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990-EZ

Department of the Treasury Internal Revenue Service

Short Form 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)

➤ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

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

OMB No 1545-1150

2009

Open to Public Inspection

ΑI	For the	2009 calend	ar year,	or tax year beginning , 2009, and e	nding				, 20
В	Check if a	ck if applicable please use IRS riendship Organization of the		C Name of organization		D Emplo	oyer ide	ntifi	cation number
	Address c			Friendship Organization of the Diocese of Vinh				I-27	64265
	Name cha	ange	label or					ımbe	ır
=	Initial retu		In 1997 North Star Circle						630386
=	Terminate		Specific City or town, state or country, and ZIP + 4						
=		ded return Instruc- tions San Jose, CA 95131 City or town, state or country, and 2IP + 4 F Greation pending							JII
느								_	Cook D Assemble
	• Seci	tion 501(c)(3)		rations and 4947(a)(1) nonexempt charitable trusts must attach pleted Schedule A (Form 990 or 990-EZ).		specify)		٣	Cash L Accrual
			a co:					—	
_		_						-	nization is not
	l Website: ▶ required to att							hed	ule B (Form 990,
<u>J 1</u>	ax-exe			nly one) — ✓ 501(c) (03) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527		Z, or 990			
	Check		_	zation is not a section 509(a)(3) supporting organization and its gross recei	-	-			nan \$25,000 A
_				turn is not required, but if the organization chooses to file a return, be su			ete ret	urn	
				e 9 to determine gross receipts; if \$500,000 or more, file Form 900 instead of f					76.683.00
Р	art I	Revenu	ie, Exp	enses, and Changes in Net Assets or Fund Balances (S	See the	instruc	ctions	for	Part I.)
	1	Contribution	ons, gif	ts, grants, and similar amounts received		[1		76,683.00
	2	Program s	ervice r	evenue including government fees and contracts		L	2		
	3	Membersh	no dues	s and assessments		[3		
	4	Investmen	•			. [4		
	5a			m sale of assets other than inventory 5a		· t			
	1 .			er basis and sales expenses			- 1		
	b				-1				
Ō	C	•	•	n sale of assets other than inventory (Subtract line 5b from line 5a	•	+	5c	—	
Revenue	6	-		sivities (complete applicable parts of Schedule G). If any amount is from gaming, ch	ieck nere	ן ט'	- 1		
Š	а	Gross reve	enue (no	ot including \$ of contributions					
æ		reported o	n line 1)			1		
	b	c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)							
	C								
_	7a								
2010	Ь								
~ ∪	C								
ക	8	Other revenue (describe							
e	9						8 9		76,683.00
Z	10	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8							75,470.00
	11	Grants and similar amounts paid (attach schedule)							
		Benefits baid to or for members							
	12	Salaries, other compensation, and employee benefits							
翯	13	Professional fees and other payments to independent contractors .MAY. 1.3.2010.							
矞	14	Occupancy, rent, utilities, and maintenance							
4	15	Printing, p	ublicati	ons, postage, and shipping	117	$\cdot \cdot $	15		1,959.91
SCAPPIED	16					<u>l</u> .)	16		5,747.80
_	17			Add lines 10 through 16			17		83,177.71
S	18			for the year (Subtract line 17 from line 9)			18		(6,494.71)
set	19	Net assets	s or fur	d balances at beginning of year (from line 27, column (A)) (mus	st agree	with			
Ą		end-of-yea	ar figure	e reported on prior year's return)		[19		31,817.04
Net Assets	20	Other char	nges in	net assets or fund balances (attach explanation)					
Z	21	Net assets or fund balances at end of year. Combine lines 18 through 20							25,322.33
E	art II	Balance	e Shee	ets. If Total assets on line 25, column (B) are \$1,250,000 or more			instea	d of	
	(See the instructions for Part II.) (A) Beginning								(B) End of year
2	2 C:	Cash, savings, and investments						22	23,134.55
2		Land and buildings						23	
2							37.78		2,187.78
	25 Total assets						17.04	$\overline{}$	25,322.33
2		otal assets otal liabilitie					_	26	
2	7 N	et assets o	r fund t	palances (line 27 of column (B) must agree with line 21)		31.8	17.04		25,322.33
_						٠,,٠			,

