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.

Α	For th	ne 2009 calendar year, or tax year beginning and ending	9	
в	Check is applicat	C Name of organization	D Employer identifi	cation number
Г	Addr	ess label or PACIFIC LINKS FOUNDATION		
	Nami chan	ge type. Doing Business As	94-3	397768
	retun	n I See I NUMber and street (or P() how it mail is not delivered to street address) I Room/		
	ated	Instruc- 554 VALLET WAT	510	435-3035
-	lretun	Gity or town, state or country, and ZIP + 4	G Gross receipts \$	527,591.
L	Appli tion pend		H(a) Is this a group re	
		F Name and address of principal officer: DIEP VUONG	for affiliates?	Yes X No
		SAME AS ABOVE	H(b) Are all affiliates inc	
		tempt status: X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527		list. (see instructions)
			H(c) Group exemptio	
0000000	art I		Year of formation: 2001 N	State of legal domicile: CA
ø	1	Briefly describe the organization's mission or most significant activities: MISSION		
Activities & Governance		SUSTAINABLE DEVELOPMENT OF VIETNAMESE COMMUN	ITIES AND THE	ENRICHMENT
ern	2	Check this box  If the organization discontinued its operations or disposed of its operations of the organization discontinued its operations of the organization dits operations of the organization discontinued its operati		sets.
NO1	3	Number of voting members of the governing body (Part VI, line 1a)	3	6
~ð	4	Number of independent voting members of the governing body (Part VI, line 1b)		4
es	5	Total number of employees (Part V, line 2a)	5	0
livit	6	Total number of volunteers (estimate if necessary)		5
Act		Total gross unrelated business revenue from Part VIII, column (C), line 12		0.
	b	Net unrelated business taxable income from Form 990-T, line 34		0.
			Prior Year	Current Year
an	8	Contributions and grants (Part VIII, line 1h)	314,798.	526,686.
Revenue	9	Program service revenue (Part VIII, line 2g)	3,150.	0.05
Re		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	5,600.	905.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	222 540	F07 F01
		Total revenue • add lines 8 through 11 (must equal Part VIII, column (A), line 12)	323,548.	527,591.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4)	13,213.	
(0)		Salaries, other compensation, employee benefits (Part IX, column (A), line 5-10)		
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		· · · · ·
bei	b	Total fundraising expenses (Part IX, column (D), line 25)		
ŵ		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	370,172.	620,117.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	385,447.	620,117.
	19	Revenue less expenses. Subtract line 18 from line 12	<61,899.	
0r CeS			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	389,282.	295,402.
t AS	21	Total liabilities (Part X, line 26)	1,794.	440.
ŽĒ	22	Net assets or fund balances. Subtract line 21 from line 20	387,488.	294,962.
Pe	irt II	Signature Block		
		Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and stateme and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowle	nts, and to the best of my knowledge	e and belief, it is true, correct,
		, Kinha	1 11/0	1
Sign Here		Signature of officer	N/ 1/	//0
		DIEP VUONG, PRESIDENT		
		Type or print name and title		*****
		Date 4	Check if Preparer	's identifying number
Paid Preparer's signature		hopardi s	self- employed	ructions)
	arer's	Firm's name (or PMB HET, TN DONOVAN		
Use	Only	self-employed), 50 FRANCISO STREET, SUITE 120		
		address, and SAN FRANCISCO, CA 94133	Phone nn > 41	5-217-3592
Mav	the IF	RS discuss this return with the preparer shown above? (see instructions)		X Yes No
	01 02-04		instructions.	Form <b>990</b> (2009)
		EE SCHEDULE O FOR ORGANIZATION MISSION STATE		ION

