Form **990** 

Department of the Treasury

### **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

OMB No. 1545-0047

				I								11.				
_		he 2023 caler	_	year, or t	ax ye	ar begi	nning		, 20	023, and endi	ng			, 20		
В		if applicable:	С										-	ntification num	ber	
	A	ddress change		ET DRE									-4115			
	N	ame change		O BOX LPITAS			036					E Telephone number				
	In	nitial return	MI	ш ттл.	, 0	л уу	0.50					40	8-41(	)-4920		
	Fi	nal return/terminated														
	A	mended return										<b>G</b> Gross			222,047.	
	A	pplication pending		Name and a			oal officer: Q	UAN K NG	UYEN		.,	s a group ret			Yes X No	
				ME AS	1 1				T T		If "No	all subordinat o," attach a li	es includ st. See ir	ed? nstructions.	Yes No	
<u> </u>		-exempt status:		501(c)(3)		501(c) (	)	(insert no.)	4947(a)(	1) or 527	-					
J				DREAMS		G		<u> </u>		1.		p exemption				
ĸ		n of organization:		Corporation	1	Trust	Associatio	n Other		L Year of forma	tion: 20	10 M	State of	legal domicile:	CA	
Pa	nrt I	Summa	ry .								10.05	<u> </u>				
	1									PROVIDE F			NG, S	SUPPLIES	<u>,</u>	
e S		<u>CLEAN WA</u>	<u>ATE</u>	<u>R AND</u>	FUN	DS_FC	<u>OR ORPH</u>	ANAGES A	ND SCHC	OLS IN V	<u>IETNAM</u>	<u>1</u>	·			
Activities & Governance																
Ver	2	Check this b		if tł		anizati	on discont	inued its one	rations or o	disposed of m	ore than	25% of its	s net a	<u>sets</u>		
ဗီ	3														3	
~ర ഗ	4				-		-	-		line 1b)					3	
itie	5									e 2a)					0	
Sti∨	6														10	
Ă															0.	
	D	Net unrelate	u bu	Silless la	xable	Income		11 990-1, Par	, iiiie i i .			Prior Yea		Curren	0. ent Year	
	8	Contribution	s and	d arants (	Part \	VIII lin	≏ 1h)					FIIUI I Ca	I		214,502.	
ne	9													4	14,302.	
Revenue	10	-			•										7,545.	
Be	11			•											.,	
	12									), line 12)				2	222,047.	
	13	Grants and s	simila	ar amoun	ts pai	id (Part	IX, colum	n (A), lines 1	-3)						106,212.	
	14	Benefits paid	d to (	or for me	mbers	s (Part	IX, columr	n (A), line 4).								
	15															
ses	16a	Professional	fund	draising fo	ees (F	Part IX,	column (A	A), line 11e).								
Expenses	b	Total fundrai	sing	expense	penses (Part IX, column (D), line 25)											
й	17														3,843.	
	18			-						5)				-	<u> </u>	
	19						•			· · · · · · · · · · · · · · · · · · ·					111,992.	
r 8	-											ning of Curro	ent Year	1	of Year	
ete - lanc	20	Total assets	(Par	rt X, line	16)							414,			526,038.	
Net Assets or Fund Balances	21	Total liabiliti	es (F	Part X, Iin	e 26)								0.		0.	
Pet	22	Net assets o	r fur	id balanc	es. Si	ubtract	line 21 fro	m line 20				414,	046.	Į.	526,038.	
Pa	rt II	Signatu	re E	Block								,				
Unde	er pena	Ities of perjury, I c Declaration of prep	eclare	that I have	examin	ned this re	turn, includin	g accompanying s	chedules and	statements, and to	the best of	my knowledg	ge and be	elief, it is true, o	correct, and	
com	plete. D	Declaration of prep	arer (	other than of	ticer) is	s based or	n all informati	on of which prepa	rer has any kn	nowledge.						
		Signatura a	( office								Date					
Siq He	yn	Signature o														
не	re	QUAN Type or prir									PRESID	ENT &	CEO			
		Print/Type					Bropororio	signature		Date		1		PTIN		
_					0.0.1			-			10.4	Check	if		004	
Pa		NAM H			CPA			I NGUYEN,		5/06	/24	self-emplo	byed	P01777	JZ4	
Pre	epar e Or							F AMERIC	A			Eineste Elb			10	
05	e Uf	IIY Firm's add	ess				STE 10					Firm's EIN		7 - 045424		
Mai	, the	IDS discuss t	hic r				<u>95111</u>		ctructions			Phone no	(40		-1888	
_		IRS discuss t r Paperwork I												X Yes	n 990 (2023)	
БA	A 10	r raderwork l	٦ear	ICTION AC	ιινοτί	ce. see	ine sebar	ate instructio	IIS.	TE	EA0101L 0	8/23/23		Forn	11 330 (2023)	

Form	n 990 (2023) VIET DREAMS	27-4115634	Page <b>2</b>
Par			
1	Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission:		
•	PROVIDE FOOD, CLOTHING, SUPPLIES, CLEAN WATER AND FUNDS FOR ORE	PHANAGES AND S	CHOOLS IN
	VIETNAM.		
2	Did the organization undertake any significant program services during the year which were not listed on the Form 990 or 990-EZ?	·	es X No
	Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	····· [] 1	
3		services? Y	es X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program s Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocat	ervices, as measured	by expenses.
	and revenue, if any, for each program service reported.		ar expenses,
4a		) (Revenue \$	)
	BUILT WATER FILTRATION SYSTEMS AND PROVIDED LIBRARY BOOKS, FOOD ORPHANAGES IN VIETNAM. PROVIDED CLEFT SURGERY, DENTAL CARE AND		
	SCHOOL CHILDREN IN VIETNAM. CHRISTMAS DINNER AND TOY DRIVE FOR		
	IN SHELTERS IN SAN JOSE		
4b	b (Code:) (Expenses \$ 4,950. including grants of \$ 4,950.)	(Revenue \$	)
	MUSIC GRANT FOR CHILDREN.		
4c	c (Code:) (Expenses \$ including grants of \$)	) (Revenue \$	)
		<b></b>	
	A Other program convises (Describe on Schedule O.)		
4d	d Other program services (Describe on Schedule O.)(Expenses \$ including grants of \$ ) (Revenue	Ś	)
4e	e Total program service expenses 106,212.		/
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 Form 990 (2023)
 VIET DREAMS

