SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

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

4947(a)(1) nonexempt charitable trust.

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

D	Decemb	ov Dublic Obc	with Chatria (All area			ما ما مدرم	ر ما ما ما ا	4 \ C :				
Part			arity Status (All orga			-			nstructio	ns.		
	_	•	ation because it is: (Fo ches, or association of		_		-		`			
			n 170(b)(1)(A)(ii). (Attac			50 III 360	11011 170) .			
3			ospital service organiza			section 1	170/b)/1)/	Δ\/iii\				
4			ion operated in conjun)(h)(1)(<u>A</u>)('iii) Ente	the	
7		ne, city, and stat		Otion with	гатюзріс	ai acsoin	300 III 30	odon 170)(D)(1)(A)(iii). Liitoi	tilo	
5	☐ An organizatio	on operated for	the benefit of a colle	ae or uni	versity ov	vned or	onerated	by a go	vernment	al unit d	escrib	ed in
•)(1)(A)(iv). (Com		go o. a	voluty of	mod of	oporatoa	by a go		ar armi a	000110	
6			rnment or government	al unit de	scribed ir	section	170(b)(1)(Δ)(v)				
7			receives a substantia						it or from	the aer	eral p	ublic
)(A)(vi). (Complete Par				. 5 .			- 3		
8			in section 170(b)(1)(A		nplete Pa	art II.)						
9			receives: (1) more that		-	-	om contri	butions	members	hin fees	and o	iross
•			ed to its exempt funct									
			ent income and unre									
	acquired by th	e organization	after June 30, 1975. Se	ee sectio	n 509(a)(2). (Com	olete Par	t III.)				
10	An organizatio	n organized and	d operated exclusively	to test fo	or public s	safety. Se	e sectio	n 509(a)(4).			
11		_	nd operated exclusive		-	-				or to car	ry ou	t the
	purposes of o	ne or more pul	blicly supported orgar	nizations	described	d in sect	ion 509(a	a)(1) or se	ection 509	9(a)(2). S	ee se	ction
	509(a)(3). Che	ck the box that	describes the type of	supportin	ng organiz	zation an	d comple	te lines 1	1e through	jh 11h.		
	a 🗌 Type I	b □	Type II c	□ Туре	III-Funct	ionally in	tegrated		d 🗌	Type II	-Othe	r
е	By checking tl	nis box, I certify	that the organization	is not co	ntrolled d	lirectly or	indirectl	y by one	or more	disqualifi	ed per	sons
	other than fou	ndation manag	ers and other than one	e or more	publicly	supporte	ed organ	izations c	lescribed	in section	n 509	(a)(1)
	or section 509	(a)(2).										
f	_		a written determination	on from t	the IRS t	that it is	a Type	I, Type I	I, or Typ	e III sup	portin	g
	•	check this box										
g			the organization accep	pted any	gift or co	ontributio	n from a	ny of the	;			
	following pers											
			indirectly controls, eith							ıd	Yes	No
	* *		ody of the supported	•						11g(i)		
		-	son described in (i) abo							11g(ii)		
		-	f a person described in	., .,						11g(iii)		
h		_	tion about the support	1								
(i) N	ame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9		organization sted in your		ou notify nization in		s the ion in col.		mount o pport	of
	organization		above or IRC section		document?	col. (i)	of your	(i) organi	zed in the	Su	pport	
			(see instructions))	Vaa	Na		oort?		S.?			
				Yes	No	Yes	No	Yes	No			
(A)												
(B)												
(C)												
(D)												
(D) (E)												

Schedule A (Form 990 or 990-EZ) 2011 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

	(Complete only if you checked the Part III. If the organization fails to				•	•	alify under
Secti	on A. Public Support	quality und	er trie tests lis	sted below, p	lease comple	ete Part III.)	
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(a) 2001	(2) 2000	(6) 2000	(a) 2010	(6) 23	(i) rotal
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.						
	on B. Total Support			1	1	1	
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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.	. (see instructi	ons)			12	
13	First five years. If the Form 990 is for the					ear as a sectio	n 501(c)(3)
	organization, check this box and stop he						▶ □
	on C. Computation of Public Suppor		·				
14	Public support percentage for 2011 (line 6		•			14	<u>%</u>
15 16a	Public support percentage from 2010 Sch 33 ¹ / ₃ % support test—2011. If the organiz					15 or more o	heck this
iva	box and stop here. The organization qua						
b	331/3% support test—2010. If the organ			-			_
-	check this box and stop here. The organi						. ▶ □
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization mee Part IV how the organization meets the "forganization	ets the "facts- acts-and-circ	and-circumsta umstances" tes	nces" test, che st. The organiz	eck this box ar	nd stop here. E	Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization means to the organization means to the organization means to the organization means to the organization.	ion meets the eets the	e "facts-and-ci s-and-circums	rcumstances" tances" test. T	test, check th	nis box and st	op here.
40	supported organization						. ▶ 🗆
18	Private foundation. If the organization di instructions						

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.)

	if the organization fails to qualify	under the te	sts listed bei	ow, piease co	mpiete Part	II.)	
	on A. Public Support						
Calen	dar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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						
3	furnished by a governmental unit to the						
	organization without charge						
6		_					
6 70	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3						
7a	received from disqualified persons .						
	· ·						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
	line 6.)						
	on B. Total Support		1	T	T	Γ	
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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						
	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for the	ne organizatior	n's first, secon	d, third, fourth	, or fifth tax ye	ear as a sectio	n 501(c)(3)
	organization, check this box and stop he	J					. , , ,
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2011 (line 8			3, column (f))		15	%
16	Public support percentage from 2010 Sch		-			16	%
	on D. Computation of Investment In						
17	Investment income percentage for 2011 (y line 13, colur	mn (f))	17	%
18	Investment income percentage from 2010			-		18	%
19a	331/3% support tests—2011. If the organ						
	17 is not more than 331/3%, check this box						
b	33 ¹ / ₃ % support tests—2010. If the organiz	-	-	-		_	_
~	line 18 is not more than 331/3%, check this l						
20	Private foundation. If the organization di	_	-	-			_

Part IV	Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).