COMMUNITIES AND THE ENRICHMENT OF THEIR CULTURAL HERITAGE.         COMMUNITIES AND THE ENRICHMENT OF THEIR CULTURAL HERITAGE.         The putp form 990 or 980-627         If "Was. Jacobas these now services on Schedule 0.         Did the organization cease conducting, or make significant changes in how it conducts, any program services by expenses. Section 501(6)(3) and 501(6)(4) organizations and section 497(4)(1) buts are required to report the amount of grams and allocations to others, the total events, and revenue, farvi, for each program services program services by expenses. Section 501(6)(3) and 501(6)(4) organizations and section 497(4)(1) buts are required to report the amount of grams and allocations to others, the total events, and revenue, farvi, for each program service sepreted. SEE SCHEDULE O FOR CONTINUATION (S)         40       (Code: )(Expenses 3) 56(5) 6411. including grants of 3) [Pierenue 5 ADAPT SEEKS TO PREVENT THE TRAPFICKING OF YOUNG GILLS AND WOREN BY ENHANCING THEIR EDUCATIONAL ATTAINMENT AND INPROVING THEIR VOCATIONAL CHOICES THROUGH A SUPPORTIVE WEB OF SERVICES. ADAPT IS A COLLABORATIVE EFFORT OF THREE JUETNAMESES-AMERICAN NOROVERMENTIAL ORGANIZATIONS: PACIFIC LINKS FOUNDATION, EAST MEETS WEST FOUNDATION AND INTERNATIONAL CHILDERN ASSISTANCE NETWORK. ADAPT IS SUPPORTS THE YIEN UNITED STATES AGENCY FOR INTERNATIONAL DEVELOPMENT (USAID). SINCE AUGUST 200 OF SEPTEMEER 2007, ADAPT HAS REACHED OUT TO OVER 6, 6300 CHILDERN, MOMEN PARENTS, AND SOCIAL WORKERS AND COMMUNITY LEADERS TO BOLSTER THEIR MARAENESS OF TRAINING AND EMPLOYMENT. ADAPT ALSO SUPPORTS THE FIRST SHELTER DEVOTED DT RAFFICKING VICTING VICTUS IN THE MEKONG DELTA.         40       (Code: )(Expenses 1) 16, 987. Indiating metro of Selling mitor of ENDEXT DEVELOPMENT AND EMPLEMENT THEIR OWN LOCAL PROJECTS THAT FROMOTE THE PROJ	1	Briefly describe the organization's mission: MISSION IS TO SUPPORT THE SUSTAINABLE DEVELOPMENT OF VIETNAMESE
the prior form 800 or 800 E27       □ Yes: (a)         th 'Yes: (accords these new services on Schedule 0.       >         3       Did the organization cause conducting, or make significant changes in how it conducts, any program services by expenses.         Sector 601(c)(3) and 301(c)(4) organizations and section 4047(a)(1) trusts are required to report the amount of grants and allocations to these, the total sepenses, and revenue, af any, for each program Services provide the amount of grants and allocations to these, the total sepenses, and revenue, af any, for each program Services (a) (Expenses 5) 366, 641, in culture reported.         40       (Code: ) (Expenses 1) 366, 641, in culture reported.       ) [fiewenue 5]         41       Code: ) (Expenses 1) 366, 641, in culture reported.       DECE SCHEDULE O FOR CONTINUATION(S)         42       (Code: ) (Expenses 1) 366, 641, in culture grants and allocations to the service of the second seco		COMMUNITIES AND THE ENRICHMENT OF THEIR CULTURAL HERITAGE.
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<ul> <li>3 Did the organization cases conducting, or make significant changes in how it conducts, any program services?</li></ul>	2	the prior Form 990 or 990-EZ?
4 Describ the seampt purpose achievements for each of the organization's three largest program services by expressions so that the seame provide is and the seame provide is and actions to these, the total expenses, and revenue, if any, for each program service reported. SEE SCHEDULE O FOR CONTINUATION(S) 4 (Code:  Expenses 1656,641. including grants ofs )(Revenue \$ ADAPT SEEKS TO PREVENT THE TRAFFICKING OF YOUNG GIRLS AND WOMEN BY ENHANCING THEIR DEUCATIONAL ATTAINMENT AND IMPROVING THEIR YOUNG THEIR YOUNG CHICKS. CHOICES THROUGH A SUPPORTIVE WEB OF SERVICES. ADAPT IS A COLLABORATIVE EFFORT OF THREE VIETNAMESE -AMBEICAN NONOVERIMENTAL ORGANIZATIONS: PACIFIC LINKS FOUNDATION, EAST MEETS WEST FOUNDATION AND INTERNATIONAL CHILDREN ASSISTANCE NETWORK. ADAPT IS SUPPORTED IN PARE BY THE UNITED STATES AGENCY FOR INTERNATIONAL DEVELOPMENT (USAID). SINCE AUGUST 2100 TO SEPTEMBER 2009, ADAPT HAS REACHED OUT TO OVER 6,800 CHILDREN, WOMEN PARENTS, AND SOCIAL WORKERS AND COORMUNITY LEADERS TO BOLSTER THEF IR AMARENESS OF TRAFFICKING RISKS AND TO OFFER REALISTIC ALTERNATIVES OF EDUCATION, JOB TRAINING AND EMPLOYMENT. ADAPT ALSO SUPPORTS THEF FIRST SHELTER DEVOTED TO TRAFFICKING VICTIMS IN THE MEKONG DELTA. 40 (Code )(Expenses 1 16,937. including grants ofs ))(MWCD SEEKS TO EMPOWER WOMEN IN THE MEKONG DELTA. 40 (Code )(Expenses 1 166,236. including grants of ))(MWCD REVENCES, AND OTHE TOOLS TO DESIGN AND IMPLEMENT THENE MENONG DELTA. 40 (Code )(Expenses 1 156,236. including grants of ))(MWCD REVENCES, AND OTHE TOOLS TO DESIGN AND IMPLEMENT THENE WOMEN WITH SKILLS, RESOURCES, AND OTHE TOOLS TO DESIGN AND IMPLEMENT THENE WOMEN WITH SKILLS, RESOURCES, AND OTHE TOOLS TO DESIGN AND IMPLEMENT THENE WOMEN WITH SKILLS, RESOURCES, AND OTHE TOOLS TO DESIGN AND IMPLEMENT THENE WOMEN WITH SKILLS, RESOURCES, AND OTHE TOOLS TO DESIGN AND IMPLEMENT THENE WOMEN WITH SKILLS, RESOURCES, AND OTHE TOOLS TO DESIGN AND IMPLEMENT THENE WOMEN WITH SKILLS, RESOURCES, AND OTHE TOOLS TO DESIGN AND IMPLEMENT	3	
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Form 990 (2009)

Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Х
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		_X_
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable	11		<u> </u>
٠	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI.			
٠	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	• Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		v	
	Schedule D, Parts XI, XII, and XIII.	12	Х	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A X			v
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i>	13	Х	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Δ	
a	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,		х	
45	and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	14b	<u>л</u>	
15		45		х
16	or entity located outside the United States? <i>If</i> "Yes," <i>complete Schedule F, Part II</i>	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		- 17
17	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	- 17		
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10		
13		19		х
20	complete Schedule G, Part III	20		X
20		20	000	

PACIFIC LINKS FOUNDATION

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			Yes	No
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		X
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		x
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		x
24a	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, that was issued after December 31, 2002? <i>If</i> "Yes," <i>answer lines 24b through 24d and complete Schedule K. If</i> "No", <i>go to line 25</i>	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	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		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	0.51		x
26	Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	25b		~
20	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			37
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		<u> </u>
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			v
~~	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X X
29 20	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?	- 50		
•••	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		x
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		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		x
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		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			<u>-</u>
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O.	38	X	

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Form 990 (2009)

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PACIFIC LINKS FOUNDATION

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance				
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of				
	U.S. Information Returns. Enter -0- if not applicable	1a	6		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eportable gaming			
	(gambling) winnings to prize winners?		1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returned	rns?	<b>2</b> b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see	instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	ed by this return?	3a		X
	· · · · · · · · · · · · · · · · · · ·		<b>3</b> b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	•			
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	<b>4</b> a	X	
b	If "Yes," enter the name of the foreign country: ► VIETNAM		-		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign	Bank and			
_	Financial Accounts.				v
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa		<b>5</b> b		
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Rega	-			
<b>^</b> -	Tax Shelter Transaction?		<u>5</u> c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				x
h	any contributions that were not tax deductible? If "Yes," did the organization include with every solicitation an express statement that such contribut		<u>6a</u>		
b			66		
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).		<u>6b</u>		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods and services			
u	provided to the payor?	-	7a		x
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?				
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w				
-	to file Form 8282?	-			x
d	If "Yes," indicate the number of Forms 8282 filed during the year				
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p				
	benefit contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri				X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	?			Х
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0	C as required?	7h		X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting or	ganizations. Did the			
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have exc	ess business holdings			
	at any time during the year?		8		X
9	Sponsoring organizations maintaining donor advised funds.				
	Did the organization make any taxable distributions under section 4966?				X
	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		X
10	Section 501(c)(7) organizations. Enter:				
	Initiation fees and capital contributions included on Part VIII, line 12	10a	_		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	_		
	Section 501(c)(12) organizations. Enter:				
	Gross income from members or shareholders	11a	_		
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
10-	amounts due or received from them.)	11b	- 10-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1 1	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			

