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Form **990**

Department of the Treasury Internal Revenue Service

(HTA)

For the 2009 calendar year, or tax year beginning

Return of Organization Exempt From Income Tax

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

Open to

and ending

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

OMB No 1545-0047 20**09**

Open to Public Inspection

	Check if ap		Please use IRS		of organization	The Fed	leration of V	<u>ietnamese Ca</u>	tholics				cation numb	er	
=	Address o	-	label or		Business As						<u>38-342771</u>				
=	Name cha	-	print or type		er and street (or P		s not delivered t	o street address)	Ro	om/suite			r		
=	nıtıal retu		See Specific		nmy Carter Bl						(804) 784-	5450			
=	Ferminate		Instruc-	1	town, state or cou	untry, and ZIP +								_	
=	Amended			Norcross				SA 30	093	1 ·	G Gross re	ceipts \$		_	03,649
Ш′	Applicatio	n pending			address of princ	•				H(a) Is t	this a group re	turn for at	ffiliates?	= ;	X No
					en P.O. BOX	1958, Flowe	ery Branch, (GA 30542		H(b) Are	e all affiliates ii	ncluded?		Yes	X No
1 T	ax-exen	npt status	X 50	01(c) (C) ◀ (insei	rt no)	4947(a)(1)	or527		If "	'No," attach a l	ist (see i	nstructions)		
JV	Vebsite	: ▶ n/a								H(c) Gro	oup exemption	number	•		
KF	orm of or	ganization	X co	orporation	Trust	Association	Other ▶		L Yea	r of forma	ition	M S	State of legal	domicile	
Р	art I	Sui	mmary			·	 .		·						
	1				nization's miss	sion or mos	significant	activities			-	-			
		-		-	Vietnamese C		-		rage to	o prese	rve our fait	h and c	ultural val	ues	
JCe					eligious, orgar								. 		
Ē		commur	nity Fina	ancial ass	sisting the Ch	urch in Vietr	nam with hei	urgent needs	s and p	particula	arly with he	r long-t	erm servic	es pro	iects.
ove.	2	Check to	his box	▶ 🔲 ıf	the organizat	tion disconti	nued its ope	rations or dis	posed	of more	e than 25%	of its n	et assets		
- ಇಕ	3	Number	of voting	ig membe	ers of the gove	erning body	(Part VI, line	e 1a)				3			
ties	4		-	-	oting membe		verning bod	y (Part VI, line	e 1b)		•	4			
Activities & Governance	5				es (Part V, lin	•			•			5			
ď	6				rs (estimate i						•	6	-		
•	7a	-			siness revenu			• •				7a			
	b	Net unre	elated bu	usiness ta	axable income	e from Form	990-1, line	34		1	Prior Year	7b	C	V	
	8	Contribi	itions an	nd arante	(Part VIII, line	e 1h)						23,589	Curi	rent Yea	98,978
e	9				(Part VIII, III		•		•		<u> </u>	23,303			30,370
Revenue	10				VIII, column (4. and 7d)	•				5,596			4,671
æ	11				column (A)			and 11e) .	• •			0,000			
	12	Total rev	enue—ad	dd lines 8 t	through 10 cm	stegual Part	WII, column (A), line 12)			3	29,185		3	303,649
	13	Grants a	and sımıl	ılar amp u ı	nts belief Dant	IX, celumb	(A), lines 1-	-3)				4,000			
	14	Benefits	s paid to	or for me	embers (Part	tX,loolumn ((A); \(\) (ne 4)								
ŵ	15	Salaries	s, other c	compens:	≨tion, epopoloby	ee benefits	(Part) X, col	umn (A), lines	5–10)					13,000	
use	16a	6a Professional fundraising thes (Part IX, column (A) Ime 11e) b Total fundraising expenses (Part IX, column (A) Ime 25) ▶							ļ						
20%	b									ļ					
	17	Other expenses (Part IX, Column (A) thees 11a–11d, 11f–24f) Total expenses. Add lines 13–12 must equal Part IX, column (A), line 25)							•			66,732			238,239
7	18							(A), line 25)				81,932		_	251,239
<u>ا ا</u>	19	Revenu	e iess ex	xpenses	Subtract line	18 from line	2 12		<u> </u>	Boom	ning of Curre	47,253	 	of Year	<u>52,410</u>
ဆိုးင္ရ	20	Total as	eete (Pa	art X, line	16)					Begin		26,660			279,070
T S E	21			Part X, Inc	•	•	•					20,000			10,010
Įšį Σ	22		•		ces Subtract	line 21 from	ı lıne 20	• •			2	26,660			79,070
ĵ Pa	ırt II		nature										ı		
					I declare that I ha	ive examined th	is return, includ	ing accompanying	schedu	les and st	tatements, and	to the be	est of my know	vledge	
ZZZ		and (belief, it is t	true, correct	t, and complete D	Declaration of pr	eparer (other th	an officer) is base	ed on all i	informatic	on of which pre	parer has	s any knowled	ge	
₹			1.0	011-	\$ 64	1.					1	2/	11/2	111	
Sig	jn 💮		Signature	of officer	rywy							2/		<u> </u>	
He	re			em Nguye					Presi	dont	Date	•	•		
				rint name ar					FICSI	uent					
		Prep	arer's					Date	С	heck if		Prepa	arer's identifyi	ng numb	er
Pai	d	signa	ature 🗾	19	2/14/	111	<u> </u>	2/40/2046	1 -	elf-	▶□	(see in	istructions)		
	parer's	S Firm	's name (or	or yours	WE WOOD	TAV 1310		3/10/2010	<u>e</u> ا ر	mployed			-		-
Us	e Only	ıf sel	lf-employed	d),	H T INCOM	-					EIN	<u> </u>			
			ess, and ZI				_	orcross, GA 3	0093		Phone no	► (678	<u>) 206-0626</u>	<u>; </u>	
Ma	y the IF	RS discus	ss this re	eturn with	the preparer	shown abo	ve? (see ins	tructions)					. X	Yes	No_
For	Privacy	Act and	Panenwa	ork Reduc	ction Act Notic	e see the se	narato inetri	ıctione						90	(2009)