LOI III S	390-EZ (2009)					Page Z
Par	Statement of Program Service Accom	plishments (See the instru	uctions for Part II	1.)		Expenses
What	his the organization's primary exempt purpose?	Charity	<u> </u>			ared for section
Desc	ribe what was achieved in carrying out the org)(3) and 501(c)(4) nizations and section
	ner, describe the services provided, the number of	f persons benefited, and o	other relevant infor	mation for		(a)(1) trusts, optional
each	program title.					hers)
28	Grants paid to the Diocese of Vinh, Vietnam, through	sponsoring charitable, educ	ational, human and	j		
	cultural programs	i				
	(Grants \$ 75,470.00) If this amount	includes foreign grants, che	eck here	. ▶ ☑	28a	75,470.00
29	Activities to promote friendship, unity, understanding	rs				
		includes foreign grants, che			29a	5,331.41
30	Organizing meetings, general conventions, festivals	, parties, conferences to carr	y out the organizati	on's		
	purposes					
	(Grants \$) If this amount	includes foreign grants, che	eck here	. ▶ 🗆	30a	2,376.30
31	Other program services (attach schedule)					
		includes foreign grants, che			31a	0
					32	83,177.71
Par	List of Officers, Directors, Trustees, and Key					<u></u>
	(a) Name and address	(b) Title and average hours per week	(c) Compensation (If not paid,	(d) Contribution employee benefit		(e) Expense account and
		devoted to position	enter -0)	deferred compe	nsation	other allowances
	d Hoa Phan	President, 10 hrs/wk				
	North Star Circle, San Jose, CA 95131		0		0	0
	Nguyen	Secretary, 8 hrs/wk			_	
	Latona Ct., San Jose, CA 95111		0	_	0	0
	e Nguyen	Treasurer, 6 hrs/wk			_	
2077	Alviso Adobe Ct., Milpitas, CA 95035		0		0	0
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Form 99	0-EZ (2009)		F	age 3
Part	V Other Information (Note the statement requirements in the instructions for Part V.)			
٠,			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		✓
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		1
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		✓
ь 36	If "Yes," has it filed a tax return on Form 990-T for this year?	35b 36		✓
37a b 38a	Enter amount of political expenditures, direct or indirect, as described in the instructions Did the organization file Form 1120-POL for this year?	37b 38a		√
b 39 a	If "Yes," complete Schedule L, Part II and enter the total amount involved			
b 40a	Gross receipts, included on line 9, for public use of club facilities			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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	40b		✓
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		√
41	List the states with which a copy of this return is filed. ▶ CALIFORNIA			
42a			63038	6
	Located at ▶ 1997 North Star Circle, San Jose, CA ZIP + 4 ▶	95	131	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority		V	NI.
	over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	res	No
	If "Yes," enter the name of the foreign country: ▶	420		-
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ▶	42c		_ ✓
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year		•	▶ □
			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44		1
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45		1
		00		

							<u> </u>		
Part VI	Section 501(c)(3) organizations and s 501(c)(3) organizations and section 494 and complete the tables for lines 50 and	17(a)(1) nonexempt cha	nexempt char aritable trusts	ritable trusts only. A must answer question	dl sec ons 40	tion 5–49l)		
	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								
	•				46				
	Old the organization engage in lobbying activities				47		-		
	s the organization a school as described in section		-		48 49a				
	Did the organization make any transfers to an ex	-	-		49a				
	f "Yes," was the related organization a section 5 Complete this table for the organization's five hi			nan officers, directors,	$\overline{}$	es an	d key		
e	employees) who each received more than \$100,0	000 of compensation fror			ter "N	one."			
((a) Name and address of each employee paid more than \$100,000				ac	count a	Expense ount and allowances		
None									
			-		<u> </u>				
		-							
					 				
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		<u> </u>			\vdash				
		1			İ				
			- 		 				
					1				
f 7	otal number of other employees paid over \$100	0,000	0		<u> </u>				
None	(a) Name and address of each independent contractor	paid more than \$100,000		(b) Type of service	(c) Co	npensa	ition		
d 1	Total number of other independent contractors e	each receiving over \$100,	▶_	0					
	Under penalties of perjury, I declare that I have examine and belief, it is true, correct, and complete Declaration								
Sign Here	15/10/2610								
	David Hoa Phan, President Type or print name and title			 					
Paid	Preparer's signature	Date	Check if self- employed	Preparer's identifying num	mber (Se	— e instruc	tions)		
Preparer Use Only	Pr'S Firm's name (or								
May the	RS discuss this return with the preparer shows	n above? See instructions	s	▶ [Yes		(2009)		
				, ,	••		,,		

