

OGDEN UT 84201-0058

In reply refer to: 0412680722 Dec. 30, 2010 LTR 3983C E1 13-6162184 000000 00

990T

00081613

BODC: TE

KOBUTSU MALONE PO BOX 213 SEDGWICK ME 04676

Taxpayer Identification Number: 13-6162184

Organization: Zen Studies Society

Form(s): 990

5227

Tax Period(s): Dec. 31, 2009

#### Dear Requestor:

We received your Oct. 27, 2010, request for a copy of the Form(s) 990 relating to the organization(s) identified above. Enclosed is a copy of the form(s) you requested.

We can not provide a photocopy of the Form(s) 990-T for the organization(s) and year(s) you requested. The returns may not be available for one of the following reasons:

- Form(s) 990-T, Exempt Organization Business Income Tax Return, that are filed by organizations that are not exempt from tax under section 501(c)(3) are not open to public inspection.
- only Form 990-T, filed by a section 501(c)(3) organization after August 17, 2006 is available for public inspection.
- the organization may not be required to file a Form 990-T.
- the organization may have received an extension of time to file.
- processing of the organization's return may not be complete.

A redacted copy of Form 5227 is only open for public inspection for returns filed after January 1, 2007. We can not provide a photocopy of the Form(s) 5227 for the organization(s) and year(s) you requested. The returns may not be available for one of the following reasons:

- only Forms 5227 filed after January 1, 2007, are open for Public inspection.
- the organization may not be required to file Form 5227.
- the organization may have received an extension of time to file.
- processing of the organization's return may not be complete.

The request for the organization's exempt status was transferred to:

Tax Exempt and Government Entities TE/GE Adjustment Unit Room 4024 P.O. Box 2508 Cincinnati, OH 45201 KOBUTSU MALONE PO BOX 213 SEDGWICK ME 04676

They will process your request. If you have any questions, please write to the address above.

If you have any questions, please write us at the address shown at the top of the first page of this letter, or you may call us toll free at 1-877-829-5500.

If you choose to write, please include this letter and, in the spaces below, give us your telephone number with the hours we can reach you. Please keep a copy of this letter for your records.

Telephone Number ( ) \_\_\_\_\_ Hours \_\_\_\_

Thank you for your cooperation.

Sincerely yours,

Deblie Bylee

Department Manager, Accounting

Enclosure(s): Photocopies KOBUTSU MALONE PO BOX 213 SEDGWICK ME 04676

CUT OUT AND RETURN THE VOUCHER AT THE BOTTOM OF THIS PAGE IF YOU ARE MAKING A PAYMENT, EVEN IF YOU ALSO HAVE AN INQUIRY.

The IRS address must appear in the window. 0412680722

BODCD-TE

Use for payments

Letter Number:

LTR3983C

Letter Date :

2010-12-30

Tax Period

000000

\*136162184\*

KOBUTSU MALONE PO BOX 213

SEDGWICK ME 04676

INTERNAL REVENUE SERVICE

OGDEN UT 84201-0058

SCANNEID JUL 1 5 2010

(HTA)

Form **990-EZ** 

Department of the Treasury

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

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

(except black lung benefit trust or private roundation)

➤ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

20**09** 

Open to Public Inspection

Form 990-EZ (2009)

Inter	nal Reven	ue Service	<b></b>	The organ	nization may have to	use a copy of this	return to satisfy	state reportir	ng requirements			nspection	500
A	For th	e 2009 calend	dar year, o	or tax ye	ar beginning			, and	l ending				
В		ıf applicable	Please	C Na	me of organization					D Employ	er ident	tification number	
Щ	Address	s change	use IRS	THE 7	EN STUDIES S	OCIETY INC					13-6	6162184	
	Name o	change	label or print or		nber and street (or P 0		rod to street aridress	6)	Room/suite	E Teleph		**	
	Initial re	eturn	type.	Null	ibei and sileer (or P O i	box, ii mans nor derve	ed to sileet address		Roombaule				
	Termina	ated	See	223 E	AST 67TH STRE	EET		1			212-8	B61-3333	
	Amende	ed return	Specific Instruc-	City	, town, or country		State	ZIP	+ 4	F Group	Exemp	tion	
$\Box$	Applica	ition pending	tions.	NEW Y	YORK		NY	10	021-5549	Numbe	er	•	
•	Section	on 501(c)(3) o	rganizatio	THE OWNER OF THE OWNER,	4947(a)(1) nonex	rempt charitable	trusts must a	THE RESERVE OF THE PERSON NAMED IN	G Accountin	a Method	X	Cash Accrua	al
	occur	011 00 1(0)(0) 0			hedule A (Form 9				Other (sp	•	/	, sas.,, as.,	-
			,		-				H Check ▶		organia	zation is not	
	Website	e: ► N/A									_	B (Form 990,	
		mpt status (che	ck only one)	_ X	501(c)( 3) <b>⊲</b>	(insert no ) 49	947(a)(1) or	527	990-EZ, o			_ (	
									nto are normal	h. mat mar	thon 6	25 000	_
	Check				a section 509(a)(3) required, but if the							23,000	
											\$		0
-	THE RESERVE THE PERSON NAMED IN				e gross receipts, if \$ nd Changes it							Part I \	
	art I							alalices	(See the in			Pait i.)	0
	1				and similar am			1		_	2		
	2 3	•			cluding govern	ment lees and	Contracts	`\		_	3	,	_
	4	Membershi Investment		nu asse	ssineilis		Q	ጉ .		-	4		0
	<b>4</b> 5а			sale of	assets other th	an inventory	1	)   5a			-		
					nd sales expens		^ \strace{\sqrt{s}}	5b		0			
	ь				assets other that		ubtract line 5		10.52)	─~~~	ic		0
e	6				te applicable parts o					$\neg$ $\vdash$			_
eu		Gross reve					ontributions	gammy, che	ack field	-			
Revenue	а	reported or	,	includii	ig \$	<del>~~</del> ""	ontributions	6a		٥			
œ	b			e other	than fundraisi	movinges es		6b					
	c				pecial events a		Subtract line f		ne Sal		ic		0
	7a				ess returns and		abtract line (	7a	ic oa) .	F			<u> </u>
	b	Less. cost		-	ss returns and	anoviances		7b					
	c				sales of invento	rv (Subtract lin	e 7b from lin				c		0
	8	Other rever				,, (oabtraot iii		,		_	В		0
	9		•		, 2, 3, 4, 5c, 6c	7c. and 8				—' —	9		0
$\neg$	10				s paid (attach s						0		0
- 1	11	Benefits pa								_	1		Ť
S	12				on, and employ	ee benefits					2		_
se	13				payments to in		ntractors			_	3		_
Expenses	14				nd maintenance					_	4		
×	15				age, and shippii					_	5		
-1	16	Other expe								) 1	6		0
- 1	17				10 through 16						7		0
S	18				ear (Subtract In	ne 17 from line	9)			1	8		0
set	19				s at beginning o			n (A)) (mu	ist agree with	n			_
As		end-of-year	r figure re	eported	on prior year's	return)				1	9		0
Net Assets	20				s or fund baland		lanation)			2	0		0
Z	21				s at end of year					▶ 2			0
Pa	art II	Balance S			assets on line			000 or mo	re, file Form	990 inste	ead of	Form 990-EZ	_
			(See th	ne instri	uctions for Part	11')	72		(A) Beginn	ing of year		(B) End of year	
22	Cash	, savings, ai	nd investi	ments	186	AAY 20 2010	SSC				22		_
23		and building			-   "	IIVI SA PAIG	ا بن ا				23		
24		r assets (des	scribe -			ART III	_1&	)		0	24		0
		assets .			. <u>Q</u>	GDEN, U	1			0	25		0
		liabilities (		-				)	1	0	26		0
27	Net a	ssets or fu	nd halan	ces (lin	e 27 of column	(R) must sare	e with line 2	1)		0	27	1	0

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2009) THE ZEN STUDIES SOCI	ETY INC		13-616	2184	Page 2
Part III Statement of Program Service Ad	complishments (See the	instructions for F	Part III.)		Expenses
What is the organization's primary exempt purpose?					ured for section
Describe what was achieved in carrying out the organ	nization's exempt purposes	n a clear and conc	ise		)(3) and 501(c)(4) izations and section
manner, describe the services provided, the number	of persons benefited, and oth	ner relevant informa	ation for		a)(1) trusts, optional
each program title				for oth	ners)
28					
(Grants \$ 0 ) If this amou	unt includes foreign grants, c	heck here .	<b>▶</b> □	28a	0
29					
(Grants \$ 0 ) If this amou	unt includes foreign grants, c	heck here		29a	0
30					
(Grants \$ 0 ) If this amou	ınt ıncludes foreign grants, c	heck here	<b>•</b>	30a	0
31 Other program services (attach schedule)	in molecular for origin grama, a	THOUR HOTO .		Sua	0
	unt includes foreign grants, c	heck here	_ [	24-	
100		TICON TICIC		31a	0
32 Total program service expenses. (add lines 28			1 1 10		0
Part IV List of Officers, Directors, Trustees,	(b) Title and average	(c) Compensation	d) Contributi		(e) Expense
(a) Name and address	hours per week	(If not paid,	employee benefi		account and
	devoted to position	enter -0)	deferred compo	ensation	other allowances
Eido Tai Shimano	Title Chairman	Λ			
333 E 69th St, #3J New York NY 10021	Hr/WK 40.00	0		0	0
Yasuko Aiho Shimano	Title Secretary				
333 E 69th St, #3J New York NY 10021	Hr/WK 40 80	0		0	0
James Streit	Title Treasure				
15 Cricket Lane Dobbs Ferry NY 10522	Hr/WK 500	0		o	0
Joe Dowling	Title President				
739 Lofgan Ave Bronx NY 10465	Hr/WK 5 00	0		0	0
Ed Glassing	Title Asst Secretary				
223 E 67th St New York NY 10021	5 00	0		0	0
Joe Marinello	Title Bd member				
1811 20th Ave Seattle WA 98122	Hr/WK 1 00	0		О	0
Banko R Phillips	Title Bd Member				
909 Bloomfield St Hoboken NJ 07030					
		0		0	0
Sherry Chayat	Title Bd Member			ا	
266 W Seneca Tpke Syracuse NY 13207	Hr/WK 1 00	0		0	0
Richard Rudin	Title Bd Member			_	
1133 Laurel Dr Layfette CA 94549	Hr/WK 1 00			0	0
Shoteki Chris Phelan	Title President of Bd mem	1			
56 W 11th Street, Apt 3RE New York NY 10011	Hr/WK 1 00	0		0	0
Yuho Carl Baldıni	Title Bd Member				
245 Middle Country Rd Smithtown NY 11787	Hr/WK 1 00	0		0	0
	Title				
	Hr/WK 00	0		0	0
	Title				
	Hr/WK 00	0		o	0
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	Title				•
	Hr/WK 00	0		0	0
					Form <b>990-EZ</b> (2009)