40	Total program service expenses ► 210 261
	(Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services. (Describe in Schedule O.)

	Youth Activities
4c	(Code) (Expenses \$ 3,045 including grants of \$) (Revenue \$)
	Disaster Nelier Assistance in Vietnam and Hait
4D	(Code) (Expenses \$ 202,874 including grants of \$) (Revenue \$) Disaster Relief Assistance in Vietnam and Haiti
	(O-1-
	Clergical Support to Clergy Group in Vietnam
4a	(Code) (Expenses \$ 4,342 including grants of \$) (Revenue \$)
	- · · · · · · · · · · · · · · · · · · ·
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses
	services?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
_	If "Yes," describe these new services on Schedule O
	the prior Form 990 or 990-EZ?
2	Did the organization undertake any significant program services during the year which were not listed on
	community Financial assisting the Church in Vietnam with her urgent needs and particularly with her long-term services projects
	Cooperating with other religious, organizations or individuals of goodwill to foster in the surrounding world a better human
	Relating and Uniting the Vietnamese Catholics in the USA in order to encourage to preserve our faith and cultural values
1	Briefly describe the organization's mission
	Statement of Program Service Accomplishments

Checklist of Required Schedules

Form 990 (2009)

Part IV

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C,			
	Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	_6_		Χ
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11		X
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
•	Schedule D, Part VI			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that			
	addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u> </u>		
	Schedule D, Parts XI, XII, and XIII	12		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			l
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			ŀ
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	<u> </u>	Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			1
	If "Yes," complete Schedule G, Part III	19	<u> </u>	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Х