 Part 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? See instructions	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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I.	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D. Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a		Х
b	Did the organization report an amount for investments – other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		Х
С	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.	11c		Х
d	I 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	11d		Х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f		Х
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 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," complete Schedule G, Part III.	19		Х
202	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
				Δ
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b		v
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х

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Form 990 (2023) VIET DREAMS
Part IV Checklist of Required Schedules (continued)

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I UI	Checkist of Required Schedules (continued)			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	22	Yes	No 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? <i>If "Yes," complete</i>	23		х
24a	Schedule J. 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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.	23 24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		Λ
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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.	25a		Х
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 Schedule L, Part I.	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		Х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV.	28c		Х
29	Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M.</i>	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part Il</i>	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i>	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			. 🗖
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
	(gambling) winnings to prize winners?	1c		

	Form 990 (2023) VIET DREAMS	27-4115634		F	Page 5
Part	Part V Statements Regarding Other IRS Filings and Tax Complian	nce (continued)			
			ľ	Yes	No
2a	<b>2a</b> Enter the number of employees reported on Form W-3. Transmittal of Wage and Ta	x State-			
	2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Ta ments, filed for the calendar year ending with or within the year covered by this returned.	urn <b>2a</b> 0			
b	<b>b</b> If at least one is reported on line 2a, did the organization file all required federal em	ployment tax returns?	2b		
32	3a Did the organization have unrelated business gross income of \$1,000 or more during	a the year?	3a		Х
	<b>b</b> If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule 0</i>		3b		21
			30		
4a	4a At any time during the calendar year, did the organization have an interest in, or a signatu financial account in a foreign country (such as a bank account, securities account, or a signature).	ire or other authority over, a	4.		Х
			4a		Л
D	<b>b</b> If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and				
	5a Was the organization a party to a prohibited tax shelter transaction at any time durin	° ,	5a		Х
b	<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited	tax shelter transaction?	5b		Х
С	c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	<b>6a</b> Does the organization have annual gross receipts that are normally greater than \$10 solicit any contributions that were not tax deductible as charitable contributions?	00,000, and did the organization	6a		Х
b	b If "Yes," did the organization include with every solicitation an express statement that such not tax deductible?		6b		
7	7 Organizations that may receive deductible contributions under section 170(c).				
	a Did the organization receive a payment in excess of \$75 made partly as a contributi	ion and partly for goods and			
a	services provided to the payor?		7a		Х
b	<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services p		7b		
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for		-		
•	Form 8282?	·····	7c		Х
d	d If "Yes," indicate the number of Forms 8282 filed during the year				
е	e Did the organization receive any funds, directly or indirectly, to pay premiums on a	personal benefit contract?	7e		Х
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a pers	sonal benefit contract?	7f		Х
	g If the organization received a contribution of qualified intellectual property, did the organization				
y	as required?		7g		
h	<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles	s, did the organization file a			
-	Form 1098-C?		7h		
8					
	organization have excess business holdings at any time during the year?	· · · · · · · · · · · · · · · · · · ·	8		
9	9 Sponsoring organizations maintaining donor advised funds.				
а	a Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or re	lated person?	9b		
10	10 Section 501(c)(7) organizations. Enter:				
	a Initiation fees and capital contributions included on Part VIII, line 12				
	<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilit				
	11 Section 501(c)(12) organizations. Enter:				
	a Gross income from members or shareholders.	11a			
	<b>b</b> Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.).				
	12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990		12a	_	
	<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year	ar <b>12b</b>			
	13 Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	a Is the organization licensed to issue qualified health plans in more than one state? .		13a		
	Note: See the instructions for additional information the organization must report on	Schedule O.			
b	<b>b</b> Enter the amount of reserves the organization is required to maintain by the states which the organization is licensed to issue qualified health plans	in 			
с	c Enter the amount of reserves on hand	13c			
14a	14a Did the organization receive any payments for indoor tanning services during the tax	x year?1	14a		Х
	<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an expla	-	14b		1
	<b>15</b> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,0		-		
15	excess parachute payment(s) during the year?		15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	<b>16</b> Is the organization an educational institution subject to the section 4968 excise tax	on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.				
17	17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person,		17		
	result in the imposition of an excise tax under section 4951, 4952, or 4953?	·····	17		
	If "Yes," complete Form 6069.		-	0000	10000
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Pa	rt VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b b a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or char Schodula Q. See instructions	elow nges	, and on	d for					
	Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI			. X					
Sec	ction A. Governing Body and Management								
			Yes	No					
1a	a Enter the number of voting members of the governing body at the end of the tax year       1a       3         If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.       1a       3								
b	<b>b</b> Enter the number of voting members included on line 1a, above, who are independent <b>1b</b>								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Х					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		Х					
4	Did the organization make any significant changes to its governing documents								
	since the prior Form 990 was filed?	4		Х					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X					
6 7a	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more	6		X					
	members of the governing body?	7a		Х					
t	• Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		Х					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
a	a The governing body?	8a		X X					
Ł	<b>b</b> Each committee with authority to act on behalf of the governing body?								
9	organization's mailing address? If "Yes," provide the names and addresses on Schedule O.	9		Х					
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Re	eveni	ie Co	ode.)					
			Yes	No					
	a Did the organization have local chapters, branches, or affiliates?	10a		Х					
	p If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Х					
	Describe on Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O								
	a Did the organization have a written conflict of interest policy? If "No," go to line 13.	12a		Х					
	• Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b							
C	bid the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c							
13	Did the organization have a written whistleblower policy?	13		X					
14	Did the organization have a written document retention and destruction policy?	14		Х					
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
	a The organization's CEO, Executive Director, or top management official	15a		X					
b	• Other officers or key employees of the organization.	15b		Х					
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.								
	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		Х					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b							
Sec	ction C. Disclosure	100		<u> </u>					
17	List the states with which a copy of this Form 990 is required to be filed NONE								
18			s) on	ly)					
	Own website     Another's website     Upon request     Other (explain on Schedule O)								
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements availa the public during the tax year. SEE SCHEDULE O	ble to							
20	State the name, address, and telephone number of the person who possesses the organization's books and records.								
	CUC TRINH-NGUYEN 88 W TULLY ROAD STE 116 SAN JOSE CA 95111 408-971-1888								