Form 9	90-EZ (2009) THE ZEI	N STUDIES SOCIETY I	NC			13	-61621	84	Page 4
Part	VI Section 501(c)(3) o	organizations and se	ection 4947(a)(1) no	nexem	pt charitable trus	ts only. All section	n		
		ons and section 4947			-	-			
	and complete the ta	bles for lines 50 and	51.						
46	Did the organization engage	in direct or indirect polit	ical campaign activities	on beh	alf of or in oppositio	n to		Yes	No
	candidates for public office?	If "Yes," complete Sche	edule C, Part I				46		X
47	Did the organization engage						47		X
48	Is the organization a school a	as described in section '	170(b)(1)(A)(॥)? If "Yes	," comp	olete Schedule E .		48		X
49 a	Did the organization make a	ny transfers to an exem	pt non-charitable relate	d organ	nization?		49a		X
	If "Yes," was the related orga						49b		
50	Complete this table for the or employees) who each receiv	0	, ,			,			
	(a) Name and address of each en than \$100,000		(b) Title and average hours per week devoted to position		(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	ac	) Expens count ar r allowar	nd .
Name	None Str		Title						
Crty	ST	ZIP	HrWK	00	0	0			0
Name	Str		Title	1					
City	ST	ZIP	Hr/WK	00	0	0			0
Name	Str		Title	,					
City	ST	ZIP	HrWK	00	0	0			0
Name			Title						
City	<u>S</u> T	ZIP	HrWK	00	0	0			0
Name	Str		Title	00					0
City	Total number of other emplo	ZIP	HrWK	00	<b>\</b>	0			0
	Complete this table for the or \$100,000 of compensation f		there is none, enter "	~		e of service		npensatu	on
Name	None	Str	~/ <b>&gt;</b>						
City		ST							-
Name		Str C							
City		ST	ZIP			1.			
Name		Str							
City		ST Y	ZIP						
Name		Str							
City		ST	ZIP						
Name		Str							
City	Total number of other indepe	ndent contractors each	receiving over \$100,00	10					
Sign Here					all information of which p		ge ,		
Paid Prepai Use O	Preparer's signature Edward Firm's name (or yours	Hara, CPA A		Date 5/11	Check if self- employed	EIN ►			ructions)
	address, and ZIP + 4	501 5th Ave,ste 2009,	New York, NY 10017			Phone no ► (212) 6	587-78	86	
May th	ne IRS discuss this return with	the preparer shown ab	ove? See instructions.	·		<b>&gt;</b>	Ye Form 9	90-EZ	No
									12000

► Attach to Form 990 or Form 990-EZ.

#### **SCHEDULE A** (Form 990 or 990-EZ)

## **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► See separate instructions.

lame o	f the	organization							Employe	er identifica	tion numb	ber	
		STUDIES S	OCIETY INC							13-6	162184		
Part	_			harity Status (All o						instruct	ions.		
he o	rgar		•	dation because it is (F		•	,	,	,				
1 [		A church, co	onvention of chi	irches, or association	of church	nes descri	bed in <b>se</b>	ction 170	(b)(1)(A)	(i).			
2		A school de	scribed in <b>secti</b>	on 170(b)(1)(A)(ii). (A	Attach Sc	hedule E	)						
3		A hospital o	r a cooperative	hospital service organ	ization de	escribed i	n section	170(b)(1	)(A)(iii).				
4 [			esearch organiz ame, city, and s	ation operated in conj tate <sup>.</sup>	unction w	vith a hosp	oital desci	ribed in s	ection 17	'0(b)(1)(A	A)(iii). E	nter th	e 
5 [				or the benefit of a colle . (Complete Part II.)	ge or uni	versity ow	ned or or	perated by	a govern	nmental u	unit desc	ribed	
6		A federal, st	ate, or local gov	vernment or governme	ental unit	described	ın sectio	n 170(b)	(1)(A)(v).				
7		An organiza	tion that norma	lly receives a substant )(1)(A)(vi). (Complete	tial part o						the gene	eral pu	blic
8 [		A communit	ty trust describe	d in section 170(b)(1	)(A)(vi). (	Complete	Part II)						
9 [		receipts from	n activities relat n gross investm	lly receives (1) more to ded to its exempt function and unrelated after June 30, 1975.	ions—sub ated busir	bject to ce ness taxat	rtain exce ble incom	eptions, a e (less se	nd (2) no ction 511	more the	an 33 1/3	3 % of	
о Г	$\neg$		_	and operated exclusive		-				(4).			
1 [		An organiza purposes of	tion organized a	and operated exclusive blicly supported organ at describes the type of	ely for the	benefit o	f, to perfo in section	rm the fu n 509(a)(	nctions of	f, or to ca ion 509(a	)(2) Se		ion
e [		persons other 509(a)(1) or	this box, I certi er than foundati section 509(a)(		n s not c or than or	ne or more	directly or e publicly	indirectly supporte	by one o	or more d ations de	scribed	ed	
f				a written acterminatio	n from th	e IRS tha	t it is a Ty	pe I, Typ	e II, or Ty	pe III sup	porting		
g				the organization acce	epted any	gift or co	ntribution	from any	of the				
		,		or indirectly controls,	either ald	one or tog	ether with	persons	describe	d in (ii)		Yes	No
			-	verning body of the su		_				• • • • • • • • • • • • • • • • • • • •	11g(i)		1 1
				person described in (		-					11g(ii)		
		(iii) A 35%	controlled entit	ty of a person describe	ed in (i) o	r (II) abov	e?				11g(iii)		
h		Provide the	following inform	ation about the suppo			/				1		
(i) N		of supported nization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col (i) h	organization isted in your document?	the organ	ou notify nization in of your	organizat (i) organi	Is the tion in col ized in the S?		Amount support	of
				, , , , , , , , , , , , , , , , , , , ,	Yes	No	Yes	No	Yes	No	1		
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			**										
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otal					,								0

Schedule A (Form 990 or 990-EZ) 2009

		DIES SOCIETY	'INC			13-616218	4 Page 2
Par	t II Support Schedule for Organ	izations Desc	ribed in Sec	tions 170(b)	(1)(A)(iv) and	1 170(b)(1)(A	
_	<ul> <li>(Complete only if you checked</li> </ul>	the box on lin	e 5, 7, or 8 o	f Part I.)			
	tion A. Public Support						
.Cale	endar year (or fiscal year beginning in) ▶	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants")		o				0
2	Tax revenues levied for the organization's			-		7	
. –	benefit and either paid to or expended on						
	its behalf		0				0
3	The value of services or facilities						
	furnished by a governmental unit to the	1					
	organization without charge	0	0		7,0	1	0
		-					
4 5	Total. Add lines 1 through 3	0	0	0	0	0	0
3	The portion of total contributions by each person (other than a governmental unit	1					
	or publicly supported organization)						
	included on line 1 that exceeds 2% of the						
	amount shown on line 11, column (f)		1			- 1	
6	Public support. Subtract line 5 from line 4						. 0
	tion B. Total Support				-		
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	0	0	0	0	0	0
8	Gross income from interest, dividends,			1			
	payments received on securities loans,			` \			
	rents, royalties and income from similar		ν. Ω	스 · I		. 1	
	sources	0		$\cup$			0
9	Net income from unrelated business		V V>				
	activities, whether or not the business is		\ \ \ \				
	regularly carried on		12			·	0
10	Other income. Do not include gain or		\ \		1		
	loss from the sale of capital assets		' a				
	(Explain in Part IV)		0				0
11	Total support. Add lines 7 through 10		E	<u></u>		40	0
12	Gross receipts from related activities, etc.					12	
13	First five years. If the Form 990 is for the o		rst, second, th	ird, fourth, or f	ifth tax year as	a section 501(	c)(3)
	organization, check this box and stop here						▶
	ion C. Computation of Public Suppor						
14	Public support percentage for 2009 (line 6,			column (f))		14	0 00%
15	Public support percentage from 2008 Scheo					15	0 00%
16a	33 1/3% support test-2009. If the organiza				ne 14 is 33 1/3	% or more, che	
	and stop here. The organization qualifies a						▶□
ь	33 1/3% support test-2008. If the organization				ind line 15 is 3	3 1/3% or more	e, check this
	box and stop here. The organization qualifi				10.10		
17a	10%-facts-and-circumstances test-2009.	-					
	or more, and if the organization meets the "						
	the organization meets the "facts-and-circuit		-				
b	10%-facts-and-circumstances test-2008.	•					
	or more, and if the organization meets the "				•		
	the organization meets the "facts-and-circur	iistances test	rne organizati	on qualifies as	a publicly sup	ported organiz	ation ►
18	Private foundation. If the organization did not chec	ck a box on line 13	, 16a, 16b, 17a ,	or 17b, check this	box and see inst	ructions	▶□

