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SCHEDULE A (Form 990 or 990-EZ) 2009 Public Charity Status and Public Support

OMB No. 1545-0047 4847(a)(1) instructions, charitable trust Attach to Form 990 or Form 990-EZ See separate instructions.

Organization's EIN 4847(a)(1) instructions, charitable trust Attach to Form 990 or Form 990-EZ See separate instructions.

Employer identification number 41-1945400

Part I Reason for Public Charity Status (All organizations must complete this part) See instructions

1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

2 A school established in section 170(b)(1)(A)(ii) (which includes E).

3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).

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).

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 governmental unit or from the general public described in section 170(b)(1)(A)(vi).

8 A community development project described in section 170(b)(1)(A)(vii).

9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from gross investment income and unrelated business taxable income (see section 513(b)(1)) or (2) more than 50% of its support from gross investment income and unrelated business taxable income (see section 513(b)(2)).

10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).

11 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).

Check the box that describes the type of supporting organization and complete lines 11c through 11h.

a Type I b Type II c Type III - Functionally Integrated d Type III - Other

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, 2005, has the organization received any gift or contribution from any of the following persons?

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) said (i) below, the governing body of the reported organization?

(ii) A family member of a person described in (i) above?

(iii) A 35% controlled entity of a person described in (i) or (ii) above?

Provide the following information about the supporting organization(s):

Table with columns: (i) EIN, (ii) Type of organization (as described on lines 1-10 where in IRC section (see instructions)), (iii) Is the organization exempt? (Yes/No), (iv) Is the organization a 501(c)(3) organization? (Yes/No), (v) Is the organization in the U.S.? (Yes/No), (vi) Annual support.

Part I Support Schedule for Organizations Described in Sections 170(b)(1)(A)(v) 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) 2009	(b) 2008	(c) 2007	(d) 2006	(e) 2005	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not deduct any "unusual grants.")	323204	339171	250837	310951	316105	1540268
2 Testimonials and other public support for the organization's benefit and other 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	323204	339171	250837	310951	316105	1540268
5 The portion of total costs borne 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 1.						
6 Public support. Subtract line 5 from line 4						1540268

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) 2005	(f) Total
7 Amounts from line 4	323204	339171	250837	310951	316105	1540268
8 Gross income from interest, dividends, payments received on securities, 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 (Exclude in Part IV)						
11 Total support. Add lines 7 through 10						1540268
12 Gross receipts from sales of assets, etc. (see instructions)						
13 First two 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 see here						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	100.00 %
15 Public support percentage for 2008 (line 6, column (d) divided by line 11, column (d))	15	100.00 %
16 Public support percentage for 2007 (line 6, column (c) divided by line 11, column (c))	16	100.00 %
17a 10% fact-and-circumstances test - 2009. If the organization did not check a box on line 13, 14a, or 14b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and see here	<input checked="" type="checkbox"/>	
17b 10% fact-and-circumstances test - 2008. If the organization did not check a box on line 13, 14a, or 14b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and see here	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 14a, 14b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>	