Form 990 (2023) VIET DREAMS	27-4115634	Page 7
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Independent Contractors	t Compensated Employee	es, and
Check if Schedule O contains a response or note to any line in this Part VII		
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensa	ted Employees	
1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending organization's tax year.	with or within the	
• List all of the organization's <b>current</b> officers, directors, trustees (whether individuals or organizat compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.	tions), regardless of amount of	

• List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

			<b>(C)</b> Position							
(A) Name and title	(B) Average hours per week	offic	er an	ıd a d		than o s both r/truste		(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-	<b>(F)</b> Estimated amount of other compensation from
	(list any hours for related	Individual trustee or director	Institutional trustee	Officer	Key employee	ighest i nploye	Former	the organization (W-2/1099- MISC/1099-NEC)	(W-2/1099- MISC/1099-NEC)	compensation from the organization and related organizations
	organiza- tions below	al trust	nal tru		oloyee	compe				
	dotted line)	lee	istee			Highest compensated employee				
(1) QUAN K NGUYEN	5									
PRESIDENT & CEO	0	Х						0.	0.	0.
_ (2) ANTHONY MY TRAN CHAIRMAN	0	Х						0.	0.	0.
(3) NAM NGUYEN	4									
TREASURER	0	Х						0.	0.	0.
(4)		-								
		-								
(10)										
(12)										
(13)										
<i>``</i>		1								
(14)										
ВАА	TEEA0	107L	08/2	3/23		I I		1		Form <b>990</b> (2023)

#### Form 990 (2023) VIET DREAMS

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ľŭ	rt VII Section A. Officers, Directors, Tru	51005,1			(C)						(commuca)
	(A) Name and title	(B) Average hours per week (list any hours for related organiza- tions below dotted line)	box, ι office	Po: t check nless po and a Officer	erson directo	is both pr/truste	an	(D) Reportable compensation from the organization (W-2/1099- MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099- MISC/1099-NEC)	comper the or and	(F) ted amount f other ssation from ganization d related inizations
(15)											
(16)											
(17)											
(18)											
(19)											
(20)											
(21)											
(22)											
(23)											
(24)											
(25)											
	Subtotal							0.	0.		0.
	Total from continuation sheets to Part VII, Section Total (add lines 1b and 1c)							0.	0.		0.
	Total number of individuals (including but not limited from the organization 0									pensatior	
3	Did the organization list any <b>former</b> officer, direct on line 1a? If "Yes,"complete Schedule J for such	tor, truste h <i>individu</i>	e, key al	/ emp	oye	e, or I	high	nest compensated	employee	. 3	X
4	For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	reportab r than \$1	le con 50,00	npens 0? <i>lf</i> '	atior Yes,	and " con	oth nple	er compensation ete Schedule J for	from	. 4	X
5	Did any person listed on line 1a receive or accrue for services rendered to the organization? If "Yes	e comper	satior	n from	anv	unrel	late	d organization or	individual		X
	tion B. Independent Contractors								¢100.000 (		
·	Complete this table for your five highest compensation from the organization. Report compensation	sated inde sation for	epend the ca	ent co lendar	ntra yeai	ctors endir	tha ng w	t received more the or within the or	nan \$100,000 of ganization's tax yea	r.	
	(A) Name and business addr	ess						<b>(B)</b> Description	of services	<b>(C</b> Compe	<b>;)</b> nsation
2	Total number of independent contractors (including b \$100,000 of compensation from the organization	ut not lim	ited to	those	liste	d abov	ve) v	who received more	than		

Form 990 (2023) VIET DREAMS
Part VIII Statement of Revenue

Page 9

Total (Revenue         (P) Relation or science (Revenue         (C) Reserve science (Revenue         (C) Revenue (Revenue			Check if Schedule O contains a	a resp	onse or note to any	/ line in this Part VI	11		
Begin         Membership dask							<b>(B)</b> Related or exempt function	<b>(C)</b> Unrelated business	(D) Revenue excluded from tax under sections
Bigg         Za         Exclose         Exclose           b	ų Se te	1a	· · ·						
Bigg         Za         Exclose         Exclose           b	Grai	b							
Bigg         Za         Exclose         Exclose           b	Ľ Š	c d	-						
Bigg         Za         Exclose         Exclose           b	i, Gi mila	e	-						
Bigg         Za         Exclose         Exclose           b	ions Sii	f	All other contributions, gifts, grants, and						
Bigg         Za         Exclose         Exclose           b	ibut.			1f	214,502.				
Bigg         Za         Exclose         Exclose           b		y	lines 1a-1f						
Percent of the second	-	h	Total. Add lines 1a-1f			214,502.			
3         Investment income (including dividends, interest, and other similar amounts).         7,545.           4         Income from investment of tax exempt bond proceeds         7,545.           5         Royalties.         7,545.           6a         Gos rests         Gos rests         7,545.           6a         Gos rests         Gos rests         Gos rests         7,545.           7         Gos rests         Gos rests         Gos rests         7,545.           7         Gos rests         Gos rests         Gos rests         Gos rests         Gos rests           7         Gos rests         <	nue	20			Business Code				
3         Investment income (including dividends, interest, and other similar amounts).         7,545.           4         Income from investment of tax exempt bond proceeds         7,545.           5         Royalties.         7,545.           6a         Gos rests         Gos rests         7,545.           6a         Gos rests         Gos rests         Gos rests         7,545.           7         Gos rests         Gos rests         Gos rests         7,545.           7         Gos rests         Gos rests         Gos rests         Gos rests         Gos rests           7         Gos rests         <	leve								
3         Investment income (including dividends, interest, and other similar amounts).         7,545.           4         Income from investment of tax exempt bond proceeds         7,545.           5         Royalties.         7,545.           6a         Gos rests         Gos rests         7,545.           6a         Gos rests         Gos rests         Gos rests         7,545.           7         Gos rests         Gos rests         Gos rests         7,545.           7         Gos rests         Gos rests         Gos rests         Gos rests         Gos rests           7         Gos rests         <	се Н								
3         Investment income (including dividends, interest, and other similar amounts).         7,545.           4         Income from investment of tax exempt bond proceeds         7,545.           5         Royalties.         7,545.           6a         Gos rests         Gos rests         7,545.           6a         Gos rests         Gos rests         Gos rests         7,545.           7         Gos rests         Gos rests         Gos rests         7,545.           7         Gos rests         Gos rests         Gos rests         Gos rests         Gos rests           7         Gos rests         <	ervi	d	1						
3         Investment income (including dividends, interest, and other similar amounts).         7,545.           4         Income from investment of tax exempt bond proceeds         7,545.           5         Royalties.         7,545.           6a         Gos rests         Gos rests         7,545.           6a         Gos rests         Gos rests         Gos rests         7,545.           7         Gos rests         Gos rests         Gos rests         7,545.           7         Gos rests         Gos rests         Gos rests         Gos rests         Gos rests           7         Gos rests         <	ŝ	е	,						
3         Investment income (including dividends, interest, and other similar amounts).         7,545.           4         Income from investment of tax exempt bond proceeds         7,545.           5         Royalties.         7,545.           6a         Gos rests         Gos rests         7,545.           6a         Gos rests         Gos rests         Gos rests         7,545.           7         Gos rests         Gos rests         Gos rests         7,545.           7         Gos rests         Gos rests         Gos rests         Gos rests         Gos rests           7         Gos rests         <	ogra	f							
other similar amounts)         7,545.         7,545.           4         income from investment of tax-exempt bond proceeds         6         7,545.         7,545.           5         Royatties         0         6         0	Ę	g							
4         Income from investment of tax-exempt bond proceeds           5         Royalties         0.0 Real         0.0 Personal           6a         Gross rents         6a         0.0 Real         0.0 Personal           6a         Gross rents         6a         0.0 Real         0.0 Personal           7a         Gross rents         6a         0.0 Real         0.0 Personal           7a         Gross amount from solves         6a         0.0 Real         0.0 Personal           7a         Gross amount from solves         7a         0.0 Securities         0.0 Other           7a         Gross amount from solves         7a         0.0 Securities         0.0 Other           7a         Gross amount from solves         7a         0.0 Securities         0.0 Other           7a         Gross amount from solves         7a         0.0 Securities         0.0 Other           7a         Gross amount from solves         7a         0.0 Other         0.0 Other           7a         Gross amount from solves         7a         0.0 Other         0.0 Other           7a         Gross amount from solves         7a         0.0 Other         0.0 Other           7a         Gross income from fundraising events         0.0 Other         0		3				7 545			7 545
Ga         Gross rents         Ga         (i) Presional           b         Less: rental expenses         Ga         (ii) Presional           d         Met rental income or (loss)         Gc         (iii) Presional           d         Net rental income or (loss)         Gc         (iii) Presional           d         Net rental income or (loss)         Gc         (iii) Presional           d         Net rental income or (loss)         (iii) Presional         (iii) Presional           d         Net rental income or (loss)         (iii) Presional         (iiii) Presional           d         Net gain or (loss)         Ta         Ta           geness income from fundraising events         Ba         Ba         Sa           e         Net incorne or (loss) from fundraising events         Sa         Sa           b         Less: direct expenses         Ba         Sa         Sa		4	,			7,545.			7,545.
Ga         Gross rents         Ga         Ga         Ga           b         Less: rental expenses         Gb		5	Royalties						
b         Less: rental expenses         6b			(i) Re	al	(ii) Personal				
c         Rental income or (loss)         Gc									
d Net rental income or (loss)       iii) Other         a Gross mount from sets of assets other hasis and sales expresses.       iii) Other         c Gain or (loss)       7a         d Net gain or (loss)       8a         gross income from fundraising events (not including \$ or other than is and advect expenses       8a         gross income from fundraising events       8a         for the torne or (loss) from fundraising events       8a         gross income from qaming activities.       8a         gross income from qaming activities.       9a         gross income from qaming activities.       9a         gross income from qaming activities.       9a         gross income or (loss) from gaming activities.       9a         b Less: direct expenses       10a         c Net income or (loss) from sales of inventory.       0         c Net income or (loss) from sales of inventory.       0         c Net income or (loss) from sales of inventory.       0         c Net income or (loss) from sales of inventory.       0         c Net income or (loss) from sal									
