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Form **990**

Department of the Treasury Internal Revenue Service

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)

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

OMB No 1545-0047

2012

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	<u> </u>	For the 2	012 calen	dar year, or tax year beginning , 2012, and ending		1
1	В	Check if app	licable	<u> </u>	Employer Identi	ification Number
_		Addres	s change	CONGREGATION OF QUANG MINH TEMPLE	36-3860	533
2013	-	Name	change		Telephone numl	
7	7	initial r	eturn	4429 N. DAMEN AVENUE	(773) 27	5-6859
0	•	Termin		CHICAGO, IL 60625-1701		3 0007
0		\vdash			3 0	\$ 245 007
>		—	ed return	<u></u>	Gross receipts of	
MAY		Applica	ition pending	1		□ ¹⁰³ □ ¹⁰
		_		SAME AS C ABOVE	filiates included? tach a list (see ins	tructions) Yes No
DATE	<u> </u>	Tax-exem	pt status	X 501(c)(3) 501(c) () (Insert no) 4947(a)(1) or 527		
20	J	Websit	e: ► N/	A H(c) Group exc	emption number	•
3 12	K	Form of o	rganization	Corporation Trust X Association Other L Year of Formation	M State of I	egal domicile IL
POSTMARK [Pe	तिशी !	Summar	v		
32.		1 Bri	efly descri	be the organization's mission or most significant activities: RELIGIOUS ORDER	OF BUDDH	ITST
2			•	2 2/4/1/21/21/21/21/21/21/21/21/21/21/21/21/2	. 31 2020.	# *
	ည					
	Activities & Governance					
	ē	2 Ch	eck this bo	ox If the organization discontinued its operations or disposed of more than 25%	% of its net as	
	ၓ			oting members of the governing body (Part VI, line 1a)	3	2
	∞ 70	4 Nur	mber of in	dependent voting members of the governing body (Part VI, line 1b)	4	0
	Ęį.	5 Tot	al number	of individuals employed in calendar year 2012 (Part V, line 2a)	5	0
	Ξ	6 Tot	al number	of volunteers (estimate if necessary)	6	5
	Ac	7 a Tot	al unrelat	ed business revenue from Part VIII, column (C), line 12	7 a	-49,235.
	ı	b Net	unrelated	business taxable income from Form 990-T, line 34	7 b	-49,235.
-				Pric	or Year	Current Year
	_	8 Cor	ntributions	and grants (Part VIII, line 1h)	240,282.	198,207.
	Revenue	9 Pro	gram serv	rice revenue (Part VIII, line 2g)		
	ē	10 Inv	estment ir	ncome (Part VIII, column (A), lines 3, 4, and 7d)		
	æ	11 Oth	er revenu	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e).	-48,150.	-49,235.
		12 Tot	al revenue		192,132.	148,972.
-				imilar amounts paid (Part IX, column (A), lines 1-3)		14,810.
				to or for members (Part IX, column (A), line 4)		1,600.
	İ			er compensation, employee benefits (Part IX, column (A), lines 5-10)		1,000.
	န္မ					
	Expenses			fundraising fees (Part IX, column (A), line 11e)		
	풄	b Tot	al fundrai	sing expenses (Part IX, column (D), line 25)▶		
	س	17 Oth	er expens	ses (Part IX, column (A), lines 11a-11d, 11f-24e)	108,902.	101,947.
	ļ	18 Tot	al expens		108,902.	118,357.
				expenses Subtract line 18 from line 12	83,230.	30,615.
Ξ	8 8				of Current Year	End of Year
7	la de	20 Tot	al assets	(Part X, line 16) MAY 1 3 2013 6 Beginning 1,	667,546.	1,630,252.
4	₹ë			(Part X, line 16) s (Part X, line 26) WIAI 1 3 2013 1, 1,	078,508.	1,017,519.
	žŠ					
z ,					582,118.	612,733.
5	<u> එබ</u>	rt O I	Signatui	re Block		
ا د	Under	penalties of	perjury, I dec	lare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge irer (other than officer) is based on all information of which preparer has any knowledge	and belief, it is true	, correct, and
			L. September	the Control Viall Office is a saccon an information of which property has any knowledge	- 10	
ANNEL			بطلے	uh Minh Hanh	-8-13	
9	Sig		Signati.	re of officer Date		
2	Hei	re	REV	<u></u>	DENT	
ِ کِ				print name and title		
7			Print/Type p		heck If	PTIN
	Pai	d	SEIN N	MYINT, EA SEID BYINT EASTE 5-4-13 se	elf-employed	P00105611
		parer	Firm's name			
		e Only	Firm's addr		ırm's EIN ► 36-	-4373459
				CUIT CO CO TEL CO CO E 100 C	hone no (773	
-	Mari	the IDC	discuse #	nis return with the preparer shown above? (see instructions)		X Yes
					1/12	Form 990 (2012)
	ロハト	∢ rur Ma	PEI WOLK H	leduction Act Notice, see the separate instructions. TEEA0113L 12/18	#1 4	1 (1111 220 (2012)

rm 990 (2012)	CONGREGATION OF QUA		36-3	860533	Pag
	ment of Program Service	•			
		onse to any question in this Part III			
•	be the organization's mission:				
KETIGION	S_ORDER_OF_BUDDHIST				
~					
		- 		-	
2 Did the organ	vization undertake any cianting	ant program services during the year whi	ich were not listed on the prior	_ 	
Form 990 or		in program services during the year win	ich were not hated on the phot		X N
	ribe these new services on Sch	nedule ()		Yes	<u>'</u>
		nake significant changes in how it condu	icte any program services?	Yes	X N
_	ribe these changes on Schedu		icts, any program services.	☐ 162	· ك
•	-	e accomplishments for each of its three I	aranet orogram carvioce as m	ager and by	ovnanca
Section 501(d	:)(3) and 501(c)(4) organization	ns and section 4947(a)(1) trusts are requally, for each program service reported	uired to report the amount of o	rants and all	ocation
a (Code) (Expenses \$	including grants of \$) (Revenue	\$	
TO PROVI	DE SPIRITUAL GUIDAN	ICE TO COMMUNITY AND CONGR	REGATION MEMBERS		
THRU REL	IGIOUS SERVICES, MI	SSION ACTIVITIES, AND OTH	IER OUTREACH		
PROGRAMS					
					