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations	_		.,
22	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21		<u>X</u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the	20		v
23	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	22		<u>X</u>
23	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	ĺ	v
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23		<u>X</u>
#-TU	\$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines</i>		- 1	
	24b through 24d and complete Schedule K. If "No," go to line 25	24a	- 1	Y
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
_	to defease any tax-exempt bonds?	24c		х
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			i
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.	28a		Χ_
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		_X_
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		<u> X</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	_31		_X_
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II			
22		32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	22		V
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	33		<u> </u>
J4		24		v
35	III, IV, and V, line 1	34		X
J J	Schedule R, Part V, line 2	35		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	33	_	_^_
	organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	-		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	<u> </u>		Ė
	19° Note. All Form 990 filers are required to complete Schedule O	38		x
			990	(2009)

Par	t V Statements Regarding Other IRS Filings and Tax Compliance		•	ugo o
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c		х
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		<u> </u>	<u> </u>
	Statements, filed for the calendar year ending with or within the year covered by this return .			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		х
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			
	instructions)			l
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			1
- U	this return?	3a		x
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	3b		x
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	30		├^
70	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			1
	account)?	4a		V
b	If "Yes," enter the name of the foreign country.	48		X
D	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			1
	and Financial Accounts			1
E.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	۱.		
	Prohibited Tax Shelter Transaction?	<u>5c</u>		X
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	_		
_	organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	l		
	gifts were not tax deductible?	6b		X
· 7	Organizations that may receive deductible contributions under section 170(c).		ļ.	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		_ X
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		X
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			ĺ
	required to file Form 8282?	7c_		_ X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal		1	
	benefit contract?	7e	ļ	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?.	7h		X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter.			
а	Initiation fees and capital contributions included on Part VIII, line 12 . 10a]]	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b]		
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders]		1
b	Gross income from other sources (Do not net amounts due or paid to other sources			1
	against amounts due or received from them)	1		1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?.	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

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 in Schedule O See instructions

Sect	ion A. Governing Body and Management				
				Yes	No
1a	Enter the number of voting members of the governing body	1a			
b	Enter the number of voting members that are independent	1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business re	lationship with			
	any other officer, director, trustee, or key employee?		2		_ X
3	Did the organization delegate control over management duties customarily performed by or u				
	supervision of officers, directors or trustees, or key employees to a management company o	r other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form		4		X
5	Did the organization become aware during the year of a material diversion of the organization	n's assets?.	5		Χ
6	Does the organization have members or stockholders?		6		Х
7a	Does the organization have members, stockholders, or other persons who may elect one or	more members			
	of the governing body?		7a		_ X
b	Are any decisions of the governing body subject to approval by members, stockholders, or o		7b		X
8	Did the organization contemporaneously document the meetings held or written actions under	ertaken during			
	the year by the following				
а	The governing body?		8a		X
b	Each committee with authority to act on behalf of the governing body?		_8b		<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot				
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedu		9a		X
Sect	ion B. Policies (This Section B requests information about policies not required by the	e Internal			
Reve	enue Code)				
				Yes	No
10a			10a		_X
b	If "Yes," does the organization have written policies and procedures governing the activities				
	affiliates, and branches to ensure their operations are consistent with those of the organization	on?	10b		Х
11	Has the organization provided a copy of this Form 990 to all members of its governing body	pefore filing the			
	form?		11		Х
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990).			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13.		12a		Х
b	Are officers, directors or trustees, and key employees required to disclose annually interests	that could give			
	rise to conflicts?		12b		Х
С	Does the organization regularly and consistently monitor and enforce compliance with the po	licy? If "Yes,"			
	describe in Schedule O how this is done		12c		X
13	Does the organization have a written whistleblower policy?		13		Х
14	Does the organization have a written document retention and destruction policy?		14		X
15	Did the process for determining compensation of the following persons include a review and				
	independent persons, comparability data, and contemporaneous substantiation of the delibe	ration and decision?	'		
а	The organization's CEO, Executive Director, or top management official		15a		Х
b	Other officers or key employees of the organization		15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions)	•			
l6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar	arrangement			
	with a taxable entity during the year?	•	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization				
	its participation in joint venture arrangements under applicable federal tax law, and taken ste	ps to safeguard			
	the organization's exempt status with respect to such arrangements?		16b	l	l
	ion C. Disclosure				
7	List the states with which a copy of this Form 990 is required to be filed				
8	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a	nd 990-T (501(c)(3)	s only)		
	available for public inspection Indicate how you make these available. Check all that apply				
	X Own website				
9	Describe in Schedule O whether (and if so, how), the organization makes its governing docu	ments, conflict of int	erest		
	policy, and financial statements available to the public				
20	State the name, physical address, and telephone number of the person who possesses the I	oooks and records o	f the		
	organization ► H&T INCOME TAX, INC.	(678) 206	0626	. .	
	5430 Jimmy Carter Blvd Suite 108, Norcross, GA 30093			•	

