SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ. formation about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection Employer identification number

| Par | t Posson f | or Public Cha | rity Status (All orga | nization | e muet o | omplete | this na | rt) Sooi | netructic | 200 | |
|----------|---|--|--|--------------------------------|------------------------------------|-------------------------|--|--------------------------|---|-------------------------------------|---|
| | | | ation because it is: (Fo | | | - | | | | JII5. | |
| 1 | • | • | • | | - | | • | , | ` | | |
| 2 | | nurch, convention of churches, or association of churches described in section 170(b)(1)(A)(i). shool described in section 170(b)(1)(A)(ii). (Attach Schedule E.) | | | | | | | | | |
| 3 | | hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). | | | | | | | | | |
| 4 | A mospital of a cooperative hospital service organization described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: | | | | | | | | | | |
| 5 | An organizatio | ation operated for the benefit of a college or university owned or operated by a governmental unit described in 0(b)(1)(A)(iv). (Complete Part II.) | | | | | | | | | |
| 6 7 | An organizatio | ral, state, or local government or governmental unit described in section 170(b)(1)(A)(v). anization that normally receives a substantial part of its support from a governmental unit or from the general public bed in section 170(b)(1)(A)(vi). (Complete Part II.) | | | | | | | | | |
| 8 | A community | trust described i | n section 170(b)(1)(A) |)(vi). (Cor | nplete Pa | art II.) | | | | | |
| 9 | | | | | | | | | | | |
| 10 11 | An organization | on organized ar | l operated exclusively nd operated exclusive licly supported organ describes the type of | ely for th nizations | ne benefi [.] describe | t of, to p d in sect | berform t ion 509(a | the funct a)(1) or se | ions of, ection 50 | 9(a)(2). See se | |
| | a 🗌 Typel | 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a _ Type I b _ Type II c _ Type III–Functionally integrated d _ Type III–Non-functionally integrated | | | | | | | | | |
| e | e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1 or section 509(a)(2). | | | | | | | | | | |
| f | If the organiz | ation received a | a written determinatio | on from t | the IRS 1 | that it is | a Type | I, Type I | ll, or Typ | be III supportin | g |
| | organization, o | check this box | | | | | | | | | |
| g | Since August following pers | | he organization accept | pted any | gift or co | ontributio | n from a | ny of the | • | | |
| | (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? | | | | | No | | | | | |
| | (ii) A family m | ember of a perse | on described in (i) abc | ove? | | | | | | 11g(ii) | |
| | (iii) A 35% cor | ntrolled entity of | a person described in | n (i) or (ii) a | above?. | | | | | 11g(iii) | |
| h | Provide the fo | llowing informati | ion about the support | ed organi | ization(s). | | | | | | |
| (i) | organization (describe above of | | (iii) Type of organization (described on lines 1–9 above or IRC section (see instructions)) | in col. (i) listed in your the | | the organ col. (i) | ou notify nization in of your port? | organizat (i) organi | s the ion in col. zed in the S.? | (vii) Amount of monetary support | |
| | | | | Yes | No | Yes | No | Yes | No | | |
| (A) | | | | | | | | | | | |
| (B) | | | | | | | | | | | |
| (C) | | | | | | | | | | | |
| (D) | | | | | | | | | | | |
| (E) | | | | | | | | | | | |
| | | | | | | | | | | - | |

Total



Department of the Treasury

Name of the organization

| | Internal Revenue Service | Inf |
|--|--------------------------|-----|
|--|--------------------------|-----|

| Sched | ule A (Form 990 or 990-EZ) 2013 | | | | | | Page 2 |
|-------|--|------------------|------------------|---------------|-----------------|----------------|-------------------|
| Par | II Support Schedule for Organiza | tions Descr | ribed in Sect | ions 170(b)(1 | I)(A)(iv) and f | 170(b)(1)(A)(v | i) |
| | (Complete only if you checked th | | | | • | • | alify under |
| 0 | Part III. If the organization fails to | qualify unde | er the tests lis | sted below, p | lease comple | ete Part III.) | |
| | ion A. Public Support ndar year (or fiscal year beginning in) ▶ | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (a) 2012 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | (a) 2009 | (b) 2010 | (C) 2011 | (0) 2012 | (e) 2013 | (i) Totai |
| 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. | | | | | | |
| | ion B. Total Support | | | • | | | |
| | ndar year (or fiscal year beginning in) 🕨 | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) 2013 | (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 IV.) | | | | | | |
| 11 | Total support. Add lines 7 through 10 | , , , , | | | | | |
| 12 | Gross receipts from related activities, etc. | - | | | | 12 | |
| 13 | First five years. If the Form 990 is for the | • | | | • | | |
| Sec. | organization, check this box and stop her ion C. Computation of Public Suppor | | | | | | 🕨 |
| Sect | ion c. computation of Public Suppor | rercentag | | | | | |

| 14 | Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) | 14 | | % | |
|-----|---|-------|-------------------|---|--|
| 15 | Public support percentage from 2012 Schedule A, Part II, line 14 | 15 | | % | |
| 16a | 33 ¹ / ₃ % support test – 2013. If the organization did not check the box on line 13, and line 14 is 33 ¹ / ₃ box and stop here. The organization qualifies as a publicly supported organization | | | | |
| b | | | s 33¹/₃% or more, | | |
| 17a | 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization | | | | |
| b | 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check the Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization | is bo | x and stop here. | | |
| | supported organization | • • | 🕨 | | |