~					
~					
~		- -			
			-		
	-				
	-				
b (Code.) (Expenses \$	including grants of \$) (Revenue	\$	
	······ <u></u>				
					
					
					
					
~	- 				
~					
				-	
c (Code:) (Expenses \$	including grants of \$) (Revenue	Ś	
C (Code) (Expenses \$	Including grants of \$\frac{1}{2}		~	
					
				-	
	-				
					
	- -				
	m services. (Describe in Sched				
(Expenses		dule O.) cluding grants of \$ 0.) (Revenue \$)

Page 3 Form **990** (2012) CONGREGATION OF QUANG MINH TEMPLE 36-3860533 Part IV Checklist of Required Schedules No Yes Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Х Schedule A 1 Х 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 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 Х 3 **Section 501(c)(3) organizations** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If 'Yes,' complete Schedule C, Part II* Х Δ Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III Х 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Х 6 Part I 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 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes.' R Х complete Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV 9 Х Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V 10 X If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings and equipment in Part X, line 103f 'Yes,' complete Schedule D. Part VI 11 a Х **b** Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII Х 11b c 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 Х 11 c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported Х 11 d in Part X, line 167 If 'Yes,' complete Schedule D, Part IX Х 11 e e 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 (ASC 740)?If 'Yes,' complete Schedule D, Part X Х 11 f 12a Did the organization obtain separate, independent audited financial statements for the tax year If 'Yes,' complete Х Schedule D, Parts XI, and XII 12a b Was the organization included in consolidated, independent audited financial statements for the tax year If 'Yes,' and X if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X 13 Is the organization a school described in section 170(b)(1)(A)(ii)?If 'Yes,' complete Schedule E 13 14a Х 14a Did the organization maintain an office, employees, or agents outside of the United States? **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV 14b X Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV Х 15 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, Parts III and IV X 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17

20 X

Form 990 (2012)

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Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a7f 'Yes,' complete Schedule G, Part III

b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?

column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)

20 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H

lines 1c and 8a? If 'Yes,' complete Schedule G, Part II

Form 990 (2012) CONGREGATION OF QUANG MINH TEMPLE

Part W Checklist of Required Schedules (continued)

			res	ИО
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		Х
24 a	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
c	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	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
k	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-EZ3f 'Yes,' complete Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest 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 employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		х
	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):			
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
k	A family member of a current or former officer, director, trustee, or key employee?If 'Yes,' complete Schedule L, Part IV	28b		х
	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M.	28c 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		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
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	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		х
	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
ŀ	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
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 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38		Х
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Form 990 (2012)

<u> එක</u>	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V				Γ
				Yes	No
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1 a 0			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 b 0			
(Did the organization comply with backup withholding rules for reportable payments to vendor (gambling) winnings to prize winners?	s and reportable gaming	1 c		
2 8	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-	2.			•
ŀ	ments, filed for the calendar year ending with or within the year covered by this return . If at least one is reported on line 2a, did the organization file all required federal employmen	2 a 0	2 b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required toe-file. (see ins				
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year	ar? .	3 a	X	
	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		3 b	Х	
4 a	At any time during the calendar year, did the organization have an interest in, or a signature financial account in a foreign country (such as a bank account, securities account, or other fi	or other authority over, a inancial account)?	4 a		Х
ł	of Yes,' enter the name of the foreign country: ►	,			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and F	inancial Accounts		ŀ	
5 a	was the organization a party to a prohibited tax shelter transaction at any time during the ta		5 a		Χ
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelt		5 b		X
	: If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 c		-
	Does the organization have annual gross receipts that are normally greater than \$100,000, a	nd did the organization	6 a		Х
ı	solicit any contributions that were not tax deductible as charitable contributions? If 'Yes,' did the organization include with every solicitation an express statement that such c	ontributions or gifts were			
7	not tax deductible? Organizations that may receive deductible contributions under section 170(c).	,	6 b		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and p	artly for goods and			
	services provided to the payor?	•	7 a		X
	of If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7 b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for w Form 8282?		7 c		Х
	If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d			v
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal		7 e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal ben		7 f		X
,	g if the organization received a contribution of qualified intellectual property, did the organization as required?	on file Form 8899	7 g		
ı	ղ If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?	e organization file a	7 h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting supporting organization, or a donor advised fund maintained by a sponsoring organization, holdings at any time during the year?	ng organizatiorเ <u>วิ</u> เd the lave excess business	8		
0	Sponsoring organizations maintaining donor advised funds.				
	a Did the organization make any taxable distributions under section 4966?		9 a		
	Did the organization make a distribution to a donor, donor advisor, or related person?		9 b		
			35	أعنصه	
	Section 501(c)(7) organizationsEnter: a Initiation fees and capital contributions included on Part VIII, line 12	10a			
	o Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
	·	100			
	Section 501(c)(12) organizationsEnter: a Gross income from members or shareholders	11a			
1	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11 ь			
	a Section 4947(a)(1) non- exempt charitable trusts.Is the organization filing Form 990 in lieu o		12a	المستوي	
	f 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.		10		
	a Is the organization licensed to issue qualified health plans in more than one state?	•	13a	أحدد	
	Note. See the instructions for additional information the organization must report on Schedul	e U.			
	c Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
	Enter the amount of reserves on hand	13c			
	a Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in S	 Schedule O	14b		
	g it 103, has it hide a form /20 to report alose payments in 110, profide an explanation in e				