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Part VI	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

a Enter the number of voting members of the governing body       1a       6         bit any officer, director, trustee, or key employee have a family relationship or a business relationship with any other       2         Did the organization delegate control over management duties customarily performed by or under the direct supervision       3         Did the organization delegate control over management duties customarily performed by or under the direct supervision       3         Did the organization bace may sufficant changes to its organizational documents since the prior Form 990 was filed?       5         Does the organization have members, stockholders?       6         Does the organization nave members, stockholders, or other persons who may elect one or more members of the governing body?       7a         Are any decisions of the governing body subject to approval by members, stockholders, or other persons?       7b         Did the organization contemporaneously document the meetings held or written actions undertaken during the year       8a       X         Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O       9         I' Yes,'' does the organization have written policies and procedures governing body before filing the form?       1a         Does the organization have written policies and procedures governing body before filing the form?       1a         Does the organization have wr		tion A. Governing Body and Management			Yes	
b Enter the number of voting members that are independent           bit 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         X           Did the organization delegate control over management duties customarily performed by or under the direct supervision of officer, directors or trustees, or key employees to a management company or other person?         3           Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?         4           Does the organization have members or stockholders?         6           Does the organization nave members, stockholders, or other persons who may elect one or more members of the governing body?         7a           Are any decisions of the governing body subject to approval by members, stockholders, or other persons?         7b           Did the organization nave members, stockholders or mane and addresses in Schedulo 0         9           The governing body?         8a         X           Bo Each committee with authority to act on behalf of the governing body?         8a         X           Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization is maling address? If "res," provide the names and addresses in Schedulo 0         9           Does the organization nave written policies and procedures governing body before filing the form?         10           1         Yes	la	Enter the number of voting members of the governing body	1a	6	103	t
Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employees?       2       X         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         Did the organization have members or stockholders?       5         Does the organization have members, stockholders?       6         Does the organization contemporaneously document the meetings held or written actions undertaken during the year       7a         Are any decisions of the governing body subject to approval by members, stockholders, or other persons?       7b         Did the organization nave members, stockholders, or other persons?       7b         Did the organization bay       8a       X         are any decisions of the governing body?       8a       X         The governing body?       8a       X         Be to committee with authority to act on behalf of the governing body?       8a       X         a the organization have methers, branches, or affiliates?       9       9         etchore B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)       Yes         a obranches to ensure their operations are consistent with throse of the organization?       10       11       X	b			4		
officer, director, trustee, or key employee?       2       X         Did the organization delegate control over management duttes customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?       3         Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?       4         Does the organization have members or stockholders?       6         Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?       7a         Are any decisions of the governing body subject to approval by members, stockholders, or other persons?       7b         Did the organization notemporaneously document the meetings held or written actions undertaken during the year by the following:       8a       X         The governing body?       8a       X       8b       X         Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's maling address? If "res," provide the names and addresses in Schedule O       9         ettines and branches to ensure their operations are consistent with those of the organization?       10a       10a         I "Yes," does the organization have written policies and procedures governing body He forefing the form?       12a       X         Does the organization have a written office on sub the organization oreguive this Form 990.       11a	2			-		l
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?  Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?  Does the organization have members, stockholders?  Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?  Are any decisions of the governing body subject to approval by members, stockholders, or other persons?  Did the organization contemporaneously document the meetings held or written actions undertaken during the year of a material diversion of the organization for the organization contemporaneously document the meetings held or written actions undertaken during the year by the tollowing:  D regoneruling body?  Each committee with authority to act on behalf of the governing body?  Each committee with authority to act on behalf of the governing body?  Des the organization have intervent the names and addresses in Schedule O  P organizators?  Does the organization have intervent the organization?  Does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with throse of the organization?  Does the organization have a written organice and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with throse of the organization?  Does the organization have a written organice and procedures governing body before filing the form?  A Describe in Schedule O the process, if any, used by the organization review with Form 990. Does the organization have a written conticle threat policy?  Does the organization have a written organi	•		-	2	x	l
of officers, directors or trustees, or key employees to a management company or other person?       3         Did the organization make any significant changes to its organizational documents since the prior Form 900 was filed?       5         Does the organization have members or stockholders?       6         Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?       7         A ray decisions of the governing body subject to approval by members, stockholders, or other persons?       7         Did the organization contemporaneously document the meetings held or written actions undertaken during the year       7         Did the organization contemporaneously document the meetings held or written actions undertaken during the year       8         The governing body?       8a       X         B Each committee with authority to act on behalf of the governing body?       8a       X         Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization is mailing address? If "Nes," provide the names and addresses in Schedule O       9         I "Oses the organization have local chapters, branches, or affiliates?       10b       11       X         Does the organization have aware uning the prove of the organization?       10b       11       X         Desc the organization have aware uning the organization or write withs Form 990.       20       20       11	,			·	- 23	ł
Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?       4         Did the organization become aware during the year of a material diversion of the organization's assets?       6         Does the organization have members of stockholders?       6         P Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?       7a         Are any decisions of the governing body subject to approval by members, stockholders, or other persons?       7b         Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:       8a       X         De the organization make any significant changes to its organization set on behalf of the governing body?       8a       X         De the organization pace SI // Yes, 'roude the names and addresses in Schedule 0       9       9         Ottom B, Policies (This Section B requests information about policies not required by the Internal Revenue Code.)       Yee         10 Does the organization have local chapters, branches, or affiliates?       10a         10 If 'Yes,' does the organization nave written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with these of the organization?       10a         10 Does the organization nave a written conflict of interest policy? If 'No, ' go to line 13       2a         10 Are officers, directors	3			2		
Did the organization become aware during the year of a material diversion of the organization's assets?       5         Does the organization have members or stockholders?       6         Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?       7a         Are any decisions of the governing body subject to approval by members, stockholders, or other persons?       7b         Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:       8a       X         B Each committee with authority to act on behalf of the governing body?       8a       X         Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization is malling address? If "Yes," provide the names and addresses in Schedule 0       9         Obces the organization have local chapters, branches, or affiliates?       10a       10a         I "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?       10a         I * Yes, " does the organization have a written policies and procedures governing body before filing the form?       11       X         Describe in Schedule O the process, if any, used by the organization or eview this Form 990.       12a       X         Does the organization have a written conflict of interest policy? If "No," go to	ŀ			·		ł
Does the organization have members or stockholders?       6         Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?       7a         Are any decisions of the governing body subject to approval by members, stockholders, or other persons?       7b         Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:       8a       X         The governing body?       8a       X         Is three any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization is mailing address? If "Yes," provide the names and addresses in Schedule O       9         It Des the organization have local chapters, branches, or affiliates?       10a       10a         Does the organization have local chapters, branches, or affiliates?       10a       10b         It Yes, " toes the organization have local chapters, branches, or affiliates?       10b       11       X         Does the organization have use consistent with those of the organizaton?       10b       11       X         Describe in Schedule O the process, if any, used by the organization to review this Form 990.       12a       X         Does the organization have a written onfitter of interset policy?       10a       12a       X         Does the organization have a written officol interestpolicy?       17a       12a				·		ł
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a The organization's CEO, Executive Director, or top management official       15a         b Other officers or key employees of the organization       15b         if "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)       15b         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?       16a         b If "Yes," has the organization adopted 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         ction C. Disclosure       List the states with which a copy of this Form 990 is required to be filed ▶CA       CA         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       102	-					
O Other officers or key employees of the organization       15b         If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)       16a         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?       16a         b If "Yes," has the organization adopted 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         Ction C. Disclosure       16b         List the states with which a copy of this Form 990 is required to be filed ▶CA         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	а			15a		1
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted 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? Ction C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶CA 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	ĥ					1
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? b If "Yes," has the organization adopted 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? Ction C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶CA 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	~					1
taxable entity during the year?       16a         o       If "Yes," has the organization adopted 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       16a         exempt status with respect to such arrangements?       16b         ction C. Disclosure       16b         List the states with which a copy of this Form 990 is required to be filed ▶CA         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	За		nent with a			
b       If "Yes," has the organization adopted 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         in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's         in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's         in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's         if b         ction C. Disclosure         List the states with which a copy of this Form 990 is required to be filed ►CA         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	u			16a		1
in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's texempt status with respect to such arrangements? 16b	h	, , , ,		. 100		
exempt status with respect to such arrangements?       16b         ction C. Disclosure       16b         List the states with which a copy of this Form 990 is required to be filed ▶CA       CA         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			• •			
ction C. Disclosure         List the states with which a copy of this Form 990 is required to be filed ▶CA         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				16b		1
List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright$ CA 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	20			. 100		•
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						
	3		(501(c)(3)s only) availab	le for		-
public inspection. Indicate how you make these available. Check all that apply	,	public inspection. Indicate how you make these available. Check all that apply.				