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2013

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 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.)

| Secti | on A. Public Support | | | | | | | | | |
|-------------------|---|----------|-----------------|----------------|----------|----------|---------------------|--|--|--|
| Calen | dar year (or fiscal year beginning in) 🕨 | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) 2013 | (f) Total | | | |
| 1 | Gifts, grants, contributions, and membership fees | | | | | | | | | |
| | received. (Do not include any "unusual grants.") | | | | | | | | | |
| 2 | Gross receipts from admissions, merchandise | | | | | | | | | |
| | sold or services performed, or facilities furnished in any activity that is related to the | | | | | | | | | |
| | organization's tax-exempt purpose | | | | | | | | | |
| 3 | Gross receipts from activities that are not an | | | | | | | | | |
| | unrelated trade or business under section 513 | | | | | | | | | |
| 4 | Tax revenues levied for the | | | | | | | | | |
| | organization's benefit and either paid | | | | | | | | | |
| | to or expended on its behalf | | | | | | | | | |
| 5 | The value of services or facilities | | | | | | | | | |
| | furnished by a governmental unit to the | | | | | | | | | |
| | organization without charge | | | | | | | | | |
| 6 | Total. Add lines 1 through 5 | | | | | | | | | |
| 7a | Amounts included on lines 1, 2, and 3 | | | | | | | | | |
| | received from disqualified persons . | | | | | | | | | |
| b | Amounts included on lines 2 and 3 | | | | | | | | | |
| | received from other than disqualified | | | | | | | | | |
| | persons that exceed the greater of \$5,000 | | | | | | | | | |
| | or 1% of the amount on line 13 for the year | | | | | | | | | |
| С | Add lines 7a and 7b | | | | | | | | | |
| 8 | Public support (Subtract line 7c from | | | | | | | | | |
| | line 6.) | | | | | | | | | |
| Secti | on B. Total Support | | | | | | | | | |
| Calen | dar year (or fiscal year beginning in) 🕨 | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) 2013 | (f) Total | | | |
| 9 | Amounts from line 6 | | | | | | | | | |
| 10a | Gross income from interest, dividends, | | | | | | | | | |
| | payments received on securities loans, rents, | | | | | | | | | |
| | royalties and income from similar sources . | | | | | | | | | |
| b | Unrelated business taxable income (less | | | | | | | | | |
| | section 511 taxes) from businesses | | | | | | | | | |
| | acquired after June 30, 1975 | | | | | | | | | |
| С | Add lines 10a and 10b | | | | | | | | | |
| 11 | Net income from unrelated business | | | | | | | | | |
| | activities not included in line 10b, whether | | | | | | | | | |
| | or not the business is regularly carried on | | | | | | | | | |
| 12 | Other income. Do not include gain or | | | | | | | | | |
| | loss from the sale of capital assets | | | | | | | | | |
| 40 | (Explain in Part IV.) | | | | | | | | | |
| 13 | Total support. (Add lines 9, 10c, 11, and 12.) | | | | | | | | | |
| 4.4 | , | | n'a first sasan | d third fourth | | | $\int c d f(a) (2)$ | | | |
| 14 | First five years. If the Form 990 is for the organization, check this box and stop he | - | | | - | | | | | |
| Sooti | on C. Computation of Public Suppor | | · · · · · | | | | 🕨 | | | |
| <u>3ecu</u> 15 | Public support percentage for 2013 (line | | | 2 column (f)) | | 15 | % | | | |
| 15 16 | Public support percentage for 2013 (intel Public support percentage from 2012 Sci | | • | | | 16 | <u>%</u> | | | |
| | on D. Computation of Investment In | | | | | 10 | 70 | | | |
| <u>3ecu</u> 17 | Investment income percentage for 2013 (| | - | v line 13 colu | mn (f)) | 17 | % | | | |
| 18 | Investment income percentage for 2013 | | | - | | 18 | % | | | |
| 10 19a | | | | | | - | | | | |
| 130 | 33 ¹ / ₃ % support tests – 2013. If the organization did not check the box on line 14, and line 15 is more than $33^{1}/_{3}$ %, and line 17 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 – 2012. If the organiz | - | - | - | | - | | | | |
| U | line 18 is not more than $33^{1}/_{3}$ %, check this | | | | | | | | | |
| 20 | Private foundation. If the organization di | - | - | | | | | | | |
| 20 | | | 557 61 1110 14 | ,,, | | | | | | |

Schedule A (Form 990 or 990-EZ) 2013

| Schedule A (Form 990 or 990-EZ) 2013 Page 2 | | | | | | | |
|---|--|--|--|--|--|--|--|
| Part IV | Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions). | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |