



7910 WOODMONT AVENUE
SUITE 500
BETHESDA, MD 20814
(T) 301.986.0600

August 6, 2024

U.S.- Japan Council
1819 L Street, NW 200
Washington, DC 20036
Attention: Ms. Terri Swetnam

Dear Terri:

Enclosed are the original and one copy of the 2023 Exempt Organization returns, as follows...

2023 Form 990

Form 114, Report of Foreign Bank and Financial Accounts

2023 California Form 199

2023 California Form RRF-1

Copies of your tax returns should be retained in your files.

Please review the return for completeness and accuracy.

We sincerely appreciate the opportunity to serve you. Please contact us if you have any questions concerning the tax return.

Very truly yours,

A handwritten signature in black ink, appearing to read 'David W.', is written over a light blue horizontal line.

Councilor, Buchanan & Mitchell, P.C.

TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

December 31, 2023

Prepared For:

U.S.- Japan Council
1819 L Street, NW 200
Washington, DC 20036

Prepared By:

Councilor, Buchanan & Mitchell, P.C.
7910 Woodmont Ave. Ste. 500
Bethesda, MD 20814

Amount Due or Refund:

Not applicable

Make Check Payable To:

Not applicable

Mail Tax Return and Check (if applicable) To:

Not applicable

Return Must be Mailed On or Before:

Not applicable

Special Instructions:

This return has qualified for electronic filing. After you have reviewed the return for completeness and accuracy, please sign, date and return Form 8879-TE to our office. We will transmit the return electronically to the IRS and no further action is required. Return Form 8879-TE to us by November 15, 2024

TAX RETURN FILING INSTRUCTIONS
REPORT OF FOREIGN BANK AND FINANCIAL ACCOUNTS

Prepared For:

U.S.- Japan Council
1819 L Street, NW 200
Washington, DC 20036

Prepared By:

Councilor, Buchanan & Mitchell, P.C.
7910 Woodmont Ave. Ste. 500
Bethesda, MD 20814

Form Must be Filed On or Before:

Return Form(s) 114A to us by October 15, 2024.

Special Instructions:

Form(s) 114 have been prepared for electronic filing. Please sign, date, and return Form(s) 114A to our office. We will then transmit your report(s) to the FinCEN.

BSA E-Filing - Report of Foreign Bank and Financial Accounts (FBAR)

FinCEN Form 114

USJAPAN20230001

Filing Name US-JAPAN COUNCIL

Submission Type NEW

PIN NOT REQUIRED

Check here if this report is submitted by an authorized third party, and complete the 3rd party preparer section on page one of the report. The E-file system will auto complete item 46.

NOTE: The FBAR must be received by the Department of the Treasury on or before April 18, 2024. An automatic extension to October 16, 2024 is available.

This report filed late for the following reason (Check only one):

- a. Forgot to file
- b. Did not know that I had to file
- c. Thought account balance was below reporting threshold
- d. Did not know that my account qualified as foreign
- e. Account statement not received in time
- f. Account statement lost (Replacement requested)
- g. Late receiving missing required account information
- h. Unable to obtain joint spouse signature in time
- i. Unable to access BSA E-filing system
- z. Other (please provide explanation below)

REPORT OF FOREIGN BANK AND FINANCIAL ACCOUNTS

Do NOT file with your Federal Tax Return

1 This report is for calendar
year ended 12/31
2023
Amended

Part I Filer information USJAPAN20230001

2 Type of filer

a Individual b Partnership c Corporation d Consolidated e Fiduciary or other - Enter type 501(C)(3)

3 U.S. Taxpayer Identification Number 900447211 <small>If filer has no U.S. Identification number complete item 4</small>	3a TIN type <input type="checkbox"/> SSN/ITIN <input checked="" type="checkbox"/> EIN	4 Foreign identification (Complete only if item 3 is not applicable) a Type: <input type="checkbox"/> Passport <input type="checkbox"/> Foreign TIN <input type="checkbox"/> Other _____ b Number _____ c Country of Issue _____	5 Individual's date of birth MM/DD/YYYY
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6 Last name or organization name US-JAPAN COUNCIL	7 First name	8 Middle initial	8a Suffix
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9 Mailing address (number, street, and apt. or suite no.)

1819 L STREET, NW, #200

10 City WASHINGTON	11 State DC	12 ZIP/Postal Code 20036	13 Country USA
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- 14 a) Does the filer have a financial interest in 25 or more financial accounts?
 Yes Enter number of accounts _____ Do not complete Part II or Part III, but maintain records of the information.
 No
- b) Does the filer have signature authority over but no financial interest in 25 or more financial accounts?
 Yes Enter number of accounts _____ Comp. Part IV, items 34 through 43 for each person on whose behalf the filer has sign. authority.
 No

Part II Information on financial account(s) owned separately

15 Maximum value of account during calendar year 495,593.	15a Amount unknown <input type="checkbox"/>	16 Type of account a <input checked="" type="checkbox"/> Bank b <input type="checkbox"/> Securities c <input type="checkbox"/> Other - Enter type below
---	---	---

17 Name of financial institution in which account is held
MUFG BANK, LTD.

18 Account number or other designation 1134774	19 Mailing address (number, street, apt. or suite no.) of financial institution in which account is held 2-7-1, MARUNOUCHI, CHIYODA-KU		
20 City TOKYO	21 State, if known	22 Foreign postal code, if known 1008388	23 Country JAPAN

Signature 44a Check here if this report is completed by a third party preparer and complete the third party preparer section.

44 Filer signature <small>The report will be electronically signed when filed</small>	45 Filer title, if not reporting a personal account	46 Date (MM/DD/YYYY) <small>This date will auto-fill when the FBAR is electronically signed</small>
--	---	--

Third Party Preparer Use Only	47 Preparer's last name WEAVER	48 First name DANIEL	49 MI L	50 Check <input type="checkbox"/> if self-employed	51 TIN P01249346	51a TIN type <input checked="" type="checkbox"/> PTIN <input type="checkbox"/> SSN/ITIN <input type="checkbox"/> Foreign
	52 Contact phone no. (301) 986-0600	52a Ext.	53 Firm's name COUNCILOR, BUCHANAN &		54 Firm's TIN 52-1711839	54a TIN type <input checked="" type="checkbox"/> EIN <input type="checkbox"/> Foreign
	55 Mailing address (number, street, apt. or suite no.) 7910 WOODMONT AVE. STE. 500		56 City BETHESDA		57 State MD	58 ZIP/Postal Code 20814

Part II Continued - Information on Financial Account(s) Owned Separately	FORM 114
Complete a Separate Block for Each Account Owned Separately	

1 Filing for calendar year 2023	3-4 Check appropriate Identification Number <input checked="" type="checkbox"/> Taxpayer Identification Number <input type="checkbox"/> Foreign Identification Number Enter identification number here: 900447211	6 Last Name or Organization Name US-JAPAN COUNCIL
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15 Maximum value of account during calendar year 102.	15a Amount Unknown <input type="checkbox"/>	16 Type of account a <input checked="" type="checkbox"/> Bank b <input type="checkbox"/> Securities c <input type="checkbox"/> Other - Enter type below
---	---	--

17 Name of Financial Institution in which account is held MUFG BANK, LTD.

18 Account number or other designation 1040218	19 Mailing Address (Number, Street, Suite Number) of financial institution in which account is held 2-7-1, MARUNOUCHI, CHIYODA-KU
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20 City TOKYO	21 State, if known	22 ZIP/Postal Code, if known 1008388	23 Country JAPAN
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15 Maximum value of account during calendar year	15a Amount Unknown <input type="checkbox"/>	16 Type of account a <input type="checkbox"/> Bank b <input type="checkbox"/> Securities c <input type="checkbox"/> Other - Enter type below
---	---	---

17 Name of Financial Institution in which account is held
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18 Account number or other designation	19 Mailing Address (Number, Street, Suite Number) of financial institution in which account is held
---	--

20 City	21 State, if known	22 ZIP/Postal Code, if known	23 Country
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15 Maximum value of account during calendar year	15a Amount Unknown <input type="checkbox"/>	16 Type of account a <input type="checkbox"/> Bank b <input type="checkbox"/> Securities c <input type="checkbox"/> Other - Enter type below
---	---	---

17 Name of Financial Institution in which account is held
--

18 Account number or other designation	19 Mailing Address (Number, Street, Suite Number) of financial institution in which account is held
---	--

20 City	21 State, if known	22 ZIP/Postal Code, if known	23 Country
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15 Maximum value of account during calendar year	15a Amount Unknown <input type="checkbox"/>	16 Type of account a <input type="checkbox"/> Bank b <input type="checkbox"/> Securities c <input type="checkbox"/> Other - Enter type below
---	---	---