7a       Gross amount from sales of assets of memory bless cost or other basis and sales expresses.       7a       (i) Securities       (ii) Other         7a       Gross and the than inventory bless cost or other basis and sales expresses.       7b       7c       7c         8a       Gross income from fundraising events of other basis and cost other basis and sales expresses.       7b       7c       7c         8a       Gross income from fundraising events of other building \$       7d       7d       7d         9a       Gross income from fundraising events of other building \$       8a       8a       8a         9a       Gross income from gaming activities.       8a       8a       8a         9a       Gross sales of income from gaming activities.       9a       9a         9a       Gross sales of incomeroy.       9a       9a         9a       Gross sales of incomeroy.       9a       9a         9a       Gross sales of incomeroy.       9a       9a         9a       Buble cost.       10a       10a       10a         10a       Gross sales of inventory.       10a       10a       10a         10a       Buble cost.       10a       10a       10a       10a         10a       Cost. Add lines 11a-11d       10a									
sales of assets and sales expenses         7a         7a           b         Less: cost or other basis and sales expenses         7c         7c           d         Net gain or (loss)         7c         7c           d         Net gain or (loss) from fundraising events (not including \$c) (rot nicutions reported on line 1c). See Part IV, line 18         8a         8a           b         Less: direct expenses         8b         7c         7c           c         Net income or (loss) from gaming activities         9a         7c         7c           d         Net income or (loss) from gaming activities         7c         7c         7c           d         Net income or (loss) from sales of inventory         7c         7c         7c           gainage         10a </td <th></th> <td></td> <td>(i) Soour</td> <td></td> <td>1</td> <td></td> <td></td> <td></td> <td></td>			(i) Soour		1				
b       Less: cost or floate hasis and sales expenses       7b		74	sales of assets						
and sale sepenses       7b         c Gain or (loss)       7c         d Net gain or (loss)       7c         as Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18       8a         b Less: direct expenses       8b         c Net income or (loss) from fundraising events       9a         b Less: direct expenses       9a         c Net income or (loss) from gaming activities. See Part IV, line 19       9a         b Less: direct expenses       9b         c Net income or (loss) from gaming activities. See Part IV, line 19       9a         b Less: direct expenses       9b         c Net income or (loss) from gaming activities.       9a         gators also of inventory, less       10a         c Net income or (loss) from sales of inventory.       0         c Net income or (loss) from sales of inventory.       0         c Net income or (loss) from sales of inventory.       0         c Net income or (loss) from sales of inventory.       0         c and all other revenue.       0         c and all other revenue.       0         c atl Ald other revenue.       0         c atl. Add lines 11a-11d.       0         12 Total revenue. See instructions.       222,047.       0.       0. </td <th></th> <td>b</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>		b							
a       Net gain or (loss)       a       a       Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18       Ba       b       b         b       Less: direct expenses       Bb       b       c       Net income or (loss) from fundraising events         9a       Gross income from gaming activities. See Part IV, line 19       9a       9a       b         b       Less: direct expenses       9b       b       c         c       Net income or (loss) from gaming activities. See Part IV, line 19       9a       b         b       Less: direct expenses       9b       c         c       Net income or (loss) from gaming activities.       0a       c         vet income or (loss) from gaming activities.       0a       c       c         tests: cost of goods sold.       10a       forest sales of inventory.       c       c         c       Net income or (loss) from sales of inventory.       c       c       c       c         gameary       a       a       a       a       a       a       a         ib       b       c       c       a       a       a       a       a       a       a       a       a       a       a       <			and sales expenses 7b						
Ba       Gross income from fundraising events (not including \$									
Image: second			<b>o ( )</b>						
9a Gross income from gaming activities. See Part IV, line 19       9a         b Less: direct expenses       9b         c Net income or (loss) from gaming activities       10a         10a Gross sales of inventory, less       10a         b Less: cost of goods sold       10a         b Less: cost of goods sold       10b         c Net income or (loss) from sales of inventory       10a         b Less: cost of goods sold       10b         c Net income or (loss) from sales of inventory       0         d All other revenue.       0         e Total. Add lines 11a-11d       222,047.       0.       0.	ue	8a							
9a Gross income from gaming activities. See Part IV, line 19       9a         b Less: direct expenses       9b         c Net income or (loss) from gaming activities       10a         10a Gross sales of inventory, less       10a         b Less: cost of goods sold       10a         b Less: cost of goods sold       10b         c Net income or (loss) from sales of inventory       10a         b Less: cost of goods sold       10b         c Net income or (loss) from sales of inventory       0         d All other revenue.       0         e Total. Add lines 11a-11d       222,047.       0.       0.	ver		· · · · · · · · · · · · · · · · · · ·	-					
9a Gross income from gaming activities. See Part IV, line 19       9a         b Less: direct expenses       9b         c Net income or (loss) from gaming activities       10a         10a Gross sales of inventory, less       10a         b Less: cost of goods sold       10a         b Less: cost of goods sold       10b         c Net income or (loss) from sales of inventory       10a         b Less: cost of goods sold       10b         c Net income or (loss) from sales of inventory       0         d All other revenue.       0         e Total. Add lines 11a-11d       222,047.       0.       0.	Be			88	a				
9a Gross income from gaming activities. See Part IV, line 19       9a         b Less: direct expenses       9b         c Net income or (loss) from gaming activities       10a         10a Gross sales of inventory, less       10a         b Less: cost of goods sold       10a         b Less: cost of goods sold       10b         c Net income or (loss) from sales of inventory       10a         b Less: cost of goods sold       10b         c Net income or (loss) from sales of inventory       0         d All other revenue.       0         e Total. Add lines 11a-11d       222,047.       0.       0.	her		•						
See Part IV, line 19	Ð	С	: Net income or (loss) from fundrai	sing e	events				
b       Less: direct expenses       9b         c       Net income or (loss) from gaming activities       0a         10a       Gross sales of inventory, less       10a         b       Less: cost of goods sold       10a         b       Less: cost of goods sold       10b         c       Net income or (loss) from sales of inventory       0a         g       11a       11a         b		9a	Gross income from gaming activities.						
c       Net income or (loss) from gaming activities.       Image: construction of the second		h	,						
10a       Gross sales of inventory, less returns and allowances				-	-				
returns and allowances.       10a         b Less: cost of goods sold.       10b         c Net income or (loss) from sales of inventory.          11a       Business Code         b       -         b       -         c       -         d All other revenue.       -         e       Total. Add lines 11a-11d         12       Total revenue. See instructions.       222,047.       0.       0.       7,545.									
c       Net income or (loss) from sales of inventory       Business Code         11a       Business Code       Image: Code         11a       Image: Code       Image: Code         b       Image: Code       Image: Code         b       Image: Code       Image: Code         c       Image: Code       Image: Code         d       All other revenue       Image: Code         e       Total. Add lines 11a-11d       Image: Code         12       Total revenue. See instructions       222,047.       0.       0.       7,545.		lud		10	a				
Business Code         Business Code           11a			-	-	-				
11a		С	: Net income or (loss) from sales o	of inve	-				
I2         Total revenue. See instructions         222,047.         0.         0.         7,545.	รา	11-	<u>,                                     </u>		Business Code				
I2         Total revenue. See instructions         222,047.         0.         0.         7,545.	nec Nue	n ið h	`						-
I2         Total revenue. See instructions         222,047.         0.         0.         7,545.	ella. Ver		, ;						
I2         Total revenue. See instructions         222,047.         0.         0.         7,545.	Re	d	All other revenue						
	Σ	е	e Total. Add lines 11a-11d	ـــــــــــــــــــــــــــــــــــــ	· · · · · · · · · · · · · · · · · · ·				
			Total revenue. See instructions				0.	0.	

