



MAIL TO:
Office of the Attorney General
Registry of Charitable Trusts
P.O. Box 903447
Sacramento, CA 94203-4470

STREET ADDRESS:
1300 I Street
Sacramento, CA 95814
(916) 210-6400

WEBSITE ADDRESS
www.oag.ca.gov/charities

**INITIAL
REGISTRATION FORM
STATE OF CALIFORNIA
OFFICE OF THE ATTORNEY GENERAL
REGISTRY OF CHARITABLE TRUSTS**
(Government Code Sections 12580-12599.7)

RECEIVED
Attorney General's Office

JAN 03 2023

Registry of Charitable Trusts

(For Registry Use Only)

Part A - Identification of Organization

Name of Organization: VIET AMERICA SOCIETY

Mailing Address: 8907 WARNER AVE, STE. 125

Telephone number: 7147219845

City: HUNTINGTON BEACH

E-mail address: MTXD234@GMAIL.COM

State: CALIFORNIA

Fax number: N/A

ZIP Code: 92647

Website: N/A

Federal Employer Identification Number (FEIN):
85-1492798

Corporation or Organization Number:
4605190

Part B - Registration Fee

A \$50 REGISTRATION FEE must accompany this registration form. Make check payable to DEPARTMENT OF JUSTICE.

Part C - List of Trustees or Directors and Officers

Names and addresses of ALL trustees or directors and officers (attach a list if necessary):

Name: PETER PHAM

Position: PRESIDENT

Address: 14372 BOWEN STREET

City: GARDEN GROVE

State: CA

ZIP Code: 92843

Name: LE HUA

Position: SECRETARY

Address: 17801 SANTA ANITA STREET

City: FOUNTAIN VALLEY

State: CA

ZIP Code: 92708

Name: THINH NGUYEN

Position: VICE PRESIDENT

Address: 17801 SANTA ANITA STREET

City: FOUNTAIN VALLEY

State: CA

ZIP Code: 92708

Name: MINH VO

Position: BOARD MEMBER

Address: 17801 SANTA ANITA STREET

City: FOUNTAIN VALLEY

State: CA

ZIP Code: 92708

Part D - Organization Activities

Describe the primary activity of the organization (a copy of the material submitted with the application for federal or state tax exemption will normally provide this information). If the organization is based outside California, comment fully on the extent of activities in California and how the California activities relate to total activities. In addition, list all funds, property, and other assets held or expected to be held in California. Attach additional sheets if necessary.

PROVIDE FREE MEALS TO THE POORS AND ELDERLIES

PROVIDE FREE MENTAL HEALTH SERVICES

916705



Part E - Assets and Accounting Period

If assets (funds, property, etc.) have been received, enter the date first received.	Registration with the Attorney General is required within <u>thirty</u> days of receipt of assets.
Date assets first received in/from California: 07/01/2020	

What annual accounting period has the organization adopted? Fiscal Year Ending (Month/Day): 12/31

Part F - Founding Documents

Attach the organization's founding documents as follows:

- A) **Corporations** - a copy of the endorsed / certified articles of incorporation and all amendments and current bylaws. If incorporated outside California, enter the date the corporation qualified through the California Secretary of State's Office to conduct activities in California.
- B) **Associations** - a copy of the instrument creating the organization (bylaws, constitution, and/or articles of association / organization).
- C) **Trusts** - a copy of the trust instrument or will and decree of final distribution.
- D) **Trustees for charitable purposes** - a statement describing operations and charitable purpose.

Part G - Federal Tax Exempt Status

Has the organization applied for or been granted IRS tax-exempt status? Yes No

Date of application for Federal tax exemption: 06/10/2020

Date of exemption letter: 5/13/2021 Exempt under Internal Revenue Code section 501(c) (3)

If known, are contributions to the organization tax-deductible? Yes No

Attach a copy of the Application for Recognition of Exemption (IRS Form 1023 or 1024) and the determination letter issued by the IRS.