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047
2009
Open to Public

Inspection

Department of the Treasury Internal Revenue Service

Employer identification number Name of the organization Friendship Organization of the Diocese of Vinh 2764265 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 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 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 in 5 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 An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33\% 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% % 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). ☐ 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 d ☐ Type III-Other a Type I **b** Type II e By checking this box. I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). f If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 11g(i) and (iii) below, the governing body of the supported organization? 11g(ii) (ii) A family member of a person described in (i) above? . . . 11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . Provide the following information about the supported organization(s). (i) Name of supported (iii) Type of organization (ii) EIN (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of organization (described on lines 1-9 in col (i) listed in your the organization in organization in col above or IRC section governing document? col (i) of your (i) organized in the (see instructions)) support? US? Yes No Yes Yes

Total

_ •	(Complete only if you chec					and 170(b)(1)(A)(VI)
	tion A. Public Support	(-) 000E	(h) 000C	(-) 0007	(4) 0000	(-) 0000	(f) Total
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(t) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	92,056.72	82,023.74	55,006.00	64,767.00	76,683.00	370,536.46
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
4	Total. Add lines 1 through 3	92,056.72	82,023.74	55,006.00	64,767.00	76,683.00	370,536.46
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						17,897.50
6	shown on line 11, column (f) Public support. Subtract line 5 from line 4.						352,638.96
Sec	tion B. Total Support						002,000.00
	lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	92,056.72	82,023.74	55,006.00	64,767.00	76,683.00	370,536.46
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	33.55	379.66	690.44	572.15	0	1,675.80
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)	0	0	0	0	0	0
11	Total support. Add lines 7 through 10 .						372,212.26
12 13	Gross receipts from related activities, etc First five years. If the Form 990 is for organization, check this box and stop he	the organizatio	•	 id, third, fourth, 		ear as a sectio	n 501(c)(3)
Sec	tion C. Computation of Public Su	pport Percer	ntage				
14	Public support percentage for 2009 (line	6, column (f) div	vided by line 1	, column (f))		14	94.74 %
15 16a	Public support percentage from 2008 Sci 331/3 % support test—2009. If the organi			 on line 13, and l	 ine 14 is 33⅓ 9	15 6	95.36 %
	and stop here. The organization qualifies	as a publicly s	upported organ	nization			▶ 🔽
b	33% % support test – 2008. If the organization qua				and line 15 is :	33½ % or more,	check this
17a	10%-facts-and-circumstances test — 20 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-circum	acts-and-circum	nstances" test,	check this box a	and stop here.	Explain in Part	IV how the
ь 18	10%-facts-and-circumstances test—2008 more, and if the organization meets the "forganization meets the "facts-and-circumstate Private foundation. If the organization did	acts-and-circum ances" test. The	stances" test, c organization qua	theck this box a difies as a public	ind stop here . ly supported or	Explain in Part ganization	IV how the

	ule A (Form 990 or 990-EZ) 2009			<u></u>			Page 3
Par	(Complete only if you checke)(2)		
Sec	tion A. Public Support						
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 200	9 (f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not 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 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 its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3					<u> </u>	
b	received from disqualified persons . 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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
Sec	tion B. Total Support					, .	<u></u>
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 200	9 (f) Total
9	Amounts from line 6	<u> </u>				ļ	
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)			<u> </u>			
14	First five years. If the Form 990 is for organization, check this box and stop	here	<u></u>	nd, third, fourt	h, or fifth tax y	ear as a s	ection 501(c)(3) ▶ □
Sec	tion C. Computation of Public Su					, , , , , , , , , , , , , , , , , , , 	
15	Public support percentage for 2009 (lin					15	<u>%</u>
16 Sec	Public support percentage from 2008 Stion D. Computation of Investmen			· · · · · ·	<u> </u>	16	<u> % _</u>
					-l (5)	17	%
17	Investment income percentage for 200 Investment income percentage from 20	*	• •	-		18	
18 19a							
	17 is not more than 33% %, check this box and stop here. The organization qualifies as a publicly supported organization $ ightharpoonup$						
b	33% % support tests – 2008. If the organ line 18 is not more than 33% %, check this	nzation did not s box and stop	check a box on the here. The organic	n iine 14 or line anization qualifie	19a, and line s as a publicly	supported	organization ►

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

Schedule A (Fo	rm 990 or 990-EZ) 2009 Page	4
Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.	
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		 .
	•••••••••••••••••••••••••••••••••••••••	
		
•		