SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization

Employer identification number

Pa	rt_L	Resear	for Public Ch	narity Status (All or	nanizatio	ane mue	t comple	ata this	nart \ (s	a inetru	ctions)	
				,						- 	<u> </u>	
1 ne				idation because it is: irches, or association	-		-		-	^ \/i\		
2				on 170(b)(1)(A)(ii). (At			ribed in s	ection i	70(b)(1)(A	A)(I).		
3				hospital service organ		-	in sectio	n 170(h)	/1\/ A \/iii\	(Attach S	Schadula H)	
4				ation operated in con								
4			_)(A)(III). Litter the	
5	П	hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in										
		•	ection 170(b)(1)(A)(iv). (Complete Part II.)									
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
7 An organization that normally receives a substantial part of its support from a government							the general public					
		described in	described in section 170(b)(1)(A)(vi). (Complete Part II.)									
8	☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)											
9		☐ An organization that normally receives: (1) more than 33⅓ % of its support from contributions, membership fees, and										
	receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no me											
		support from gross investment income and unrelated business taxable income (less section 511 tax								from businesses		
40	acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions)					- !						
10 11		_	_	nd operated exclusive and operated exclusiv	-	-	-					
• • •	ш			blicly supported orga								
				at describes the type								
		a ☐ Type							•	_	Type III-Other	
е										71		
				on managers and othe								
		509(a)(1) or s	section 509(a)(2)									
f		If the organi	zation received	a written determinati	on from	the IRS	that it is	a Type I	I, Type II	, or Type	III supporting	
		•	, check this box	k this box								
g			August 17, 2006, has the organization accepted any gift or contribution from any of the									
		٠.	bllowing persons? Yes No.									
		(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes 110(i)										
		and (iii) below, the governing body of the supported organization?								11g(ii)		
		(1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (1) / (11g(iii)			
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		of supported	(ii) EIN	(iii) Type of organization		organization		ou notify	(vi)	s the	(vii) Amount of	
()		anization	()	(described on lines 1-9	in col. (i) listed in your		the organization in col. (i) of your		organization in col. (i) organized in the		support	
				above or IRC section (see instructions))	governing document?		support?		U.S.?			
					Yes	No	Yes	No	Yes	No		
		<u> </u>										

Schedule A (Form 990 or 990-EZ) 2008 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 box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2004 **(b)** 2005 (c) 2006 (d) 2007 (f) Total (e) 2008 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge **Total.** Add lines 1-3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2004 **(b)** 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or 10 loss from the sale of capital assets (Explain in Part IV.) **Total support.** Add lines 7 through 10 . 11 12 Gross receipts from related activities, etc. (see instructions) 1 1

_	arous recorpts from related detrition, etc. (eee metrocatorie)	_
3	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here	
Sec	on C. Computation of Public Support Percentage	
4	Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	6_
5	Public support percentage from 2007 Schedule A, Part IV-A, line 26f	<u>6</u>
6a	33\% % support test—2008. If the organization did not check the box on line 13, and line 14 is 33\% % or more, check this box and stop here. The organization qualifies as a publicly supported organization	
b	33\% % support test—2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33\% % or more, check this box and stop here. The organization qualifies as a publicly supported organization	
7a	10%-facts-and-circumstances test—2008. 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—2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 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	
8	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 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.)

Sec	Section A. Public Support						
Ca	alendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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 6	The value of services or facilities furnished by a governmental unit to the organization without charge						
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 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(a) 0000	(f) Total
		(a) 2004	(b) 2003	(c) 2000	(u) 2001	(e) 2008	(i) Total
9 10a	Amounts from line 6						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
с 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 organization, check this box and stop	here			•		` ' ' ' _
Sec 15	tion C. Computation of Public Support percentage for 2008 (lin	•		e 13 column	(f))	15	%
16	Public support percentage for 2008 (In Public support percentage from 2007 stion D. Computation of Investmer	Schedule A, Pa	art IV-A, line 27			16	% %
17	Investment income percentage for 2008			hy line 13 o	olumn (f)\	17	%
1 <i>1</i> 18	Investment income percentage for 200					18	%
19a	331/3 % support tests—2008. If the organization is not more than 331/3 %, check this b	anization did n	ot check the b	ox on line 14, a	and line 15 is r		
b	331/3 % support tests – 2007. If the organ line 18 is not more than 331/3 %, check this	nization did not s box and stop	check a box or here. The orga	line 14 or line nization qualifie	19a, and line 1 s as a publicly	6 is more thar supported org	n 33⅓ %, and anization ► □
20	Private foundation. If the organization	did not check	a box on line 1	4, 19a, or 19b	, check this be	ox and see in:	structions 🕨 🗌

Part IV	Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)