17 Name of Financial Institution in which account is held
--

18 Account number or other designation	19 Mailing Address (Number, Street, Suite Number) of financial institution in which account is held
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20 City	21 State, if known	22 ZIP/Postal Code, if known	23 Country
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15 Maximum value of account during calendar year	15a Amount Unknown <input type="checkbox"/>	16 Type of account a <input type="checkbox"/> Bank b <input type="checkbox"/> Securities c <input type="checkbox"/> Other - Enter type below
---	---	---

17 Name of Financial Institution in which account is held
--

18 Account number or other designation	19 Mailing Address (Number, Street, Suite Number) of financial institution in which account is held
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20 City	21 State, if known	22 ZIP/Postal Code, if known	23 Country
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15 Maximum value of account during calendar year	15a Amount Unknown <input type="checkbox"/>	16 Type of account a <input type="checkbox"/> Bank b <input type="checkbox"/> Securities c <input type="checkbox"/> Other - Enter type below
---	---	---

17 Name of Financial Institution in which account is held
--

18 Account number or other designation	19 Mailing Address (Number, Street, Suite Number) of financial institution in which account is held
---	--

20 City	21 State, if known	22 ZIP/Postal Code, if known	23 Country
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Return of Organization Exempt From Income Tax

Form 990

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

2023

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Form 990 header section containing organization name (U.S. - JAPAN COUNCIL), identification number (90-0447211), address (1819 L STREET, NW WASHINGTON, DC 20036), and principal officer (TERRI SWETNAM).

Part I Summary

Table with 22 rows detailing financial information: 1-7a Activities & Governance, 8-12 Revenue, 13-19 Expenses, and 20-22 Net Assets or Fund Balances. Includes prior and current year comparisons.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature block containing officer signature (TERRI SWETNAM, COO), preparer name (DANIEL L. WEAVER), date (08/06/24), and firm information (COUNCILOR, BUCHANAN & MITCHELL, P.C.).

May the IRS discuss this return with the preparer shown above? See instructions [X] Yes [] No

**Application for Extension of Time To File an Exempt Organization
Return or Excise Taxes Related to Employee Benefit Plans**

Department of the Treasury
Internal Revenue Service

File a separate application for each return.
Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Part I - Identification

Type or Print	Name of exempt organization, employer, or other filer, see instructions. U.S. - JAPAN COUNCIL	Taxpayer identification number (TIN) 90-0447211
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 1819 L STREET, NW, 200	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WASHINGTON, DC 20036	

Enter the Return Code for the return that this application is for (file a separate application for each return) 01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08		

• After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.

• If this application is for an extension of time to file Form 5330, you must enter the following information.

Plan Name _____
 Plan Number _____
 Plan Year Ending (MM/DD/YYYY) _____

Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions)

The books are in the care of **TERRI SWETNAM, COO**
1819 L STREET NW, SUITE 200 - WASHINGTON, DC 20036

Telephone No. **(202) 223-6840** Fax No. _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 15**, 20 **24**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 calendar year 20 **23** or
 tax year beginning _____, 20 _____, and ending _____, 20 _____

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

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

Part III 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: THE U.S.-JAPAN COUNCIL DEVELOPS AND CONNECTS DIVERSE LEADERS TO CREATE A STRONG U.S.-JAPAN RELATIONSHIP. FOUNDED BY JAPANESE AMERICANS, THE COUNCIL BRINGS TOGETHER LEADERS OF THE UNITED STATES AND JAPAN FROM ACROSS BACKGROUNDS, SECTORS AND GENERATIONS TO PARTNER FOR A BETTER

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 1,903,201. including grants of \$ 0.) (Revenue \$ 1,712,565.) USJC'S GENERAL EDUCATION PROGRAM INCLUDES THE ANNUAL CONFERENCE, CLIMATE & SUSTAINABILITY INITIATIVE, JAPANESE AMERICAN LEADERSHIP DELEGATION (JALD), EMERGING LEADERS PROGRAM, WOMEN IN LEADERSHIP, REGIONAL PROGRAMS IN THE UNITED STATES AND JAPAN, NETWORKING AND OUTREACH ACTIVITIES, AND COMMUNICATIONS. THE U.S.-JAPAN COUNCIL AND THE U.S.-JAPAN COUNCIL (JAPAN) BROUGHT TOGETHER NEARLY 600 MEMBERS, ALUMNI AND OTHER FRIENDS OF THE U.S.-JAPAN RELATIONSHIP FOR ITS TWELFTH ANNUAL CONFERENCE, WHICH TOOK PLACE NOVEMBER 8-10. HELD UNDER THE THEME "BUILDING A SUSTAINABLE, SECURE AND INCLUSIVE FUTURE TOGETHER," THE CONFERENCE'S WASHINGTON, DC LOCATION HELD SPECIAL SIGNIFICANCE THIS YEAR, WHICH OPENED WITH THE JANUARY 2023 BIDEN-KISHIDA JOINT STATEMENT EMPHASIZING THE NEED TO ADDRESS CRITICAL

4b (Code:) (Expenses \$ 981,606. including grants of \$ 0.) (Revenue \$ 1,235,208.) THE SILICON VALLEY JAPAN PLATFORM (SVJP) IS AN INITIATIVE OF THE US-JAPAN COUNCIL AND THE INTERNATIONAL HOUSE OF JAPAN. SVJP AIMS TO CONNECT THE TECHNOLOGICAL DYNAMISM OF SILICON VALLEY WITH THE CURRENT AND FUTURE NEEDS OF DIGITAL TRANSFORMATION IN JAPAN THROUGH TRUSTING, COLLABORATIVE RELATIONSHIPS. THE SVJP ENGAGES CURRENT AND FUTURE CORPORATE MEMBERS AND THE SVJP COMMUNITY THROUGH ONLINE, IN-PERSON AND HYBRID PROGRAMMING. IN 2023, TWO MAIN EVENTS WERE HELD IN APRIL AND SEPTEMBER RESPECTIVELY, THE JAPAN RETREAT IN KYOTO AND THE ANNUAL CORPORATE MEMBERS' RETREAT IN HALF MOON BAY, CALIFORNIA. ONE BIG ADMINISTRATIVE CHANGE WAS THE DEPARTURE OF SVJP'S PRESIDENT IN FEBRUARY 2023.

4c (Code:) (Expenses \$ 860,052. including grants of \$ 466,097.) (Revenue \$ 0.) THE TOMODACHI BOEING KEIO SFC ENTREPRENEURSHIP SEMINAR 2022 FOR HIGH SCHOOL AND UNIVERSITY STUDENTS INCLUDED A RANGE OF SEMINARS, GROUP ACTIVITIES, PRESENTATIONS AND TRAVEL TO THE U.S. TO FURTHER EXPLORE ENTREPRENEURSHIP AROUND THE THEME OF WELLNESS. TOMODACHI TOSHIZO WATANABE LEADERSHIP PROGRAM - USJC RECEIVED A \$10M ENDOWMENT TO ESTABLISH THIS PROGRAM. IN AUGUST 2023, FOURTEEN JAPANESE HIGH SCHOOL STUDENTS FROM ALL OVER JAPAN VISITED CALIFORNIA AS PART OF THE INAUGURAL TOMODACHI TOSHIZO WATANABE LEADERSHIP PROGRAM. THE PROGRAM, WHICH AIMS TO CREATE THE NEXT GENERATION OF LEADERS, ALLOWED PARTICIPANTS TO EXPLORE A WIDE RANGE OF TOPICS INCLUDING DIFFERENT LEADERSHIP STYLES, THE HISTORY OF DISCRIMINATION, AND THE ROLE OF A COMMUNITY. THE PROGRAM INCLUDED A VISIT TO INSTITUTIONS SUCH AS THE

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 3,744,859.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and financial reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question number, Yes, No. Rows 22-38 covering various organizational requirements and schedules.

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

Table with 3 columns: Question number, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 17 regarding employee counts, tax returns, gross income, foreign accounts, prohibited transactions, and charitable contributions.