Schedule A (Form 990 or 990-EZ) 2009

## THIS IS A COPY OF A LIVE RETURN FROM SMIPS. OFFICIAL USE ONLY.

Schedule A (Form 99	90 or 990-EZ) 2009	THE ZEN ST	UDIES SOCIE	TY INC		13-6162184	Page 4
Part IV	Supplemental I	nformation.	Complete thi	s part to provide	the explanations require	d by Part II, line	10;
	Part II, line 17a	or 17b; and F	Part III, line 12	2. Provide any of	her additional information	n. See instruction	ns.
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		-,					

# 990-EZ

Department of the Treasury

Internal Revenue Service

#### Short Form

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

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

For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year

The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-1150

2002

Openito Public

A	For the 2002 calendar year, or tax	year beginning	and ending	9		
	Check if applicable	C Name of organization			) Employ	er identification number
	Address change Please	THE 75N OTHER 200-5	INO.	i		40.0400044
$\Box$	Name change use IRS	THE ZEN STUDIES SOCIETY  Number and street (or P O box if n		ss) Room/suite	E Toloob	13-6162814
$\sqcap$	Initial return print or	Number and Super (or P C box in it	iaii is not delivered to etteet boole.	SS) KOOIII/SUILB	E relepii	one number
Ħ	Ivne See	223 EAST 67TH STREET				228665680
H	Amended return Instruc-	City, town, or country	State	ZIP+4		
님	nons .					
<u></u>	Application pending	NEW YORK	NY	10021-5549		
		ons and 4947(a)(1) nonexempt ci eted Schedule A (Form 990 or 99			ing metho pecify)	Accrual
_	<u> </u>	cios concessio A (r cim coc or co				d the error and a
1787	WED 0175			H Check		if the organization
	WEB SITE	[2]		_	required to	
	ORGANIZATION TYPE (check only one)	- X 501(c) (3) ◀ (insert n	527 4947(a)(1) OR 527	Schedul	e B (Fom	1 990, 990-EZ, or 990-PF)
K	Check ► if the organization organization received a Form 990 P	n's gross receipts are normally not lackage in the mail, it should file a r				
	Add lines 5b 6b and 7b to line 9 to deter	mine gross receipts if \$100 000 or more	file Form 990 Instead of Form 99	10-EZ	<b>▶</b> \$	0
Pa	Revenue, Expenses,	and Changes in Net Assets	or Fund Balances (See	page 36 of the ins	structions	5)
	1 Contributions, gifts, gr	rants, and similar amounts rece	ived		_1	0
	<ol><li>Program service reveil</li></ol>	nue including government fees	and contracts		_ 2	
	3 Membership dues and	d assessments			3	
	4 Investment income		i i eo	r	4	,,
		ale of assets other than invento			(//	
	b Less cost or other ba	경찰 IP 전에 15명한 인터넷의 경찰 경찰 전하게 되었다면 되었습니다. [편집 전에 전에 전쟁하면 10명 전쟁 기계 [2] [2] [2] [2] [2] [2] [2] [2] [2] [2]		L	///	
		le of assets other than inventor	y (line 5a less line 5b) (atta	ach schedule)	50	0
9	6 Special events and ac	ctivities (attach schedule)				
5	a Gross revenue (not in	cluding \$		r		
Revenue	reported on line 1)	- 11 15 6 d	6a 6b		{///	
-	b Less direct expenses	other than fundraising expension special events and activities		<u> </u>	- 6	
	1 1000 00 1000	ory, less returns and allowance		ſ	777	
	b Less cost of goods so		7b			
		from sales of inventory (line 7a	the second support		7	0
	8 Other revenue (descri				) 8	
		dd lines 1, 2, 3, 4, 5c, 6c, 7c, ar	nd 8)	100	▶ 9	
		nounts paid (attach schedule)	1000000		. 10	
	11 Benefits paid to or for	members			1	
×		ensation, and employee benefit			1:	
ĕ	13 Professional fees and	other payments to independen	t contractors		1:	
Expens	14 <b>内经</b> 仍经以色的 utilit	ies, and maintenance			1.	
Ð	15 Printing publications	postage, and shipping			1	
~	Other expenses (desc	ostage, and shipping be 10 through 16)	<del></del>		-1 1	
<del>-</del> ë	A TAN AND AND AND AND AND AND AND AND AND A	the year (line 9 less line 17)			► 1°	
J.	19 Excess or (deficit) that	ances at beginning of year (fro	m lune 27 column (A)) (mu	ict agrae with	11	
ૠ	OGDENOUT	orted on prior year's return)	in line 27, column (A)) (mo	ist agree with	19	
4	20 Other changes in net	assets or fund balances (attach	evolanation)		20	
8	21 Net assets or fund bal	lances at end of year (combine			▶ 2	
Ra	Balance Sheets -	If Total assets on line 25, colur		re, file Form 990		
H		page 39 of the instructions )		(A) Beginning of		(B) End of year
<b>3</b> 2	Cash, savings, and investme				2	
€3	Land and buildings				2	
24	Other assets (describe		)	107	0 24	
25	TOTAL ASSETS				0 2	
			)		0 26	
27	NET ASSETS OR FUND BALAN	NCES (line 27 of column (B) MUST	agree with line 21)		0 27	0

Form 9	90-EZ	(2002)	THE 2	ZEN STUDIES SC	CIETY	INC	13-6162	2814	1	Pa	ge 3
Part III	#	Statement of Pro	ogram Service Acc	complishments	(See	page 39 of the instr	ructions)		Ex	penses	
What is	s the o	roanization's prin	nary exempt purpos	e? SEE ATTA	CHMEN	TI.	- 11-27-23	7		of for 501(corpanization	
		(T)	rrying out the organiza				anner,	1	and 494	7(a)(1) trus	15
			e number of persons b	enefited, or other re	levant in	formation for each pro-	ogram title	4	optional	(or others )	
28 _	SEE A	TTACHMENT						-			
-					-	(Grants \$	<del></del> ,	٦,	8a		0
29						(Grants o		+-	-		
_									. 1		
						(Grants \$		2	9a		0
30 _								4			
_						(Grants \$		3	0a		
			(attach schedule)			(Grants \$			1a		
			RVICE EXPENSES						32		0
Part V.	垂	List of Officers,	Directors, Trustee			(List each one even if no		_			
		(A) Name and ad	drass	(B) Title and ave	000000000000000000000000000000000000000	(C) Compensation (IF NOT PAID,	(D) Contribution employee benefit			(E) Experi count and	
		(rt) Hamo and ad	0.033	devoted to posi	32	ENTER -0-)	deferred compen			allowanc	
							2001				
-		<del></del>	<del></del>					-			
						_					
Part V	趙(	Other Information	on (Note the attack	hment requiremen	it in Ger	neral Instruction V,	page 14 )			Yes	No
		네 [24] 하면 모든 아이들이 되었다. 그 아이들은 아이를 살아 있다.	any activity not previously			· (1) 전문 전문에 가장 아름답답답답답답답답답답답답답답답답답답답답답답답답답답답답답답답답답답답답			2/		X
			e organizing or governing							m	X
7420-20			ome from business act litach a statement expl					I NC	71		
			lated business gross inco							7////	X
b ii	f "Yes"	has it filed a tax re	etum on Form 990-T fo	or this year?							X
36 V	Was the	ere a liquidation, dis	ssolution, termination,	or substantial contra	action du	nng the year? (If "Yes		nt)		,,,,,,	X
			xpenditures, direct or li DRM 1120-POL for this		d in the ii	nstructions	▶ 37a	_		_/////	
			v from, or make any lo		director I	nistee or key emolo	vee OR were any			7////	mm,
			year and still unpaid a				yes on mere any			(11111)	X
b If	f "Yes."	attach the schedu	le specified in the line	38 instructions and	enter the	amount involved	38b				//////
			nter a Initiation fe		ributions	included on line 9	39a			_\(\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
			n line 9, for public use nter Amount of tax imp		talian du	nno the week wader	39Ь	-		-{////	
	ection			ction 4912	zauon du	, section 49	955 ▶				
<b>b</b> 5	01(c)(3	) and (4) organizat	ions Did the organiza		ection 49			year	-	- 1	
			an excess benefit trans								-X
			organization manager			ing the year under 49	12, 4955, and 4958	•	NONE		
	nter A	mount of tax on lin	e 40c, above, reimbur	sed by the organizat	ton			•	NONE		
			copy of this return is					_			
		ks are in care of		R, ZEN STUDIES		TY INC	Telephone no				08
	ocated	Name	RIVERSIDE DRIVE				ZIP + 4		10025-	3421	
			mpt chantable trusts fi								
a			x-exempt Interest rece ury, I declare that I have e								
	a	nd belief it is true cor	reguland complete Decla	aration of preparer (oth							
Please		. 11110	VAL GOVE	2 NO. 2							
Sign		Signature of officer	an College	4)							
Here			TORIUS, TREASUR	RER							
	_	Type or print name	and title								
Paid	- 1	reparer's lignature	90. 11	Date							
Preparer	· -	<del></del>	clwant ta	u us							
Use Only	y  1	rm's name (or yours self-employed)		OF GEO Y HARA							
	ac	ddress and ZIP + 4	501 5TH AVE,	STE 2009, NEW							

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

## Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0047

Employer identification number

2002

Department of the Treasury Internal Revenue Service

Name of the organization

Supplementary Information - (See separate Instructions.) MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

