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SCHEDULE A

Bublic Charley Status and Public Support

OMB No. 1545-0047

ZUTU

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

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Name of the organization						Employer identification number					
Pars			Endowment Ass								38377
	Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.										
The 6	organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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 organ	ization operated for the benefit of a college or university owned or operated by a governmental unit described in 170(b)(1)(A)(iv). (Complete Part II.)									
8 7	An organ	al, state, or local government or governmental unit described in section 170(b)(1)(A)(v). Inization that normally receives a substantial part of its support from a governmental unit or from the general public ed in section 170(b)(1)(A)(vi). (Complete Part II.)									
8	A commu	ınity	trust described	in section 170(b)(1)(A	1)(vi). (Co	mpleta P	art 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 331/3% 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 organi	zatı	on organized and	d operated exclusively	to test f	or public	safety. So	ee sectio	n 509(a)	(4).	
	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. a										
f	If the org	ection 509(a)(2). e organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting nization, check this box									
9	Since August 17, 2006, has the organization accepted 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) and (iii) below, the governing body of the supported 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?										
<u>h</u>	Provide tr	e fo	llowing informat	ion about the support	ed organ	ızation(s).					
(1)	Name of supporte organization	ed 	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	in col. (i) if	organization stad in your document?	the organ col (I) supp	ou notify nization in of your out?	organizat (I) organi U.	e the tion in col, zed in the S ?	(vii) Amount of support
/A)		-	 		Yes	No	Yes	No	Yes	No	
(A)		_	 		 _						
(B)		_									,
(C)											
(D)											
(E)											
Total					The state of the s		Pet librida (je Pet librida (je Peter izbida (je				

Schad	ula A (Form 990 or 990-EZ) 2010	4	8-0938	377			Page 2		
Part		ations Desci	ibed in Sect	ions 170(b)(1)(A)(iv) and	70(b)(1)(A)(v			
منحي	(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under								
	Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)								
	ion A. Public Support	1 1 1 1 1 1 1 1	<u> </u>	(-) 0000	(4) 0000	(-) 0010	(O Total		
	idar year (or fiscal year beginning In)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total		
1	Gifts, grants, contributions, and		1	,					
	membership fees received (Do not include any "unusual grants.")					1			
2	Tax revenues levied for the		 			-			
2	organization's benefit and either paid		ĺ		1	1			
	to or expended on its behalf	{	}		}	l			
3	The value of services or facilities								
	furnished by a governmental unit to the		}]			
	organization without charge								
4	Total. Add lines 1 through 3	4 100 4 2 2 2 2 2 2	(at thing to them are	Carrier Charles Notes	1 1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
5	The portion of total contributions by	The state of the s	The state of the s						
	each person (other than a								
	governmental unit or publicly supported organization) included on	Managaran da sa							
	fine 1 that exceeds 2% of the amount	THE BEAR IS COMPANY	300 400 300 300 300 300 300 300 300 300						
	shown on line 11, column (f)					ke Tivitë (Takurë Ami) Shinisti (Takurë Ami)			
6	Public support. Subtract line 5 from line 4.	States of the condition	The sale part of the base	Como in the Secretarions	antile corposal supplied	Bernary and Bernary			
	ол В. Total Support								
	dar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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				l į				
9	Net income from unrelated business								
_	activities, whether or not the business			1	i				
	la regularly carried on								
10	Other income. Do not include gain or								
	loss from the sale of capital assets	1							
4.4	(Explain in Part IV.)	Stalente maringen i il	Janes Victoria (C. 1)	the word Colf Day - 100000	muntan es remarable	money accounts when			
11 12	Total support. Add lines 7 through 10 Gross receipts from related activities, etc.	(EGO JOSTELLA)		n'io y incidentale ao benefit	1798522 1888 biologic				
13	First five years. If the Form 990 is for the			 I third fourth	or fifth tax ve	ar as a section	501(0)(3)		
	organization, check this box and stop he								
Secti	on C. Computation of Public Suppo	rt Percentage							
14	Public support percentage for 2010 (line	6, column (f) di	vided by line 1	1. column (f))		14	%		
15	Public support percentage from 2009 Schedule A. Part II, line 14								
16a	131/3% support test – 2010. 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								
h	· · · · · · · · · · · · · · · · · · ·	•	•	_			▶ []		
U	331x8 support test—2009. If the organization did not check a box on line 13 or 16a, and line 15 is 331x8 or more, check this box and stop here. The organization qualifies as a publicly supported organization								
17a	10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is								
110	10% or more, and if the organization me								
	Part IV how the organization meets the "I	acts-and-circu	mstances" test	The organiza	tion qualifies a	s a publicly su	ported		
	organization								
b	The first transfer and the state of the stat								
	15 is 10% or more, and if the organization	tion meets the	"facts-and-cire	cumstances" 1	test, check the	s box and stop	p here.		
	Explain in Part IV how the organization m								
10	supported organization								
18	Private foundation, if the organization di instructions						→ 「□		
	Instructions					dule A (Form 990 o	or 990-EZ) 2010		
	1								