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 VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 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.		
	1a 21		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 20		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
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?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
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? If "Yes," provide the names and addresses on Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		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?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed CA
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records
TERRI SWETNAM, COO - (202) 223-6840
1819 L STREET NW, SUITE 200, WASHINGTON, DC 20036

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See 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.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) SUZANNE BASALLA PRESIDENT & CEO	40.00	X		X			333,542.	0.	31,752.	
(2) TERRI SWETNAM CHIEF OPERATING OFFICER	40.00			X			222,560.	0.	12,710.	
(3) FRED KATAYAMA EXECUTIVE VICE PRESIDENT	40.00				X		201,741.	0.	9,591.	
(4) DIANE HIROSHIMA HEAD OF SVJP PROGRAM	40.00				X		143,295.	0.	21,576.	
(5) WENDY ABE DIRECTOR, EXTERNAL RELATIO	40.00				X		127,990.	0.	7,775.	
(6) SHANE GRAVES DIRECTOR, PROGRAM DEVELOPMENT	40.00				X		112,703.	0.	22,570.	
(7) KATHY MATSUI CO-CHAIR	8.00	X		X			0.	0.	0.	
(8) SUSAN MORITA CO-CHAIR	8.00	X		X			0.	0.	0.	
(9) ANN TERANISHI SECRETARY	5.00	X		X			0.	0.	0.	
(10) EIICHIRO KUWANA TREASURER	5.00	X		X			0.	0.	0.	
(11) JOSHUA MOREY DIRECTOR	5.00	X		X			0.	0.	0.	
(12) KAZUHIRO GOMI DIRECTOR	5.00	X		X			0.	0.	0.	
(13) TODD GUILD DIRECTOR	5.00	X		X			0.	0.	0.	
(14) DAVID KENJI CHANG DIRECTOR	2.00	X					0.	0.	0.	
(15) SACHI HAMAI DIRECTOR	2.00	X					0.	0.	0.	
(16) YOH KAWANAMI DIRECTOR	2.00	X					0.	0.	0.	
(17) BRAD MIYAKE DIRECTOR	2.00	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) ANDREW OGAWA DIRECTOR	2.00	X						0.	0.	0.
(19) MARK OKADA DIRECTOR	2.00	X						0.	0.	0.
(20) YOKO OTANI DIRECTOR	2.00	X						0.	0.	0.
(21) CURTISS ROOKS DIRECTOR	2.00	X						0.	0.	0.
(22) MASAMI TYSON DIRECTOR	2.00	X						0.	0.	0.
(23) TERRY SUZUKI DIRECTOR	2.00	X						0.	0.	0.
(24) RONA TISON DIRECTOR	2.00	X						0.	0.	0.
(25) MINORU TSUMURA DIRECTOR	2.00	X						0.	0.	0.
(26) WILLIAM TSUTSUI DIRECTOR	2.00	X						0.	0.	0.
1b Subtotal								1,141,831.	0.	105,974.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								1,141,831.	0.	105,974.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 6

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
WESTIN HOTELS 99 9TH ST NW, WASHINGTON, DC 20001	ANNUAL CONFERENCE LODGING & FOOD	500,000.
THE RITZ CARLTON, 1 MIRA MONTES POINT RD, HALF MOON BAY, CA 94019	SVJP ANNUAL RETREAT LODGING & FOOD	424,107.
GLOBAL SEED 5523 MCMILLAN ST 0, OAKLAND, CA 94618	PROGRAM IMPLEMENTER FEES	154,798.
THE WASHINGTON CENTER 1005 3RD ST, NE, WASHINGTON, DC 20002	PROGRAM IMPLEMENTER FEES	119,967.
CHILDREN'S NATIONAL MEDICAL SYSTEM 111 MICHIGAN AVE NW, WASHINGTON, DC 20010	TOMODACHI J&J DISASTER NURSING TRA	110,375.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 6

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	82,830.			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	1,970,000.			
	g	Noncash contributions included in lines 1a-1f	1g	\$			
	h	Total. Add lines 1a-1f		2,052,830.			
Program Service Revenue	2 a	PROGRAM ACTIVITIES	Business Code				
			611710	2,947,773.	2,947,773.		
	b						
	c						
	d						
	e						
	f	All other program service revenue					
g	Total. Add lines 2a-2f		2,947,773.				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		893,913.		893,913.	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross rents	6a	(i) Real			
				(ii) Personal			
	b	Less: rental expenses	6b				
	c	Rental income or (loss)	6c				
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	7a	(i) Securities			
				(ii) Other			
					1,643,520.		
	b	Less: cost or other basis and sales expenses	7b	2,076,095.			
	c	Gain or (loss)	7c	-432,575.			
d	Net gain or (loss)		-432,575.		-432,575.		
8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a					
b	Less: direct expenses	8b					
c	Net income or (loss) from fundraising events						
9 a	Gross income from gaming activities. See Part IV, line 19	9a					
b	Less: direct expenses	9b					
c	Net income or (loss) from gaming activities						
10 a	Gross sales of inventory, less returns and allowances	10a					
b	Less: cost of goods sold	10b					
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue	11 a	ADMINISTRATIVE FEES	Business Code	561000	2,000.	2,000.	
	b	FOREIGN EXCHANGE LOSS		561499	-1,357.	-1,357.	
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d			643.		
12	Total revenue. See instructions			5,462,584.	2,949,773.	0.	
						459,981.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	160,511.	160,511.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	305,586.	305,586.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	600,564.	317,041.	175,284.	108,239.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,407,613.	743,086.	410,835.	253,692.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	84,834.	44,784.	24,760.	15,290.
9 Other employee benefits	132,434.	69,913.	38,653.	23,868.
10 Payroll taxes	142,132.	75,032.	41,484.	25,616.
11 Fees for services (nonemployees):				
a Management				
b Legal	150.	74.	76.	
c Accounting	145,568.	71,797.	73,466.	305.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	52,895.		52,895.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	183,863.	89,624.	93,840.	399.
12 Advertising and promotion				
13 Office expenses	226,983.	143,597.	73,758.	9,628.
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	1,136,805.	1,095,791.	19,322.	21,692.
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	5,679.	4,037.	1,131.	511.
23 Insurance	26,302.	18,228.	5,795.	2,279.
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.)				
a PROGRAM IMPLEMENTATION	595,713.	595,713.	0.	0.
b BANK AND OTHER FEES	41,386.	10,045.	20,262.	11,079.
c _____				
d _____				
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	5,249,018.	3,744,859.	1,031,561.	472,598.
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	6,942,240.	1	3,847,592.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	326,612.	3	801,358.
	4 Accounts receivable, net		4	
	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	20,227.	9	200,047.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 181,451.		
	b Less: accumulated depreciation	10b 181,451.	10c 970.	0.
	11 Investments - publicly traded securities	21,011,083.	11	25,774,526.
	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	287,133.	15	603,214.
16 Total assets. Add lines 1 through 15 (must equal line 33)	28,588,265.	16	31,226,737.	
Liabilities	17 Accounts payable and accrued expenses	275,573.	17	259,066.
	18 Grants payable		18	
	19 Deferred revenue	275,000.	19	100,000.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		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	309,998.	25	240,685.
	26 Total liabilities. Add lines 17 through 25	860,571.	26	599,751.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	2,654,235.	27	2,093,636.
	28 Net assets with donor restrictions	25,073,459.	28	28,533,350.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> 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	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	27,727,694.	32	30,626,986.
	33 Total liabilities and net assets/fund balances	28,588,265.	33	31,226,737.

Part 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	5,462,584.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,249,018.
3	Revenue less expenses. Subtract line 2 from line 1	3	213,566.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	27,727,694.
5	Net unrealized gains (losses) on investments	5	2,685,726.
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	30,626,986.

Part XII Financial Statements and Reporting

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

- 1 Accounting method used to prepare the Form 990: Cash 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?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

	Yes	No
1		
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2023)

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2315567.	1041145.	2011241.	578,100.	2052830.	7998883.
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	2315567.	1041145.	2011241.	578,100.	2052830.	7998883.
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)						3691389.
6 Public support. Subtract line 5 from line 4.						4307494.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	2315567.	1041145.	2011241.	578,100.	2052830.	7998883.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	47,471.	4,891.	543,289.	920,304.	893,913.	2409868.
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.)	7,645.	246,776.	19,219.	27,734.	643.	302,017.
11 Total support. Add lines 7 through 10						10710768.
12 Gross receipts from related activities, etc. (see instructions)					12	14,577,959.
13 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) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))	14	40.22 %
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	38.88 %
16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
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		<input type="checkbox"/>

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

Table with 7 columns: (a) 2019, (b) 2020, (c) 2021, (d) 2022, (e) 2023, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2019, (b) 2020, (c) 2021, (d) 2022, (e) 2023, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on; 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.); 13 Total support.