Check if Schedule O contains a response or note to any line in this Part IX.										
Do 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21									
2	Grants and other assistance to domestic individuals. See Part IV, line 22									
3	Grants and other assistance to foreign organizations, foreign governments, and for- eign individuals. See Part IV, lines 15 and 16	106,212.	106,212.							
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.					
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.					
7	Other salaries and wages	01								
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)									
9	Other employee benefits									
10	Payroll taxes									
11	Fees for services (nonemployees):									
	Management									
b	Legal	77.		77.						
c	Accounting									
	Lobbying									
е	Professional fundraising services. See Part IV, line 17									
	Investment management fees									
g	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule 0.)									
12	Advertising and promotion.	150.		150.						
13	Office expenses	822.		822.						
14	Information technology			0221						
15	Royalties									
16	Occupancy									
17	Travel									
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 24	Insurance Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.).									
a		2,716.		2,716.						
b	INTERNET	49.		49.						
c		29.		29.						
d										
e	All other expenses.									
25		110,055.	106,212.	3,843.	0.					
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)									
RAA					Earm 990 (2023)					

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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27-4115634	
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art X	Balanc	e Sheet	

		<b>(A)</b> Beginning of year		<b>(B)</b> End of year
1	Cash – non-interest-bearing.	414,046.	1	218,679
2	5 1 5		2	
3	5 5		3	
4	Accounts receivable, net		4	
5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
7	Notes and loans receivable, net.		7	
	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges		9	
10	a 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	307,35
12			12	507,55
13	r i i i i i i i i i i i i i i i i i i i		13	
14			14	
15	-		15	
16		414,046.	16	526,03
17	Accounts payable and accrued expenses		17	
18			18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
			23	
23			23	
25			24	
	and other liabilities not included on lines 17-24). Complete Part X of Schedule D.		25	
26		0.	26	
	Organizations that follow FASB ASC 958, check here X and complete lines 27, 28, 32, and 33.			
27	Net assets without donor restrictions	414,046.	27	526,03
28	Net assets with donor restrictions		28	
27 28 30 31 32 33	Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.			
29	Capital stock or trust principal, or current funds		29	
30	Paid-in or capital surplus, or land, building, or equipment fund		30	
31	Retained earnings, endowment, accumulated income, or other funds		31	
32		414,046.	32	526,03
		,,		,00

Form	1 990 (2023) VIET DREAMS 27-	4115634	F	Page 12
Par	t XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI.			🔲
1	Total revenue (must equal Part VIII, column (A), line 12)	1	222	047.
2	Total expenses (must equal Part IX, column (A), line 25)	2		055.
3	Revenue less expenses. Subtract line 2 from line 1	3		,992.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)).	4		046.
5	Net unrealized gains (losses) on investments.	5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain on Schedule O)	9		0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	526	038.
Par	t XII Financial Statements and Reporting	<u>I</u> I	020	
	Check if Schedule O contains a response or note to any line in this Part XII			П
			Ye	s No
1	Accounting method used to prepare the Form 990: X Cash Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both.	red on a		
h	Were the organization's financial statements audited by an independent accountant?		2b	х
IJ	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separ basis, consolidated basis, or both.         Separate basis       Consolidated basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audi review, or compilation of its financial statements and selection of an independent accountant?	t,	2c	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Guidance, 2 C.F.R. Part 200, Subpart F?	Uniform	3a	Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required au or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	
BAA	TEEA0112L 08/23/23		Form <b>99</b>	<b>)</b> (2023)