Part	III Support Schedule for Organiz	ations Desc	ribed in Sec	tion 509(a)(2)		4	1- D11
	(Complete only if you checked t	he box on lin	e 9 of Part I o	or if the organ	ization falled	to quality und	ier Part II.
	If the organization falls to qualif	under the te	ests listed be	low, please c	omplete Part	11.)	
	ion A. Public Support	T (2) 0000	0.0007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	idar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(E) 2008	(0) 2009	(a) 2010	(I) TOTAL
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")		1		1		
2	Gross receipts from admissions, merchandise	-	 	 		 	
_	sold or services performed, or facilities			1		}	
	furnished in any activity that is related to the organization's tax-exempt purpose	}	1	1	1	1 1	
3	Gross receipts from activities that are not an		 		-	 - 	
•	unrelated trade or business under section 513		}	1		}	
4	Tax revenues levied for the		 		 	 	
•	organization's benefit and either paid						
	to or expended on its behalf	}		1	1	1	
5	The value of services or facilities						
	furnished by a governmental unit to the	1		1	J	}	
	organization without charge		L	1	<u> </u>	l l	
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				•	<u> </u>	
	received from other than disqualified	l		1	j		
	persons that exceed the greater of \$5,000	{				ļ	
	or 1% of the amount on line 13 for the year	<u> </u>					
C	Add lines 7a and 7b	. 7 H 12 / 100 x 21 / 1	Proceedings of the Processing	131 (170 (17)	HE ALL OF IS WHATE, MOVE	na zamazada zama	
8	Public support (Subtract line 7c from line 6.)	President of the state of		The state of the s			
Sect	on B. Total Support	Burn De Barre	THE STATE OF THE STATE OF	Just the Belling She William	Local Island Topics (1979).	Berger William Property	
	dar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6		1	(, 3)		(4)	(1) / 5 (5)
10a	Gross income from Interest, dividends,		 				
	payments received on securities loans, rents,)	1	1			
	royalties and income from similar sources .	}		1			
ь	Unrelated business taxable income (less						
	section 511 taxes) from businesses			i i			
	acquired after June 30, 1975			l :			
C	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether	•				1	
	or not the business is regularly carried on						
12	Other income, Do not include gain or			1		1	
	loss from the sale of capital assets (Explain in Part IV.)			}	}	}	
13	Total support. (Add lines 9, 10c, 11,						
10	and 12.)			}			
14	First five years. If the Form 990 is for the	e organizatlor	's first second	d third fourth	or fifth tay ve	ar as a cection	501(0)(3)
	organization, check this box and stop he				. Or mar tax ye	al as a section	301(c)(3) ► □
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2010 (line E			3. column (f))		15	%
16_	Public support percentage from 2009 Sch					16	%
Secti	on D. Computation of Investment Inc						
17	investment income percentage for 2010 (I				າກ (f)	17	%
18	Investment income percentage from 2009 Schedule A, Part III, line 17						
19a	331/3% support tests-2010. If the organi						and line
	17 is not more than 331/2%, check this box					-	—
þ	331/2% support tests - 2009. If the organiz						
	line 18 is not more than 331/2%, check this b		_				
20	Private foundation. If the organization did	not check a	box on line 14,	19a, or 19b, c			
]				Sch	edule A (Form 990	or 990-EZ) 2010