14 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) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Row 15: Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2022 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 2 columns: Line number, Percentage. Row 17: Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2022 Schedule A, Part III, line 17 18 %

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 is not more than 33 1/3%, check this box and stop here. The organization qualifies 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 qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b 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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
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>		
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>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
b 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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? Row 2: Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? Row 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?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). **See instructions.**
 All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(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 (<i>explain in detail in Part VI</i>):		
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	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2023 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions 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			
b From 2019			
c From 2020			
d From 2021			
e From 2022			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2023 distributable amount			
i Carryover from 2018 not applied (see instructions)			
j 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			
b Applied to 2023 distributable amount			
c 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			
b Excess from 2020			
c Excess from 2021			
d Excess from 2022			
e Excess from 2023			

Schedule A (Form 990) 2023

Part VI

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

Multiple horizontal lines for supplemental information.

Schedule A

**Identification of Excess Contributions
Included on Part II, Line 5**

2023

**** Do Not File ****

***** Not Open to Public Inspection *****

Contributor's Name	Total Contributions	Excess Contributions
APAMANSHOP HOLDINGS CO., LTD.	1,000,000.	785,785.
EAST JAPAN RAILWAY COMPANY	600,000.	385,785.
FAST RETAILING CO., LTD	300,000.	85,785.
JAPAN POST CO., LTD.	300,000.	85,785.
METLIFE	227,764.	13,549.
MITSUI FUDOSAN CO., LTD.	799,990.	585,775.
MORGAN STANLEY	1,000,000.	785,785.
NEC CORPORATION	325,000.	110,785.
NORTHROP GRUMMAN	445,000.	230,785.
SHINKIN CENTRAL BANK	300,000.	85,785.
THE BOEING COMPANY	750,000.	535,785.
Total Excess Contributions to Schedule A, Part II, Line 5		3,691,389.

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Name of the organization

U.S. - JAPAN COUNCIL

Employer identification number

90-0447211

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2023)

Name of organization U.S. - JAPAN COUNCIL	Employer identification number 90-0447211
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	THE PRUDENTIAL FOUNDATION 751 BROAD STREET NEWARK, NJ 07102	\$ 500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	MORGAN STANLEY 1585 BROADWAY NEW YORK, NY 10036	\$ 500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	BOEING COMPANY 1-6-6 MARUNOUCHI 20TH FLOOR CHIYODA-KU, TOKYO, JAPAN 100-0005	\$ 300,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	APAMAN 3F, ASAHI SEIMEI OHTEMACHI BUILDING 2-6-1 OHTEMACHI CHIYODA, TOKYO, JAPAN 100-0004	\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	EAST JAPAN RAILWAY COMPANY 2-2-2 YOYOGI SHIBUYA-KU, TOKYO, JAPAN 151-8578	\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	USJC - JAPAN NEW OTANI GARDEN COURT 12F, 41 KIOICHO CHIYODA-KU, TOKYO, JAPAN 108-8001	\$ 175,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization U.S. - JAPAN COUNCIL	Employer identification number 90-0447211
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	NORTHROP GRUMMAN PRUDENTIAL TOWER 3F, 2-13-10 NAGATA-CHO CHIYODA-KU, TOKYO, JAPAN 100-0014	\$ 165,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	NEC CORPORATION 5-7-1, SHIBA MINATO-KU MINATO-KU, TOKYO, JAPAN 108-8001	\$ 125,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	WOVEN PLANET HOLDINGS INC 2 PALO ALTO SQUARE PALO ALTO, CA 94306	\$ 125,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	SANSEI TECHNOLOGIES, INC. 3-29, MIYAHARA 4-CHOME YODAGAWA, TOKYO, JAPAN	\$ 105,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	SHINKIN CHUKIN 8-1 KYOBASHI 3 CHO-ME CHUO, TOKYO, JAPAN 104-0031	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	FAST RETAILING CO, LTD MIDTOWN TOWER, 9-7-1 AKASAKA MINATO-KU, TOKYO, JAPAN 107-6231	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization U.S. - JAPAN COUNCIL	Employer identification number 90-0447211
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	JAPAN POST CO, LTD 2-3-1 OTEMACHI CHIYODA-KU, TOKYO, JAPAN 100-8792	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	CHARITIES AID FOUNDATION AMERICA/DOW 225 REINEKERS LANE, SUITE 375 ALEXANDRIA, VA 22314-2840	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
15	CHEVRON 600 13TH STREET NW, SUITE 600 WASHINGTON, DC 20005	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
16	SERVICENOW INC 2225 LAWSON LANE SANTA CLARA, CA 95054	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
17	CENTRAL PACIFIC BANK 220 S. KING ST., P.O. BOX 3590 HONOLULU, HI 96811	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
18	DAIKIN US CORPORATION 475 5TH AVENUE, FL 21 NEW YORK, NY 10017	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization U.S. - JAPAN COUNCIL	Employer identification number 90-0447211
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	TOYOTA RESEARCH INSITUTE 4440 EL CAMINO REAL LOS ALTOS, CA 94022	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
20	DELOITTE 111 S. WACKER DRIVE CHICAGO, MI 60606	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
21	HITACHI 1-6-6, MARUNOUCHI CHIYODA-KU, TOKYO, JAPAN 100-8280	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
22	TERASAKI NIBEI FOUNDATION. TIT LE SPONSORSHIP 1018 WESTWOOD BLVD LOS ANGELES, CA 90024	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
23	TOSHIZO WATANABE FOUNDATION C/O NIKKEN, 18301 VON KARMAN AVE UNIT 120 IRVINE, CA 92612	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
24	ORIX CORPORATION USA 1717 MAIN STREET, SUITE 1100 DALLAS, TX 75201	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization U.S. - JAPAN COUNCIL	Employer identification number 90-0447211
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	<u>EIICHIRO KUWANA</u> <u>2 SOUND VIEW DRIVE, 2ND FLOOR</u> <u>GREENWICH, CT 06830</u>	\$ <u>50,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
26	<u>CONSULATE GENERAL OF JAPAN</u> <u>350 S. GRAND AVENUE, SUITE 1700</u> <u>LOS ANGELES, CA 90071</u>	\$ <u>45,229.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
27	<u>DEPARTMENT OF TREASURY (EMPLOYEE RETENTION CREDIT)</u> <u>1500 PENNSYLVANIA AVE, NW</u> <u>WASHINGTON, DC 20220</u>	\$ <u>82,830.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization U.S. - JAPAN COUNCIL	Employer identification number 90-0447211
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization U.S. - JAPAN COUNCIL	Employer identification number 90-0447211
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization U.S. - JAPAN COUNCIL Employer identification number 90-0447211

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, a table for lines 2a-2d (Total number, acreage, certified historic structures, and non-certified historic structures), and questions about monitoring, expenses, and reporting requirements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions about reporting requirements for art and historical treasures, and a table for revenue and assets included.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2023

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | 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 Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	20,535,945.	14,624,575.	13,832,161.	11,740,751.	10,400,218.
b Contributions	119.	10,000,000.			
c Net investment earnings, gains, and losses	3,037,921.	-3,193,165.	974,143.	2,237,821.	1,771,873.
d Grants or scholarships		646,934.	154,470.	105,773.	385,315.
e Other expenditures for facilities and programs		168,434.			
f Administrative expenses	595,864.	80,097.	27,259.	18,666.	67,997.
g End of year balance	22,978,121.	20,535,945.	14,624,575.	13,832,161.	11,740,751.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____%
 - b Permanent endowment 87.0400 %
 - c Term endowment 12.9600 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|-----|----|
| (i) Unrelated organizations? | | X |
| (ii) Related organizations? | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

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 value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		142,109.	142,109.	0.
e Other		39,342.	39,342.	0.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				0.

Part VII Investments - Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) OPERATING LEASE LIABILITY	231,526.
(3) FINANCE LEASE LIABILITY	9,159.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	240,685.

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 ...

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	8,187,334.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a 2,685,726.		
b	Donated services and use of facilities	2b 91,919.		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	2,777,645.
3	Subtract line 2e from line 1		3	5,409,689.
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 52,895.		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	52,895.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	5,462,584.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	5,288,042.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a 91,919.		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	91,919.
3	Subtract line 2e from line 1		3	5,196,123.
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 52,895.		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	52,895.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	5,249,018.

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.

PART X, LINE 2:

USJC REQUIRES THAT A TAX POSITION BE RECOGNIZED OR DERECOGNIZED BASED ON A "MORE-LIKELY-THAN-NOT" THRESHOLD. THIS APPLIES TO POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. USJC DOES NOT BELIEVE ITS FINANCIAL STATEMENTS INCLUDE, OR REFLECT, ANY UNCERTAIN TAX POSITIONS.

