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.

2013

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Open to Public Inspection

Employer identification number

Pa	rt Reason f	or Public Cha	rity Status (All orga	nization	s must c	omplete	this pa	rt.) See i	nstructio	ons.		
			ation because it is: (Fo				•	,				
1	-	-	hes, or association of		_		-		i)			
2			170(b)(1)(A)(ii). (Attac			Ja III 300	11011 170	(5)(1)(5)(·/·			
3			spital service organiza		-	coation :	170/b\/1\	/A\/;;;\				
			on operated in conjun						O/b\/4\/A\	/iii\ Ent	or the	
4	hospital's nam	ne, city, and stat	e:									
5		on operated for b)(1)(A)(iv). (Com	the benefit of a colle- plete Part II.)	ge or uni	versity o	wned or	operated	l by a go	vernmen	tal unit	descrit	oed in
6	A federal, stat	e, or local gover	nment or government	al unit de	scribed in	section	170(b)(1	1)(A)(v).				
7			receives a substantia		its suppo	ort from a	a governi	mental ur	nit or fror	n the ge	eneral	public
8	—		n section 170(b)(1)(A									
9	•	•	receives: (1) more that							•		_
			d to its exempt funct									
			ent income and unre						n 511 ta	x) from	busin	esses
		=	after June 30, 1975. Se									
10	An organization	on organized and	d operated exclusively	to test fo	or public s	safety. Se	e sectio	n 509(a)	(4).			
11			nd operated exclusive									
			olicly supported organ								See s e	ection
	509(a)(3). Che	ck the box that	describes the type of	supportir	ng organiz	zation an	d comple	ete lines 1	1e throu	gh 11h.		
	a 🗌 Type I	b 🗌 Type	II c Type II	I–Functio	nally inte	grated	d 🗌	Type III–ľ	Non-funct	tionally i	ntegra	ted
e	□ By checking t	his box, I certify	that the organization	is not co	ntrolled d	lirectly or	indirectl	ly by one	or more	disquali	fied pe	rsons
	other than fou	ındation manage	ers and other than one	e or more	e publicly	support	ed organ	izations o	described	l in sect	ion 50	9(a)(1)
	or section 509)(a)(2).										
f	If the organiz	ation received	a written determination	on from	the IRS t	that it is	a Type	I, Type	II, or Typ	oe III su	pporti	ng
	organization, o	check this box										
g	Since August	17, 2006, has t	he organization accep	pted any	gift or co	ontributio	n from a	any of the	9			
	following pers											
	(i) A person v	who directly or i	ndirectly controls, eitl	her alone	or toget	her with	persons	describe	d in (ii) a	nd	Yes	No
			ody of the supported								i)	
			on described in (i) abo									
		-	a person described in							11g(i		
h			ion about the support							1190	,	
	Name of supported	(ii) EIN	(iii) Type of organization	1	organization		ou notify	()	ls the	(vii) Amo	unt of m	onotoni
(1)	organization	(11) LIN	(described on lines 1–9		sted in your		nization in		tion in col.		support	onetai y
· ·			above or IRC section	governing document?		col. (i) of your support?		(i) organized in the U.S.?				
			(see instructions))	Yes	No	Yes	No	Yes	No			
(A)												
(B)												
(C)												
(D)												
(D) (E)												

	(Complete only if you checked the Part III. If the organization fails to				-	•	alify under
Secti	on A. Public Support			/ 1		,	
	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	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	() 0000	#1.0040		(1) 00 (0	() 0040	(A T
_	dar 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 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc. First five years. If the Form 990 is for the	•	•		or fifth tax w	12	n 501(c)(3)
	organization, check this box and stop her						
Secti	on C. Computation of Public Suppor	t Percentag	е				<u>_</u>
14	Public support percentage for 2013 (line 6			1, column (f))		14	%
15	Public support percentage from 2012 Schedule A, Part II, line 14						
16a	331/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
b							
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						Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizat Explain in Part IV how the organization m supported organization	ion meets the eets the "facts	facts-and-ci	rcumstances" tances" test. T	test, check th	nis box and st	op here.
18	Private foundation. If the organization did	d not check a	box on line 13	, 16a, 16b, 17a	a, or 17b, chec	k this box and	see

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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.)

<u> </u>	in the organization rails to quality	under the te	ists listed bei	ow, please co	Jilipiele Fait	11.)	
	on A. Public Support		T				
	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						
2	received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise						
2	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						
	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
	line 6.)						
	on B. Total Support			T	ı	ı	I
	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	· · · · · · · · · · · · · · · · · · ·						
	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						
	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						
46	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
	and 12.)		 	al Alada Const.	fifth		F04(-)(0)
14	First five years. If the Form 990 is for the	•					` ' ' '
Caati	organization, check this box and stop her						
	on C. Computation of Public Suppor			0 1 (6)		45	0/
15	Public support percentage for 2013 (line 8						%
16 Secti	Public support percentage from 2012 Schon D. Computation of Investment Inc			<u> </u>		16	%
<u> 17</u>	<u> </u>			v lino 12 police	mn (fl)	17	0/
	Investment income percentage for 2013 (I			-		17	<u>%</u>
18	Investment income percentage from 2012 331/3% support tests—2013. If the organi						
19a	17 is not more than 33 ¹ / ₃ %, check this box						
L			_	-		_	_
b	331/3% support tests—2012. If the organiz line 18 is not more than 331/3%, check this b						
20	Private foundation. If the organization di	_	_		· · · · · ·		_

Schedule A (I	Form 990 or 990-EZ) 2013	age 4
Part IV	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; a Part III, line 12. Also complete this part for any additional information. (See instructions).	and