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Part Via 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. X Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 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 in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent 1 b 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? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 Χ Did the organization make any significant changes to its governing documents Х 4 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? 6 Did the organization have members or stockholders? 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7 a Х members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, Х stockholders, or other persons other than the governing body? 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 a a The governing body? X 8 b **b** Each committee with authority to act on behalf of the governing body? Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code No Yes 10 a Х 10 a Did the organization have local chapters, branches, or affiliates? b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10 b operations are consistent with the organization's exempt purposes: X 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12a Х b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12 c 13 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? . 14 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? 15 a a The organization's CEO, Executive Director, or top management official 15_b b Other officers of key employees of the organization If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16 a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16 a 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 taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available. Check all that apply Other (explain in Schedule O) Another's website Upon request Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. SEE SCHEDULE O State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

> CHICAGO IL 60625 (773)275-6859 HANH 4429 N. DAMEN AVE. Form 990 (2012) TEEA0106L 08/08/12

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36-3860533

Page 7

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1 a 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 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 neither the organization	n nor any	relate	d or	gan	ızat	ion co	mpe	nsated any current o	fficer, director, or trus	itee.
				(C						
(A) Name and Title	(B) Average hours per		on (do x, un er an			more to n is both or/trustee		(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation
	hours per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) REV. THICH MINH HANH	_ 60 _							0.	0.	0
PRESIDENT (2) HA THU NGUYEN TREASURER	0 16 0							0.	0.	0.
(3)										
<u>(4)</u>										
(5)										
(6)										
<u>(7)</u>										
(8)										
(9)				-						
(10)										
(11)										
(12)					_					-
(13)										
(14)								_	_	

	(B)			((
(A) Name and title	Average hours per week	Box.	, unle	heck ss pe	erson	than is bot or/trus	h an	(D) Reportable compensation from	(E) Reportable compensation from	amou	(F) stmated int of oth	ner
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	fr org: and	pensation the anization direction of the anization of the	n i
<u>(15)</u>			_									
(16)										-		
(17)						-						
<u>(18)</u>												
(19)												
(20)												
(21)												
(22)												
(23)												
(24)				_								
(25)			-									
1 b Sub-total	·	1		1	1	l	>	0.	0			0.
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)	n A				•		▶	0.	0			<u>0.</u>
2 Total number of individuals (including but not limit from the organization ► 0	ed to th	ose I	ıste	d ab	ove) wh	o re			table cor	npens	
							-				Yes	No
3 Did the organization list anyformer officer, directo on line 1a? If 'Yes,' complete Schedule J for such	r or trus <i>individu</i>	tee, l <i>al</i>	key	emp	oloy	ee, o	r hi	ghest compensate	ed employee	3	Saltrantia e	X
4 For any individual listed on line 1a, is the sum of it the organization and related organizations greater such individual	eportab than \$1	le co 50,0	mpe 00?	ensa If 'Y	ation es'	and comp	l oth	ner compensation e Schedule J for	from	4		X
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,'	comper	nsatio	on fr chea	om lule	any <i>J fo</i>	unre	elate ch p	ed organization or erson	ındıvıdual	5	数量	X
Section B. Independent Contractors												
1 Complete this table for your five highest compensation from the organization. Report comp	ated ind ensation	epen 1 for	the	t co cale	ntra	ctors ar yea	ar e	nding with or with	in the organization			
(A) Name and business addre	ess 		-					Description	of services	Compe	C) nsatio	n
					_	_						
							_					
2 Total number of independent contractors (including	a but no	ot Iım	ıted	to t	thos	e list	ted :	above) who receiv	ed more than			23
\$100,000 in compensation from the organization		. ,										

- 41	Check if Schedule O contains a resp	onse to any question	on in this Part VIII		•	П
(A)			(A) Total revenue	Related or exempt function revenue	Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
NTS.	1 a Federated campaigns. 1 a					
8 2	b Membership dues 1 b					
R S	c Fundraising events 1 c					
ਙੁੱ₹	d Related organizations 1 d					
S 50	e Government grants (contributions)					
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above	198,207.	ı			
\$ ₹	g Noncash contributions included in lns 1a-1f \$	>	100 007			
굘	h Total. Add lines 1a-1f	Business Code	198,207.			
PROGRAM SERVICE REVENUE	2 a					
뿚	b			-		
딍	c		-		···	
띯	d					-
₹	e			- 1	·	
8	f All other program service revenue					
품	g Total. Add lines 2a-2f	▶.			-	
	3 Investment income (including dividends	s, interest and				
	other similar amounts)					
	4 Income from investment of tax-exempt	bond proceeds				
	5 Royalties (i) Real	(II) Personal				
	6 a Gross rents 46,800					
	b Less: rental expenses 96,035		i	İ		
İ	c Rental income or (loss) -49,235		. !			
	d Net rental income or (loss)	•1	-49,235.		-49,235.	<u> </u>
	7 a Gross amount from sales of (i) Securities	(ii) Other	40,233.		45,255.	
	assets other than inventory		Ì			
	b Less cost or other basis			į		
	and sales expenses					
	c Gain or (loss)				·	
	d Net gain or (loss)	<u> </u>				
OTHER REVENUE	8a Gross income from fundraising events (not including \$					
즱	of contributions reported on line 1c).					
监		a h				
ㅎ	b Less: direct expensesc Net income or (loss) from fundraising expenses	~		-		
	, ,	Vents				
	9a Gross income from gaming activities. See Part IV, line 19	a				
	b Less direct expenses	b				
	c Net income or (loss) from gaming activ	rities 🕨				
	10a Gross sales of inventory, less returns and allowances				-	
		b				
	c Net income or (loss) from sales of inve					
	Miscellaneous Revenue	Business Code	<u> </u>			
	11a					
	b					
	c					
	d All other revenue		_			
	e Total. Add lines 11a-11d					
	12 Total revenue. See instructions .	<u>.</u> ►	148,972.	0.	-49,235.	0.
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	Check if Schedule O contains a re			· · · · · · · · · · · · · · · · · · ·	(D)
Do 1 7b,	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	Fundraising expenses
1	Grants and other assistance to governments				
	and organizations in the United States See Part IV, line 21	9,810.	9,810.		
2	Grants and other assistance to individuals in the United States See Part IV, line 22		3,3=3.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the United States See Part IV, lines 15 and 16	5,000.	5,000.		
4	Benefits paid to or for members	1,600.	1,600.		
5	Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k)) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
á	a Management				
i	b Legal				
•	c Accounting	600.	600.		
•	d Lobbying				
•	e Professional fundraising services. See Part IV, line 17				
1	f Investment management fees				
12	g Other (If line 11g amt exceeds 10% of line 25, col- umn (A) amt, list line 11g expenses on Sch 0) Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	5,827.	5,827.		
17	_ `. `	17,300.	17,300.		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	11,000.	2.,,000.		
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	51,168.	51,168.		
	Insurance Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e if line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	3,041.	3,041.		
;	a UTILITIES	9,966.	9,966.		
	b PRINTING AND PUBLICATIONS	5,400.	5,400.		
	c MAINTENANCE & REPAIRS	3,194.	3,194.		
	d FREIGHT	1,409.	1,409.		
	e All other expenses	4,042.	4,042.		
25	· · · · · · · · · · · · · · · · · · ·	118,357.	118,357.	0.	0.
26					