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)
		EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA,	PROGRAM IMPLEMENTER FOR SOFTBANK	17,648.		0.		
		EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA,	PRINTING OF PROGRAM BOOKLET	13,316.		0.		
		EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA,	TO IMPLEMENT THE TOSHIZO WATANABE LEADERSHIP PROGRAM	188,000.		0.		
		EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA,	WATANABE SCHOLARSHIP	9,000.		0.		
		EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA,	PROGRAM IMPLEMENTER FOR PRUDENTIAL; TRAVEL ARRANGEMENTS FOR PARTICIPANTS	13,340.		0.		
		EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA,	TRANSLATION SERVICES FOR ELP INITIATIVE	10,649.		0.		
		EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA,	WATANABE SCHOLARSHIP	8,500.		0.		
		EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA,	WATANABE SCHOLARSHIP	9,000.		0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA,	WATANABE SCHOLARSHIP	7,000.		0.		
		EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA,	WATANABE SCHOLARSHIP	7,000.		0.		
		EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA,	WATANABE SCHOLARSHIP	9,000.		0.		

Part IV Foreign Forms

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

Schedule F (Form 990) 2023

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:

AWARD/ASSISTANCE MONITORING PROCESS:

1) EACH IMPLEMENTING ORGANIZATION IS REQUIRED TO MAINTAIN PROGRAM AND FINANCIAL INFORMATION AS PER THE AGREEMENT.

2) EACH ORGANIZATION IS REQUIRED TO MAINTAIN THE GRANT FUNDS IN A SEPARATE ACCOUNT, OR SPECIFIC PROGRAM CODE ON THE IMPLEMENTER'S FINANCIAL RECORDS.

3) EACH ORGANIZATION IS REQUIRED TO SUBMIT AN INTERIM AND FINAL REPORT WHICH INCLUDES A WRITTEN NARRATIVE, FINANCIAL REPORT INCLUDING COMPLIANCE WITH THE GRANT TERMS AND A SUMMARY OF THE IMPACT WHICH RESULTED FROM THE PROJECT.

4) THE USJC USES A RANDOM SAMPLING TO REVIEW SELECT EXPENDITURES. DOCUMENTATION OF EXPENSE AUTHORIZATIONS AND COMPLIANCE WITH THE BUDGET AND ITEMS IN THE GRANT AGREEMENTS ARE REVIEWED. IF ANY DISCREPANCIES ARE FOUND, USJC STAFF WILL DISCUSS THE RESULTS WITH THE IMPLEMENTER, AND IF NECESSARY, CORRECTIVE ACTION (INCLUDING RETURN OF FUNDS) MAY BE TAKEN.

PART II, COLUMN (D):

REGION: EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA,

(D) PURPOSE OF GRANT: PROGRAM IMPLEMENTER FOR SOFTBANK; TRAVEL ARRANGEMENTS FOR PARTICIPANTS IN THE PROGRAM

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization **U.S.- JAPAN COUNCIL** Employer identification number **90-0447211**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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 grant or assistance
AMERICAN UNIVERSITY STUDENT ACCOUNTS - 4400 MASSACHUSETTS AVE NW - WASHINGTON, DC 20016	53-0196549	501(C)(3)	7,000.	0.			WATANABE SCHOLARSHIP
COLORADO SCHOOL OF MINES 1500 ILLINOIS ST GOLDEN, CO 80401	84-6000551	501(C)(3)	7,600.	0.			WATANABE SCHOLARSHIP
DENISON UNIVERSITY 100 W COLLEGE ST GRANVILLE, OH 43023	31-4379459	501(C)(3)	14,000.	0.			WATANABE SCHOLARSHIP
DEPAUW UNIVERSITY P.O. BOX 37 GREENCASTLE, IN 46135-0037	35-0869045	501(C)(3)	8,000.	0.			WATANABE SCHOLARSHIP
GRINNELL COLLEGE 1115 8TH AVE GRINNELL, IA 50112	42-0680387	501(C)(3)	8,000.	0.			WATANABE SCHOLARSHIP
SAN FRANCISCO STATE UNIVERSITY 1600 HOLLOWAY AVE SAN FRANCISCO, CA 94132	94-1384645	501(C)(3)	7,983.	0.			WATANABE SCHOLARSHIP

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table _____
- 3** Enter total number of other organizations listed in the line 1 table _____

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

Schedule I (Form 990) 2023

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule 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 non-cash assistance	(h) Purpose of grant or assistance
ST EDWARDS UNIVERSITY 3001 S. CONGRESS AVE AUSTIN , TX 78704	74-1109641	501(C)(3)	6,800.	0.			WATANABE SCHOLARSHIP
THE UNIVERSITY OF CHICAGO 1101 E. 58TH ST CHICAGO, IL 60637	36-2177139	501(C)(3)	9,000.	0.			WATANABE SCHOLARSHIP
UC DAVIS FINANCIAL AID 1 SHIELDS AVE DAVIS, CA 95616	94-6036494	501(C)(3)	9,000.	0.			WATANABE SCHOLARSHIP
UNIVERSITY OF CALIFORNIA, BERKELEY UNIVERSITY AVE AND OXFORD ST BERKELEY, CA 94720	94-6002123	501(C)(3)	10,000.	0.			WATANABE SCHOLARSHIP
UNIVERSITY OF CALIFORNIA, SAN DIEGO - 9500 GILMAN DR - LA JOLLA, CA 92093	95-6006144	501(C)(3)	15,000.	0.			WATANABE SCHOLARSHIP
UNIVERSITY OF CONNECTICUT 241 GLENBROOK RD STORRS, CO 06269-4175	06-0772160	501(C)(3)	8,000.	0.			WATANABE SCHOLARSHIP
UNIVERSITY OF MASSACHUSETTS 100 MORRISSEY BLVD BOSTON, MA 02125	04-3167352	501(C)(3)	9,463.	0.			WATANABE SCHOLARSHIP
UNIVERSITY OF NC WILMINGTON 601 COLLEGE RD WILMINGTON, NC 28403	56-1258660	501(C)(3)	11,000.	0.			WATANABE SCHOLARSHIP
UNIVERSITY OF TOLEDO 2801 BANCROFT ST TOLEDO, OH 43606	34-6401483	501(C)(3)	8,000.	0.			WATANABE SCHOLARSHIP

Schedule I (Form 990)

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

U.S. - JAPAN COUNCIL

Employer identification number

90-0447211

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a		
1b		
2		
3		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2023

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) SUZANNE BASALLA PRESIDENT & CEO	(i)	288,542.	45,000.	0.	19,800.	11,952.	365,294.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) TERRI SWETNAM CHIEF OPERATING OFFICER	(i)	216,600.	5,960.	0.	12,009.	701.	235,270.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) FRED KATAYAMA EXECUTIVE VICE PRESIDENT	(i)	201,241.	500.	0.	9,066.	525.	211,332.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) DIANE HIROSHIMA HEAD OF SVJP PROGRAM	(i)	130,095.	13,200.	0.	8,682.	12,894.	164,871.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**SCHEDULE O
(Form 990)**

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

2023

Open to Public
Inspection

Name of the organization

U.S.- JAPAN COUNCIL

Employer identification number

90-0447211

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

RELATIONSHIP. FOUNDED BY JAPANESE AMERICANS, THE COUNCIL BRINGS
TOGETHER LEADERS OF THE UNITED STATES AND JAPAN FROM ACROSS
BACKGROUND, SECTORS AND GENERATIONS TO PARTNER FOR A BETTER FUTURE FOR
THE ASIA-PACIFIC REGION AND BEYOND.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

FUTURE FOR THE ASIA-PACIFIC REGION AND BEYOND.

THE PURPOSE OF THE COUNCIL IS TO FOSTER A UNIQUE COMMUNITY THAT BRINGS
TOGETHER JAPANESE AMERICAN AND OTHER LEADERS OF THE UNITED STATES AND
JAPAN, STRENGTHENING TIES BETWEEN THE TWO COUNTRIES. USJC BRINGS
TOGETHER A NETWORK OF DIVERSE LEADERS ACROSS SECTORS FOR MEANINGFUL
COLLABORATION, CREATING DEEP AND LASTING RELATIONSHIPS. IT DEVELOPS
THE NEXT GENERATION OF LEADERS BY OFFERING LIFE-CHANGING EXPERIENCES
THAT INSPIRE PARTICIPANTS TO CONTRIBUTE TO A STRONGER U.S.-JAPAN
RELATIONSHIP; AND IT BELIEVES IN SERVICE AND IS COMMITTED TO ACTION IN
AREAS WHERE MULTICULTURAL PERSPECTIVES AND EXPERIENCES CAN MAKE A
DIFFERENCE.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

ISSUES IN THE INDO-PACIFIC REGION. LEADERS ACROSS INDUSTRIES,
BACKGROUND AND GENERATIONS INSTIGATED SOLUTION-FOCUSED DISCUSSIONS ON
KEY ISSUES, WITH A SPECIAL EMPHASIS ON SUSTAINABILITY, DIVERSITY AND
STRENGTHENING BILATERAL TIES.