THE ZEN STUDIES SOCIETY INC				13-6162814
Compensation of the Flv (See page 1 of the instruction	e Highest Pald Emp is List each one If ther	loyees Other The are none, enter	nan Officers, Directors, and "None")	d Trustees
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
EXEMPT				
	-	1		
· · · · · · · · · · · · · · · · · · ·				
	-			
Total number of other employees paid over \$50,000				
Compensation of the Fiv (See page 2 of the instruction	e Highest Paid Indep s List each one (wheth	pendent Contra er individuals or fi	ctors for Professional Ser rms) If there are none, enter "N	vices None ")
(a) Name and address of each independen	t contractor paid more than	n \$50,000	(b) Type of service	(c) Compensation
EXEMPT				
				<u> </u>
<del></del>				
	· · · · · · · · · · · · · · · · · · ·			
	· · · · · · · · · · · · · · · · · · ·		····	
Total number of others receiving over \$50,000 for professional services				

Sched	ule A (Form 990 or 990-EZ) 2002 THE ZEN STUDIES SOCIETY INC	13-6162814		Pa	ge 2
Part	Statements About Activities (See page 2 of the instructions )			Yes	No
1	Part VI-A, or line i of Part VI-B ) Organizations that made an election under section 501(h) by filing Form 5768 must co	er the total expenses paid equal amounts on line 38, emplete Part VI-A Other	1	,	×
	organizations checking "Yes," must complete Part VI-B AND attach a statement giving	a detailed description of			
2	the lobbying activities  During the year, has the organization, either directly or indirectly, engaged in any of th	e following acts with any			
-	substantial contributors, trustees, directors, officers, creators, key employees, or mem				
	with any taxable organization with which any such person is affiliated as an officer, dir				
	owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detail	ed statement explaining the			
	transactions )				
а	Sale, exchange, or leasing of property?		2a	-	X
b	Lending of money or other extension of credit?		2b	-	X
С	Furnishing of goods, services, or facilities?	in the state of th	2c		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1	,000)?	2d		х
в	Transfer of any part of its income or assets?		2e		X
	Does the organization make grants for scholarships, fellowships, student loans, etc? Do you have a section 403(b) annuity plan for your employees? Attach a statement to explain how the organization determines that individuals or organise from it in furtherance of its chantable programs "qualify" to receive payments	The Control of the Co	3		×
Part					
The or	rga ization is not a private foundation because it is (Please check only ONE applicable A church, convention of churches, or association of churches. Section 170(b)(1)(A)				
6	LAschool Section 170(b)(1)(A)(ii) (Also complete Part V)				
7	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii)				
8	A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)				
9	A medical research organization operated in conjunction with a hospital Section 17 NAME, CITY, AND STATE	70(b)(1)(A)(III) ENTER THE HO	OSPI	ral's	
10	An organization operated for the benefit of a college or university owned or operate 170(b)(1)(A)(iv) (Also complete the SUPPORT SCHEDULE in Part IV-A)	d by a governmental unit Sec	tion		
11 a	An organization that normally receives a substantial part of its support from a gove public Section 170(b)(1)(A)(vi) (Also complete the SUPPORT SCHEDULE in Part		ral		
11 b	#####################################				
12	organization that normally receives (1) MORE THAN 33 1/3% of its support from contribution related to its charitable, etc., functions - subject to certain exceptions, and (2) NO M investment income and unrelated business taxable income (less section 511 tax) from business taxable income.	ORE THAN 33 1/3% of its support	from	gross	
13	975 See section 509(a)(2) (Also complete the SUPPORT SCHEDULE in Part IV-A) An organization that is not controlled by any disqualified persons (other than found organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5) 109(a)(2) (See section 509(a)(3))		of sec	tion	
	Provide the following information about the supported organizations (See page 5)		- 100		
	(a) Name(s) of supported organization(s)	(b) Line nu from abo			
166					
14	an organization organized and operated to test for public safety. Section 509(a)(4)	(See page 5 of the instruction	s)		

Part IV	Support Schedule (Complete only if you chec					COUNTING
Note	You may use the worksheet in the instructions for conv	erting from the	accrual to the c	ash method of a	ccounting	
Calend	dar year (or fiscal year beginning in) .	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15	Gifts, grants, and contributions received (Do					
	not include unusual grants. See line 28.)	EXEMPT	EXEMPT	EXEMPT	EXEMPT	0
16	Membership fees received					0
17	Gross receipts from admissions, merchandise	1	]	ì		5
	sold or services performed, or furnishing of		ĺ	1		
	facilities in any activity that is related to the			1		
	organization's chantable, etc., purpose					0
18	Gross income from interest, dividends,		ĺ			
	amounts received from payments on securities					
	loans (section 512(a)(5)), rents, royalities, and	ļ				
	unrelated business taxable income (less section 511 taxes) from businesses acquired					
	by the organization after June 30, 1975					۰ ا
19	Net income from unrelated business					
	activities not included in line 18	1			ľ	) 0
20	Tax revenues levied for the organization's				-	×
	benefit and either paid to it or expended on		ĺ			ľ
	its behalf					l o
21	The value of services or facilities furnished to				(C)	
	the organization by a governmental unit			1		
	without charge. Do not include the value of				ļ	
	services or facilities generally furnished to the			1	l	
	public without charge					0
22	Other income Attach a schedule Do not					
	include gain or (loss) from sale of capital assets					0
23	Total of lines 15 through 22	0				
24	Line 23 minus line 17	0				mmmmm
25	Enter 1% of line 23	1 0		0		
26	ORGANIZATIONS DESCRIBED ON LINES 10 OR 11 a E				26a	
b	Prepare a list for your records to show the name of and amou			The second of th	(/////	
	unit or publicly supported organization) whose total gifts for 19			ount shown in line		
	DO NOT FILE THIS LIST WITH YOUR RETURN Enter the to		cess amounts		26b 26c	
727	Total support for section 509(a)(1) test Enter line 24, column Add Amounts from column (e) for lines 18	0 19			77777	
<b>u</b>	22	0 26b			26d	
e	Public support (line 26c minus line 26d total)			É	26e	0
f	PUBLIC SUPPORT PERCENTAGE (LINE 26E (NUMERATO	R) DIVIDED BY L	NE 26C (DENON	(INATOR))	26f	0 00%
27	ORGANIZATIONS DESCRIBED ON LINE 12 a For amou				from a "disqualif	
	person," prepare a list for your records to show the name of, a					
	DO NOT FILE THIS LIST WITH YOUR RETURN Enter the se	um of such amour	nts for each year			
	(000 c)				V	
h	(2001)(2000)		99)		(1998)	
b	For any amount included in line 17 that was received from each	50 50	15 5	202	\*	
	show the name of, and amount received for each year, that we (Include in the list organizations described in lines 5 through 1					
	computing the difference between the amount received and the					
	excess amounts) for each year	io larger amount o	lescribed in (1) or	(2), enter die sun	i oi alese ameren	ces (uio
	(2001)(2000)	(19	199)		(1998)	
	(1007)	,,		10.0	(1000)	
С	Add Amounts from column (e) for lines 15	<u>0</u> 16	0		4	
	170 20	0 21	0		27c	0
d	Add Line 27a total 0 and line 2	7b total	0		27d	0
θ	Public support (line 27c total minus line 27d total)	Several PSE VICTOR		( t	27e	0
f	Total support for section 509(a)(2) test. Enter amount from line			27f	0/////	
g	PUBLIC SUPPORT PERCENTAGE (LINE 27E (NUMERATOR		[ 프로마 (1 12 Hot	AND THE RESTREET HER COUNTY OF	27g	0 00%
h	INVESTMENT INCOME PERCENTAGE (LINE 18, COLUMN)					0 00%
28	UNUSUAL GRANTS For an organization described in line 10			the second of the second secon	and the second of the second o	
	list for your records to show, for each year, the name of the co			Section with the second state of the second section is a second section of the second section section is a second section sect	er description of th	18

(See page 7 of the instructions )

Private School Questionnaire

Part V

(To be completed ONLY by schools that checked the box on line 6 in Part IV) Yes No 29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 29 30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 30 31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? 31 If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement) Does the organization maintain the following a Records indicating the racial composition of the student body, faculty, and administrative staff? 32a b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 32b c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 32c d Copies of all material used by the organization or on its behalf to solicit contributions? 32d If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) 33 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 33a Admissions policies? 33b c Employment of faculty or administrative staff? 33c Scholarships or other financial assistance? 33d Educational policies? 33e Use of facilities? 33f Athletic programs? 33g Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement) 34 a Does the organization receive any financial aid or assistance from a governmental agency? 34a b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement 35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation

	ule A (Form 990 or 990-EZ) 2002 THE ZEN	STUDIES S	SOCIETY INC			13-61	62814		Page 5
Part	Lobbying Expenditures by Elec (To be completed ONLY by an eligible			(See page 9 orm 5768)	of the in	structio	ons)		
Check	a if the organization belongs to an affili	ated group	Check b	ıf you checked '	'a" and "I	imited	control" p	rovisio	ons apply
							(a)		(b)
	Limits on Lobb	ying Expen	ditures				Affiliated	group	To be completed
	Charles Same address -						totals		for ALL electing
	(The term "expenditures" m							52	organizations
36	Total lobbying expenditures to influence public					36		0	0
37	Total lobbying expenditures to influence a legis		y (direct lobbyli	ng)		37		0	0
38	Total lobbying expenditures (add lines 36 and	37)				38	_	0	0
39	Other exempt purpose expenditures	00 1 00	£3			39	_		
40	Total exempt purpose expenditures (add lines					40			
41	Lobbying nontaxable amount Enter the amount is the amount of the amount		and the second of the second of the second						
			ng nontaxable	amount is -					
	4		mount on line 40		_				
	그래, 그리다 하다면 하다 하는 맛들어 그렇게 뭐 생겨 먹어 가장 하는 것이다			ess over \$500,000	Acres (Carlotte	41			
				ess over \$1,000,00		111111		mi	
			s 5% of the exce	ss over \$1,500,000	, ,				
40		1,000,000				111111			
42 43	Grassroots nontaxable amount (enter 25% of I Subtract line 42 from line 36 Enter -0- if line 4.	115	han ! 26			42	-	0 0	0
44	Subtract line 42 from line 38 Enter -0- if line 4	= -	N			44		0	0
44	Subtract line 41 nom line 36 Enter -0- II line 4	1 15 111010 1	nan ine so			viiin		min	
	Caution If there is an amount on either line 43	3 or line 44	you must file	Form 4720					
				Section 501(h)		********			
	(Some organizations that made a sect	77/2 27	7.			he five	columns	helow	
	See the instructions						00.0	00.011	
	000 010 1100 00010	101 111100	o tribugit of o	, pugo o. m.e	nion do				
		1	1 - 4 4		B 1	- 4 1/			
			Lobb	ing Expenditur	es Durir	ng 4-Ye	ar Avera	ging F	Period
	Calendar year (or		Lobby	ing Expenditur	(0	)	ar Avera	æ (B	Period (e)
	Calendar year (or fiscal year beginning in)					)			
	fiscal year beginning in)		(a) 2002	(b) 2001	200	)	(d) 1999		(e) Total
45			(a)	(b)	(0	)	(d)		(e)
45	fiscal year beginning in)		(a) 2002	(b) 2001	200	)	(d) 1999		(e) Total
	fiscal year beginning in)  Lobbying nontaxable amount		(a) 2002	(b) 2001	200	)	(d) 1999		(e) Total
46	fiscal year beginning in)  Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures		(a) 2002	(b) 2001	200	)	(d) 1999		(e) Total 0
46	fiscal year beginning in)  Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))		(a) 2002	(b) 2001	200	)	(d) 1999		(e) Total 0
46 47 48	fiscal year beginning in)  Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount		(a) 2002	(b) 2001	200	)	(d) 1999		(e) Total 0 0
46	fiscal year beginning in)  Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures		(a) 2002	(b) 2001	200	)	(d) 1999		(e) Total 0
46 47 48 49 50	fiscal year beginning in)  Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures	)	(a) 2002 O	(b) 2001	200	)	(d) 1999		(e) Total 0 0
46 47 48 49	Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  Lobbying Activity by Nonelecting	) ng Public	(a) 2002 O	(b) 2001 O	O (c	00	(d) 1999 O		(e) Total 0 0 0
46 47 48 49 50 Parts	Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  Lobbying Activity by Nonelecting (For reporting only by organizations to	ng Public	(a) 2002 O Charities complete Part	(b) 2001 O	0 0	e Instru	(d) 1999 O		(e) Total 0 0 0
46 47 48 49 50 Part	Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  Lobbying Activity by Nonelectic (For reporting only by organizations to the year, did the organization attempt to influe	ng Public	(a) 2002  O  Charities complete Part al, state or loca	(b) 2001 O VI-A) (See page	0 0	e Instru	(d) 1999 O	9	(e) Total 0 0 0
46 47 48 49 50 Parts	Lobbying amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  Lobbying Activity by Nonelecting (For reporting only by organizations to the year, did the organization attempt to influence to influence public opinion on a legislative manual content of the year.	ng Public	(a) 2002  O  Charities complete Part al, state or loca	(b) 2001 O VI-A) (See page	0 0	e Instru	(d) 1999 O	9 No	(e) Total 0 0 0
46 47 48 49 50 Parts  During attemp	Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  Lobbying Activity by Nonelecting (For reporting only by organizations to influence public opinion on a legislative mativolunteers	ng Public that did not ince nation atter or refe	Charities complete Part al, state or local rendum, through	(b) 2001 O VI-A) (See page al legislation, incl gh the use of	O O O O O O O O O O O O O O O O O O O	e Instru	(d) 1999 O	No X	(e) Total 0 0 0
46 47 48 49 50 Part	Lobbying nontaxable amount  Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  Lobbying Activity by Nonelectic (For reporting only by organizations to influence public opinion on a legislative mat Volunteers  Paid staff or management (Include compensations)	ng Public that did not ince nation atter or refe	Charities complete Part al, state or local	(b) 2001 O VI-A) (See page al legislation, incl gh the use of	O O O O O O O O O O O O O O O O O O O	e Instru	(d) 1999 O	No X	(e) Total 0 0 0
46 47 48 49 50 Parti	Lobbying amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  Lobbying Activity by Nonelecting (For reporting only by organizations to influence public opinion on a legislative many Volunteers  Paid staff or management (Include compensate Media advertisements	ng Public that did not ince nation atter or refe	Charities complete Part al, state or local	(b) 2001 O VI-A) (See page al legislation, incl gh the use of	O O O O O O O O O O O O O O O O O O O	e Instru	(d) 1999 O	No X X X	(e) Total 0 0 0
46 47 48 49 50 Parts  During attemple a b c d	Lobbying amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  Lobbying Activity by Nonelectic (For reporting only by organizations to influence public opinion on a legislative may volunteers  Paid staff or management (Include compensate Media advertisements  Mailings to members, legislators, or the public	ng Public that did not ince nation atter or refe	Charities complete Part al, state or local	(b) 2001 O VI-A) (See page al legislation, incl gh the use of	O O O O O O O O O O O O O O O O O O O	e Instru	(d) 1999 O	No X X X X	(e) Total 0 0 0
46 47 48 49 50 Parts  During attemple a b c d	Lobbying amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots tobbying expenditures  Lobbying Activity by Nonelecting (For reporting only by organizations to influence public opinion on a legislative many volunteers  Paid staff or management (Include compensate Media advertisements  Mailings to members, legislators, or the public Publications, or published or broadcast statements	ng Public that did not ince nation atter or refe	Charities complete Part al, state or local	(b) 2001 O VI-A) (See page al legislation, incl gh the use of	O O O O O O O O O O O O O O O O O O O	e Instru	(d) 1999 O	No X X X X X X	(e) Total 0 0 0
46 47 48 49 50 Parts  During attempt a b c c d e f	Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  Lobbying Activity by Nonelectic (For reporting only by organizations to influence public opinion on a legislative management (Include compensate Media advertisements)  Mailings to members, legislators, or the public Publications, or published or broadcast statem Grants to other organizations for lobbying purp	ng Public that did not ince nation atter or refe	Charities complete Part al, state or local rendum, through	(b) 2001 O VI-A) (See page al legislation, include the use of on lines c through	O O O O O O O O O O O O O O O O O O O	e Instru	(d) 1999 O	No X X X X X X X	(e) Total 0 0 0
46 47 48 49 50 Part	Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  Lobbying Activity by Nonelectic (For reporting only by organizations to influence public opinion on a legislative may volunteers  Paid staff or management (Include compensate Media advertisements  Mailings to members, legislators, or the public Publications, or published or broadcast statem Grants to other organizations for lobbying purp Direct contact with legislators, their staffs, governments	ng Public that did not ance nation atter or refer tion in expenses ents poses ernment of	(a) 2002  Charities complete Part al, state or local rendum, through	(b) 2001 O VI-A) (See page al legislation, include the use of on lines c through slative body	O O O O O O O O O O O O O O O O O O O	e Instru	(d) 1999 O	No X X X X X X X X X X X X X X X X X X X	(e) Total 0 0 0
46 47 48 49 50 Parti	Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  Lobbying Activity by Nonelectic (For reporting only by organizations to influence public opinion on a legislative may volunteers  Paid staff or management (Include compensate Media advertisements  Mailings to members, legislators, or the public Publications, or published or broadcast statem Grants to other organizations for lobbying purp Direct contact with legislators, their staffs, gover Rallies, demonstrations, seminars, convention	ng Public that did not ince nation atter or refer tion in experients poses ernment off is, speeche	(a) 2002  Charities complete Part al, state or local rendum, through	(b) 2001 O VI-A) (See page al legislation, include the use of on lines c through slative body	O O O O O O O O O O O O O O O O O O O	e Instru	(d) 1999 O	No X X X X X X X	(e) Total  0 0 0 0 Amount
46 47 48 49 50 Parti	Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  Lobbying Activity by Nonelectic (For reporting only by organizations to influence public opinion on a legislative may volunteers  Paid staff or management (Include compensate Media advertisements  Mailings to members, legislators, or the public Publications, or published or broadcast statem Grants to other organizations for lobbying purp Direct contact with legislators, their staffs, governments	ng Public that did not ince nation atter or refer tion in expenses ents poses ernment of is, speeche igh h)	Charities complete Part al, state or local rendum, through	VI-A) (See page al legislation, include the use of con lines c through slative body any other means	o 11 of the uding and	e Instru	(d) 1999 O Ves	No X X X X X X X X X X X X X X X X X X X	(e) Total 0 0 0