Page 11

Par X ■ Balance Sheet Check if Schedule O contains a response to any question in this Part X **(B)** End of year (A) Beginning of year 9,103 22,977. Cash - non-interest-bearing 2 2 Savings and temporary cash investments. 3 Pledges and grants receivable, net 3 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instructions) Complete Part II of Schedule L 6 7 Notes and loans receivable, net Inventories for sale or use 8 9 9 Prepaid expenses and deferred charges 10 a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10 a 957, 992 1,607,275. 10b 10 c b Less, accumulated depreciation 350,717 1,658,443 11 Investments - publicly traded securities Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 14 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 1,667,546 1,630,252 16 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons. 22 Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 1,078,508 1,017,519. 24 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 25 26 1,017,519. Total liabilities. Add lines 17 through 25 1,078,508 26 Organizations that follow SFAS 117 (ASC 958), check here | X and complete lines 27 through 29, and lines 33 and 34. 582,118 27 612,733. ASSETS 27 Unrestricted net assets 28 28 Temporarily restricted net assets Permanently restricted net assets 29 29 R Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. FUZD 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund BALANCES Retained earnings, endowment, accumulated income, or other funds 32 32

BAA

33

34

Total net assets or fund balances

Total liabilities and net assets/fund balances.

1,630,252. Form 990 (2012)

612,733.

33

582,118

660,626.

Forn	n 990 (2012) CONGREGATION OF QUANG MINH TEMPLE	36-3860533		Page 12
Pa	सिश्रा Reconciliation of Net Assets			
	Check if Schedule O contains a response to any question in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	148	3,972.
2	Total expenses (must equal Part IX, column (A), line 25)	2	118	3,357.
3	Revenue less expenses. Subtract line 2 from line 1	3	30) <u>,615.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	582	2,118.
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		
7	Investment expenses.	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	612	2,733.
Pa	মিআ Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII			
			Y,	es No
1	Accounting method used to prepare the Form 990. X Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or r separate basis, consolidated basis, or both:	eviewed on a		
	Separate basis Consolidated basis Both consolidated and separate basis	'		
	b Were the organization's financial statements audited by an independent accountant?		2 b	X
	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 oversign review, or compilation of its financial statements and selection of an independent accountant?	jht of the audit,	2 c	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O.			
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth Audit Act and OMB Circular A-133?	in the Single	3 a	X
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo to or audits, explain why in Schedule O and describe any steps taken to undergo such audits	ne required audit	3 b	
BAA	4		Form 9	90 (2012

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Employer identification number

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

lame o	the	organization CO	NGRE	GATION OF OU	ANG MINH TEMPLE					Employe	ridentifica	tion number		
		QU	ANG	MINH TEMPLE							360533			
					(All organizations m					ee ins	truction	ıs.		
he o	ga	nization is not a	privat	e foundation becau	se it is: (For lines 1 thro	ugh 11,	check o	nly one	pox)					
1	X	A church, conv	ention	of churches or asso	ociation of churches desc	cribed in	section	170(b)(1) (A)(i).					
2	П	A school descri	ibed in	section 170(b)(1)(A	Xii). (Attach Schedule E	.)								
3		A hospital or a	coope	ratıve hospital servi	ce organization describe	d insect	ion 170	(b)(1)(A)	(iii).					
4	П	A medical rese	arch o	rganızatıon operate	d in conjunction with a h	ospital d	describe	d irsect	ion 170	(b)(1)(A)	(iii) Ente	er the hosp	ıtal's	
		name, city, and	d state:	•										
5		An organization 170(b)(1)(A)(iv)	n opera	ated for the benefit plete Part II.)	of a college or university	owned	or oper	ated by	a gover	nmenta	unit de	scribed ise	ction	
6		•	•	•	jovernmental unit descri									
7		ın section 170(Ь χ1χΑ	ι χνι). (Complete Pa			_	vernme	ntal uni	t or from	the ger	neral public	descr	ıbed
8	\sqcup	•			70(b)(1)(A)(vi). (Complete		•							
9	X	related to its exe	mpt fur ss taxal	actions - subject to ce	ore than 33-1/3% of its supportain exceptions, and (2) no on 511 tax) from businesse	o more th	nan 33-1 <i>1</i>	3% of its	support	from gro	ss invest	ment income	e and	
10		3			exclusively to test for pu		-			•				
11		supported organi	ızatıons	described in section !	isively for the benefit of, to 509(a)(1) or section 509(a)(es 11e through 11h.	perform (2). See s	the funct section 5	ons of, c 5 09(a)(3).	or carry c Check t	out the pu he box th	irposes o nat descri	f one or mor bes the type	e public of	cly
		a Type I	ь	Type II	c ∏Type III – Function	nally inte	grated		d 🗍 .	Type III	– Non-fi	unctionally	integra	ated
е		By checking the	ndation	I certify that the or managers and other	ganization is not controller than one or more pub	led dired licly sup	tly or in	directly organiza	by one itions de	or more escribed	disqual in section	ified persoi on 509(a)(1	ns) or	
f				ceived a written det	ermination from the IRS	that is a	а Туре І	, Type II	or Typ	e III sup	porting	organızatıo	Π,	
g		Since August 1	7, 200	6, has the organiza	tion accepted any gift o	r contrib	ution fr	om any	of the f	ollowing	persons	s?	Yes	No
		(i) A person below, th	who d e gove	lirectly or indirectly or	controls, either alone or upported organization?	togethe	with pe	ersons c	lescribe	d ın (ıı)	and (III)	11 g (i)	103	
		(II) A family I	membe	er of a person descr	ibed in (i) above?							11 g (ii)		
		(iii) A 35% co	ontrolle	ed entity of a persor	described in (i) or (ii) a	bove?						11 g (iii)		
h		Provide the foll	lowing	information about t	he supported organization	on(s).								
		(I) Name of support organization	ted	(II) EIN	(III) Type of organization (described on lines 1-9 above or IRC section (see instructions)	organiz column (your go	s the ation in I) listed in everning ment?	(v) Did yo the organ column (supp	ization in i) of your	organiz colur	s the ation in nn (i) ed in the S ?	(VII) Amoun sup	t of mon	etary
						Yes	No	Yes	No	Yes	No			
A)														
В)														
	-			-										
(C)									 					
D)						<u> </u>								
E)														
lotal [