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

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. Use Schedule J-2 if additional space is needed.
- 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 See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, 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

List persons in the following order individual trustees or directors, institutional trustees; officers, key employees, highest compensated employees, and former such persons

X Check this box if the organization did not compensate any current officer, director, or trustee

(A)	(B)			((C)			(D)	(E)	(F)
Name and Title	, ,	Position (check all that apply)			(vla	, ,				
Name and Title	Average hours per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Rev Liem Nguyen President					:					
Rev Anh Nguyen Vice-President										
Sr Theresa Hang Pham Vice-President										
Tuan D Nguyen Vice-President										
Corby Nguyen Treasurer										
Deacon Phu Hoa Nguyen Secretary										
	· · · · · ·									

	rt VII Section A. Officers, Directors, Tru (A)	(B)	(C)						(D)	(E)		(F)	
	Name and title	Average	Po	sition		k all ti	hat app	Treportable		Reportable		Estima	
		hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organization (W-2/1099-MI	d ns	amoun othe compens from t organiza and rela organiza	r sation he ation ated
		1					<u> </u>						
····													
								ļ <u>.</u>					<u></u>
												···	
<u>1b</u>	Total							•	<u></u>	1,			
2	Total number of individuals (including but no reportable compensation from the organization)		se lis	ted a	abov	e) w	ho re	ceiv	ed more than \$1	n 000,000 n			
				-								Yes	No
3	Did the organization list any former officer, employee on line 1a? <i>If "Yes," complete Sc</i>						, or h	ighe	st compensated	l 	3		x
4	For any individual listed on line 1a, is the su the organization and related organizations of individual	•	50,00	0? //	f "Ye	s," c	ompi	lete :	· · · · · · · · · · · · · · · · · · ·		4		×
5	Did any person listed on line 1a receive or a services rendered to the organization? If "Y	accrue compens	satior	n froi	m an	y un	relat	ed o	rganization for		5		×
Se	ction B. Independent Contractors								·				
1	Complete this table for your five highest cor compensation from the organization	npensated inde	pend	lent (conti	acto	ors th	at re	ceived more tha	n \$100,000	of		
	(A) (B) Name and business address Description of services							vices	Com	(C) pensation			
								<u> </u>					
		-						\vdash					
2	Total number of independent contractors (in more than \$100,000 in compensation from			ed to	tho	se li	sted	abov	e) who received				