SCHEDULE A (Form 990)

## **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service
Name of the organization

Name of the organization					Employer identifica	
VIET DREAMS	with Status (All a	raonizationa must	aamal	ata thi	27-411563	
Part I Reason for Public Cha						cuons.
$1  \square A \text{ church, convention of church}$	•	0		2	,	
2 A school described in section				5,1,7,7,	. <b>')</b> .	
<b>3</b> A hospital or a cooperative I				)(b)(1)(A	AV(iii).	
4 A medical research organiza						nter the hospital's
name, city, and state:						
5 An organization operated for section 170(b)(1)(A)(iv). (Co	r the benefit of a colle					escribed in
6 A federal, state, or local gov	vernment or governme	ntal unit described in s	ection 1	<b>70(b)(</b> 1)	)(A)(v).	
7 An organization that normally in section 170(b)(1)(A)(vi).	receives a substantial p (Complete Part II.)	art of its support from a	governm	ental un	it or from the general pul	blic described
8 A community trust described	d in section 170(b)(1)(	A)(vi). (Complete Part I	l.)			
9 An agricultural research organ	ization described in sec	tion 170(b)(1)(A)(ix) oper	ated in c	onjunctio	on with a land-grant colle	ege
or university or a non-land-gra	0 0	e (see instructions). Enter		ne, city,	and state of the college of	or — — — — — — — — — — — — — — — — — — —
10 X An organization that normal from activities related to its investment income and unre June 30, 1975. See section	exempt functions, sub lated business taxable	ject to certain exception e income (less section	ns; and	(2) no r	nore than 33-1/3% of i	ts support from gross
11 An organization organized a	nd operated exclusive	ly to test for public safe	ety. See	sectior	n 509(a)(4).	
12 An organization organized a or more publicly supported o lines 12a through 12d that d	organizations describe	d in <b>section 509(a)(1)</b> c	or <b>sectio</b>	n 509(a	)(2). See section 509(a	ut the purposes of one <b>)(3).</b> Check the box on
a Type I. A supporting organization(s) the power to re complete Part IV, Sections A	ion operated, supervise equiarly appoint or elect					the supported on. <b>You must</b>
<ul> <li><b>b</b> Type II. A supporting organize management of the supporting must complete Part IV, Sector</li> </ul>	organization vested in	ontrolled in connection the same persons that c	with its ontrol or	support manage	ed organization(s), by the supported organizat	having control or ion(s). <b>You</b>
<b>c Type III functionally integrated</b> organization(s) (see instruct	ions). You must comp	olete Part IV, Sections	A, D, an	d E.		
d Type III non-functionally integrated. The instructions). You must com	organization generally	must satisfy a distribu	nection tion requ	with its s uiremen	supported organization(s) t and an attentiveness	) that is not requirement (see
e Check this box if the organiz integrated, or Type III non-fu	zation received a writte	en determination from t	the IRS	that it is	s а Туре I, Туре II, Тур	e III functionally
f Enter the number of supported	organizations		ı. 			
g Provide the following information	0					
(i) Name of supported organization	<b>(ii)</b> EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) I organizat in your g docur	ion listed overning	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
<u>(C)</u>						
<u>(</u> D)						
(E)						
Total						

Sche	edule A (Form 990) 2023	VIET DRE	AMS			27-41156	34 Page 2
Par	t II Support Schedule for (Complete only if you checked organization fails to qualify	the box on line 5,	7, or 8 of Part I or	if the organization	failed to qualify ur		
Sec	tion A. Public Support	-			·	-	
Cale begi	ndar year (or fiscal year nning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	<b>(c)</b> 2021	<b>(d)</b> 2022	<b>(e)</b> 2023	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
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)						
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support	ſ	Γ	T	1		
Cale begi	ndar year (or fiscal year nning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	<b>(c)</b> 2021	( <b>d)</b> 2022	<b>(e)</b> 2023	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activ	vities, etc. (see in	structions)				2
13	First 5 years. If the Form 990 is organization, check this box and						
Sec	tion C. Computation of Pu						
14 15	Public support percentage for 20 Public support percentage from						
16a	<b>33-1/3% support test–2023.</b> If t and <b>stop here.</b> The organization	he organization d qualifies as a pu	id not check the l blicly supported o	box on line 13, an organization	id line 14 is 33-1/	3% or more, che	eck this box
b	<b>33-1/3% support test–2022.</b> If the and <b>stop here.</b> The organization	ne organization di	d not check a box	c on line 13 or 16	a, and line 15 is 3	3-1/3% or more	, check this box
17a	<b>10%-facts-and-circumstances te</b> or more, and if the organization the organization meets the facts	meets the facts-a	nd-circumstance	s test, check this	box and stop her	e. Éxplain in Pa	rt VI how
	<b>10%-facts-and-circumstances te</b> or more, and if the organization organization meets the facts-and	meets the facts-a d-circumstances t	ind-circumstance est. The organiza	s test, check this ition qualifies as a	box and <b>stop her</b> publicly supporte	e. Explain in Pa ed organization.	rt VI how the
18	Private foundation. If the organi	zation did not che	eck a box on line	13, 16a, 16b, 17a	, or 1/b, check th	is box and see	Instructions