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

	(Complete only if you check organization fails to qualify	ed the box on line	e 5, 7, or 8 of Pa	rt I or if the organ	ization failed to q		
Sec	tion A. Public Support						
	ndar year (or fiscal year nning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4 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)						
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support					-	
Calendar year (or fiscal year beginning in) ►		(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activ	rities, etc (see ins	structions).			12	
	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth, o	or fifth tax year as	a section 501(c)(3)	▶ []
	tion C. Computation of Pu					т	
	Public support percentage for 20 Public support percentage from	•		ne 11, column (f).)	14	% %
	33-1/3% support test— 2012. If and stop here. The organization	the organization o	did not check the	box on line 13, a	nd the line 14 is 3	LL	<u>-</u>
ŀ	33-1/3% support test – 2011. If to and stop here. The organization	he organization d	id not check a bo	x on line 13 or 16	ia, and line 15 is i	33-1/3% or more, ch	neck this box
17 a	a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-	and-circumstance	es' test, check this	s box andstop her	e. Explain in Part IV	how
ł	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts-	añd-circumstance	es' test, check this	box andstop her	e. Explain in Part IV	5 is 10% how the ►

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

Schedule A (Form 990 or 990-EZ) 2012 CONGREGATION OF QUANG MINH TEMPLE

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 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.)

Sect	tion A. Public Support						
	lar year (or fiscal yr beginning in)►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Gifts, grants, contributions and membership fees						
	received. (Do not include any 'unusual grants.')	139,515.	175,794.	. 184,838.	240,282.		740,429.
2	Gross receipts from admis-	133,313.	110,104.		240,202.		740,425.
	sions, merchandise sold or services performed, or facilities						
	furnished in any activity that is						
	related to the organization's tax-exempt purpose						0.
	Gross receipts from activities						
_	that are not an unrelated trade						0
4	or business under section 513 Tax revenues levied for the	-					0.
	organization's benefit and						
	either paid to or expended on its behalf						0.
5	The value of services or						
	facilities furnished by a governmental unit to the						
	organization without charge						0.
	Total. Add lines 1 through 5	139,515.	175,794.	184,838.	240,282.	0.	740,429.
7 a	Amounts included on lines 1, 2, and 3 received from						
	disqualified persons	0.	0.	0.	0.	0.	0.
b	Amounts included on lines 2 and 3 received from other than	•					
	disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13						
	for the year	0.	0.	0.	0.	0.	0.
С	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
8	Public support (Subtract line 7c from line 6)						740,429.
Sac	tion B. Total Support	and the state of t	NATIONAL PROPERTY AND ADDRESS.	AND PERSONAL PROPERTY.	公共中国国际公司	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	140,429.
	dar year (or fiscal yr beginning in)►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 6	139,515.	175,794.	184,838.	240,282.	0.	740,429.
	Gross income from interest,		= 10/1011	201,0001			
	dividends, payments received on securities loans, rents,						
	royalties and income from						
h	similar sources Unrelated business taxable						0.
J	income (less section 511						
	taxes) from businesses acquired after June 30, 1975						0.
С	Add lines 10a and 10b	0.	0.	0.	0.	0.	0.
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on	-20,878.	-13,412.	-10,376.	-48,150.		-92,816.
12	Other income Do not include gain or loss from the sale of				İ		
	capital assets (Explain in Part IV)	1					0.
13	Total support. (Add Ins 9, 10c, 11, and 12)	118,637.	162,382.	174,462.	192,132.	0.	647,613.
	First five years. If the Form 990						
	organization, check this box and	stop here		· · · · · · · · · · · · · · · · · · ·			<u> </u>
	tion C. Computation of Pu Public support percentage for 20			no 12 nolumn (6)			
	Public support percentage from	• •	• • • • • • • • • • • • • • • • • • • •	ie 13, column (i))		15	
	tion D. Computation of Inv				· · · · · · · · · · · · · · · · · · ·	1 10	
17	Investment income percentage f				nn (f))	17	%
18	Investment income percentage f	•		-	(.,,,	18	%
	33-1/3% support tests - 2012. If	the organization of	did not check the	box on line 14, ar	nd line 15 is more	than 33-1/3%, an	
	is not more than 33-1/3%, check	this box andstop	here. The organi	zation qualifies as	s a publicly suppor	rted organization	▶ 📗
b	33-1/3% support tests— 2011. If line 18 is not more than 33-1/3%	the organization of	iid not check a bo	ox on line 14 or lin	ne 19a, and line 1 lifies as a publicly	6 is more than 33-	·1/3%, and zation ► □
20	Private foundation. If the organi						► H
BAA			TEEADADSI				90 or 990.EZ) 2012

Schedule A	(Form 990 or 990-EZ) 2012	CONGREGATION (OF QUANG MINH	TEMPLE	36-3860533	Page 4
Part IV	Supplemental Information Part II, line 17a or 17b; (See instructions).	i. Complete this part and Part III, line 12	t to provide the ex 2. Also complete	xplanations required this part for any a	by Part II, line 10; idditional information.	
		. 				
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Schedule A (Form 990 or 990-EZ) 2012

BAA

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name	of the organization			Employer Identification number
	NGREGATION OF QUANG MINH TEMPI ANG MINH TEMPLE	E		36-3860533
Par	ति। Organizations Maintaining Donor A	dvised Funds or Other Similar Fund	s or Accounts. (Complete if
	the organization answered 'Yes'	to Form 990, Part IV, line 6.	<u></u>	
		(a) Donor advised funds	(b) f	Funds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and dorare the organization's property, subject to the	nor advisors in writing that the assets he organization's exclusive legal control?	ld in donor advised	I funds Yes No
6	Did the organization inform all grantees, dono for charitable purposes and not for the benefit impermissible private benefit?	rs, and donor advisors in writing that gra of the donor or donor advisor, or for an	ant funds can be us y other purpose co	sed only nferring Yes No
Pa			'Yes' to Form	990, Part IV, line 7.
1	Purpose(s) of conservation easements held by			
	Preservation of land for public use (e.g., r			cally important land area
	Protection of natural habitat	Preserv	ation of a certified	historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organizati last day of the tax year	on held a qualified conservation contribu	ition in the form of	a conservation easement on the
	last day of the tax year			Held at the End of the Tax Year
	a Total number of conservation easements		2 a	
	b Total acreage restricted by conservation ease	ments	2 b	
	c Number of conservation easements on a certi		2 c	
	d Number of conservation easements included i		a historic	
	structure listed in the National Register		2 d	
3	Number of conservation easements modified, tax year ►	transferred, released, extinguished, or te	erminated by the o	rganization during the
4	Number of states where property subject to co	onservation easement is located►		
5	Does the organization have a written policy reand enforcement of the conservation easement	nts it holds?	•	∐ Yes ∐ No
6	Staff and volunteer hours devoted to monitori			
7	Amount of expenses incurred in monitoring, if	nspecting, and enforcing conservation ea	asements during the	e year
8	Does each conservation easement reported o and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirement	s of section 170(h)	(4)(B)(i) Yes No
9	In Part XIII, describe how the organization repinclude, if applicable, the text of the footnote conservation easements	oorts conservation easements in its revei to the organization's financial statements	nue and expense s s that describes the	tatement, and balance sheet, and e organization's accounting for
Pa	Organizations Maintaining Collection Complete if the organization ans	tions of Art, Historical Treasures, wered 'Yes' to Form 990, Part IV	or Other Similar , line 8.	Assets.
1	If the organization elected, as permitted under art, historical treasures, or other similar asset in Part XIII, the text of the footnote to its final	s held for public exhibition, education, oi	r research in furthe	ent and balance sheet works of rance of public service, provide,
	b If the organization elected, as permitted unde historical treasures, or other similar assets he following amounts relating to these items:	r SFAS 116 (ASC 958), to report in its re ld for public exhibition, education, or res	evenue statement a search in furtherand	and balance sheet works of art, be of public service, provide the
	(i) Revenues included in Form 990, Part VIII	line 1		► \$
	(ii) Assets included in Form 990, Part X			► \$
2		ert, historical treasures, or other similar a 116 (ASC 958) relating to these items.	assets for financial	_
	a Revenues included in Form 990, Part VIII, line	e 1		► \$
	b Assets included in Form 990, Part X	·		► \$

Schedule D (Form 990) 2012 CONG	REGATION OF Q	UANG MINH TEM	PLE	36-386	0533	<u> </u>	Page 2
3 Using the organization's acquisit items (check all that apply):	ion, accession, and (other records, check a	any of the following	that are a significant t	use of its o	collect	ion
a Public exhibition		d Loan or ex	change programs				
b Scholarly research		e Other					
c Preservation for future gener	ations						
4 Provide a description of the organ Part XIII.	inization's collections	s and explain how the	y further the organi	zation's exempt purpo	se in		
5 During the year, did the organiza to be sold to raise funds rather to	han to be maintained	d as part of the organ	ization's collection?		Yes		No
Part M Escrow and Custodial Arra reported an amount o	n gements. Complet n Form 990, Par	e if the organization t X, line 21.	answered 'Yes' to F	orm 990, Part IV, line	9, or		
1 a is the organization an agent, trus on Form 990, Part X?				er assets not included	Yes		No
b If 'Yes,' explain the arrangement	in Part XIII and con	aplete the following to	able:				
					Amount		
c Beginning balance				1 c			
d Additions during the year				1 d			
e Distributions during the year		•		1 e			
f Ending balance				1 f			
2 a Did the organization include an a	amount on Form 990	, Part X, line 21? .		-	Yes		No
b If 'Yes,' explain the arrangement	in Part XIII. Check !	nere if the explantion	has been provided	ın Part XIII .]
Part V Endowment Funds. Co							
	(a) Current	(b) Prior year	(c) Two years	(d) Three years	(e) Fo	ur year	S
1 a Beginning of year balance							
b Contributions			<u> </u>				
c Net investment earnings, gains, and losses							
d Grants or scholarships							
 Other expenditures for facilities and programs 							
f Administrative expenses							
g End of year balance							
2 Provide the estimated percentag	e of the current year	end balance (line 1g	, column (a)) held a	as:			
a Board designated or quasi-endov	wment ►	%					
b Permanent endowment ▶	%						
c Temporarily restricted endowmer	nt ►	%					
The percentages in lines 2a, 2b,	and 2c should equa	<u> </u>					
3 a Are there endowment funds not organization by	in the possession of	the organization that	are held and admin	nistered for the	۲	Yes	No No
(i) unrelated organizations	•				3a(i)	$\neg \neg \uparrow$	
(ii) related organizations					3a(ii)	$\neg \neg$	
b If 'Yes' to 3a(II), are the related	organizations listed a	as required on Schedi	ule R?		3b	\rightarrow	
4 Describe in Part XIII the intended	-	· · · · · · · · · · · · · · · · · · ·			<u> </u>		
Part VI Land, Buildings, and							
Description of property			Cost or other	(c) Accumulated	(d) Bc	ok val	ue
= : : : : : : : : : : : : : : : :	1,-,0,	investment)	hasis (other)	depreciation	,		