19	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.

20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization:
	DIEP VUONG - 510-435-3035
	534 VALLEY WAY, MILPITAS, CA 95035

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Form **990** (2009)

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	<b>(B)</b> Average	Í		(C Pos	<b>C)</b> itior	I		(D) Reportable	<b>(E)</b> Reportable	<b>(F)</b> Estimated
	hours per week	Individual trustee or director	Institutional trustee	officer Officer		Highest compensated action to the second sec	-	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
DIEP VUONG PRESIDENT	50.00	x		x				41,600.	0.	0.
ANH K. TRAN BOARD CHAIR & TREASURER	15.00	x		x				0.	0.	0.
QUYNH TRAN SECRETARY	2.00	x		x				0.	0.	0.
THINH NGUYEN BOARD MEMBER	2.00	x						0.	0.	0.
HOANG NGUYEN BOARD MEMBER	2.00	x						0.	0.	0.
QUYEN VUONG BOARD MEMBER	2.00	x						0.	0.	0.
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Part VII Section A. Officers, Directors, Tru	istees, Key Er	nplo	oyee	s, a	nd I	ligh	est	Compensated Employ	ees (continued)		
(A) Name and title	<b>(B)</b> Average			<b>(C</b> Posi	ition			<b>(D)</b> Reportable	<b>(E)</b> Reportable	<b>(F)</b> Estimated	
	hours per week	Individual trustee or director	Institutional trustee	officer Officer		Highest compensated do do do		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations	
											•
											Ì

1b	Total								41,600.	0	•		0.
2	Total number of individuals (including but n compensation from the organization	ot limited to th	iose	liste	ed al	oove	e) wł	io re	eceived more than \$100	),000 in reportable			0
	· · · · ·											Yes	No
3	Did the organization list any former officer,	director or tru	stee	, ke	y em	ploy	/ee,	or h	ighest compensated er	nployee on			
	line 1a? If "Yes," complete Schedule J for s	uch individual									3		Х

	line 1a? If "Yes," complete Schedule J for such individual
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
-	

Sec	ction B. Independent Contractors
	the organization? If "Yes," complete Schedule J for such person
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to

1	Complete this table for	r your five highest compensated independent contractors that received more than \$100,000 of compensation from
	the organization.	NONE

	(A) Name and business address	<b>(B)</b> Description of services	<b>(C)</b> Compensation
2	Total number of independent contractors (including but not limited to those lister \$100,000 in compensation from the organization  0	d above) who received more than	
			Form <b>990</b> (2009)

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Form **330** (2009)

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Form 990 (20	009)
Dart VIII	State