VIET DREAMS

Page 3

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

#### Section A. Public Support (b) 2020 (c) 2021 Calendar year (or fiscal year beginning in) (a) 2019 (d) 2022 (e) 2023 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.").... 174,434 119,185 186,888 121,659 214,502 816,668. 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose... 0. 3 Gross receipts from activities that are not an unrelated trade or business under section 513. 0. Tax revenues levied for the organization's benefit and either paid to or expended on 0. its behalf.... The value of services or facilities furnished by a governmental unit to the organization without charge ... n Total. Add lines 1 through 5... 174,434 119,185 186,888 121,659 214,502 816 668. Amounts included on lines 1, 7a 2, and 3 received from disqualified persons.... 0 0 0 0 0 0. **b** Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year. 0 0 0 0 0 0. c Add lines 7a and 7b..... 0 0 0 0 0 0. 8 Public support. (Subtract line 7c from line 6.). 816,668. Section B. Total Support (c) 2021 (e) 2023 (f) Total (a) 2019 (b) 2020 (d) 2022 Calendar year (or fiscal year beginning in) 9 Amounts from line 6..... 174,434 119,185 186,888 121,659 214,502 816,668. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . 0. b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975... c Add lines 10a and 10b ..... 0 0 0. 0. 0 0. Net income from unrelated business 11 activities not included on line 10b. whether or not the business is regularly carried on . . . . . 0. 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in 0. Part VI.)... 13 Total support. (Add lines 9, 119,185. 10c, 11, and 12.)..... 121,659. 816,668. 174,434. 186,888. 214,502. First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 14 organization, check this box and stop here. Section C. Computation of Public Support Percentage **15** Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))..... % 15 100.00 16 Public support percentage from 2022 Schedule A, Part III, line 15. 16 100.00 8 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f). 17 0\0 0.00 18 Investment income percentage from 2022 Schedule A, Part III, line 17 ..... 18 0.00 Ŷ 19a 33-1/3% support tests-2023. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 Х is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization .... **b** 33-1/3% support tests - 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization gualifies as a publicly supported organization .... Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions..... 20

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 Part IV
 Supporting Organizations

 (Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

			Vee	Ma
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was	0		
	described in section 509(a)(1) or (2).	2		
3	a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
l	b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		
	c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4	a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
I	<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
	c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5	<b>a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
	<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
	c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9	a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
l	<b>b</b> Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in <b>Part VI.</b></i>	9b		
	c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	9c		
10	a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.	10a		
		1 Ja		
	<b>b</b> Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

Par	IV Supporting Organizations (continued)	_	
		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below,		
	the governing body of a supported organization? 11a		
b	A family member of a person described on line 11a above? 11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in <b>Part VI</b> . <b>11c</b>		

#### Section B. Type I Supporting Organizations

Schedule A (Form 990) 2023

1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? *If "No," describe in Part VI how the supported organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.* 

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2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.* 

#### Section C. Type II Supporting Organizations

1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).* 

#### Section D. All Type III Supporting Organizations

1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? *If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).*3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's norme or assets at all times during the tax year? *If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.*

#### Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
  - a The organization satisfied the Activities Test. Complete line 2 below.
  - **b** The organization is the parent of each of its supported organizations. *Complete line 3 below*.
  - c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).

#### 2 Activities Test. Answer lines 2a and 2b below.

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported** organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- **b** Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If "Yes" or "No," provide details in Part VI.*
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.

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2a

2b

3a

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Yes

Yes

No

No

Yes

1

2

1

No

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Schedule A (Form 990) 2023 VIET DREAMS			15634 Page
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org			
1 Check here if the organization satisfied the Integral Part Test as a qualifying true instructions. All other Type III non-functionally integrated supporting organization	st on No ons mus	ov. 20, 1970 (explain in t complete Sections A	through E.
Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
<b>4</b> Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C – Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
		<b>-</b> :	

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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Schedule A (Form 990) 2023

-	edule A (Form 990) 2023 VIET DREAMS				5634 Page <b>7</b>
-	rt V Type III Non-Functionally Integrated 509(a)(3) Su	pporting Organiza	tions (continued	d)	
Sec	tion D – Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exempt put	rposes		1	
2	Amounts paid to perform activity that directly furthers exempt purposes of in excess of income from activity	of supported organization	S,	2	
3	Administrative expenses paid to accomplish exempt purposes of su	pported organizations		3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - provide	details in <b>Part VI</b> )		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the organization	on is responsive (provide	details		
	in <b>Part VI</b> ). See instructions.			8	
	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sec	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2023	ons	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required – <i>explain in Part VI</i> ). See instructions.				
3	Excess distributions carryover, if any, to 2023				
á	From 2018				
I	• From 2019				
	: From 2020				
(	From 2021				
(	e From 2022				
	f Total of lines 3a through 3e				
	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
	i Carryover from 2018 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4					
ć	Applied to underdistributions of prior years				
I	• Applied to 2023 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in <b>Part VI</b></i> . See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j and 4c.				
8	Breakdown of line 7:				
ć	Excess from 2019				
-	Excess from 2020				
(	Excess from 2021				
(	Excess from 2022				
	Excess from 2023				
BAA			S	chedu	le A (Form 990) 2023

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Part VI	Supplemental Information. Provide the explanations require	d by Part II, line 10; Part II, line 17a or 17b; Part	
	III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b	, 9c, 11a, 11b, and 11c; Part IV, Section	
	B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2	and 3; Part IV, Section E, lines 1c, 2a, 2b,	
	3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section	D, lines 5, 6, and 8; and Part V, Section E,	
	lines 2, 5, and 6. Also complete this part for any additional informat	on. (See instructions.)	