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land		123,000.		123,000
b Buildings		1,665,920.	278,401.	1,387,519
c Leasehold improvements		110,714.	21,308.	89,406
d Equipment		22,366.	22,366.	C
e Other		35,992.	28,642.	7,350
otal. Add lines 1a through 1e. (Column (d) r	nust equal Form 990, Part X, co	olumn (B), line 10(c))	•	1,607,275

TEEA3302L 06/07/12

Schedule D (Form 990) 2012 CONGREGATION OF QU	JANG MINH TEMPL	E 36-3860533 Page
Part VII Investments - Other Securities. See For		
(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		ond or your market value
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(c)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12)		
Part VIII Investments - Program Related. See	Form 990, Part X,	line 13. N/A
(a) Description of investment type	(b) Book value	(c) Method of valuation. Cost or
415		end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
<u>(8)</u> (9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)		
Part IX Other Assets. See Form 990, Part X,		
	scription	(b) Book value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (b)	3), line 15.)	>
Part X Other Liabilities. See Form 990, Part	X, line 25.	
(a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2)		
(3)		
(4)		<u> </u>
(5)		
(6)		
(7)		_
(8)		_
(9)		
(10)		_
(11)		
Total (Column (b) must equal Form 990, Part X, column (B) line 25.)	to the community for an and	Label and the transport of the company of the compa
FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote under FIN 48 (ASC 740) Check here if the text of the footnote has been pro	to the organization's financial	statements that reports the organization's liability for uncertain tax positions
under FIN 48 (ASC 740) Check here if the text of the footbote has been pro-	TEE A22021 12/22/12	Schedule D (Form 990) 201

Schedule D (Form 990) 2012 CONGREGATION OF QUANG MINH TEMPLE	36-3860533	Page 4
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue pe	r Return N/A	
1 Total revenue, gains, and other support per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments.		
b Donated services and use of facilities 2b		
c Recoveries of prior year grants		
d Other (Describe in Part XIII) - 2 d		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	,	
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	. 5	
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Return N/A	
1 Total expenses and losses per audited financial statements .	1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities 2a		
b Prior year adjustments		
c Other losses 2c		
d Other (Describe in Part XIII)		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	
4 Amounts included on Form 990, Part IX, line 25, but not on line1:		
a Investment expenses not included on Form 990, Part VIII, line 7b · 4a		
b Other (Describe in Part XIII)		
c Add lines 4a and 4b	4 c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
Part XIII Supplemental Information		
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4 line 4, Part X, line 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to pr	ovide any additional inforr	nation.
	· 	
		· -
BAA	Schedule D (Form	n 990) 2012

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Grants and Other Assistance to Organizations,

Governments, and Individuals in the United States

2
Ξ
20

OMB No 1545 0047

Open to Public

Employer identification number

Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

General Information on Grants and Assistance OF OUANG MINH TEMPLE CONGREGATION Part

36-3860533

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∏Yes

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? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

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 Rart II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes'

(h) Purpose of grant or assistance											0	0	Schedule I (Form 990) (2012)
(g) Description of non cash assistance											•	 	Schedule 1
(f) Method of valuation (book, FMV, appraisal, other)	:												11/30/12
(e) Amount of non cash assistance					-								TEEA3901L 11/30/12
(d) Amount of cash grant											n the line 1 table		
(c) IRC section if applicable											rganizations listed	1 table	s for Form 990.
(b) EIN				L.							3) and government o	ons listed in the line	, see the Instruction
1 (a) Name and address of organization or government	(1)	(2)	(3)	(4)		(5)	(9)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(0)	<u></u>	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	BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

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

Page 2 (f) Description of non cash assistance Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non cash assistance (c) Amount of cash grant (b) Number of recipients additional information. (a) Type of grant or assistance Schedule I (Form 990) (2012) Part IV

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Schedule I (Form 990) (2012)

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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Department of the Treasury Internal Revenue Service

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 990-EZ.

Name of the organization CONGREGATION OF QUANG MINH TEMPLE	Employer Identification number
OUANG MINH TEMPLE	36-3860533
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS	
NO REVIEW WAS OR WILL BE CONDUCTED.	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY A	VAILABLE
NO DOCUMENTS AVAILABLE TO THE PUBLIC.	
NO_DOCOMENTO_AVAILABLE_TO_THE_TOBLIC.	
	_~

Form **4562**

Depreciation and Amortization (Including Information on Listed Property)

OMB No. 1545-0172 2012

Department of the Treasury Internal Revenue Service

► See separate instructions.

► Attach to your tax return.