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I a Foderated campaign     Ia     Ia     Ib	га		Statement of Rever	lue	(4)	(5)	(0)	(D)
as Federated carposaging       1a         b       Membership dues       1b         c       Feddading events       1c         d       Related organizations       1d         e       Government grants (contributions)       1t         f       Al other contributions (induced above difference)       1d         f       Total. Add lines 1g-11       52.6 , 6.86.         g       2.a       0       0         d       d       0       0         d       d       0       0         d       d       0       0         d       d       0       0         d       d       0       0         d       d       0       0         d       d       0       0         d       d       0       0         d       d       0       0         d       d       0       0         d       d       0       0         d       d       0       0         d       d       0       0         d       d       0       0         d       d       0					(A) Total revenue	exempt function	business	excluded from tax under sections 512,
90       90 <t< th=""><th>S N</th><th>1 -</th><th>Endersted campaigns</th><th>12</th><th></th><th></th><th></th><th></th></t<>	S N	1 -	Endersted campaigns	12				
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90       2 a	0.0	h	Total. Add lines 1a-1f					
g       Total. Add lines 2a.21         a       Investment income (including dividends, interest, and other similar amounts)         4       Income from investment of tax exempt bord proceeds         5       Royalties         6       a Gross Rents         0       (i) Real         0       Bess: rental expenses         0       (ii) Real         0       Rest income of (oss)         7       Gross amount from sales of inventory         0       Less: cost of other basis and sales expenses         1       Gain or loss)         4       Income from fundraling events (not including \$		-		Busines	ss Code			
g       Total. Add lines 2a.21         a       Investment income (including dividends, interest, and other similar amounts)         4       Income from investment of tax exempt bord proceeds         5       Royalties         6       a Gross Rents         0       (i) Real         0       Bess: rental expenses         0       (ii) Real         0       Rest income of (oss)         7       Gross amount from sales of inventory         0       Less: cost of other basis and sales expenses         1       Gain or loss)         4       Income from fundraling events (not including \$	lice							
a       Total. Add lines 2a 21         a       Investment income (including dividends, interest, and other similar amounts).         4       Income from investment of tax exempt bord proceeds         5       Royatties         6       a Gross Rents         0       (i) Real         0       Real income or (loss)         0       Net rental income or (loss)         1       a Gross anount from sales of inventory         b       Less: cost or other basis and sales expenses         a Gian or loss)       (i) Securities         4       Income from fundraling events (not including \$	ue C							
a       Total. Add lines 2a 21         a       Investment income (including dividends, interest, and other similar amounts).         4       Income from investment of tax exempt bord proceeds         5       Royatties         6       a Gross Rents         0       (i) Real         0       Real income or (loss)         0       Net rental income or (loss)         1       a Gross anount from sales of inventory         b       Less: cost or other basis and sales expenses         a Gian or loss)       (i) Securities         4       Income from fundraling events (not including \$	S u S							
a       Total. Add lines 2a 21         a       Investment income (including dividends, interest, and other similar amounts).         4       Income from investment of tax exempt bord proceeds         5       Royatties         6       a Gross Rents         0       (i) Real         0       Real income or (loss)         0       Net rental income or (loss)         1       a Gross anount from sales of inventory         b       Less: cost or other basis and sales expenses         a Gian or loss)       (i) Securities         4       Income from fundraling events (not including \$	Be	d						
a       Total. Add lines 2a 21         a       Investment income (including dividends, interest, and other similar amounts).         4       Income from investment of tax exempt bord proceeds         5       Royatties         6       a Gross Rents         0       (i) Real         0       Real income or (loss)         0       Net rental income or (loss)         1       a Gross anount from sales of inventory         b       Less: cost or other basis and sales expenses         a Gian or loss)       (i) Securities         4       Income from fundraling events (not including \$	2							
3       Investment income (including dividends, interest, and other similar amounts)       905.905.         4       Income from investment of tax exempt bond proceeds       905.905.         5       Royalties       (i) Real       (ii) Personal         6       Gross Rents       (i) Real       (ii) Personal         6       Gross Rents       (iii) Other       (iiii) Other         7       Gross amount from sales of assets other than inventory       (iii) Securities       (iii) Other         8       Gross income from fundraising events (not including S of constributions reported on line 1c). See       (iii) Other         8       Gross income from fundraising events       (iii) Other         9       Gross income from fundraising events (not including S of constributions reported on line 1c). See       (iiii) Other         9       Gross income from gaming activities. See       (iiii) Other         9       Gross income from gaming activities. See       (iiii) Other         9       Gross income from gaming activities. See       (iiii) Other         9       Gross income from gaming activities. See       (iiii) Other         9       Gross income from gaming activities. See       (iiii) Other         9       Gross income from gaming activities. See       (iiiii) Other         10       G	-							
other similar amounts)       905.905.         4       income from investment of tax-exempt bond proceeds         5       Royatiles         6 a Gross Rents       0) Real         b Less: rental expenses       0) Real         c Rental income or (loss)       0) Securities         7 a Gross amount from sales of assets other than inventory       0) Securities         b Less: cost or other basis and sales expenses       0) Securities         c Gain or (loss)       0         d Net gain or (loss)       0         b Less: circle typenses       0         c Net income or (loss) from gaming activities. See       0         part IV, line 18       0         a Gross income from gaming activities. See       0         part IV, line 19       0         a Less: circle typenses       0         b Less: cost of goods sold       0         b Less: cost of goods sold       0         b Less: cost of goods sold       0         c Net income or (loss) from gaming activities. See       0         miscelaneous Renue       0 <th></th> <th></th> <td></td> <td></td> <td> 🕨</td> <td></td> <td></td> <td></td>					🕨			
4       Income from investment of tax-exempt bond proceeds         5       Royatties         6       Gross Rents         b       Less: rental expenses         c       Rental income or (loss)         d       Net mettal income or (loss)         b       Less: cost or other basis and sales expenses         a Gross income from fundraising events (not including \$ or (loss)         d       Net gain or (loss)         b       Less: direct expenses         b		3			905	905		
5 Royatties   6 a Gross Rents   b Less: rental expenses   c Rental income or (loss)   d Net rental income or (loss)   7 a Gross amount from sales of   assets other than inventory   b Less: cost or other basis   and sales expenses   c Gain or (loss)   d Net gain or (loss)   d Net gain or (loss)   d Net gain or (loss)   b Less: cost or other basis   and sales expenses   c Gain or (loss)   b Less: cost or other basis   and sales expenses   c Gain or (loss)   b Less: circet expenses   b Less: circet expenses   b Less: circet expenses   b Less: circet expenses   b Less: direct expenses   b Less: direct expenses   b Less: direct expenses   b Less: cost or ganing activities. See   part IV, line 19   a b Less: direct expenses   b Less: cost of goods sold   b Less: cost of goods sold   b Less: cost of goods sold   c Net income or (loss) from gailes of inventory   miscellaneous Revenue   Business Code   Miscellaneous Revenue   Business Code   11 a		4				505.		
6 a Gross Rents       (i) Real       (ii) Personal         b Less: rental expenses				1 1	-			
6 a Gross Rents		5	noyaities					
b Less: rental expenses		6 9	Gross Ponts		Sonal			
