (b) Prior yea	r (c) Two years back	(d) Three years back	(e) Four yea	rs back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains,					
and losses					
d Grants or scholarships					
e Other expenditures for facilities					
and programs					
f Administrative expenses					
g End of year balance					
2 Provide the estimated percentage of the curr	-	ne 1g, column (a)) held as	:		
a Board designated or quasi-endowment	⁹⁰				
	0				
c Term endowment %					
The percentages on lines 2a, 2b, and 2c should	equal 100%.				
3a Are there endowment funds not in the possession	n of the organization that a	are held and administered fo	or the		
organization by:				Yes	No
(i) Unrelated organizations?				3a(i)	
(ii) Related organizations?				3a(ii)	
b If "Yes" on line 3a(ii), are the related organiz	•			3b	
4 Describe in Part XIII the intended uses of the		ent funds.			
Part VI Land, Buildings, and Equipm					
Complete if the organization answered	"Yes" on Form 990, Part	IV, line 11a. See Form 990	, Part X, line 10.		
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book v	alue
1a Land					
b Buildings					
c Leasehold improvements					
d Equipment					
e Other					
Total. Add lines 1a through 1e. (Column (d) must	equal Form 990, Part X,	line 10c, column (B))			0.
ВАА			Schedu	ule D (Form 99	0) 2023

Part VII	Investments – Other Securities	E Francisco De de IV-line	N/A	
	Complete if the organization answered "Yes" o	(b) Book value	(c) Method of valuation: Cost or end-or	
•••	tion of security or category (including name of security) I derivatives	(D) BOOK value	(C) Method of Valuation: Cost of end-o	r-year market value
	neld equity interests			
(3) Other				
(A)				
<u>(B)</u>		-		
(C)		_		
(D)		-		
(E)		-		
(F)				
(G)				
(H)				
()		_		
	n (b) must equal Form 990, Part X, line 12, column (B))			
Part VIII	Investments – Program Related Complete if the organization answered "Yes" o	n Form 990 Part IV line	N/A 11c See Form 990 Part X line 13	
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	of-vear market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Part IX	n (b) must equal Form 990, Part X, line 13, column (B)) Other Assets	N/A		
Fartix	Complete if the organization answered "Yes" o			
		escription	· · · · · · · · · · · · · · · · · · ·	(b) Book value
(1)				
(2)				
(3) (4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10) Tatal (Oat)	(h) much a much Farma (200) Dart V. Kara 15			
Part X	Imn (b) must equal Form 990, Part X, line 15,	column (B))		
Part A	Other Liabilities Complete if the organization answered "Yes" o	n Form 990 Part IV line	11e or 11f See Form 990 Part X line 2	5
1.		ription of liability		(b) Book value
	al income taxes			
(2)				
(3)				
(4) (5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
Total. (Colur	mn (b) must equal Form 990, Part X, line 25, c	column (B))		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII.

Schedule D (Form 990) 2023 BUDDHIST GLOBAL RELIEF 2	26-2852923	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	. 1]	,863,054.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments 2a		
b Donated services and use of facilities		
c Recoveries of prior year grants 2c		
d Other (Describe in Part XIII.) 2d		
e Add lines 2a through 2d.	. 2e	57,012.
3 Subtract line 2e from line 1.	. 3]	,806,042.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included 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 4c. (This must equal Form 990, Part I, line 12.)	. 5 1	,806,042.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	er Return	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	. 1 1	,984,660.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		<u> </u>
a Donated services and use of facilities		
b Prior year adjustments	<u> </u>	
c Other losses.	-	
d Other (Describe in Part XIII.)	-	
e Add lines 2a through 2d	. 2e	57,012.
3 Subtract line 2e from line 1	. 3 1	,927,648.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		///////////////////////////////////////
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.) 4b		
c Add lines 4a and 4b.		
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	. 5	,927,648.
Part XIII Supplemental Information		

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE F (Form 990)	OMB No. 1545-0047						
Department of the Treasury Internal Revenue Service	orm 990) Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990. partment of the Treasury renal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.						
Name of the organization BUDDH A NJ	Employer identi 26-28529	Inspection fication number					
Part I General Inform			e United States. Complet				
			substantiate the amount of its g selection criteria used to award				
2 For grantmakers. Describ United States. PAR	-	zation's procedure	s for monitoring the use of its gra	nts and other assistance	outside the		
3 Activities per Region. (The following Part I,	ine 3 table can b	e duplicated if additional space	e is 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 the 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		
EAST ASIA, EAST EUR	λ & 		GRANTS TO RECIPIENTS		116,400.		
(2) SOUTH ASIA			GRANTS TO RECIPIENTS		376,100.		
(3) SUB-SAHARAN AFRICA			GRANTS TO RECIPIENTS		169,000.		
(4) SOUTH AMERICA			GRANTS TO RECIPIENTS		45,500.		
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
<u>(</u> 16)							
(17)							
3a Subtotal.b Total from continuation					707,000.		
c Totals (add lines 3a and 3b)		0			707,000.		

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

Schedule F (Form 990) 2023

Page 2

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			AFRICA	EDUCATION	92,500.	WIRE			
			AFRICA	FARM DEV	41,000.	WIRE			
			AFRICA	FOOD RELIEF	35,500.	WIRE			
			ASIA & PACIFIC	EDUCATION	40,000.	WIRE			
			ASIA & PACIFIC	FARM DEV	20,000.	WIRE			
			ASIA & PACIFIC	FOOD RELIEF	10,000.	WIRE			
			ASIA & PACIFIC	NUTRITION	34,000.				
			EAST EUROPE	FOOD RELIEF	12,400.				
			SOUTH AMERICA	EDUCATION	25,500.	WIRE			
			SOUTH AMERICA	FARM DEV	20,000.	WIRE			
			SOUTH ASIA	COMMUNITY DEV	30,500.	WIRE			
			SOUTH ASIA	EDUCATION	229,600.	WIRE			
			SOUTH ASIA	FOOD RELIEF	91,500.	WIRE			
			SOUTH ASIA	NUTRITION	24,500.	WIRE			
0	Inter total number of recipient organ rganization by the IRS, or for which Inter total number of other organiza	the grantee or counse	el has provided a se	ection 501(c)(3) e	equivalency letter.			· · · · · · · · · · · · · · · · · · ·	34

BAA

Schedule F (Form 990) 2023

Schedule F (Form 990) 2023 BUDDHIST GLOBAL RELIEF

26-2852923

Page 3

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(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)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

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 the Instructions for Form 926).	Yes	X 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 the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X 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 the Instructions for Form 5471).	Yes	X 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 the Instructions for Form 8621).	Yes	X 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 the Instructions for Form 8865).	Yes	X 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 the Instructions for Form 5713; don't file with Form 990).	Yes	X No

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.

PART I, LINE 2 - GRANTMAKERS EXPLANATION FOR MONITORING USE OF FUNDS OUTSIDE US

ALL GRANTEES ARE REQUIRED TO SUBMIT A DETAILED APPLICATION INDICATING ITS LEGITIMACY, FINANCIAL HISTORY, REFERENCES AND LAYOUT OF HOW FUNDS ARE TO BE USED. WITHIN 30 DAYS, THE RECIPIENT ORGANIZATION MUST SEND A LETTER TO BUDDHIST GLOBAL RELIEF CONFIRMING RECEIPT OF FUNDS. A SEMIANNUAL REPORT OF THE PROJECT'S PROGRESS IS REQUIRED. UPON PROJECT COMPLETION, A GRANT FINAL REPORT IS SUBMITTED EXPLAINING HOW THE FUNDS WERE USED AND NOTING THE SUCCESSES AND CHALLENGES ENCOUNTERED INCLUDING HUMAN INTEREST STORIES AND PHOTOS.

26-2852923

	Suppleme	ental Informa	tion Reg	jarding F	undraising or Gami	ng Activ	vities	OMB No. 1545-0047
SCHEDULE G (Form 990)	Comple	te if the organizati organizatior	on answere n entered m	d "Yes" on Fo ore than \$15	orm 990, Part IV, line 17, 18, ,000 on Form 990-EZ, line 6a	, or 19, or i a.	if the	2023
Department of the Treasury Internal Revenue Service	Go	-	Attach to	o Form 990 o	r Form 990-EZ. uctions and the latest i		on	Open to Public Inspection
Name of the organization BU		0		o for matri			Employer identifica	•
A	NJ NONPROFI	T CORPORA	TION				26-285292	3
Part I Fundraising Form 990-E2	Activities. Complet Z filers are not re	te if the organiza guired to comp	ation answ lete this p	ered "Yes" part.	on Form 990, Part IV, lin	ne 17.		
					owing activities. Check	all that a	apply.	
a Mail solicitatio				e		0	0	
	email solicitations	5		f	Solicitation of gove		grants	
c Phone solicita d In-person soli				g		events		
2 a Did the organizatio	n have a written o	r oral agreement	t with any i	individual (i	including officers, director	rs, trustee	es, or key	
					rofessional fundraising nt to agreements under v			
compensated at l	east \$5,000 by th	le organization.	(iunuraise	ers) pursua				DC
(i) Name and addres or entity (fundr		(ii) Activity	have custor	fundraiser dy or control ibutions?	(iv) Gross receipts from activity	(or re fundra	iount paid to etained by) iser listed in olumn (i)	(vi) Amount paid to (or retained by) organization
			Yes	No				
1								
2								
3								
5								
4								
5								
6								
7								
,								
8								
9								
10								
Total								0
3 List all states in wh					ontributions or has been	notified it	is exempt from	0. registration
or licensing.								

Schedule	G	(Form	990)	2023
Ochedule	u	(1 01111	550)	2025

26-2852923

Sche	edule	G (Form 990) 2023 BUDDHIS	ST GLOBAL RELIE	F	26-28	52923 Page 2				
Par	Yart II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (add column (a) through column (c))									
ą			ONLINE SPECIAL		NONE	(add column (a)				
even	1	Gross receipts	66,297.			66,297.				
n n n										

<u>LT.</u>	2	Less: Contributions	66,297.		66,297.
	3	Gross income (line 1 minus line 2)			
	4	Cash prizes			
	5	Noncash prizes			
ses	6	Rent/facility costs			
Expenses	7	Food and beverages			
Direct E	8	Entertainment			
Dir	9	Other direct expenses			
	10	Direct expense summary. Add lines 4 thr			
	11	Net income summary. Subtract line 10 fro	om line 3, column (d).	 	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
Ř	1	Gross revenue				
es	2	Cash prizes				
xpens	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
ā	5	Other direct expenses				
	6	Volunteer labor	Yes% No	Yes% No	Yes% No	
	7	Direct expense summary. Add lines 2 thr	ough 5 in column (d) .			
	8	Net gaming income summary. Subtract li	ne 7 from line 1, colum	ın (d)		
	ls th	er the state(s) in which the organization co ne organization licensed to conduct gaming No," explain:	g activities in each of th			
		e any of the organization's gaming license (es," explain:				

Schedule G (Form 990) 2023

Schedule G (Form 990) 2023	BUDDHIST GLOB	BAL RELIEF	26	5-28529	23	Page 3
11 Does the organization conduct	gaming activities with no	onmembers?		[Yes	No
12 Is the organization a grantor, ber administer charitable gaming?				[Yes	No
13 Indicate the percentage of gamin	0 ,					
a The organization's facility				13a		00
b An outside facility14 Enter the name and address of the name and address o				13b		010
Name						
Address						
 15 a Does the organization have a d b If "Yes," enter the amount of g of gaming revenue retained by c If "Yes," enter name and address 	aming revenue received the third party \$			e? e amount	Yes	No
Name						
Address						
16 Gaming manager information:						
Name						
Gaming manager compensatio	n \$					
Description of services provide	d					
Director/officer	Employee	Independent co	ontractor			
17 Mandatory distributions:						
a Is the organization required unde state gaming license?					Yes	No
b Enter the amount of distributions organization's own exempt act			t organizations or spent in t	the		_
Part IV Supplemental Infor and Part III, lines 9, information. See ins	, 9b, 10b, 15b, 15c,	explanations required t 16, and 17b, as applica	by Part I, line 2b, col ble. Also provide any	umns (iii y additio	i) and (v nal);

SCHEDULE I	Gra	ants and Ot	her Assistance	to Organization	IS,	L	OMB No. 1545-0047	
(Form 990)	Governments, and Individuals in the United States							
	Complet	e if the organizati	on answered "Yes" on F Attach to Form 990.	Form 990, Part IV, line 2	21 or 22.	-	2023 Open to Public	
Department of the Treasury Internal Revenue Service		Go to www.ir	s.gov/Form990 for the l	atest information.			Inspection	
Name of the organization BUDDHIST GLOB						Employer identifi		
A NJ NONPROFI						26-285292	23	
1 Does the organization maintain records			assistance the grantees	eligibility for the grants	or assistance and			
the selection criteria used to award t	he grants or assistance	?	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·		Yes X N	
2 Describe in Part IV the organization's p								
Part II Grants and Other Assista								
Form 990, Part IV, line 21	, for any recipient	that received i	more than \$5,000. H	Part II can be dupli	cated if additional	space is neede	d.	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of gra or assistance	
(1) ACTION AGAINST HUNGER								
1 WHITEHALL STREET							COMMUNITY FOO	
NEW YORK, NY 10004	13-3327220		140,000.	0.			RELIEF	
2) LOTUS OUTREACH INTERNATIONAL								
1104 N SIGNAL ST	00 0012000		07.000	0.			WOMEN'S	
OJAI, CA 93023 (3) WORLD FOOD PROGRAM	80-0013909		97,000.	υ.			EDUCATION	
1750 H STREET STE 500							COMMUNITY FOO	
WASHING, DC 20006	13-3843435		190,000.	0.			RELIEF	
(4) SAVE THE CHILDREN								
501 KINGS HWY EAST SUITE 400							COMMUNITY FOO	
FAIRFIELD, CT 06825	06-0726487		20,000.	0.			RELIEF	
(5) NORTH COUNTY MISSION OF HOPE								
<u>3452 NY-22</u>							WOMEN'S	
PERU, NY 12972	10-0000800		47,000.	0.			EDUCATION	
(6) <u>CARE</u>							WOMEN'S	
1515 ELLIS STREET							EDUCATION &	
ATLANTA , GA 30303	13-1685039		55,000.	0.			FOOD RELIEF	
125 MAIDEN LANE							COMMUNITY FOO	
NEW YORK, NY 10038	13-4148824		40,000.	0.			RELIEF	
(8) HELEN KELLER INTERNATIONAL	10 4140024		40,000.	0.				
ONE DAG HAMMARSKOLD PLAZA							MATERNAL/CHIL	
NEW YORK, NY 10017	13-5562162		50,000.	0.			NUTRITION	
2 Enter total number of section 501(c)	(3) and government or	anizations listed	in the line 1 table		· · · · · · · · · · · · · · · · · · ·		•	
3 Enter total number of other organization	tions listed in the line	table						

26-2852923

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART IV - ADDITIONAL SUPPLEMENTAL INFORMATION

ALL GRANTEES ARE REQUIRED TO SUBMIT A DETAILED APPLICATION INDICATING ITS

LEGITIMACY, FINANCIAL HISTORY, REFERENCES AND LAYOUT OF HOW FUNDS ARE TO BE USED.

WITHIN 30 DAYS, THE RECIPIENT ORGANIZATION MUST SEND A LETTER TO BUDDHIST GLOBAL

RELIEF CONFIRMING RECEIPT OF FUNDS. A SEMIANNUAL REPORT OF THE PROJECT'S PROGRESS IS

REQUIRED. UPON PROJECT COMPLETION, A GRANT FINAL REPORT IS SUBMITTED EXPLAINING HOW

THE FUNDS WERE USED AND NOTING THE SUCCESSES AND CHALLENGES ENCOUNTERED INCLUDING

HUMAN INTEREST STORIES AND PHOTOS.

Continuation Sheet for Schedule I (Form 990)

Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

Continuation Page 1 of 2

2023

Name of the organization						Employer identific	cation number
BUDDHIST GLOBAL RELIEF						26-285292	23
Part II Continuation of Grants and	l Other Assistan	ice to Domestic	COrganizations ar	nd Domestic Goverr	ments. (Schedu	ıle I (Form 990),	Part II.)
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
UNRWA TWO_UNITED_NATIONS_PLAZA NEW_YORK, NY 10017	20-2714426		25,000.				COMMUNITY FOOD RELIEF
_ <u>EASTON_AREA_NEIGHBORHOOD_CNTR</u> _ <u>902_PHIALDELPHIA_RD</u> EASTON , PA 18042	23-2039194		10,000.				COMMUNITY FARM DEVELOPMENT
OXFAM_AMERICA 226_CAUSEWAY_STREET_5TH_FLOOR BOSTON, MA_02114	23-7069110		20,000.				COMMUNITY FARM DEVELOPMENT
TREES_THAT_FEED 1200_HILL_ROAD WINNETKA , IL 60093	26-2780427		20,000.				CHILDREN'S EDUCATION
<u>BURMA HUMANITARIAN MISSION</u> <u>2985 S 800 E</u> SALT LAKE , UT 84106	26-3268421		20,000.				CHILDREN'S EDUCATION
JOAN ROSE FOUNDATION 432 S. WASHINGTON #1703 ROYAL OAK, MI 48067	27-3057377		24,000.				CHILDREN'S EDUCATION
<u>PERMEZONE</u> <u>1406 SANTA ROSA AVE</u> SANTA BARBARA, CA 93109	31-1796801		14,000.				COMMUNITY FARM DEVELOPMENT
JAMYANG FOUNDATION 5998 ALCALA PARK SAN DIEGO , CA 92110	33-0386414		30,000.				WOMEN'S EDUCATION
_ FEEDING AMERICA _ 161_NORTH_CLARK_ST_SUITE_700 CHICAGO, IL_60601	36-3673599		35,000.				COMMUNITY FOOD RELIEF
<u>SAHUARITA FOOD BANK</u> <u>17750 SOUTH LA CANADA DRIVE</u> SAHUARITA , AZ 85629	47-1654162		15,000.				WOMEN'S FOOD & EDUCATION

TEEA4001L 06/12/23

Schedule I Cont (Form 990) 2023

Continuation Sheet for Schedule I (Form 990)

Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

Continuation Page 2 of 2

Name of the organization						Employer identific	ation number
BUDDHIST GLOBAL RELIEF						26-285292	3
Part II Continuation of Grants and	d Other Assistan	ice to Domestic	: Organizations ar	d Domestic Govern	ments. (Schedu	le I (Form 990), I	Part II.)
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
<u>CAPITAL AREA FOOD BANK</u> <u>4900 PUERTO RICO AVENUE</u> WASHINGTON, DC 20017	52-1167581		40,000.				COMMUNITY FOOD RELIEF
<u>HOPE FOR HAITI</u> <u>PO BOX 413026 DEPT 0286</u> NAPLES , FL 34101	59-3564329		30,000.				COMMUNITY FOOD RELIEF
ARTS CREATION FOUNDATION 6346-65 LANTANA RD #137 LAKE WORTH , FL 33463	65-1196151		26,500.				CHILDREN'S EDUCATION
<u>WHITE LOTUS CHARITABLE TRUST</u> <u>1104 N_SIGNAL_ST</u> 0JAI, CA 93023	80-0013909		18,000.				MATERNAL/CHILD NUTRITION
KEEP GROWING DETROIT 1445 ADELAIDE STREET DETROIT , MI 48207	80-0892277		20,000.				COMMUNITY FARM DEVELOPMENT
<u>BETTER BURMA</u> <u>PO BOX 4572</u> WOODLAND PARK, CO 80866	86-2221018		15,000.				COMMUNITY FOOD RELIEF
<u>WHAT IF FOUNDATION</u> <u>1569 SOLANO AVE</u> BERKELEY , CA 94707	91-2121669		30,000.				COMMUNITY FOOD RELIEF
ECOLOGY ACTION 5798 RIDGEWOOD RD WILLITS , CA 95490	94-2584236		15,000.				COMMUNITY FARM DEVELOPMENT
			TEEA 40011 00/10/00	l l			Cant (Earma 000) 202

TEEA4001L 06/12/23

2023

SCHEDULE	Μ
(Form 990)	

Noncash Contributions

OMB No. 1545-0047 2023

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

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

 2 Art 3 Art 4 Bo 	A NJ NONPROFIT CORPORAT Types of Property t – Works of art t – Historical treasures	(a) Check if applicable	(b) Number of contributions or	(c) Noncash contribution	-2852923	(4)	
 2 Art 3 Art 4 Bo 		(a) Check if applicable	Number of contributions or	(c) Noncash contribution		(4)	
 2 Art 3 Art 4 Bo 			items contributed	amounts reported on Form 990, Part VIII, line 1g	Method o noncash cor	(d) of determir atribution a	ning mounts
3 Art4 Bo	t - Historical treasures						
4 Bo							
	t – Fractional interests						
	ooks and publications						
	othing and household goods						
	ars and other vehicles						
	pats and planes						
	ellectual property						
	ecurities – Publicly traded	Х	214	39,324.	MARKET H	PRICES	
	ecurities – Closely held stock						
	curities – Partnership, LLC, or trust interests.						
	curities – Miscellaneous.						
	alified conservation contribution – storic structures						
14 Qu	alified conservation contribution – Other						
15 Re	al estate – Residential						
16 Re	eal estate – Commercial						
17 Re	eal estate – Other						
18 Co	llectibles						
19 Fo	od inventory						
20 Dru	ugs and medical supplies						
21 Ta:	xidermy						
22 His	storical artifacts						
23 Sc	ientific specimens						
24 Arc	cheological artifacts						
25 Oth	her ()						
26 Oth	her ()						
	her ()						
28 Oth	her ()						
	mber of Forms 8283 received by the organization di						
org	ganization completed Form 8283, Part V, Donee	Acknowledg	gement		29	V	
						Yes	No
it r	ring the year, did the organization receive by contril must hold for at least 3 years from the date of the	ne initial con	tribution, and which is	n't required to be used			
	exempt purposes for the entire holding period?					Da	X
	'Yes," describe the arrangement in Part II.						
31 Do	bes the organization have a gift acceptance polic	cy that requi	res the review of any r	nonstandard contribution	ns? 3	1 X	
	bes the organization hire or use third parties or r ntributions?					2a	Х
b If "	'Yes," describe in Part II.						
	the organization didn't report an amount in colur scribe in Part II.	mn (c) for a	type of property for wh	nich column (a) is cheo	ked,		

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

Schedule M (Form 990) 2023

26-2852923 Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Page 2

Department of the Treasury Internal Revenue Service Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization	Βl	JDDF	IIST GLOB	AL	RELIEF
	A	NJ	NONPROFI	Τ (CORPORATION

Employer identification	numbe
26-2852923	

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION

BUDDHIST GLOBAL RELIEF WORKS WITH LONGTIME PARTNER LOTUS OUTREACH INTERNATIONAL TO IMPROVE THE LIVES OF WOMEN AND GIRLS IN CAMBODIA THROUGH INITIATIVES THAT INCREASE GIRLS' ACCESS TO EDUCATION.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

THE FORM 990 IS REVIEWED BY THE TREASURER AND FINANCE COMMITTEE FROM THE BOARD OF DIRECTORS PRIOR TO ITS FILING. AFTER FILING, THE BOARD OF DIRECTORS WAS NOTIFIED OF THE FILING AND PUBLICATION OF FORM 990 ON THE BGR'S WEBSITE.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

THE ORGANIZATION MONITORS AND ENFORCES COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY ON AN ONGOING BASIS THROUGHOUT THE YEAR.

FORM 990, PART VI, LINE 17 - LIST OF STATES WHICH THIS RETURN IS FILED

AR CA FL GA HI IL KY MA MD MI MN MS NC NH NJ NM NY OR PA RI TN SC VA WI WV

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

THE ORGANZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENT AVALIABLE TO THE PUBLIC UPON WRITTEN REQUEST OF THE INTERESTED PARTY.