Part H - Fundraising Professionals

Does the organization contract with or otherwise engage the services of any commercial fundraiser for charitable purposes, fundraising counsel, or commercial coventurer (as defined in Government Code sections 12599-12599.2)? If yes, provide the name(s), address(es), telephone number(s), and registration number(s) assigned by the Registry of Charitable Trusts of the provider(s). Attach additional sheets if necessary.

<input type="checkbox"/> Commercial Fundraiser (#)	<input type="checkbox"/> Fundraising Counsel (#)	<input type="checkbox"/> Commercial Coventurer (#)
Name:		Telephone Number:
Address:	City:	State: ZIP Code:
<input type="checkbox"/> Commercial Fundraiser (#)	<input type="checkbox"/> Fundraising Counsel (#)	<input type="checkbox"/> Commercial Coventurer (#)
Name:		Telephone Number:
Address:	City:	State: ZIP Code:
<input type="checkbox"/> Commercial Fundraiser (#)	<input type="checkbox"/> Fundraising Counsel (#)	<input type="checkbox"/> Commercial Coventurer (#)
Name:		Telephone Number:
Address:	City:	State: ZIP Code:



Part I - Please respond to the following list of questions and provide supplemental information if applicable.

1. List all DBAs and names of the organization uses or has used.

WARNER WELLNESS CENTER

2. List all states in which you solicit charitable donations or have registered to do so, or in which you are exempt from registration but operate.

CALIFORNIA

3. Is the organization under common control, does it have a close connection with, or is it related to, any other nonprofit or for-profit organization or trust? If yes, identify by name, address, and telephone.

NO

4. Has the organization's IRS tax-exempt status ever been denied, revoked, or modified? If yes, please explain circumstances on a separate sheet.

NO

5. Has the organization's tax-exempt status ever been suspended or revoked by the Franchise Tax Board? If yes, please explain circumstances on a separate sheet.

NO

6. Has the organization's corporation status ever been suspended or revoked by the Secretary of State? If yes, please explain circumstances on a separate sheet.

NO

7. Are any officers, directors, trustees, or employees related by blood, marriage or adoption? If yes, identify by name, title and relationship.

NO

8. Has the organization or any of its officers, directors, or trustees been the subject of a court or administrative proceeding in any state regarding any solicitation or registration? If yes, please explain on a separate sheet.

NO

9. Have any of the organization's officers, directors, or trustees been convicted of any crime involving the misuse or misappropriation of funds, or any crime involving deception in the operation of a charity? If yes, identify by name and title.

NO

Please note that the Form CT-1 is a public document which will be posted on the Registry's website. If you wish to maintain the confidentiality of any attachment to the Form CT-1, you must request that the attachment not be maintained in the Public File.

Part J - Signature

I declare under penalty of perjury that I have examined this registration form, including accompanying documents, and to the best of my knowledge and belief, the form and each document are true, correct, and complete, and I am authorized to sign.

Signature

Title **PRESIDENT**

Date **12/21/2022**

The organization will be required to file financial reports annually on Form RRF-1 (Annual Registration/Renewal Fee Report) no later than four months and fifteen days after the end of the organization's accounting period. Organizations with \$50,000 or more in total revenue are also required to file the applicable IRS Form 990, with all attachments and schedules, as filed with the IRS. Organizations with less than \$50,000 in total revenue are generally required to file Form CT-TR-1. All Registry forms can be found on the Attorney General's website at www.oag.ca.gov/charities.

For additional information, please refer to the Supervision of Trustees and Fundraisers for Charitable Purposes Act (Government Code sections 12580-12599.8) and the Administrative Rules and Regulations pursuant to the Act (California Code of Regulations, Title 11, Sections 300-312.1), and other resources available on the Attorney General's website at www.oag.ca.gov/charities.

Additional information is available on the Attorney General's website at www.oag.ca.gov/charities. You may also call the Attorney General's Registry of Charitable Trusts at (916) 210-6400 or fax at (916) 444-3651 or contact the Registry via email at Registration@doj.ca.gov.



Secretary of State
Articles of Incorporation of a
Nonprofit Public Benefit Corporation

ARTS-PB-501(c)(3)

4605190

FILED NH

Secretary of State
 State of California

JUN 10 2020

IMPORTANT — Read Instructions before completing this form.