CLIMATE AND SUSTAINABILITY INITIATIVE - USJC'S KEY INITIATIVE

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2023

LHA 332211 11-14-23

Name of the organization U.S.- JAPAN COUNCIL	Employer identification number 90-0447211
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SPOTLIGHTS THE CLIMATE CRISIS, CONVENING LEADERS AND CHANGE MAKERS TO SHARE STRATEGIES AND TAKE ACTION. IN MARCH, USJC PARTNERED WITH THE U.S. EMBASSY IN TOKYO TO HOST A ROUNDTABLE DIALOGUE ON "MEETING THE TWIN CHALLENGES OF CLIMATE CHANGE AND ENERGY SECURITY THROUGH METHANE MITIGATION." LATER IN MARCH, USJC PARTNERED WITH RICE UNIVERSITY TO HOST AN EVENT TO CONNECT THE YOUNGER GENERATION AND LEARN HOW LOCAL JAPANESE COMPANIES ARE MOVING TOWARD GREENER BUSINESS PRACTICES. IN APRIL, USJC HOSTED A FIRESIDE CHAT IN WASHINGTON, DC WITH SEC COMMISSIONER MARK UYEDA, WHICH TOUCHED ON CLIMATE RULES AMONG OTHER TOPICS. FROM JUNE TO SEPTEMBER, USJC HELD THREE WEBINARS ON JAPAN'S RENEWABLE ENERGY FUTURE, SUSTAINABILITY DISCLOSURES, AND NATURE-BASED SOLUTIONS. IN JULY, USJC COLLABORATED WITH THE JAPAN SOCIETY OF NORTHERN CALIFORNIA TO HOLD A PANEL AND RECEPTION IN SAN FRANCISCO ON GREEN ENERGY COLLABORATION. IN OCTOBER, USJC COLLABORATED WITH GEODESIC CAPITAL AND MITSUBISHI CORPORATION TO HOLD AN ENERGY TRANSFORMATION STARTUP SHOWCASE IN TOKYO. IN NOVEMBER, USJC CONVENED ANOTHER IN-PERSON SUSTAINABILITY ROUNDTABLE AT ITS ANNUAL CONFERENCE IN WASHINGTON, DC, WHERE DOZENS OF JAPANESE AND AMERICAN LEADERS FROM VARIOUS SECTORS DISCUSSED SUSTAINABILITY AND CLIMATE FINANCING AND DISCLOSURES, AND HYDROGEN HUBS. A NUMBER OF OTHER SESSIONS AT THE ANNUAL CONFERENCE ALSO TOUCHED ON CLIMATE AND SUSTAINABILITY ISSUES.

JAPANESE AMERICAN LEADERSHIP DELEGATION PROGRAM (JALD) - TEN JAPANESE AMERICAN LEADERS TRAVELED TO JAPAN FROM MARCH 3 TO 11 FOR THE 2023 JAPANESE AMERICAN LEADERSHIP DELEGATION (JALD) PROGRAM. ORGANIZED BY THE U.S.-JAPAN COUNCIL AND SPONSORED BY JAPAN'S MINISTRY OF FOREIGN AFFAIRS, THE JALD PROGRAM AIMS TO STRENGTHEN THE U.S.-JAPAN RELATIONSHIP BY FACILITATING PEOPLE-TO-PEOPLE CONNECTIONS BETWEEN PROMINENT JAPANESE AMERICAN AND JAPANESE LEADERS. THIS YEAR'S TRIP,

Name of the organization U.S.- JAPAN COUNCIL	Employer identification number 90-0447211
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WHICH MARKED THE 20TH DELEGATION SINCE THE PROGRAM'S INCEPTION IN 2000, BROUGHT DELEGATES TO TOKYO AND SHIZUOKA TO MEET WITH TOP GOVERNMENT, BUSINESS, NON-PROFIT AND OTHER NOTABLE JAPANESE LEADERS.

EMERGING LEADERS PROGRAM (ELP) - ELP IDENTIFIES, CULTIVATES AND EMPOWERS A NEW GENERATION OF JAPANESE AMERICAN LEADERS. IN ITS 14TH YEAR, THE 2023 PROGRAM BROUGHT TOGETHER 11 JAPANESE AMERICAN YOUNG PROFESSIONALS AT THE USJC ANNUAL CONFERENCE IN WASHINGTON, DC. THE COHORT EXPLORED ISSUES OF LEADERSHIP AND IDENTITY WHILE MAKING VALUABLE CONNECTIONS AND FULLY EXPERIENCING THE CONFERENCE. NEARLY 60 PROGRAM ALUMNI ALSO ATTENDED AND WELCOMED THE NEW CLASS. THROUGHOUT THE YEAR, ALUMNI, LED BY THE ELP STEERING COMMITTEE, CREATED OPPORTUNITIES FOR MEMBERS OF THE COMMUNITY TO CONNECT WITH EACH OTHER, INCLUDING THE KAIWA PROGRAM SERIES ON NON-PROFIT SUSTAINABILITY.

WOMEN IN LEADERSHIP - USJC ORGANIZED SEVERAL VIRTUAL PROGRAMS TO SUPPORT ADVANCEMENT OF WOMEN'S LEADERSHIP IN THE UNITED STATES AND JAPAN.

MEMBERSHIP ACTIVITIES - THE USJC CONVENED ACTIVITIES IN 12 REGIONS THAT PROVIDE OPPORTUNITIES FOR JAPANESE AND AMERICANS TO COME TOGETHER FOR NETWORKING AND EDUCATIONAL EVENTS THAT INCLUDED SPEAKERS ON VARIOUS TOPICS. REGIONAL NETWORKS ALSO PROVIDE POTENTIAL COLLABORATION WITHIN AND BETWEEN 12 REGIONS LOCATED IN THE UNITED STATES AND JAPAN. IN 2023, USJC REGIONS HOSTED 130 MEETINGS AND EVENTS AND THE COUNCIL CONVENED A NUMBER OF AFFINITY GROUP GATHERINGS. THE IN-PERSON MEMBERS FORUM IN WASHINGTON DC ON NOVEMBER 2023 HOSTED NEARLY 300 MEMBERS AND SUPPORTERS. THE COUNCIL CURRENTLY HAS 896 MEMBERS.

GOVERNMENT BRIEFINGS - USJC HOLDS SEVERAL GOVERNMENT BRIEFINGS EACH YEAR FOR TOP TIER SPONSORS AND INVITED GUESTS. THE IN-PERSON AND HYBRID EVENTS FEATURE KEY POLICY MAKERS IN AN INTIMATE FIRESIDE CHAT FORMAT

Name of the organization U.S.- JAPAN COUNCIL	Employer identification number 90-0447211
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DISCUSSING WHAT WENT ON BEHIND THE HEADLINES IMPACTING U.S.-JAPAN RELATIONS. PAST SPEAKERS INCLUDE DEPUTY TREASURY SECRETARY WALLY ADEYEMO, U.S. REP. MARK TAKANO AND JILL TOKUDA, THEN NATIONAL SECURITY COUNCIL EAST ASIA DIRECTOR CHRISTOPHER JOHNSTONE AND SEC COMMISSIONER MARK UYEDA.

COMMUNICATIONS - USJC MAINTAINS AN INFORMATIVE WEBSITE AND SOCIAL MEDIA PRESENCE IN ENGLISH AND JAPANESE PROVIDING INFORMATION ON PROGRAMS, MEMBER NEWS, CURRENT EVENTS AND IMPORTANT U.S.-JAPAN TOPICS. USJC PUTS OUT A NEWSLETTER THAT INFORMS SPONSORS ABOUT THE KEY POINTS MADE BY SPEAKERS IN ITS GOVERNMENT BRIEFING SERIES. USJC ALSO PUBLISHES A BI-WEEKLY ELECTRONIC NEWSLETTER AND ISSUES REGULAR PRESS RELEASES ABOUT PROGRAMS AND EVENTS IN JAPAN AND THE SILICON VALLEY.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: UNIVERSITY OF CALIFORNIA LOS ANGELES (UCLA), THE TERASAKI INSTITUTE, CALIFORNIA INSTITUTE OF TECHNOLOGY, JAPANESE AMERICAN NATIONAL MUSEUM (JANM), AND HOLOCAUST MUSEUM LA, AMONG MANY OTHER PLACES.