c       Rental income or (loss)								
d Net rental income or (loss)								
7 a Gross amount from sales of assets other than inventory       (i) Securities       (ii) Other         b Less: cost or other basis and sales expenses       (iii) Other       (iii) Other         c Gain or (loss)       (iii) Other       (iii) Other         d Net gain or (loss)       (iii) Other       (iii) Other         d Net gain or (loss)       (iii) Other       (iii) Other         d Net gain or (loss)       (iii) Other       (iii) Other         d Net gain or (loss)       (iii) Other       (iii) Other         d Net gain or (loss)       (iii) Other       (iii) Other         d Net gain or (loss)       (iii) Other       (iii) Other         d Net gain or (loss)       (iii) Other       (iii) Other         d Net gain or (loss)       (iii) Other       (iii) Other         b Less: direct expenses       (iii) Other       (iii) Other         g a Gross income from gaming activities. See       (iii) Other       (iii) Other         g a Gross income from gaming activities. See       (iii) Other       (iii) Other         g a Gross income from gaming activities       (iii) Other       (iii) Other         g a Gross income or (loss) from gaming activities       (iii) Other       (iii) Other         g a Gross income or (loss) from sales of inventory       (iii) Other       (iii) Other					•			
assets other than inventory								
b Less: cost or other basis   and sales expenses   c   Gain or (loss)   d   Net gain or (loss)   a   Gross income from fundraising events (not including \$ of contributions reported on line 1c). See   Part IV, line 18   b   b   c Sirect expenses   b   c Net income or (loss) from fundraising events   9 a   Gross income from gaming activities. See   Part IV, line 19   a   b   c Net income or (loss) from gaming activities   10 a   Gross sales of inventory, less returns   and allowances   a   b   Less: cost of goods sold   b   d   I1 a   b   c   c   d   All other revenue   e   Total Add lines 11a:11d   total revenue. See instructions.   527, 591.   905.   0.								
and sales expenses   c   Gain or (loss)   d   Net gain or (loss)   d   a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See   Part IV, line 18   b   Less: direct expenses   b   c   Net income or (loss) from fundraising events   a Gross income from gaming activities. See   Part IV, line 19   a Gross income from gaming activities. See   Part IV, line 19   a Less: direct expenses   b   c   Net income or (loss) from gaming activities   a Gross sales of inventory, less returns   and allowances   a   b   Less: cost of goods sold   c   d   All other revenue   Business Code   11 a   c   c   d   All other revenue   e   Total, Add lines 11a:11d   t   12   Total revenue: See instructions.   527, 591.   905.   0.		b						
e Gain or (loss)   d Net gain or (loss)   B a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See   Part IV, line 18 a   b Less: direct expenses   b c   c Net income or (loss) from fundraising events   9 a Gross sincome from gaming activities. See   Part IV, line 19 a   b Less: direct expenses   b								
d Net gain or (loss)   8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See   Part IV, line 18 a   b Less: direct expenses   b Less: direct expenses   b C   e Net income or (loss) from gaming activities. See   Part IV, line 19 a   b Less: direct expenses   c Net income or (loss) from gaming activities.   b Less: cost of goods sold   c Net income or (loss) from sales of inventory   Miscellaneous Revenue Business Code   11 a		с						
8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses b   9 a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses b   9 a Gross income or (loss) from gaming activities. See Part IV, line 19 a b Less: direct expenses b   0 a Gross sales of inventory, less returns and allowances a   0 a Gross sold sold b   0 b Less: cost of goods sold								
including \$of   contributions reported on line 1c). See   Part IV, line 18   b Less: direct expenses   b   c Net income or (loss) from gaming activities. See   Part IV, line 19   a   b Less: direct expenses   b   c Net income or (loss) from gaming activities   a   b Less: cost of goods sold   b   c Net income or (loss) from sales of inventory   miscellaneous Revenue   Business Code   11 a   c   d All other revenue   e Total. Add lines 11a-11d   total revenue. See instructions.   527, 591.   905.   0.			• • •					
c Net income or (loss) from fundraising events   9 a Gross income from gaming activities. See   Part IV, line 19 a   b Less: direct expenses   b b   c Net income or (loss) from gaming activities   10 a Gross sales of inventory, less returns   and allowances a   b Less: cost of goods sold   c Net income or (loss) from sales of inventory   Miscellaneous Revenue Business Code   11 a	nu							
c Net income or (loss) from fundraising events   9 a Gross income from gaming activities. See   Part IV, line 19 a   b Less: direct expenses   b b   c Net income or (loss) from gaming activities   10 a Gross sales of inventory, less returns   and allowances a   b Less: cost of goods sold   c Net income or (loss) from sales of inventory   Miscellaneous Revenue Business Code   11 a	eve							
c Net income or (loss) from fundraising events   9 a Gross income from gaming activities. See   Part IV, line 19 a   b Less: direct expenses   b b   c Net income or (loss) from gaming activities   10 a Gross sales of inventory, less returns   and allowances a   b Less: cost of goods sold   c Net income or (loss) from sales of inventory   Miscellaneous Revenue Business Code   11 a	R		Part IV, line 18	a				
c Net income or (loss) from fundraising events   9 a Gross income from gaming activities. See   Part IV, line 19 a   b Less: direct expenses   b b   c Net income or (loss) from gaming activities   10 a Gross sales of inventory, less returns   and allowances a   b Less: cost of goods sold   c Net income or (loss) from sales of inventory   Miscellaneous Revenue Business Code   11 a	the	b						
Part IV, line 19 a   b Less: direct expenses   c Net income or (loss) from gaming activities   10 a Gross sales of inventory, less returns   and allowances a   b	0				🕨			
b Less: direct expenses b b b b b b b b b b b b b b b b b b		9 a	Gross income from gaming ac	ctivities. See				
b Less: direct expenses b b b b b b b b b b b b b b b b b b			Part IV, line 19	а				
10 a Gross sales of inventory, less returns and allowances   and allowances   b Less: cost of goods sold   c Net income or (loss) from sales of inventory   Miscellaneous Revenue   Business Code   11 a   b   c   c   d All other revenue   e Total. Add lines 11a-11d   12   Total revenue. See instructions.     527, 591.		b	Less: direct expenses	b				
and allowances a   b Less: cost of goods sold   c Net income or (loss) from sales of inventory   Miscellaneous Revenue Business Code   11 a Business Code   b C   c C   d All other revenue   e Total. Add lines 11a-11d   12 Total revenue. See instructions.     527, 591. 905.		С	Net income or (loss) from gam	ning activities	🕨			
b Less: cost of goods soldb c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code b c d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions 527, 591. 905. 0. 0.		10 a	Gross sales of inventory, less	returns				
c Net income or (loss) from sales of inventory       ▶       Image: Constraint of the second			and allowances	а				
Miscellaneous Revenue       Business Code       Image: Code       Image: Code         11 a		b	Less: cost of goods sold	b				
11 a	ļ	С	Net income or (loss) from sale	s of inventory	🕨			
b				e Busines	ss Code			
c								
d All other revenue								
e Total. Add lines 11a-11d       ►         12 Total revenue. See instructions.       ►         527,591.       905.         0.		C		<b> </b>				
12         Total revenue. See instructions.         ►         527,591.         905.         0.         0.		d						
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	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	(B) Program service	(C) Management and general expenses	(D) Fundraising
1	Grants and other assistance to governments and		expenses	general expenses	expenses
•	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
-	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b	Legal	380.		380.	
с	Accounting	23,540.		23,540.	
	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	68,531.	63,610.	4,560.	361
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	9,719.	7,136.	2,116.	467
17	Travel	65,166.	63,640.	1,462.	64
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total				
	expenses shown on line 25 below.)				
а	PROGRAM EXPENSES	233,035.	233,035.		
b	PROGRAM SUPPLIES	170,312.	170,237.		75
с	OTHER COMPENSATION	25,638.	25,638.		
d	OTHER EXPENSES	23,796.	12,883.	9,197.	1,716
е					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	620,117.	576,179.	41,255.	2,683
26	Joint costs. Check here 🕨 🛄 if following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

### 932010 02-04-10

Form 990 (2009)

Form 990 (2009)	PAC
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Pa	rt X	Balance Sheet				
				<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing		282,401.	1	294,034.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net		3		
	4	Accounts receivable, net		106,881.	4	1,368.
	5	Receivables from current and former officers, d				
		employees, and highest compensated employe	es. Complete Part II			
		of Schedule L			5	
	6	Receivables from other disqualified persons (as	defined under section			
		4958(f)(1)) and persons described in section 49	58(c)(3)(B). Complete			
		Part II of Schedule L			6	
S	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
Ä	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D	10a			
	b	Less: accumulated depreciation			10c	
	11	Investments - publicly traded securities		11		
	12	Investments - other securities. See Part IV, line			12	
	13	Investments - program-related. See Part IV, line		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11		15		
	16	Total assets. Add lines 1 through 15 (must equ		389,282.	16	295,402.
	17	Accounts payable and accrued expenses	268.	17	440.	
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
S	21	Escrow or custodial account liability. Complete			21	
litie	22	Payables to current and former officers, directo				
Liabilities		highest compensated employees, and disqualif	ied persons. Complete Part II			
		of Schedule L			22	
	23	Secured mortgages and notes payable to unrel			23	
	24	Unsecured notes and loans payable to unrelate			24	
	25	Other liabilities. Complete Part X of Schedule D		1,526.	25	0.
	26	Total liabilities. Add lines 17 through 25		1,794.	26	440.
		Organizations that follow SFAS 117, check h				
es		lines 27 through 29, and lines 33 and 34.				
ŭ	27	Unrestricted net assets		<6,623.	>27	67,591.
3ala	28	Temporarily restricted net assets		394,111.	28	227,371.
Ц	29				29	
Ъ		Organizations that do not follow SFAS 117, c				
ŗ		complete lines 30 through 34.				
ets	30	Capital stock or trust principal, or current funds			30	
Ass	31	Paid-in or capital surplus, or land, building, or ea			31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	ncome, or other funds		32	
Z	33	Total net assets or fund balances		387,488.	33	294,962.
	34	Total liabilities and net assets/fund balances		389,282.	34	295,402.

Form 990 (2009)

12501109 785791 PACIFICLINKS 2009.04011 PACIFIC LINKS FOUNDATION

Form 990	(2009)
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Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
b	Were the organization's financial statements audited by an independent accountant?	2b	Х	
С	······································	2c	x	
	review, or compilation of its financial statements and selection of an independent accountant?	20	- 23	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			
	consolidated basis, separate basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
	Act and OMB Circular A-133?	3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		
		_	000	

Form **990** (2009)

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		Comple	ete if the organization is	s a sectior	n 501(c)(3)	organiza	tion or a s	section				
Department of	of the Treasury		4947(a)(1) n			-				Open te	o Publ	ic
	enue Service	► A	ttach to Form 990 or Fo	orm 990-E	Z. 🕨 See	separate	instructio	ons.		Inspe	ection	
Name of	the organizati	on						1	Employer i	dentificati	ion nu	mber
		PACIFIC	C LINKS FOUND	ATION	I				94	l-3397	768	
Part I	Reason	for Public Cha	<b>rity Status</b> (All organiz	zations mu	ist complet	te this par	t.) See ins	tructions				
The orgar	nization is not a	a private foundation	because it is: (For lines	1 through	11, check	only one b	oox.)					
1	A church, co	nvention of churche	es, or association of chur	ches desc	ribed in <b>se</b>	ction 170	(b)(1)(A)(i)	).				
2			70(b)(1)(A)(ii). (Attach So									
3			ital service organization			170(b)(1)	(A)(iii).					
4	A medical res	search organization	operated in conjunction	with a hos	spital desc	ribed in <b>se</b>	ection 170	(b)(1)(A)(	iii). Enter tl	he hospital	's nam	ne,
	city, and stat											
5	An organizati	on operated for the	benefit of a college or u	niversity o	wned or op	perated by	/ a govern	mental ur	nit describe	ed in		
	section 170	(b)(1)(A)(iv). (Comp	lete Part II.)									
6	A federal, sta	te, or local governm	nent or governmental uni	t describe	d in <b>sectio</b>	n 170(b)( <sup>.</sup>	1)(A)(v).					
7 X			ceives a substantial part					or from th	e general r	oublic desc	ribed	in
		b)(1)(A)(vi). (Compl				5			5 1			
8			section 170(b)(1)(A)(vi).	(Complete	Part II.)							
9	-		ceives: (1) more than 33			rom contri	ibutions. n	nembersh	nip fees, an	id aross re	ceipts	from
	-	-	Inctions - subject to certa						-	-	-	
			taxable income (less sec									
		509(a)(2). (Complet			,		I	, .			,	
10			perated exclusively to te	st for pub	lic safetv. S	See <b>sectio</b>	on 509(a)(4	4).				
11	-	-	perated exclusively for the	-	-			-	rv out the	purposes (	of one	or
			ations described in secti									
			organization and compl						(-/(-/			
	а 🗌 Туре I	· ·			e III - Func		tearated		d 🗌	Type III - (	Other	
e 🗌	• •		• •			•	•	r more di		• •		in
	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).											
f	If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III											
	C C	rganization, check 1										
g		•	organization accepted a									
9	-		directly controls, either a			•					Yes	No
			supported organization?							. 11g(i)		
			on described in (i) above?									
			a person described in (i) d									
h			a about the supported or									
	Trovide the h	oliowing information	about the supported of	gamzation	(3).							
(1) Nome	a of our ported		(iii) Type of	(iv) Is the (	organization	(v) Did vo	u notify the	(vi)	Is the	(14:1) An	aount o	.4
	e of supported janization	organization	organization		sted in your		tion in col.	organizát	ion in col. ized in the	(vii) An sun		1
org	Junization	(described on lines 1-9 above or IRC section		governing document? (i) of your support?		U.	S.?	Jup	support			
		(see instructions)) Yes				Yes	No	Yes	No			
					No							
			1	1	1	1	1	1	1 I			

**Public Charity Status and Public Support** 

OMB No. 1545-0047

Schedule A (Form 990 or 990-EZ) 2009

Form 990 or 990-EZ.

Total

SCHEDULE A

(Form 990 or 990-EZ)

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LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for

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Part II	Su
	10-

 
 Schedule A (Form 990 or 990-EZ) 2009
 PACIFIC
 LINKS
 FOUNDATION
 94-3397

 Part II
 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

# Section A Public Support

<u> </u>	Stion A. I ublic Support						
Cale	endar year (or fiscal year beginning in)	<b>(a)</b> 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	203,129.	354,696.	518,224.	317,948.	526,686.	1920683.
2	Tax revenues levied for the organ-						
	ization'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	Total. Add lines 1 through 3	203,129.	354,696.	518,224.	317,948.	526,686.	1920683.
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 shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4.						1920683.
	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total 1920683.
7	Amounts from line 4	203,129.	354,696.	518,224.	317,948.	526,686.	1920683.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources $\dots$		1,962.	5,615.	5,600.	905.	14,082.
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						1934765.
	Gross receipts from related activities,					12	
13	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
0	organization, check this box and stor						
	ction C. Computation of Publ						
	Public support percentage for 2009 (I					14	99.27 %
	Public support percentage from 2008					15	%
16a	33 1/3% support test - 2009. If the o	0		,		,	
	stop here. The organization qualifies	as a publicly supp	orted organization	۱			
b	<b>33 1/3% support test - 2008.</b> If the o	•				•	
	and <b>stop here.</b> The organization qual						
17a	10% -facts-and-circumstances tes	-					
	and if the organization meets the "fac		•		•	•	
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances tes	-					
	more, and if the organization meets the				• •		
	organization meets the "facts-and-circ						
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17t		and see instruction	
					<b>•</b> •		

Schedule A (Form 990 or 990-EZ) 2009

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Sch	edule A (Form 990 or 990-EZ) 2009 Irt III Support Schedule for C	Pragnizations	Described in	Section 500/2	<b>)(2)</b> (0	. Star and a star state state state	Page 3
	ction A. Public Support	ryanizations	Described in	Section Sus(a	(Complete only	/ If you checked the bo	ox on line 9 of Part I.)
		( ) 0007	(1) 0000	() 0007	( 1) 0000	() 0000	(0
	endar year (or fiscal year beginning in)	<b>(a)</b> 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
_	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per- formed. 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
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						
	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
Sec	ction B. Total Support						
	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Amounts from line 6	(u) 2000	(10) 2000	(0) 2001	(4) 2000	(0) 2000	(i) iotai
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
h	Unrelated business taxable income						
L	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	· · · · · · · · · · · · · · · · · · ·						
	Add lines 10a and 10b Net income from unrelated business						
••	activities not included in line 10b,						
	whether or not the business is						
40	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.)						
	First five years. If the Form 990 is for	-			•		
14	First five years. If the Form 990 is for check this box and stop here				•		
14 Sec	First five years. If the Form 990 is for check this box and stop here ction C. Computation of Publ	ic Support Pe	ercentage				
14 Sec 15	First five years. If the Form 990 is for check this box and stop here ction C. Computation of Publ Public support percentage for 2009 (I	ic Support Pe ine 8, column (f) d	<b>rcentage</b> livided by line 13, o	column (f))		15	····· <b>&gt;</b>
14 Sec 15 16	First five years. If the Form 990 is for check this box and stop here ction C. Computation of Publ Public support percentage for 2009 (I Public support percentage from 2008	<b>ic Support Pe</b> ine 8, column (f) d Schedule A, Part	ercentage livided by line 13, o : III, line 15	column (f))			·····
14 Sec 15 16 Sec	First five years. If the Form 990 is for check this box and stop here ction C. Computation of Publ Public support percentage for 2009 ( Public support percentage from 2008 ction D. Computation of Invest	ic Support Pe ine 8, column (f) d Schedule A, Part stment Incom	ivided by line 13, of 10, international technology in the second	column (f))		15 16	····· <b>&gt;</b>
14 Sec 15 16 Sec	First five years. If the Form 990 is for check this box and stop here ction C. Computation of Publ Public support percentage for 2009 (I Public support percentage from 2008	ic Support Pe ine 8, column (f) d Schedule A, Part stment Incom	ivided by line 13, of 10, international technology in the second	column (f))		15 16 17	····· <b>&gt;</b>
14 <u>Sec</u> 15 <u>16</u> <u>Sec</u> 17 18	First five years. If the Form 990 is for check this box and stop here ction C. Computation of Publ Public support percentage for 2009 (I Public support percentage from 2008 ction D. Computation of Invest Investment income percentage from 2008	ic Support Pe ine 8, column (f) d Schedule A, Part stment Incom 09 (line 10c, colur 2008 Schedule A,	ivided by line 13, d III, line 15 <b>Percentage</b> mn (f) divided by lin Part III, line 17	column (f)) ne 13, column (f))		15 16 17 18	▶□ 
14 <u>Sec</u> 15 <u>16</u> <u>Sec</u> 17 18	First five years. If the Form 990 is for check this box and stop here ction C. Computation of Publ Public support percentage for 2009 (I Public support percentage from 2008 ction D. Computation of Invest Investment income percentage for 20	ic Support Pe ine 8, column (f) d Schedule A, Part stment Incom 09 (line 10c, colur 2008 Schedule A,	ivided by line 13, d III, line 15 <b>Percentage</b> mn (f) divided by lin Part III, line 17	column (f)) ne 13, column (f))		15 16 17 18	▶□ 
14 <u>Sec</u> 15 <u>16</u> <u>Sec</u> 17 18	First five years. If the Form 990 is for check this box and stop here ction C. Computation of Publ Public support percentage for 2009 (I Public support percentage from 2008 ction D. Computation of Invest Investment income percentage from 2008	ic Support Per ine 8, column (f) d Schedule A, Part Stment Incom 109 (line 10c, colu 2008 Schedule A, organization did r	ivided by line 13, of III, line 15 <b>Percentage</b> mn (f) divided by lin Part III, line 17 not check the box	ne 13, column (f))	e 15 is more than	15       16       17       18       33 1/3%, and line 1	▶□ % % % 17 is not
14 <b>Sec</b> 15 <u>16</u> <b>Sec</b> 17 18 19a	First five years. If the Form 990 is for check this box and stop here ction C. Computation of Publ Public support percentage for 2009 ( Public support percentage from 2008 ction D. Computation of Invest Investment income percentage from 2008 a 33 1/3% support tests - 2009. If the	ic Support Per ine 8, column (f) d Schedule A, Part Stment Incom 109 (line 10c, colur 2008 Schedule A, organization did r nd stop here. The	ivided by line 13, o III, line 15 <b>Percentage</b> mn (f) divided by lin Part III, line 17 not check the box organization quali	column (f)) ne 13, column (f)) on line 14, and line fies as a publicly s	e 15 is more than supported organiz	15       16       17       18       33 1/3%, and line 1       ation	
14 <b>Sec</b> 15 <u>16</u> <b>Sec</b> 17 18 19a	First five years. If the Form 990 is for check this box and stop here ction C. Computation of Publ Public support percentage for 2009 (I Public support percentage from 2008 ction D. Computation of Invest Investment income percentage for 20 Investment income percentage from 2 33 1/3% support tests - 2009. If the more than 33 1/3%, check this box a	ic Support Per ine 8, column (f) d Schedule A, Part stment Incom 09 (line 10c, colur 2008 Schedule A, organization did r nd stop here. The organization did r	ivided by line 13, o III, line 15 <b>Percentage</b> mn (f) divided by lin Part III, line 17 not check the box organization quali not check a box or	column (f)) ne 13, column (f)) on line 14, and line fies as a publicly s n line 14 or line 19a	e 15 is more than supported organiz a, and line 16 is m	15           16           17           18           33 1/3%, and line 1           ration           nore than 33 1/3%, i	

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Schedule A (Form 990 or 990-EZ) 2009