Scriedule A (r	OIII 990 OF 990-EZ]	2002	THE ZEN GIODIES SOCIE	10-0102014		1 6	ige o
Part VII	Information Reg		sfers To and Transaction ee page 12 of the instruction	s and Relationships With Noncha	rıtable		
	e reporting organiz	ation directly or	indirectly engage in any of t	he following with any other organization		section	1
	7.			section 527, relating to political organiza	ations	Yes	No
	. O. A. 1984.	ting organization	n to a noncharitable exempt	ritable exempt organization of			
(i) C					51a(i)		
(ii) C	ther assets				a(ii)	-	
	transactions						
(ı) S	ales or exchanges	of assets with a	noncharitable exempt organ	ization	b(1)		
(ii) P	urchases of assets	from a nonchar	ritable exempt organization		b(II)		
(iii) R	tental of facilities, e	quipment, or oth	ner assets		b(III)		
(IV) R	teimbursement arra	ingements			b(lv)		
(v) L	oans or loan guara	ntees			b(v)	_	
(vi) P	erformance of serv	ices or member	ship or fundraising solicitation	ns	b(vI)		
c Sharii	ng of facilities, equi	pment, mailing	lists, other assets, or paid en	nployees	С		
				nedule Column (b) should always show	the fair marke	et value	е
			40.1 D. N.	ation If the organization received less t			
			네 ^ 요즘 가지 않아 나를 열하면 보고 있다면 하는 사람이 되었다면 하는데	lue of the goods, other assets, or service			
(a)	(b)		(c)	(d)			
Line no	Amount involved	Name of noncl	haritable exempt organization	Description of transfers, transactions, as	nd sharing arra	ngemer	nts
						S():	
	7				<del>13</del> 2		- 50
			···	e element element element			-
		TO RECORD					
			<del></del>	<del></del>			
				<del></del>			
descr		(c) of the Code	(other than section 501(c)(3)	ne or more tax-exempt organizations ) or in section 527?	Yes		No
	(a)	200	, (b)	, (c)			
	Name of organization	on	Type of organization	Description of relation	nship		
***							
		- March					- 20 800
	74 C to 1 Co.						
	2.70						
						7-38	
77.		· · · · · · · · · · · · · · · · · · ·					
					-		
					<del></del>		
		<del> </del>					

ATTACHMENT TO 990EZ FOR THE ZEN STUDIES SOCIETY INC EIN # 13-6162814
BY TREASURER WILLEM J PRETORIUS
260 RIVERSIDE DRIVE
NEW YORK, NY 10025-3421

PER INSTRUCTIONS UNDER 990-EZ, PARAGRAPH B ORGANIZATIONS NOT REQUIRED TO FILE, SUB SECTION (I) A CHURCH, AN INTERCHURCH ORGANIZATION OF LOCAL UNIT OF A CHURCH, A CONVENTION OF ASSOCIATION OF CHURCHES, AN INTEGRATED AUXILLIARY OF A CHURCH (SUCH AS A MEN'S OR WOMEN'S ORGANIZATION, RELIGIOUS SCHOOL, MISSION SOCIETY, OR YOUTH GROUP)

IN VIEW OF THIS INSTRUCTION, THE ORGANIZATION THE ZEN STUDIES SOCIETY INC QUALIFIES BY THIS DEFINITION OF 'NOT REQUIRED TO FILE' AS A RELIGIOUS ACTIVITY AND IS HEREBY ADHERING TO THE 990 INSTRUCTIONS BY NOT FILING THE REQUIRED INFORMATION

YOU MAY CONTACT THE ORGANIZATION IFTHERE IS ANY DISAGREEMENT WITH OUR TREASURER HIS ADDRESS IS LISTED ABOVE

# Form 990-EZ

Department of the Treasury

**Short Form** 

**Return of Organization Exempt From Income Tax** 

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

For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year.

OMB No. 1545-1150

2003

Open to Public Inspection

Interna	I Reven	ue Service	►The organization may have to use a copy of this return	to satisfy state report	ing requirements		inspection		
A F	or the 2	003 calendar year, o	ax year beginning	and ending					
B C	neck if a	applicable:	C Name of organization		D Em	ployer l	dentification number		
		change Please	Number of the control						
Π <sub>N</sub>	ame cha	use IRS label or	THE ZEN STUDIES SOCIETY INC.				3-6162814		
			Number and street (or P O box, if mail is not delivered	d to street address)	Room/suite E Te	lephone	number		
=	tial retu	type. See	222 EACT CTTU CTDEET			21	2 064 2222		
LJF1	nal retu	rn Specific	223 EAST 67TH STREET	-t-	ZIP+4	- 21	12-861-3333		
Ar	nended		City, town, or country St	ate	F Gr	oup Exe	emption		
	plicatio	on pending tions.	NEW YORK N	Y	10021-5549 Nu	mber	<b>▶</b> 5549		
			ations and 4947(a)(1) nonexempt charitable trus		G Accounting m	othod			
	• 366		pleted Schedule A (Form 990 or 990-EZ).	s must attacn		17.5	Accidai		
		a co	pieteu Schedule A (Form 550 or 550-EZ).		Other (specify				
V211 176750		<b>.</b>			145 (400) (400)		ne organization		
ı w	ebsite:	► N/A			is not require				
J O	ganizati	on type (check only one)	X 501(c) ( 3 ) ◀ (insert no ) 4947(a	)(1) or527	Schedule B (F	orm 99	0, 990-EZ, or 990-PF).		
K C	neck	► if the organiza	on's gross receipts are normally not more than \$25,	000 The organizat	ion need not file a ref	urn with	the IRS: but if the		
1107.00	Plant of the last		Package in the mail, it should file a return without						
			etermine gross receipts, if \$100,000 or more, file Form 990 i			\$	0		
Part		Revenue, Expens	s, and Changes in Net Assets or Fund Bala	nces (See page	37 of the instruction	ns.)			
	1		grants, and similar amounts received			1	0		
	2		enue including government fees and contract			2			
	3	Membership dues	선물이 살았다. [1] 사용하다 보고 있는데 가는 다른 아내가 되었다. 그리고 나는데 그리고 있는데 그리고 있다.			3			
5	- 4	Investment income				4			
SJUUL S	\$ 5.		sale of assets other than inventory			7.7			
6	, on		pasis and sales expenses						
O			sale of assets other than inventory (line 5a les		schedule)	5c	0		
Revenue	6		activities (attach schedule). If any amount is fr			100			
0	,		including \$0 of contribu		CK TICHE - L				
<u> </u>			· · · · · · · · · · · · · · · · · · ·	0					
ш	Ь		s other than fundraising expenses						
0			from special events and activities (line 6a les			6c	0		
W			ntory, less returns and allowances						
Z			sold			1 1			
SCANNED			from sales of inventory (line 7a less line 7b)			7c	0		
ď	R	Other revenue (de				8	0		
$\mathcal{Q}$	١		lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)			9	Ö		
	10	Grants and similar	mounts paid (attach schedule)			10	0		
	11	Benefits paid to or	or members			11			
un.	12	Salaries other cor	pensation, and employee benefits			12			
88	13	Professional fees	nd other payments to independent contractors			13			
Expense	14		lities, and maintenance	RECEIVE	D 1	14			
Δ	15				Ten .	15			
	16	Other expenses (d		0.0434 1 0	18	16	0		
	17		d lines 10 through 16)	WAY 1 5 20	04 8	17	0		
	18		or the year (line 9 less line 17)		<u> </u>	18	0		
Net Assets	19	Net assets or fund	alances at beginning of year (from line 27, co	UM (TAT) (tmust a	gree with				
Ass		end-of-vear figure	eported on prior year's return)	OOBEIG, C	91	19	0		
क्र	20		et assets or fund balances (attach explanation	)		20			
Z	21		alances at end of year (combine lines 18 thro			21	0		
Part	_		Total assets on line 25, column (B) are \$250				n 990-EZ.		
	31 2		e page 40 of the instructions.)		(A) Beginning of year	1	(B) End of year		
22	Cash		nents			22	.,		
23						23			
24					0	_	0		
25	Total	assets		——' H	Ö	_	0		
26		liabilities (describe	<b>&gt;</b>	)	0		Ö		
27			(line 27 of column (B) must agree with line 21)		0	_	0		