Part	VIII	Statement of Revenue							
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts its	1a	Federated campaigns		1a					
grai our	b	Membership dues		1b					
S, S	С	Fundraising events		1c					
gift ar a	d	Related organizations	. [1d					
S, g	е	Government grants (contributions)		1e					
ion r si		All other contributions, gifts, grants	. and						
but		similar amounts not included above		1f	298,978				•
itri d of	g	Noncash contributions included in		_	200,010				
Contributions, gifts, grants and other similar amounts	_	Total. Add lines 1a-1f			▶	298,978			
	-				Business Code	200,070	······································		
nue	2a							-	
Rev	b								
ce	С								
ezi	d								
E S	9								
Program Service Revenue	f	All other program service revenue							
Pro	a	T (A 0 O(•				
	3	Investment income (including divid							
	•	other similar amounts) .	crias, interesi	, an	` .	4,671			
	4	Income from investment of tax-exe	mnt bond pro		dc -	4,071			
	5	Royalties .	mpt bond pro	CCC	15				
	3	Noyalies .	(ı) Real		(II) Personal				
	6a	Gross Rents	(i) Iteal		(ii) i cisoriai				
	b	Less rental expenses							
	C	Rental income or (loss)							
	d	Net rental income or (loss)	<u> </u>		•	•	-		
	7a	_	(i) Securities		(II) Other			<u></u>	
	, α	assets other than inventory	(i) Gecunie.		(ii) Other				
	b	Less: cost or other basis							
		and sales expenses .							
	С	Gain or (loss) .							
	d	Net gain or (loss)							
	8a	Gross income from fundraising	•	•					
ne	Οŭ	events (not including \$							
Other Revenue		of contributions reported on line 1c	`						
ě		See Part IV, line 18	•	_					
ř	h	Less direct expenses .		a b				}	
Ę		Net income or (loss) from fundraisi		U					
0		Gross income from gaming activities		•				-	
	Ju	See Part IV, line 19.		а					
	h	Less direct expenses		b					
		Net income or (loss) from gaming a	ectivities		>				
		Gross sales of inventory, less	CHVILICS						
		returns and allowances .		9					
	ь			a b				:	
		Net income or (loss) from sales of						i	
		Miscellaneous Revenue	inventory	<u> </u>	Business Code				
	11a					-	-		
	b					<u> </u>			
	С								
	d	All other revenue							
	е	Total. Add lines 11a-11d .							
	12	Total revenue. See instructions				303,649			

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) but are not rec	uirea to complete	columns (B), (C), ar	ום (ט).
	not include amounts reported on lines 6b, 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 governments and				
	organizations in the U.S. See Part IV, line 21			1	
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members		· · · · · · · · · · · · · · · · · · ·		
5	Compensation of current officers, directors,				
_	trustees, and key employees				
6	Compensation not included above, to disqualified				-
_	persons (as defined under section 4958(f)(1)) and	İ			
	persons described in section 4958(c)(3)(B)		ŀ		
7	Other salaries and wages	13,000		13,000	
8	Pension plan contributions (include section 401(k)			.0,500	
-	and section 403(b) employer contributions)				
9	Other employee benefits .				
10	Payroll taxes				
11	Fees for services (non-employees)				
	Management				
b	Legal				
c	Accounting	1,170		1,170	
d	Lobbying			,	
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	199		199	
12	Advertising and promotion .	2,600		2,600	
13	Office expenses	3,907		3,907	
14	Information technology	-,	· · · · · · · · · · · · · · · · · · ·		
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	19,928		19,928	
20	Interest .				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed			İ	
	5% of total expenses shown on line 25 below)				
а	Continue Education				
b					
С	Bank Charges	174		174	
d	Charity Contribution	······································			
е	See Statement	210,261	210,261		
_ f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	251,239	210,261	40,978	
26	Joint costs. Check here ▶ if following				
	SOP 98-2 Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising				
	solicitation			1	

