

TAXABLE YEAR
2004

**California Corporation
Franchise or Income Tax Return**

FORM
100

For calendar year 2004 or fiscal year beginning month		day	year 2004, and ending month	day	year 20
California corporation number 2628500		Federal employer identification number (FEIN) 20-1807670			
Corporation name BAY AREA BANGLADESH ASSOCIATION INC					
Address including Suite or Room no. C/O MIZANUR M RAHMAN 11583 COUNTRY SPRING CT			PMB no.		
City Cupertino		State CA	ZIP Code 95014-		
A Final return? <input checked="" type="radio"/> <input type="checkbox"/> Dissolved <input type="checkbox"/> Surrendered (withdrawn) <input type="checkbox"/> Merged/ Reorganized <input type="checkbox"/> IRC Section 338 sale <input type="checkbox"/> QSub election. Enter date <input type="checkbox"/>					
B Is income included in a combined report of a unitary group? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, indicate: <input type="checkbox"/> wholly within CA (R&TC 25101.15) <input type="checkbox"/> within and outside of CA					
C If the corp. filed on a water's-edge basis pursuant to R&TC Sections 25110 and 25113 in previous years, enter the date the water's-edge election ended <input type="checkbox"/>					
D Was the corporation's income included in a consolidated federal return? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

Questions continued on Page 2

State Adjustments	1	Net income (loss) before state adjustments. See instructions	• 1	2,754.
	2	Amount deducted for foreign or domestic tax based on income or profits from Schedule A	• 2	
	3	Amount deducted for tax under the provisions of the Corporation Tax Law from Schedule A	• 3	
	4	Interest on government obligations	• 4	
	5	Net California capital gain from Schedule D, line 11	• 5	
	6	Depreciation and amortization in excess of amount allowed under California law. Attach form FTB 3885	• 6	
	7	Net income from corporations not included in federal consolidated return. See instructions	• 7	
	8	Other additions. Attach schedule(s)	• 8	
	9	Total. Add line 1 through line 8	• 9	2,754.
	10	Intercompany dividend deduction. Attach Schedule H (100)	• 10	
	11	Dividends received deduction	• 11	
	12	Additional depreciation allowed under CA law. Attach form FTB 3885	• 12	
	13	Capital gain from federal Form 1120 or Form 1120A, line 8	• 13	
	14	Contributions	• 14	
	15	EZ, LAMBRA, or TTA busn. expense and EZ net interest deduction	• 15	
	16	Other deductions. Attach schedule(s)	• 16	
	17	Total. Add line 10 through line 16	• 17	
	18	Net income (loss) after state adjustments. Subtract line 17 from line 9. See instructions	• 18	2,754.
CA Net Income	19	Net income (loss) for state purposes. Complete Sch. R if apportioning income. See instructions	• 19	2,754.
	20	Net operating loss (NOL) carryover deduction. See instructions	• 20	
	21	Pierce's disease, EZ, LARZ, TTA, or LAMBRA NOL carryover deduction. See instructions	• 21	
	22	Disaster loss carryover deduction. See instructions	• 22	
	23	Net income for tax purposes. Combine line 20 through line 22. Then subtract from line 19.	• 23	2,754.
Taxes	24	Tax. <u>8.84</u> % x line 23 (not less than minimum franchise tax, if applicable)	■ 24	243.
	25	Enter credit name _____ code no. _____ and amount	▶ 25	
	26	Enter credit name _____ code no. _____ and amount	▶ 26	
	27	To claim more than two credits, see instructions	• 27	
	28	Add line 25 through line 27	■ 28	
	29	Balance. Subtract line 28 from line 24 (not less than minimum franchise tax, if applicable)	■ 29	243.
	30	Alternative minimum tax. Attach Schedule P (100). See instructions	■ 30	
31	Total tax. Add line 29 and line 30	■ 31	243.	
Payments	32	Overpayment from prior year allowed as a credit	■ 32	
	33	2004 Estimated tax payments. See instructions	■ 33	
	34	2004 Nonresident or real estate withholding. See instructions	■ 34	
	35	Amount paid with extension of time to file tax return	■ 35	
	36	Total payments. Add line 32 through line 35	■ 36	
Refund - Direct Deposit of Refund (DDR) or Amount Due	37	Franchise or income tax due. If line 31 is more than line 36, subtract line 36 from line 31. Go to line 40	■ 37	243.
	38	Overpayment. If line 36 is more than line 31, subtract line 31 from line 36	■ 38	
	39	Amount of line 38 to be credited to 2005 estimated tax	■ 39	
	40	Use Tax. See instructions	• 40	
	41	Refund. If the sum of line 39 and 40 is less than line 38, then subtract the result from line 38. See DDR inst.	■ 41	
		Fill in the account information to have the refund directly deposited. a Routing number	• 41a	
		b Type: Checking <input checked="" type="radio"/> Savings <input type="radio"/> c Account Number	• 41c	
42	a Penalties & interest. b <input type="checkbox"/> Check if estimate penalty computed using Exception B or C. See instructions	■ 42a	4.	
43	Total amount due. Add line 37, line 39, line 40, and line 42a. Then, subtract line 38 from the result	■ 43	247.	