WATANABE ENDOWED SCHOLARSHIPS - THE PROGRAM PROVIDES FINANCIAL ASSISTANCE TO UNDERGRADUATE AND GRADUATE STUDENTS FOR A SEMESTER OR YEAR-LONG STUDY ABROAD PROGRAM. DUE TO THE PANDEMIC, SOME OF THE SCHOLARSHIPS WERE UNABLE TO BE REALIZED OR WERE DEFERRED. ON-LINE LEADERSHIP PROGRAMMING WAS MADE AVAILABLE TO THE SCHOLARS TO SUPPLEMENT THEIR SCHOOLING.

FORM 990, PART VI, SECTION B, LINE 11B: COPIES OF THE FORM 990 WERE DISTRIBUTED TO ALL BOARD MEMBERS PRIOR TO FILING. A DETAILED REVIEW AND APPROVAL WAS CONDUCTED BY A COMMITTEE SELECTED BY THE BOARD.

Name of the organization U.S.- JAPAN COUNCIL	Employer identification number 90-0447211
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FORM 990, PART VI, SECTION B, LINE 12C:

THE ORGANIZATION HAS A CONFLICT OF INTEREST POLICY THAT IS SIGNED ANNUALLY BY EACH BOARD MEMBER. A SUMMARY REPORT IS SUBMITTED TO THE BOARD OF DIRECTORS ANNUALLY FOR REVIEW AND APPROVAL.

FORM 990, PART VI, SECTION B, LINE 15:

COMPENSATION IS DETERMINED BY DISINTERESTED DIRECTORS OF THE EXECUTIVE COMMITTEE AND IS BASED ON A REVIEW OF RELIABLE COMPARABILITY DATA AND A DECISION AS THE REASONABLENESS OF THE COMPENSATION. A RECORD OF THE DELIBERATION, DECISION AND PERSONS INVOLVED ARE MAINTAINED IN THE ORGANIZATION'S CORPORATE MINUTE BOOK.

FORM 990, PART VI, SECTION C, LINE 19:

THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE GENERAL PUBLIC UPON REQUEST. THESE DOCUMENTS ARE ALSO AVAILABLE AT THE ORGANIZATION'S OFFICE DURING REGULAR BUSINESS HOURS. THE AUDITED FINANCIAL STATEMENTS ARE POSTED ON THE ORGANIZATION'S WEBSITE EACH YEAR.

FORM 990, PART XII, LINE 2C:

THE PROCESS HAS NOT CHANGED FROM PRIOR YEARS.

Part V Detailed Information for Each Foreign Deposit and Custodial Account Included in the Part I Summary

(see instructions)

If you have more than one account to report in Part V, attach a separate statement for each additional account. See instructions.

20 Type of account a [X] Deposit b [] Custodial 21 Account number or other designation 1134774
22 Check all that apply a [] Account opened during tax year b [] Account closed during tax year
c [] Account jointly owned with spouse d [X] No tax item reported in Part III with respect to this asset
23 Maximum value of account during tax year \$ 495,593.
24 Did you use a foreign currency exchange rate to convert the value of the account into U.S. dollars? [] Yes [X] No
25 If you answered "Yes" to line 24, complete all that apply.
(a) Foreign currency in which account is maintained (b) Foreign currency exchange rate used to convert to U.S. dollars
(c) Source of exchange rate used if not from U.S. Treasury Department's Bureau of the Fiscal Service
26a Name of financial institution in which account is maintained MUFU BANK, LTD. b Global Intermediary Identification Number (GIIN) (Optional)
27 Mailing address of financial institution in which account is maintained. Number, street, and room or suite no. 2-7-1, MARUNOUCHI, CHIYODA-KU
28 City or town, state or province, country, and ZIP or foreign postal code TOKYO JAPAN 100-8388

Part VI Detailed Information for Each "Other Foreign Asset" Included in the Part II Summary (see instructions)

If you have more than one asset to report in Part VI, attach a separate statement for each additional asset. See instructions.

29 Description of asset 30 Identifying number or other designation
31 Complete all that apply. See instructions for reporting of multiple acquisition or disposition dates.
a Date asset acquired during tax year, if applicable
b Date asset disposed of during tax year, if applicable
c [] Check if asset jointly owned with spouse d [] Check if no tax item reported in Part III with respect to this asset
32 Maximum value of asset during tax year (check box that applies)
a [] \$0 - \$50,000 b [] \$50,001 - \$100,000 c [] \$100,001 - \$150,000 d [] \$150,001 - \$200,000
e If more than \$200,000, list value \$
33 Did you use a foreign currency exchange rate to convert the value of the asset into U.S. dollars? [] Yes [] No
34 If you answered "Yes" to line 33, complete all that apply.
(a) Foreign currency in which asset is denominated (b) Foreign currency exchange rate used to convert to U.S. dollars
(c) Source of exchange rate used if not from U.S. Treasury Department's Bureau of the Fiscal Service
35 If asset reported on line 29 is stock of a foreign entity or an interest in a foreign entity, enter the following information for the asset.
a Name of foreign entity b GIIN (Optional)
c Type of foreign entity (1) [] Partnership (2) [] Corporation (3) [] Trust (4) [] Estate
d Mailing address of foreign entity. Number, street, and room or suite no.
e City or town, state or province, country, and ZIP or foreign postal code
36 If asset reported on line 29 is not stock of a foreign entity or an interest in a foreign entity, enter the following information for the asset.
Note: If this asset has more than one issuer or counterparty, attach a separate statement with the same information for each additional issuer or counterparty. See instructions.
a Name of issuer or counterparty
Check if information is for [] Issuer [] Counterparty
b Type of issuer or counterparty
(1) [] Individual (2) [] Partnership (3) [] Corporation (4) [] Trust (5) [] Estate
c Check if issuer or counterparty is a [] U.S. person [] Foreign person
d Mailing address of issuer or counterparty. Number, street, and room or suite no.
e City or town, state or province, country, and ZIP or foreign postal code

TAX RETURN FILING INSTRUCTIONS

CALIFORNIA FORM 199

FOR THE YEAR ENDING

December 31, 2023

Prepared For:

U.S.- Japan Council
1819 L Street, NW 200
Washington, DC 20036

Prepared By:

Councilor, Buchanan & Mitchell, P.C.
7910 Woodmont Ave. Ste. 500
Bethesda, MD 20814

To be Signed and Dated By:

Not applicable

Amount of Tax:

Total Tax	\$	0
Less: payments and credits	\$	0
Plus: other amount	\$	0
Plus: interest and penalties	\$	0
No payment is required	\$	

Overpayment:

Credited to your estimated tax	\$	0
Other amount	\$	0
Refunded to you	\$	0

Make Check Payable To:

Not applicable

Mail Tax Return and Check (if applicable) To:

This return has qualified for electronic filing. Please review the return for completeness and accuracy. We will then transmit your return electronically to the FTB. Do not mail the paper copy of the return to the FTB.

Return Must be Mailed On or Before:

Not applicable

Special Instructions:

California Exempt Organization Annual Information Return

Calendar Year 2023 or fiscal year beginning (mm/dd/yyyy) _____, and ending (mm/dd/yyyy) _____

Corporation/Organization name
U.S. - JAPAN COUNCIL

California corporation number
3182230

Additional information. See instructions.

FEIN
90-0447211

Street address (suite or room)
1819 L STREET, NW, NO. 200

PMB no.

City
WASHINGTON

State
DC

ZIP code
20036

Foreign country name

Foreign province/state/county

Foreign postal code

- A** First return Yes No
- B** Amended return Yes No
- C** IRC Section 4947(a)(1) trust Yes No
- D** Final information return?
 - Dissolved Surrendered (Withdrawn) Merged/Reorganized
 - Enter date: (mm/dd/yyyy) _____
- E** Check accounting method: (1) Cash (2) Accrual (3) Other
- F** Federal return filed? (1) 990T (2) 990PF (3) Sch H (990) (4) Other 990 series
- G** Is this a group filing? See instructions Yes No
- H** Is this organization in a group exemption Yes No
If "Yes," what is the parent's name? _____

- I** Did the organization have any changes to its guidelines not reported to the FTB? See instructions Yes No
- J** If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions. Yes No
- K** Is the organization exempt under R&TC Section 23701g? Yes No
If "Yes," enter the gross receipts from nonmember sources \$ _____
- L** Is the organization a limited liability company? Yes No
- M** Did the organization file Form 100 or Form 109 to report taxable income? Yes No
- N** Is the organization under audit by the IRS or has the IRS audited in a prior year? Yes No
- O** Is federal Form 1023/1024 pending? Yes No
Date filed with IRS _____

Part I Complete Part I unless not required to file this form. See General Information B and C.