Part X **Balance Sheet** (A) (B) Beginning of year End of year Cash-non-interest-bearing 226,660 1 279,070 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net. 3 4 Accounts receivable, net . 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of . . 5 . . Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L . 6 7 Notes and loans receivable, net 7 8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges . 9 10a Land, buildings, and equipment, cost or 10a other basis Complete Part VI of Schedule D **b** Less accumulated depreciation 10b 10c 11 Investments—publicly traded securities 11 12 Investments—other securities See Part IV, line 11 12 13 13 Investments—program-related See Part IV, line 11 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 226,660 16 279,070 17 Accounts payable and accrued expenses 17 18 Grants payable. 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L . . 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 Complete Part X of Schedule D . 25 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117, check here ▶ and Balances complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 27 28 Temporarily restricted net assets 28 Net Assets or Fund 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here▶ and complete lines 30 through 34. Capital stock or trust principal, or current funds . . . 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds. 226,660 32 279,070 33 Total net assets or fund balances . . . 226,660 33 279,070 Total liabilities and net assets/fund balances. 226,660 279,070

38-3427714

Part	XI Financial Statements and Reporting			-
1	Accounting method used to prepare the Form 990. X Cash Accrual Other		Yes	No
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X	
b	Were the organization's financial statements audited by an independent accountant?	2b	Χ	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	Ja		 ^-
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

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.

▶ Attach to Form 990 or Form 990-EZ.

See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number The Federation of Vietnamese Catholics in the USA 38-3427714 Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 4 hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described 5 in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 9 An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 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 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III-Functionally integrated **b** Type II Type III-Other 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) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box . Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes and (III) below, the governing body of the supported organization? 11g(i) A family member of a person described in (i) above? . . . 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) h (III) Type of organization (iv) is the organization (v) Did you notify (vi) Is the (vii) Amount of (i) Name of supported (ii) EIN in col (i) listed in your (described on lines 1-9 the organization in organization in col support organization above or IRC section governing document? col (i) of your (i) organized in the (see instructions)) support? Yes No Yes Yes

Total

	(Complete only if you checked t	he box on lin	e 5, 7, or 8 of	Part I)			
	ion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")		143,470	486,373	323,589		953,432
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 5	Total. Add lines 1 through 3 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).		143,470	486,373	323,589		953,432
6	Public support. Subtract line 5 from line 4				-		953,432
	ion B. Total Support	<u>-</u>	1		<u></u>		900,402
	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
		(4) 2000				(e) 2009	
7 8	Amounts from line 4 Gross income from interest, dividends,		143,470	486,373	323,589		953,432
Ü	payments received on securities loans, rents, royalties and income from similar sources			1,300	5,596		6,896
9	Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets						
	(Explain in Part IV) .						
11	Total support. Add lines 7 through 10						960,328
12	Gross receipts from related activities, etc. (s	ee instructions	s)	•		12	
13	First five years. If the Form 990 is for the or organization, check this box and stop here			d, fourth, or fift	h tax year as a	section 501(c)(3) . ► □
	ion C. Computation of Public Support						
14 15	Public support percentage for 2009 (line 6, c Public support percentage from 2008 Sched	lule A, Part II, I	ine 14 .				99 28% 99 28%
16a	33 1/3% support test–2009. If the organization qualifies as	s a publicly su	oported organiz	ation .			▶ X
b 	33 1/3% support test–2008. If the organization and stop here. The organization qualified	es as a publicly	supported org	anızatıon			▶ □
17a	10%-facts-and-circumstances test–2009. or more, and if the organization meets the "facts-and-circum meets-and-circum meets-and-circum meets-and-circum meets-and-circum meets-and-circum meets-and-cir	acts-and-circunstances" test	mstances" test, The organizati	check this box on qualifies as	and stop her a publicly sup	e. Explain in F ported organiz	Part IV how
b	10%-facts-and-circumstances test—2008. or more, and if the organization meets the "facts-and-circum meets-and-circum meets-and-circum meets-and-circum meets-and-circum meets-and-circum meets-and-cir	acts-and-circu	mstances" test,	check this box	and stop her	e. Explain in	Part IV how
18	Private foundation. If the organization did not ch		_			•	tation