Schedule D California Capital Gains and Losses

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less. Use additional sheet(s) if necessary.

(a) Kind of property and description (Example, 100 shares of Z Co.)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Cost or other basis plus expense of sale	(f) Gain (loss) ((d) less (e))
1					
2 Short-term capital gain from installment sales from form FTB 3805E, line 26 or line 37					2
3 Unused capital loss carryover from 2003					3
4 Net short-term capital gain (loss). Combine line 1 through line 3					4

Part II Long-Term Capital Gains and Losses - Assets held More Than One Year. Use additional sheet(s) if necessary.

5					
6 Enter gain from Schedule D-1, line 9 and/or any capital gain distributions					6
7 Long-term capital gain from installment sales from form FTB 3805E, line 26 or line 37					7
8 Net long-term capital gain (loss). Combine line 5 through line 7					8
9 Enter excess of net short-term capital gain (line 4) over net long-term capital loss (line 8)					9
10 Net capital gain. Enter excess of net long-term capital gain (line 8) over net short-term capital loss (line 4)					10
11 Total line 9 & line 10. Enter here & on Fm. 100, Side 1, line 5. NOTE: If losses exceed gains, carry forward losses to 2005					11

Schedule J Add-On Taxes and Recapture of Tax Credits. See instructions.

1 LIFO recapture due to S corporation election, IRC Sec. 1363(d) deferral: \$		1
2 Interest computed under the look-back method for completed long-term contracts (Attach form FTB 3834)		2
3 Interest on tax attributable to installment:		
a Sales of certain timeshares and residential lots		3a
b Method for nondealer installment obligations		3b
4 IRC Section 197(f)(9)(B)(ii) election		4
5 Credit recapture name:		5
6 Combine line 1 through line 5, revise Side 1, line 37 or line 38, whichever applies, by this amount. Write "Schedule J" to the left of line 37 or line 38		6

Questions (continued from Side 1)

E Principal busn. activity code. (Do not leave blank): 813000
 Business activity CIVIC & CULTURAL
 Product or service SOCIAL SERVICE
F Date incorporated: 10/06/2004 • Where: State CA Country _____
G Date business began in CA or date income was first derived from CA sources: 07/01/2004
H First return? Yes No If "Yes" and this corporation is a successor to a previously existing business, check appropriate box.
 (1) sole proprietorship (2) partnership (3) joint venture (4) corporation (5) other
 (attach statement showing name, address and FEIN of previous business)
I Doing business as" name: C/O MIZANUR M RAHMAN
J Did this corp./its subsidiary(ies) have a change in control/ownership, or acquire ownership or control of any other legal entity this year? Yes No
K At any time during taxable year, was more than 50% of the voting stock:
a Of the corporation owned by any single interest? Yes No
b Of another corporation owned by this corporation? Yes No
c Of this and one or more other corporations owned or controlled, directly or indirectly, by the same interests? Yes No
 If a or c is "Yes," enter the country of the ultimate parent _____
 If a, b or c is "Yes," furnish a statement of ownership indicating pertinent names, addresses, and percentages of stock owned. If owner(s) is an individual, provide the SSN.
L Has the corporation included a Reportable Transaction, Listed Transaction or Registered Tax Shelter within this return? (see inst.) Yes No
 If yes, complete and attach Form 8886 or Form 8271 for each transaction.

M Is this corp. apportioning income to CA using Sch. R? Yes No
N How many affiliates in the combined report are claiming immunity from taxation in California under Public Law 86-272? _____
O Corporation headquarters are: (1) Within California
 (2) Outside of CA, within the U.S. (3) Outside of the U.S.
P Location of principal acct. records SAME AS BUSINESS
Q Accounting method: (1) Cash (2) Accrual (3) Other
R Did this corporation or one of its subsidiaries make a federal election to be treated as a foreign sales corporation (FSC) or a domestic international sales corporation (DISC)? Yes No
S Is this corporation or any of its subsidiaries a RIC? Yes No
T Is this corp. treated as a REMIC for CA purposes? Yes No
U Is this corporation a REIT for California purposes? Yes No
V Is this corporation an LLC or limited partnership electing to be taxed as a corporation for federal purposes? Yes No
W Is this corporation to be treated as a credit union? Yes No
X Is the corporation under audit by the IRS or has it been audited by the IRS in a prior year? Yes No
Y Have all required information returns (e.g. Federal Forms 1099, 5471, 5472, 8300, 8865, etc.) been filed with the Franchise Tax Board? N/A Yes No
Z Does the taxpayer (or any corporation of the taxpayer's combined group, if applicable) own 80% or more of the stock of an insurance company? Yes No

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

Signature of officer	Title	Date	Telephone
Preparer's signature <u>Chowdhury Alam SA</u>		08/01/2005	Preparer's SSN/PTIN P00077540
Firm's name (or yours, if self-employed) and address	ALAM ACCOUNTANCY CORPORATION 1799 HAMILTON AVENUE STE 206 San Jose CA 95125-		FEIN 77-0462987 Telephone 408-445-1120