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CIS52Y968R

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047
2009
Open to Public
Inspection

		reme Service									inspection	
Name of the organization Employer identification number 51. INCENT DEPOL CONTELENCY (35/19636												
Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.												
The	org	nization is no	ot a private foun	dation because it is:	(For lines	1 throug	jh 11, chi	eck only	one box.))		
1	X	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).										
2	ñ	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)										
3	П	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).										
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state										
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)										
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
7		An organization that normally receives a substantial part of its support from a governmental unit or from the general public									he general public	
	described in section 170(b)(1)(A)(vi). (Complete Part II.)											
8	П	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)										
9	The regularity from the records (1) more than box to draw adopter from contributions, membership rees, a										p fees, and gross	
	receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33/3/9											
support from gross investment income and unrelated business taxable income (less section 511 tax) acquired by the organization after June 30, 1975. See section 509(a)(2), (Complete Part III.)										from businesses		
10 11	Η											
••	_	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section										
					supported organizations described in section 509(a)(1) or section 509(a)(2). See section scribes the type of supporting organization and complete lines 11e through 11h.							
	<u> </u>										Type III-Other	
ė		• •										
		By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section										
	509(a)(1) or section 509(a)(2).											
f		If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting										
			check this box								🗖	
9		Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?										
				r indirectly controls, enting body of the supp				h person	s describ	ed in (ii)	Yes No	
				rson described in (i) a		. <i>.</i> .					11g(ii)	
				of a person described		evoda (ii)	?				11g(iii)	
<u>h</u>				ation about the suppo	orted orga	anization	s).		,			
(ī)		e of supported panization	(ii) EIN	(iii) Type of organization (described on lines 1-9	(Iv) is the organization in col. (i) listed in your		(v) Did you notify the organization in		(vi) is the organization in col.		(vii) Amount of support	
-		,	"	above or IRC section (see instructions))	governing document?		col. (i) of your		(i) organized in the		эсрроч.	
					<u></u>			ort?	U.	-		
					Yes	No	Yes	No	Yes	No		
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ST VINCENT DE PAUL CONFERENCE ST CATHERINE 108 MIDDLETOWN RD HOLMDEL NJ 07733



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DECLARATION

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

Signature of officer or trustee

Title

B. 018