	(Complete only if you checked the	<u>he box on line</u>	e 9 of Part I)						
	tion A. Public Support								
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total		
1	Gifts, grants, contributions, and								
•	membership fees received (Do not			1					
	include any "unusual grants")								
	include any unusual grants /								
2	Gross receipts from admissions, merchandise								
	sold or services performed, or facilities furnished]					
	in any activity that is related to the		ļ						
	organization's tax-exempt purpose								
3	Gross receipts from activities that are not an								
	unrelated trade or business under section 513								
4	Tax revenues levied for the organization's								
	benefit and either paid to or expended on								
	ıts behalf								
5	The value of services or facilities					•			
	furnished by a governmental unit to the								
	organization without charge .								
6	Total. Add lines 1 through 5 .						L		
7a	Amounts included on lines 1, 2, and 3								
	received from disqualified persons .								
	Amounto included on lines 0 and 0 and 1								
b	Amounts included on lines 2 and 3 received			1			1		
	from other than disqualified persons that					-			
	exceed the greater of \$5,000 or 1% of the								
_	amount on line 13 for the year						 		
	Add lines 7a and 7b		 	 		 			
8	Public support (Subtract line 7c from								
8	line 6.)		1	L	<u></u>		<u> </u>		
	tion B. Total Support	() 0005	4. \ 0000	1 1 2007	/ I) 0000	() 2000	(0 T-1-1		
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total		
9	Amounts from line 6 .								
10a	Gross income from interest, dividends,								
	payments received on securities loans,								
	rents, royalties and income from similar		}						
	sources					1			
b	Unrelated business taxable income (less								
	section 511 taxes) from businesses								
	acquired after June 30, 1975 .								
С	Add lines 10a and 10b								
11	Net income from unrelated business								
	activities not included in line 10b,								
	whether or not the business is regularly								
	carried on	<u></u>							
12	Other income Do not include gain or					1			
	loss from the sale of capital assets					1			
	(Explain in Part IV) .			L	ļ				
13	Total support. (Add lines 9, 10c, 11,								
	and 12)		<u> </u>		<u> </u>	<u> </u>			
14	First five years. If the Form 990 is for the org	ganızation's fir	st, second, thir	d, fourth, or fift	h tax year as a	a section 501(c)(3)		
	organization, check this box and stop here						▶		
Sec	tion C. Computation of Public Support	Percentage							
15	Public support percentage for 2009 (line 8, co	olumn (f) dıvid	ed by line 13, o	column (f)) .	• •	15			
16	Public support percentage from 2008 Schedu					16	 		
	tion D. Computation of Investment Inc			· · · · · · · · · · · · · · · · · · ·					
17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))									
18									
19a							ind line 17 is		
	not more than 33 1/3%, check this box and s								
ь	33 1/3% support tests-2008. If the organization d			•		_	. – _		
U	line 18 is not more than 33 1/3%, check this box at						▶ □		
20	Private foundation. If the organization did n			•		-			
44	TELLER TO THE CONTRACT OF THE	ᇇᇇᇄᇉᅜᅔᆸᄓᅁ	COLUMB 14 19	a or two coet	.6 005 003 200	acc manucion	.a ₽ !		

	m 990 or 990-EZ) 2009	The Federation of	f Vietnamese	Catholics in the	e USA		38-3427714	Page 4
Part IV	Supplemental	Information. Co	mplete this p	art to provide	the explanation	ns required	by Part II, line 1	0;
_	Part II, line 17a	or 17b, and Part	III, line 12. P	rovide any oth	ner additional	information	See instructions	8
								
								
			 -					
							••••••	
					• • • • • • • • • • • • • • • • • • • •			
			- -					

SCHEDULE L

(Form 990 or 990-EZ)

Transactions With Interested Persons

OMB No 1545-0047

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Open To Public

Department of the Internal Revenue		► Attach t			m 990-EZ.	•	a oi 400. separate instru	ıctions.			Inspe	to Pub ction	IIC
Name of the or								E	mployer				
The Federat	tion of Vietna	mese Catholics ıı	n the US	Δ.				38	34277	714			
Part I		nefit Transactio								, line 40	 0b		
												(c) Cor	rected?
1 	(a) Name or di	squalified person			(b) Description of transact			or transaction	ction			Yes	No
									-				ļ
													<u> </u>
													