Part I	Statement of Program Service Accomplishments (See page 41 of the instructions.)						Expense		
What	What is the organization's primary exempt purpose?						quired for 501		
		t was achieved in carrying out the organization		a clear and concise m	nanner,		and (4) organizations and 4947(a)(1) trusts,		
		services provided, the number of persons t				2,573,731,771	onal for other		
28									
						2202			-
22 /				(Grants \$	)	28a			0
29					•••••	()			
		•••••		(Grants \$		29a			0
30		The second secon		(Grants 5		23a			
50				• • • • • • • • • • • • • • • • • • • •	•••••				
	•••••			(Grants \$	)	30a			0
31	Other	program services (attach schedule)		. (Grants \$	j	31a			0
32	Total	program service expenses (add line	es 28a through 31a)		>	32	100		0
Part I	V	List of Officers, Directors, Trustees, an	d Key Employees (List eac	h one even if not com	pensated. See page	41 of th	e instructio	ns.)	
7.		200 S	(B) Title and average	(C) Compensation	(D) Contributions	s to	(E) Ex	pense	
		(A) Name and address	hours per week	(If not paid,	employee benefit pl		account a		er
-			devoted to position	enter -0)	deferred compens	ation	allowa	nces	
Name		Str	Title		:				
City		ST ZIP	Hr/WK	<del></del>					
Name		Str ST ZIP	Title Hr/WK						
Name		Str	Title						_
City		ST ZIP	Hr/WK						
Part		Other Information (Note the attachr	ment requirement in Gene	eral Instruction V, p	age 14.)		Ye	s N	lo
		organization engage in any activity not previously	<del></del>						X
		ny changes made to the organizing or governing				nanges .		<b>&gt;</b>	
35	If the c	organization had income from business ac	tivities, such as those report	ed on lines 2, 6, and 7	7 (among others), but	not			3 22
		ed on Form 990-T, attach a statement exp	. (1985년 1982년 - 1985년					27	6.3
		organization have unrelated business gross inco		notice, reporting, and pro	oxy tax requirements?		200		<u>X</u>
		i," has it filed a tax return on Form 990-T form a liquidation, dissolution, termination,		ring the year? (If "Ve		• X			X X
		amount of political expenditures, direct or i			s, allacin a statement  ▶ 37a				2
		e organization file Form 1120-POL for this		matructions	0/41	-			X
		e organization borrow from, or make any lo	어른 생생님이 있었다. 그 그 사람은 사실이 있었다.	trustee, or key emplo	yee or were any	13.51			. 2
	such le	pans made in a prior year and still unpaid a	at the start of the period cove	ered by this return?				>	X
		," attach the schedule specified in the line			. 38b		:	" 9.71×	1
39		(7) organizations Enter. a Initiation fees a		uded on line 9	. 39a				
		receipts, included on line 9, for public use	[항공기() 하나 보고 있었다면 하고 있는 그 그 그 그 없는 것이 되었다.		39b		100		
40 a	section	(3) organizations. Enter: Amount of tax im	ection 4912	uring the year under: section 4:	055				2.4
b	_	(3) and (4) organizations. Did the organizations				vear	<del></del>	十	
		it become aware of an excess benefit trans							X
С		nt of tax imposed on organization manager				► NC	NE		
		Amount of tax on line 40c, above, reimbur				▶ NC	Series Section 1		
41		e states with which a copy of this return is	The state of the s	252 5: 25: 5: 12	130 N 101 N 10			7.5	_
42		MAT.	easurer, Zen Studies Soc	letvRusines shock has	e Telephone no		212-485-	2100	_
74		HER KANDE BELLEVIN DE STANDE STAND		ST NY		10		2100	
42	Located	***************************************	City Dobbs Ferry	SLIVI	7 P + 4		17.7		
43		n 4947(a)(1) nonexempt chantable trusts t							
0	and er	nter the amount of tax-exempt interest rece							
		Under penalties of perjury, I declare that I have and belief, it is true, carrect, and complete. Declared the period of the peri							
Pleas	_	1 1 51	archior propurer (only						
Sign	U	Supporting of final							
Here		Signature of officer Tames D St	reit, Treas						
. 1010		Type or print name and title							
		Preparer's	Date						
Paid		signature	in coa						
Prepai		Firm's name (or yours THE OFFICE O	OF GEORGE Y. HA						
Use O	nly	il self-employed),	ENUE, #2009, NE\						
12.00		JOUR THE THE AVI	LINUL, #2003, INC						

## SCHEDULE A

(Form 990 or 990-EZ)

# Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No 1545-0047

2003

Department of the Treasury Internal Revenue Service Name of the organization

Employer Identification number

THE ZEN	STUDIES SOCIETY INC.				13-6162814
Part I	Compensation of the Five Hig (See page 1 of the instructions. List				
(a) Nam	e and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans deferred compensatio	
Name		1 th			
Str EXE	MPT			1	
City	ST	Title		1	
Zip	Country	Avg hr/wk			
Name					
Str					
City	ST	Title			
Zip	Country	Avg hr/wk		nes research deser-	3874
Name					
Str				1	
City	ST	1Title			
Zip	Country	Avg hr/wk			1
Name			4		
Str		1			
City	ST	1 <sub>Title</sub>			
Zıp	Country	Avg hr/wk		1	
Name	-				
Str					
City	ST	1 <sub>Title</sub>			
Zip	Country	Avg hr/wk		-101	FO. 8119 ( 1.4.790.)
	per of other employees paid over		Common State of the State of th	Mary Conference of the Town of the	The second secon
\$50,000 .					No. of the second
Part II	Compensation of the Five High (See page 2 of the instructions. List	hest Paid Independent	Contractors for P	rofessional Serv	ices
(a) Nam	e and address of each independent contra	200 20 200		pe of service	(c) Compensation
Name		Check here if a business			
Str EXE	MPT				
City			1		
ST	ZIP Count	ry			
Name	A CONTRACTOR OF THE STATE OF TH	Check here if a business		175-55-11	
Str					
City					ľ
ST	ZIP Count	ry			
Name	3140-41 / D	Check here if a business			
Str					
City			-1		
ST	ZIP Count	ry			144 V.01344
Name		Check here if a business			
Str					ľ
City					
ST	ZIP Count	ry			b 1972
Name		Check here if a business	= 4.5	The state	
Str					
City					
ST	ZIP Count	ry	= 0.	<u> </u>	#9.1
Total numb	er of others receiving over		7/1 7/18 2	The excellent with a series of the series of	Marie Control of the
\$50,000 for	r professional services	1	AND THE PERSON NAMED IN	The state of the s	<b>"这个人","这个人,我们们</b>

Par	Ш	Statements About Activities (See page 2 of the instructions.)	Yes	No
1	atte or i	ring the year, has the organization attempted to influence national, state, or local legislation, including any empt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid ncurred in connection with the lobbying activities		x
	org	ganizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other anizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of lobbying activities.		
2	sub with own	ring the year, has the organization, either directly or indirectly, engaged in any of the following acts with any estantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or any taxable organization with which any such person is affiliated as an officer, director, trustee, majority ner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the insactions.)		
a b c d	Len	nding of money or other extension of credit?	a b c d	X X X
е 3 а	Do	you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how determine that recipients qualify to receive payments.)	а	x
4	Did	you have a section 403(b) annuity plan for your employees?	b	X
Part	IV	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)		
The c	organ	nization is not a private foundation because it is: (Please check only ONE applicable box.)		
5	X	A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).		
6		A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)		
7		A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).		
8		A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).		
9		A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital name, city, and state   City ST Country		
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the <b>Support Schedule</b> in Part IV-A.)	L	
11 a		An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)		
11 b	$\vdash$	A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)	ou ousse	220
12	Ш	An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, a receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 3 of its support from gross investment income and unrelated business taxable income (less section 511 tax) from busin acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Page 1)	33 1/3% nesses	•
13		An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of so 509(a)(2). (See section 509(a)(3).)		_
		Provide the following information about the supported organizations. (See page 5 of the instructions.)		_
		(a) Name(s) of supported organization(s)  (b) Line numb from above		-
				=
14		An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)	JP	-

	IV-A Support Schedule (Complete only if you check You may use the worksheet in the instructions for conven					count	ing.
	dar year (or fiscal year beginning in) .	(a) 2002	(b) 2001	(c) 2000	(d) 1	999	(e) Total
15	Gifts, grants, and contributions received. (Do	(a) 2002	(6) 2001	(6) 2000	(0)	333	(e) rotar
######################################	not include unusual grants. See line 28.)						l o
16	Membership fees received	200					0
17	Gross receipts from admissions, merchandise				a.t		
	sold or services performed, or furnishing of	1			1		
	facilities in any activity that is related to the				1		
	organization's charitable, etc., purpose						l 0
18	Gross income from interest, dividends,						25562 1000
	amounts received from payments on securities						
	loans (section 512(a)(5)), rents, royalties, and			4,			
	unrelated business taxable income (less						)
	section 511 taxes) from businesses acquired				ļ		
	by the organization after June 30, 1975	1					0
19	Net income from unrelated business				ł		
	activities not included in line 18						0
20	Tax revenues levied for the organization's						
	benefit and either paid to it or expended on						
21	its behalf			8 <del>1 00</del> 210)			0
21	The contract of						
	the organization by a governmental unit without charge. Do not include the value of						
	services or facilities generally furnished to the	1					
	public without charge						0
22	Other income. Attach a schedule. Do not			A 18			
	include gain or (loss) from sale of capital assets			3	1		О .
23	Total of lines 15 through 22	0	0	0		0	
24	Line 23 minus line 17	0		0		0	
25	Enter 1% of line 23	0		0		0	
26	Organizations described on lines 10 or 11: a Enter	2% of amount in	column (e) line	24	<b>•</b>	26a	0
	Prepare a list for your records to show the name of and a						. Si makan da Maria
	governmental unit or publicly supported organization) who					1.10	
	amount shown in line 26a. Do not file this list with your	return Enter th	e total of all thes	e excess amou	nte D	26b	2. 14. 12. 14. 16. 16. 16. 16. 16. 16. 16. 16. 16. 16
C	Total support for section 509(a)(1) test: Enter line 24, colu	ımn (e)			III.3 ▶	26c	0
	Add: Amounts from column (e) for lines: 18	0 19		0	* 5		7.574 Stage of the Control of the Co
	22	0 26		0		26d	0
0	Public support (line 26c minus line 26d total)				. •	26e	0
f	Public support percentage (line 26e (numerator) divid	ed by line 26c (	denominator))		. •	26f	0.00%
27	Organizations described on line 12: a For amounts					a "dis	
	person," prepare a list for your records to show the name						
	person." Do not file this list with your return. Enter the						
	(2002) (2001)		LODG.	(	1999)		
b	For any amount included in line 17 that was received from			alified persons"	) propo	o a lie	forvour
	records to show the name of, and amount received for ea	ch year that was	e more than the	larger of (1) the	), prepar	t on lin	o 25 for the
	year or (2) \$5,000. (Include in the list organizations described to the list organization or the list organization	ihed in lines 5 th	rough 11 as we	larger or (1) the	\ Do no	t file ti	e 23 ioi iiie
	your return. After computing the difference between the	amount received	and the larger a	mount describe	ed in (1)	or (2)	enter the
	sum of these differences (the excess amounts) for each y		and the larger c	ourit doddribe	, a (1)	o. ( <b>-</b> ),	ontor the
	(0000)	0.0000000000000000000000000000000000000	00)	,	(1999)		
					1999)		
C	Add: Amounts from column (e) for lines: 15	0 16 0 21 ne 27b total .	0			yt 2	
	170 20	0 21	0		, ▶	27c	0
	Add: Line 27a total . 0 and lin	ne 27b total .	0		. •	27d	0
0	Public support (line 2/c total minus line 2/d total)				. ▶	27e	0
f	Total support for section 509(a)(2) test: Enter amount from					1846	2.572
g	Public support percentage (line 27e (numerator) divid					27g	0.00%
	Investment income percentage (line 18, column (e) (nu					27h	0.00%
28	Unusual Grants: For an organization described in line 10 2002, prepare a list for your records to show, for each year	), 11, or 12 that r ar, the name of th	eceived any unu ne contributor, th	isual grants dur ie date and amo	ing 1999 ount of the	through the gran	gh nt, and a

brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

Schedulg A (Form 990 or 990-EZ) 2003 Page 4 THE ZEN STUDIES SOCIETY INC. 13-6162814 Part V Private School Questionnaire (See page 7 of the instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV) Does the organization have a racially nondiscriminatory policy toward students by statement in its 29 charter, bylaws, other governing instrument, or in a resolution of its governing body? . . . . . . . . . 29 30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student 30 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation 31 program, in a way that makes the policy known to all parts of the general community it serves? . . . . . . . . If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) Does the organization maintain the following: a Records indicating the racial composition of the student body, faculty, and administrative staff? . . . . . . . 32a b Records documenting that scholarships and other financial assistance are awarded on a racially 32b ROOM ROOM c Copies of all catalogues, brochures, announcements, and other written communications to the public 32c 32d If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) ........... 33 Does the organization discriminate by race in any way with respect to: 33a b Admissions policies? . 33b c Employment of faculty or administrative staff? . 33c d Scholarships or other financial assistance? . 33d e Educational policies? 33e Use of facilities? 33f Athletic programs? 33g h Other extracurricular activities? 33h If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) 34 a Does the organization receive any financial aid or assistance from a governmental agency? . . . . . . . . . 34a 

If you answered "Yes" to either 34a or b, please explain using an attached statement.

Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation

Part	VI-A Lobbying Expenditures by Electing Pul (To be completed ONLY by an eligible organize			the instru	ctions.	.)	
Check		Check ▶		ecked "a" ar	d "limite	ed control" p	rovisions apply.
	Limits on Lobbying Ex	NO 0000 NO			Aff	(a) filiated group totals	(b) To be completed for ALL electing
	(The term "expenditures" means amou			<del></del>	_	totalo	organizations
36	Total lobbying expenditures to influence public opinion (	TT	4 (5.00)		6		
37	Total lobbying expenditures to influence a legislative bo		C-73.000		88	0	0
38 39	Total lobbying expenditures (add lines 36 and 37) Other exempt surpass expenditures			12.50 10 1	9		0
	Other exempt purpose expenditures			Note 15 - 50 5	10	0	
40 41	Lobbying nontaxable amount. Enter the amount from the				Mary Trans	1.5 (m. 18)	12 60 8 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
41		ring nontaxable		45	Come Grap	133912	
	THE REST OF SECURITIES AND THE SECURITIES OF SECURITIES AND ASSESSMENT OF SECURITIES ASSESSMENT OF SECURITIES AND ASSESSMENT OF SECU	amount on line 40		ે ો	為多		
		us 15% of the exc			- 7	4 7 7 7 8 8	
	Over \$1,000,000 but not over \$1,500,000 \$175,000 pl			Street Street Street	11	0	0
	Over \$1,500,000 but not over \$17,000,000 \$225,000 pl				de sin	(公外)	and the second second
	Over \$17,000,000 \$1,000,000		x 20	· ] [2]	1/2 29	31.70E14	75-10-1
42	Grassroots nontaxable amount (enter 25% of line 41)				2	0	0
43	Subtract line 42 from line 36 Enter -0- if line 42 is more				13	0	0
44	Subtract line 41 from line 38 Enter -0- if line 41 is more	than line 38 .		🔽	4	0	0
				4	Tural 34	200	NEW YORK
	Caution: If there is an amount on either line 43 or line 4	14, you must file	Form 4720.	10			<b>学程</b> 真的。
No.	4-Year Averaging	Period Under	Section 501(h)			10 14000 0 10	11 - 11 - 11 - 11 - 11 - 11 - 11 - 11
	(Some organizations that made a section 501(h	) election do not ha	ave to complete a	ll of the five o	columns	below.	
	See the instructions for lines	45 through 50 on p	age 11 of the inst	ructions.)			
		Lobbyi	ng Expenditure	s During 4	-Year	Averaging	Period
	Calendar year (or	(a)	(b)	(c)		(d)	(e)
	fiscal year beginning in) ▶	2003	2002	2001	_	2000	Total
45	Lobbying nontaxable amount						0
		- 1. 4" A. L.	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	N. T.	2 13	The second section	
46	Lobbying ceiling amount (150% of line 45(e))	14600	Company of the second	"一种"	Chan	P. Sandali.	0
47	Total lobbying expenditures		1				0
48	Grassroots nontaxable amount						0
		19.	The Manual of	14 The 18	Aggle May		
49	Grassroots ceiling amount (150% of line 48(e))	17:42	14. " 18 18 18 18 18 18 18 18 18 18 18 18 18	66.00 TO	Complete 10 25		0
50	Grassroots lobbying expenditures						0
Part	VI-B Lobbying Activity by Nonelecting Publi		wigo ognornazani e energia			1400000-10	
	(For reporting only by organizations that did no	ot complete Part	VI-A) (See page	e 12 of the	instruc	tions.)	
During	the year, did the organization attempt to influence nation	nal, state or loca	al legislation, inc	cluding any	1,	V   N-	
	ot to influence public opinion on a legislative matter or re		100	- (C) N		Yes No	Amount
а	Volunteers				[	X	一个 一
b	Paid staff or management (Include compensation in exp	enses reported	on lines c throu	gh <b>h.</b> )	. [	X	
C	Media advertisements					X	
d	Mailings to members, legislators, or the public					X	
θ	Publications, or published or broadcast statements				_	X	
f	Grants to other organizations for lobbying purposes .				_	X	
g	Direct contact with legislators, their staffs, government of					X	
h	Rallies, demonstrations, seminars, conventions, speech					X	
1	Total lobbying expenditures (Add lines c through h.) .					11 3. AS 17	0
	If "Yes" to any of the above, also attach a statement give	ing a detailed de	escription of the	lobbying ac	tivities		

Part	VII			fers To and Transaction page 12 of the instructions	s and Relationships With Noncharita .)	ble		
51				이 2001년 : [18] [18] [18] [18] [18] [18] [18] [18]	the following with any other organization des section 527, relating to political organization		sectio	n
а	Participant (1)			n to a noncharitable exempt	a trade fan yetter af de en doer fan de en de en de en de en de en de en de de en dat de en de en de en de en d		Yes	No
		2005 BY	774 - 753	만 나는 그는 당시하다 나는 것 같아.		51a(i)		
	(ii)					a(ii)		
b		r transactions:				-(/		
955	(i)		s of assets with	a noncharitable exempt org	anization	b(i)		
	(ii)	March and March 1997		a nakawa sa Silan Si	1	b(ii)		
	(iii)			8 8		b(iii)		, de 74 70
	(iv)					b(iv)		
	(v)					b(v)		<del></del>
	(v) Loans or loan guarantees					b(vi)		-
С					mployees	C		
					hedule. Column (b) should always show the		ot volu	
u					zation. If the organization received less than			
				나는 가는 마음을 살아 살아들이 되지 않는데 그렇게 되었다면 하는데 하는데 하는데 하는데 하는데 없었다.	alue of the goods, other assets, or services i		et valu	0
	a)	(b)		(c)	(d)			
Line		Amount involved	Name of none	charitable exempt organization	Description of transfers, transactions, and share	nng arrange	ments	
	-							
				10 0				
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			10 (Heat)	10000				
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		200,000 E			7.375-075			
			-		5. 100-10			
			107-108	- 14 - 20000				
52 a					ne or more tax-exempt organizations		_	Legan
b		s," complete the fol		9:	) or in section 527? ▶	Yes		No
		(a) Name of organization		(b) Type of organization	(c) Description of relationship	or Colonia - Illian -		
		- 01		1 K 2 C 1 K 2 C 1	100 mm		7-1/4416	
					(Carlo)			
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		32-1	5300	2017 April 20			- 10.00	
			1000					
			H20	****	444.4			
	741.5							
550		97 - 97		1890 ME //				
- 12								

ATTACHMENT TO 990EZ FOR: THE ZEN STUDIES SOCIETY INC.

EIN# 13-6162814

BY TREASURER: JAMES STREIT

15 CRICKET LANE

DOBBS FERRY, NY 10522

PER INSTRUCTIONS UNDER 990-EZ, PARAGRAPH B. ORGNIZATIONS NOT REQUIRED TO FILE, SUB SECTION (1). A CHURCH, AN INTERCHURCH ORGNIZATION OF LOCAL UNIT OF A CHURCH, A CONVENTION OF ASSOCIATION OF CHURCHES, AN INTEGRATED AUXILLIARY OF A CHURCH (SUCH AS A MEN'S OR WOMEN'S ORGNIZATION, RELIGIOUS SCHOOL, MISSION SOCIETY, OR YOUTH GROUP).

IN VIEW OF THIS INSTRUCTION, THE ORGANIZATION: THE ZEN STUDIES SOCIETY INC. QUALIFIES BY THIS DEFINITION OF 'NOT REQUIRED TO FILE' AS A RELIGIOUS ACTIVITY AND IS HEREBY ADHERING TO THE 990 INSTRUCTIONS BY NOT FILING THE REQUIRED INFOMRATION.

YOU MAY CONTACT THE ORGANIZATION IF THERE IS ANY DISAGREEMENT WITH OUR TREASURER. HIS ADDRESS IS LISTED ABOVE.