Filing Fee - \$30.00

Copy Fees - First page \$1.00; each attachment page \$0.50;
Certification Fee - \$5.00

Note: A separate California Franchise Tax Board application is required to obtain tax exempt status. For more information, go to <https://www.ftb.ca.gov>.

This Space For Office Use Only

1. Corporate Name (Go to www.sos.ca.gov/business/be/name-availability for general corporate name requirements and restrictions.)

The name of the corporation is VIET AMERICA SOCIETY

2. Business Addresses (Enter the complete business addresses. Item 2a cannot be a P.O.Box or "in care of" an individual or entity.)

a. Initial Street Address of Corporation - Do not enter a P.O. Box 17801 SANTA ANITA CIR.	City (no abbreviations) FOUNTAIN VALLEY	State CA	Zip Code 92708
b. Initial Mailing Address of Corporation, if different than Item 2a	City (no abbreviations)	State	Zip Code

3. Service of Process (Must provide either Individual OR Corporation.)

INDIVIDUAL - Complete Items 3a and 3b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is not a corporation) PETER	Middle Name ANH	Last Name PHAM	Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box 17801 SANTA ANITA CIR.	City (no abbreviations) FOUNTAIN VALLEY	State CA	Zip Code 92708

CORPORATION - Complete Item 3c. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not complete Item 3a or 3b

Item 4a: One or both boxes must be checked.

4. Purpose Statement **Item 4b: If "public" purposes is checked in Item 4a, or if you intend to apply for tax-exempt status in California, you must enter the specific purpose in Item 4b.)**

a. This corporation is a nonprofit public benefit corporation and is not organized for the private gain of any person. It is organized under the Nonprofit Public Benefit Corporation Law for: public purposes. charitable purposes.
 b. The specific purpose of this corporation is to provide culture, education & arts for Vietnamese-American

5. Additional Statements (See Instructions and Filing Tips.)

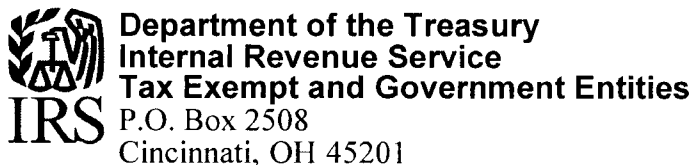
- a. This corporation is organized and operated exclusively for the purposes set forth in Article 4 hereof within the meaning of Internal Revenue Code section 501(c)(3).
- b. No substantial part of the activities of this corporation shall consist of carrying on propaganda, or otherwise attempting to influence legislation, and this corporation shall not participate or intervene in any political campaign (including the publishing or distribution of statements) on behalf of any candidate for public office.
- c. The property of this corporation is irrevocably dedicated to the purposes in Article 4 hereof and no part of the net income or assets of this corporation shall ever inure to the benefit of any director, officer or member thereof or to the benefit of any private person.
- d. Upon the dissolution or winding up of this corporation, its assets remaining after payment, or provision for payment, of all debts and liabilities of this corporation shall be distributed to a nonprofit fund, foundation or corporation which is organized and operated exclusively for charitable, educational and/or religious purposes and which has established its tax-exempt status under Internal Revenue Code section 501(c)(3).

6. Read and Sign Below (This form must be signed by each incorporator. See Instructions. Do not include a title.)

Signature

Peter Anh Pham

Type or Print Name



VIET AMERICA SOCIETY
C/O PETER PHAM
17801 SANTA ANITA CIRCLE
FOUNTAIN VALLEY, CA 92708

Date:
05/13/2021
Employer ID number:
85-1492798
Person to contact:
Name: Customer Service
ID number: 31954
Telephone: (877) 829-5500
Accounting period ending:
December 31
Public charity status:
170(b)(1)(A)(vi)
Form 990 / 990-EZ / 990-N required:
Yes
Effective date of exemption:
June 10, 2020
Contribution deductibility:
Yes
Addendum applies:
No
DLN:
26053413001971

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,

A handwritten signature in black ink that reads "Stephen A. Martin".

Stephen A. Martin
Director, Exempt Organizations
Rulings and Agreements