												ļ	
												 	
unde	r section 495	of tax imposed or 8 . of tax, if any, on l			•			ns during th	ne year	•	\$ \$	•	
D: 4 II							 -						
Part II		and/or From Ir f the organization				OO Dort	IV line 26 o	Form 000	E7 Da	et V lu	no 38,	•	
(a) Name	•				1		(d) Balance						Vritton
(a) Name of interested person and purpose		ison and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(u) Balance	ide (e) iii	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
			То	From	L			Yes	No	Yes	No	Yes	No
									<u> </u>		<u> </u>	ļ .	<u> </u>
			+	ļ			ļ				 	<u> </u>	
		·············	+						1		 	 -	
					<u> </u>		.		 		 	 	
				<u> </u>									
Total				٠.		. • \$;						
Part III		Assistance Befither the organization		-			: IV, line 27						
(a) Name of interes	ited person	(b) f	Relationshi	p between int organiza	•	rson and the	(c) Am	ount of g	rant or ty	/pe of as	ssistance	;
		 	+				-						
													
Part IV		Transactions f the organization					IV line 28a	28b. or 28c					
(a) Name of interested person		(b) R	(b) Relationship between (c) Arr		Amount of insaction		(d) Description of transaction		ion	(e) Sharing o organization's revenues?			
												Yes	No
							— I	•				1	1

Schedule J (Form 1118)

(Rev January 2009)

Adjustments to Separate Limitation Income (Loss) Categories for **Determining Numerators of Limitation Fractions, Year-End** Recharacterization Balances, and Overall Foreign and Domestic **Loss Account Balances**

OMB No 1545-0122

For calendar year 20 09 , or other tax year beginning , 20 , and ending , 20 Department of the Treasury Internal Revenue Service Attach to Form 1118. For Paperwork Reduction Act Notice, see the Instructions for Form 1118. Name of corporation Employer identification number The Federation of Vietnamese Catholics in the USA 38-3427714 Adjustments to Separate Limitation Income or (Losses) in Determining Numerators of Limitation Part I Fractions (see instructions) (11) (iii) (iv) General category income Passive category income Other income* U.S. income Income or (loss) before adjustments Allocation of separate limitation losses a General category income b Passive category income c Other income* Subtotal- Combine lines 1 through 2c Allocation of overall foreign losses Allocation of domestic losses Subtotal— Combine lines 3 through 5 Recapture of overall foreign losses 7 Subtotal- Combine lines 6 and 7 Recharacterization of separate limitation income a General category income **b** Passive category income c Other income* 10 Recapture of overall domestic losses 11 Numerator of Limitation Fraction— Combine lines 8 through 10 Enter each result here and on Schedule B, Part II, line 7, of corresponding Form 1118

Part II Year-End Balances of Future Separate Limitation Income That Must Be Recharacterized (section 904(f)(5)(C)) a General category income b Passive category income c Other income*

Part III Overall Foreign Loss Account Balances (section 904(f)(1))

Complete for each separate limitation income category

1	Beginning balance				
2	Current year additions				
3	Current year reductions (other than recapture)	()()()
4	Current year recapture (from Part I, line 7)	()()()
5	Ending balance—Combine lines 1				

Overall Domestic Loss Account Balances (section 904(g)(1))

<u> 1</u>	Beginning balance	<u> </u>		
2	Current year additions			
3	Current year reductions (other than recapture)		()	()
4	Subtotal—Combine lines 1 through 3		<u> </u>	,
5	Current year recapture (from Part I, line 10)			
6	Ending balance—Subtract line 5 from line 4			

^{*} Important: See Computer-Generated Schedule J in instructions