Attachment Sequence No 179

Identifying number CONGREGATION OF OUANG MINH TEMPLE Name(s) shown on return 36-3860533 QUANG MINH TEMPLE Business or activity to which this form relates FORM 990/990-PF Part | 豫 Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I Maximum amount (see instructions) 2 Total cost of section 179 property placed in service (see instructions) 3 Threshold cost of section 179 property before reduction in limitation (see instructions). 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 6 (a) Description of property (b) Cost (business use only) (c) Elected cost Listed property Enter the amount from line 29 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction Enter the smaller of line 5 or line 8 10 10 Carryover of disallowed deduction from line 13 of your 2011 Form 4562 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line $1\underline{1}$ 12 Carryover of disallowed deduction to 2013. Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property Instead, use Part V Part Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service during the 14 tax year (see instructions) 15 15 Property subject to section 168(f)(1) election 16 16 Other depreciation (including ACRS) Part III ... MACRS Depreciation (Do not include listed property) (See instructions.) Section A 17 51,168. MACRS deductions for assets placed in service in tax years beginning before 2012 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B — Assets Placed in Service During 2012 Tax Year Using the General Depreciation System (a) Classification of property (b) Month and (C) Basis for depreciation (d) (e) (f) Method (g) Depreciation year placed (business/investment use only - see instructions) Recovery period Convention deduction 19a 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property f 20-year property S/L 25 vrs g 25-year property 27.5 yrs MM S/L h Residential rental 27.5 yrs MM S/L property

b 12-year c 40-year Part IV最 Summary (See instructions.)

21 Listed property Enter amount from line 28

I Nonresidential real

property

20 a Class life

Total, Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return Partnerships and S corporations— see instructions

For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.

FDIZ0812L 08/19/12

MM

MM

MM

39 yrs

12 yrs

40 yrs

Section C - Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System

S/L

S/L

S/L

S/L

S/L

21

22

Form 4562 (2012)

51,168

<u> </u>		Property (In		oles, cert	aın othe	r vehicl	es, certa	ain c	omputers	s, and p	roperty us	sed for e	ntertain	ment,	
	Note: Fo	or any vehicle fo s (a) through (c)	or which you a	re using t all of Se	he stan ction B.	dard mi and Se	leage ra	te or ıf ap	deductii plicable	ng lease	e expense	, comple	et eonly 2	4a, 24b,	
		n A – Deprecia								limits t	for passer	nger auto	mobiles	5)	
24 a	Do you have evid	ience to support t	the business/inv	estment us	se claime	:d? [X Yes		No 24b	If 'Yes,' ı	is the eviden	ce written?	, [X Yes	No
	(a) Type of property (list vehicles first)	(b) Date placed in service	(C) Business/ investment use percentage	(d) Cost other b	or	(busine	(e) Basis for depreciation (business/investment use only)				(g) Method/ Convention		(h) Depreciation deduction		(i) lected tion 179 cost
25		ciation allowance n 50% in a qual	e for qualified				service	durii	ng the ta	x year a	and 25				
26		more than 50%										<u> </u>			
TOY	OTA VAN	10/01/99	100.0	13	,796.		13,79	96.	5.0	0 20	OODB HY				-
27	Property used	50% or less in a	a gualified bus	inect lice											
	Property used	30% or less in a		11622 USE	· · · · · · · · · · · · · · · · · · ·							T			
		n column (h), lir	-					oage	1		28				<u></u>
29	Add amounts i	n column (ı), lın							(. 1 . 1				29	<u>'</u>	
<u></u>	-1-+- +	n for vehicles u		Section I						wper' o	r related r	person 1	if you pr	ovided v	ahiclas
to yo	piete this section our employees,	first answer the	questions in S	Section C	to see i	f you m	eet an e	excep	otion to c	ompleti	ng this se	ction for	those \	/ehicles.	CHICIGS
				(2	a)	(b)			(c)		(d)		e)		
30	 Total business/investment miles driven during the year (do not include commuting miles) 				Vehicle 1		Vehicle 2 V		/ehicle 3 Ve		Vehicle 4 Vel		Vehicle 5 Vehic		cle 6
31	-	niles driven during t	the year												
32	Total other per	rsonal (noncomi	muting)												
33		ven during the y ih 32	year. Add												
	•			Yes	No	Yes	No	Ye	s No	Yes	s No	Yes	No	Yes	No
34	Was the vehicl during off-duty	e available for phours?	personal use												
35	Was the vehicl than 5% owne	e used primarily r or related pers	y by a more son?												
36	Is another veh personal use?	icle available fo													
Ansv	wer these quest	Section ions to determin	C – Questions										whare n	ot more	than
5%	owners or relate	d persons (see	instructions).												
37	Do you mainta	ın a written poli yees?	cy statement t	hat prohil	bits all p	ersonal	l use of	vehic	cles, incli	uding co	ommuting	,		Yes	No
38	Do you mainta employees? So	in a written poli ee the instructio	cy statement t	hat prohil s used by	bits pers	sonal us ate offic	se of vel ers, dire	ctors	s, except s, or 1%	commu or more	iting, by y owners	our .			
39	Do you treat al	Il use of vehicle	s by employee	s as pers	onal us	e [?]									
40	Do you provide vehicles, and r	e more than five etain the inform	vehicles to you	our emplo ?	yees, ol	otain inf	formatio	n fro	m your e	mploye	es about t	the use o	of the		
41	Do you meet the Note: If your a	ne requirements nswer to 37, 38	concerning q , 39, 40, or 41	ualified a	utomobi do not d	le demo	onstratio e Sectio	n us n B	e? (See i	instructi overed v	ions.). rehicles				
Pa	ते ∭ Amor	ization													
	De	(a) scription of costs	_	Date ar	(b) mortization egins		(C) Amortizat amount	le		(d) Code section	P	(e) nortization eriod or ercentage		(f) Amortization for this year	
42	Amortization of	of costs that beg	jins during you	r 2012 ta	x year (see inst	tructions):							
				-		- -			+				+		
43	Amortization	of costs that be	gan before you	ır 2012 ta	x year .					_	<u></u>	43	1		
44		nounts in columi			•		report					44			
						1Z0812L 0							F	orm 456	2 (2012