Receipts and Revenues	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8	1	5,485,849	00
	2	Gross dues and assessments from members and affiliates	2		00
	3	Gross contributions, gifts, grants, and similar amounts received STMT 1	3	2,052,830	00
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. This line must be completed. If the result is less than \$50,000, see General Information B	4	7,538,679	00
	5	Cost of goods sold	5		00
	6	Cost or other basis, and sales expenses of assets sold	6	2,076,095	00
	7	Total costs. Add line 5 and line 6	7	2,076,095	00
	8	Total gross income. Subtract line 7 from line 4	8	5,462,584	00
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18	9	5,243,339	00
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10	219,245	00
Payments	11	Total payments	11		00
	12	Use tax. See General Information K	12		00
	13	Payments balance. If line 11 is more than line 12, subtract line 12 from line 11	13		00
	14	Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12	14		00
	15	Penalties and interest. See General Information J	15		00
	16	Balance due. Add line 12 and line 15. Then subtract line 11 from the result	16		00

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here
Signature of officer **COO** Title Date _____
• Telephone (202) 223-6840

Paid Preparer's Use Only
Preparer's signature **DANIEL L. WEAVER** Date **08/06/24** Check if self-employed
• PTIN P01249346

Firm's name (or yours, if self-employed) and address **COUNCILOR, BUCHANAN & MITCHELL, P.C.**
7910 WOODMONT AVE. STE. 500
BETHESDA, MD 20814
• Firm's FEIN 52-1711839

• Telephone (301) 986-0600

May the FTB discuss this return with the preparer shown above? See instructions Yes No

Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information.

SEE PART II SUBSTITUTE ATTACHMENT

Receipts from Other Sources	1	Gross sales or receipts from all business activities. See instructions	•	1		00	
	2	Interest	•	2		00	
	3	Dividends	•	3		00	
	4	Gross rents	•	4		00	
	5	Gross royalties	•	5		00	
	6	Gross amount received from sale of assets (See instructions)	•	6		00	
	7	Other income	•	7		00	
	8	Total gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1		8		00	
	9	Contributions, gifts, grants, and similar amounts paid	•	9		00	
	10	Disbursements to or for members	•	10		00	
	11	Compensation of officers, directors, and trustees	•	11		0 00	
	12	Other salaries and wages	•	12		00	
	Expenses and Disbursements	13	Interest	•	13		00
		14	Taxes	•	14		00
		15	Rents	•	15		00
		16	Depreciation and depletion (See instructions)	•	16		00
		17	Other expenses and disbursements	•	17		00
		18	Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9		18		00

Schedule L Balance Sheet	Beginning of taxable year			End of taxable year
	(a)	(b)	(c)	(d)
Assets				
1 Cash				•
2 Net accounts receivable				•
3 Net notes receivable				•
4 Inventories				•
5 Federal and state government obligations				•
6 Investments in other bonds				•
7 Investments in stock				•
8 Mortgage loans				•
9 Other investments				•
10 a Depreciable assets				
b Less accumulated depreciation				
11 Land				•
12 Other assets				•
13 Total assets				
Liabilities and net worth				
14 Accounts payable				•
15 Contributions, gifts, or grants payable				•
16 Bonds and notes payable				•
17 Mortgages payable				•
18 Other liabilities				
19 Capital stock or principal fund				•
20 Paid-in or capital surplus. Attach reconciliation				•
21 Retained earnings or income fund				•
22 Total liabilities and net worth				

Schedule M-1 Reconciliation of income per books with income per return			
Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$50,000.			
1 Net income per books	•	7 Income recorded on books this year not included in this return. Attach schedule	•
2 Federal income tax	•	8 Deductions in this return not charged against book income this year. Attach schedule	•
3 Excess of capital losses over capital gains	•	9 Total. Add line 7 and line 8	
4 Income not recorded on books this year. Attach schedule	•	10 Net income per return. Subtract line 9 from line 6	
5 Expenses recorded on books this year not deducted in this return. Attach schedule	•		
6 Total. Add line 1 through line 5			

CA 199

CASH CONTRIBUTIONS
INCLUDED ON PART I, LINE 3

STATEMENT 1

CONTRIBUTOR'S NAME	CONTRIBUTOR'S ADDRESS	DATE OF GIFT	AMOUNT
THE PRUDENTIAL FOUNDATION	751 BROAD STREET NEWARK, NJ 07102		500,000.
MORGAN STANLEY	1585 BROADWAY NEW YORK, NY 10036		500,000.
BOEING COMPANY	1-6-6 MARUNOUCHI 20TH FLOOR CHIYODA-KU, TOKYO, JAPAN 100-0005		300,000.
APAMAN	3F, ASAHI SEIMEI OHTEMACHI BUILDING 2-6-1 OHTEMACHI CHIYODA, TOKYO, JAPAN 10		250,000.
EAST JAPAN RAILWAY COMPANY	2-2-2 YOYOGI SHIBUYA-KU, TOKYO, JAPAN 151-8578		250,000.
USJC - JAPAN	NEW OTANI GARDEN COURT 12F, 41 KIOICHO CHIYODA-KU, TOKYO, JAPAN 108-8001		175,000.
NORTHROP GRUMMAN	PRUDENTIAL TOWER 3F, 2-13-10 NAGATA-CHO CHIYODA-KU, TOKYO, JAPAN 100-0014		165,000.
NEC CORPORATION	5-7-1, SHIBA MINATO-KU MINATO-KU, TOKYO, JAPAN 108-8001		125,000.
WOVEN PLANET HOLDINGS INC	2 PALO ALTO SQUARE PALO ALTO, CA 94306		125,000.
SANSEI TECHNOLOGIES, INC.	3-29, MIYAHARA 4-CHOME YODAGAWA, TOKYO, JAPAN		105,000.
SHINKIN CHUKIN	8-1 KYOBASHI 3 CHO-ME CHUO, TOKYO, JAPAN 104-0031		100,000.
FAST RETAILING CO, LTD	MIDTOWN TOWER, 9-7-1 AKASAKA MINATO-KU, TOKYO, JAPAN 107-6231		100,000.

U.S.- JAPAN COUNCIL90-0447211

JAPAN POST CO, LTD	2-3-1 OTEMACHI CHIYODA-KU, TOKYO, JAPAN 100-8792	100,000.
CHARITIES AID FOUNDATION AMERICA/DOW	225 REINEKERS LANE, SUITE 375 ALEXANDRIA, VA 22314-2840	100,000.
CHEVRON	600 13TH STREET NW, SUITE 600 WASHINGTON, DC 20005	100,000.
SERVICENOW INC	2225 LAWSON LANE SANTA CLARA, CA 95054	100,000.
CENTRAL PACIFIC BANK	220 S. KING ST., P.O. BOX 3590 HONOLULU, HI 96811	50,000.
DAIKIN US CORPORATION	475 5TH AVENUE, FL 21 NEW YORK, NY 10017	50,000.
TOYOTA RESEARCH INSITUTE	4440 EL CAMINO REAL LOS ALTOS, CA 94022	50,000.
DELOITTE	111 S. WACKER DRIVE CHICAGO, MI 60606	50,000.
HITACHI	1-6-6, MARUNOUCHI CHIYODA-KU, TOKYO, JAPAN 100-8280	50,000.
TERASAKI NIBEI FOUNDATION. TIT LE SPONSORSHIP	1018 WESTWOOD BLVD LOS ANGELES, CA 90024	50,000.
TOSHIZO WATANABE FOUNDATION	C/O NIKKEN, 18301 VON KARMAN AVE UNIT 120 IRVINE, CA 92612	50,000.
ORIX CORPORATION USA	1717 MAIN STREET, SUITE 1100 DALLAS, TX 75201	50,000.
EIICHIRO KUWANA	2 SOUND VIEW DRIVE, 2ND FLOOR GREENWICH, CT 06830	50,000.
CONSULATE GENERAL OF JAPAN	350 S. GRAND AVENUE, SUITE 1700 LOS ANGELES, CA 90071	45,229.
DEPARTMENT OF TREASURY (EMPLOYEE RETENTION CREDIT)	1500 PENNSYLVANIA AVE, NW WASHINGTON, DC 20220	82,830.
TOTAL INCLUDED ON LINE 3		<u>3,673,059.</u>