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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.

Open to Public Inspection

OMB No. 1545-0047

09

Department of the Treasury Internal Revenue Service

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

Employer Identification number Mama of the organization 27 0341021 Fibrolamellar Cancer Foundation Inc. Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 🔲 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(lii). 4 🔲 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 An organization that normally receives: (1) more than 331/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/8 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 \(\sum \) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. d Type III-Other b 🔲 Type II c Type III-Functionally integrated a 🔲 Type i 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). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? No Yes (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 11g(i) and (III) below, the governing body of the supported organization? 11g(ii) (II) A family member of a person described in (i) above? 11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? .. Provide the following information about the supported organization(s) (i) Name of supported (ii) EIN (iii) Type of organization (Iv) is the organization (V) Did you notify (vil) Amount of organization in col organization (described on lines 1-9 in col () listed in your the organization in support governing document? (i) of your (i) organized in the above or IRC section (see instructions)) support? U.S.? Yas Yea

Total

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Sche	tule A (Form 990 of 990-EZ) 2009						Page &
Pai	Support Schedule for Org (Complete only if you chec					and 170(b)(1)(A)(vi)
Sec	tion A. Public Support						
Ca	lender year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	N/A	N/A	N/A	N/A	28292	28292
_	•						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf					-0-	-0-
3	The value of services or facilities furnished by a governmental unit to the organization without charge					-0-	-0-
4	Total. Add lines 1 through 3					28292	28292
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						566
R	shown on line 11, column (f)	Alaka da da kara da ka		an in a see entire e			27726
Sec	tion B. Total Support	tarahan amangan da	2008-11/2019-1-Parket - 1/2-miledia	Andread the second of the second of	the water was to the attended to the con-	Seminary in the contract of	
	lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	N/A	N/A	N/A	N/A	28292	28292
8	Gross income from interest, dividends,						
•	payments received on securities loans, rents, royalties and income from similar sources					-0-	-0-
9	Net income from unrelated business activities, whether or not the business is regularly carried on					-0-	-0-
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)					-0-	-0-
11	Total support. Add lines 7 through 10 .	Service Balancies			್ಷಾಗ್ ನಿರ್ವಹಿತ		28292
12	Gross receipts from related activities, etc.	. (see instructio	ns)			12	<u>-0-</u>
13	First five years. If the Form 990 is for organization, check this box and stop he	ere	 	d, third, fourth,	· -	ear as a sectio	n 501(c)(3)
Sec	tion C. Computation of Public Su	pport Percer	ntage				
14	Public support percentage for 2009 (line	6, column (f) dr	vided by line 11	l, column (f))		14	<u>%</u>
15	Public support percentage from 2008 Sc				!	15	<u>%</u>
	a 33%% support test—2009. 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						
þ	33½ % support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33½ % or more, check this box and stop here. The organization qualifies as a publicly supported organization						
17a	10%-facts-and-circumstances test -2009. 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 18	0%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or nore, 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						
							

Par	Support Schedule for Orga (Complete only if you checke	nizations De	escribed in S n line 9 of Pa	ection 509(a rt l.))(2)			
Sec	tion A. Public Support							
Cŧ	ilendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 20	09 M To	tal
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							<u></u>
6	Total. Add lines 1 through 5							
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .	, <u> </u>						
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		i					
c	Add lines 7a and 7b							
8	Public support (Subtract line 7c from line 6.)		kasa .			- L		
	ction B. Total Support	·				r		
C	stender year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 20	09 (1) To	tal
9 10a	Amounts from line 6							
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
11	Add lines 10a and 10b 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.)					l		
14	First five years. If the Form 990 is for organization, check this box and stop	here .	<u> </u>		n, or fifth tax y			(E)(3) . ▶ □
	tion C. Computation of Public Su							
15 16	Public support percentage for 2009 (lin Public support percentage from 2008 5	Schedule A, Pa	art III, line 15	e 13, column	(f)) . 	15 16		%_ %
Sec	ction D. Computation of Investmen	nt Income P	ercentage					
17 18	Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)). Investment income percentage from 2008 Schedule A, Part III, line 17					17 18		% %
	33½% support tests – 2009. If the organization did not check the box on line 14, and line 15 is more than 33½%, and line 17 is not more than 33½%, check this box and stop here. The organization qualifies as a publicly supported organization							
b	33% % support tests-2008. If the organ line 18 is not more than 33% %, check this	ization did not	check a box or	line 14 or line	19a, and line 1	6 is more	than 33/3 %,	and
20	Private foundation, If the organization						_	_

27-0341021

Schedule A (Fo	orn 980 or 990-EZ) 2009		1300 4
Part IV	Supplemental Information. Complete this part to provide the explanations required Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information.	by Part II, See instru	line 10; ctions.
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