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#### SCHEDULE A (Form 990 or 990-EZ)

## **Public Charity Status and Public Support**

2011

Department of the Treasury Internal Revenue Service

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

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

Open to Publi Inspection

Name of the organization

Caron Por Cangor Ind

Employer identification number

			or Cancer, in						<u> </u>	-2025	769	
Part I	Reason	for Public Cha	rity Status (All organi	zations mu	st complet	te this par	t)See ins	tructions				
The organ	nization is not a	a private foundation	because it is. (For lines	1 through	11, check	only one t	xox)					
1 🖳	A church, co	กvention of churche	es, or association of chur	ches desc	inbed in se	ction 170	<b>Xb)(1)(A)(</b> i)	}.				
2 🖳	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)											
з 🛄	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,							e.				
	city, and stat											
5 🔲	An organizat	on operated for the	benefit of a college or u	niversity o	wned or or	perated by	a govern	mental un	t describe	d in		
		(b)(1)(A)(iv). (Compi										
6 🗀	A federal, sta	ite, or local governm	nent or governmental uni	t describe	d in sectio	n 170(b)(	1NAHv).					
7 X			ceives a substantial part					or from the	general p	ublic desc	nbed n	7
	-	b)(1)(A)(vi). (Comple	•	, ,		•						
в 🗀			section 170(b)(1)(A)(vi).	(Complete	Part II )							
9 🗔			ceives (1) more than 33			rom contri	ibutions, n	nembershi	o fees, an	d aross rec	eipts f	rom
	-	•	nctions - subject to certa		• •		•		•	_	•	
			axable income (less sec		•	•				-		
		509(a)(2). (Complet			- <b>,</b>			,			•	
10			perated exclusively to te	st for publ	lic safety 5	See sectio	on 509la¥4	4).				
11	_	-	perated exclusively for the	-	-			=	v out the d	ourooses o	f one o	or
	_	-	ations described in secti		-							
			organization and compl				<b>-,</b>					
	a Type	<del>ه</del> م ۲۰			e III - Func		tegrated		аШ	Type III · C	Other	
e 🗀	• • •		at the organization is not			•	-	r more dis	qualified p	ersons oth	er tha	n
•		•	than one or more publich		-	-	-					
f		-	tten determination from									
·	=	rganization, check t					,,	-				
9		-	organization accepted a	nvoriftorc	ontribution	from anv	of the foll	owing per	sons?		•	
	•		directly controls, either a			-					Yes	No
			upported organization?		,			,,		11g(i)		
	_	-	n described in (i) above?	,	• •	• •		•	•	11g(ii)		
		•	person described in (i)	-	e?		• •			11g(iii)		
h			about the supported or						• •			
••	Trovide die i	onowing information	t and did dapper too of	921124101	.(0)							
(1) Nome		(EXCIA)	(iii) Type of	Tiv) is the	organization	(v) Did vo	u notify the	(vi) ls	the	(vii) An	ount of	,
	e of supported anization	(ii) EIN	organization (described on lines 1-9 above or (RC section (see instructions))	From (1) the second increasing the second of 10003		lorganizáti	ization in col ( ( ( ( ) / ( in colin )			,		
org	анианоп							(i) organized in the U.S.?		зиррогі		
				Yes	No	Yes	No	Yes	No			
		<u> </u>	<del> -`</del>				<del> </del>	-	1			
					į		l	1	1 1			
<del></del>		<del>                                     </del>		<del> </del>	<del>                                     </del>	<del></del>	<del>†                                    </del>	-				
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Total				ļ								

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

# Schedule A (Form 990 or 990-EZ) 2011 Cares For Cancer, Inc. 27-20257 | Part II | 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 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.)

Se	ction A. Public Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total		
1	Gifts, grants, contributions, and					T			
	membership fees received (Do not					İ			
	include any "unusual grants ")		<u> </u>			38,473.	38,473.		
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf		l 			<u> </u>			
3	The value of services or facilities								
	furnished by a governmental unit to				i				
	the organization without charge			<u>{</u>					
4	Total. Add lines 1 through 3					38,473.	38,473.		
5	The portion of total contributions	}			İ				
	by each person (other than a			ļ	ł				
	governmental unit or publicly		<u> </u>	ļ	ł				
	supported organization) included			1	Ì	1			
	on line 1 that exceeds 2% of the			1	1				
	amount shown on line 11,			1					
	column (f)		i						
6	Public support, Subtract line 5 from line 4.						38,473.		
Sec	ction B. Total Support								
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total 38,473.		
7	Amounts from line 4					38,473.	38,473.		
8	Gross income from interest,		}	ł	ļ				
	dividends, payments received on				1				
	securities loans, rents, royalties	1		ļ		!			
	and income from similar sources								
9	Net income from unrelated business								
	activities, whether or not the					j			
	business is regularly carried on			l					
10	Other income. Do not include gain				į.				
	or loss from the sale of capital				ķ				
	assets (Explain in Part IV)					r			
11	Total support. Add lines 7 through 10			<u> </u>			38,473.		
12	Gross receipts from related activities	, etc (see instructi	ons)			12	1,960.		
13	First five years. If the Form 990 is fo	r the organization's	s first, second, thi	rd, fourth, or fifth t	tax year as a sectio	n 501(c)(3)			
Sec	organization, check this box and stoction C. Computation of Pub	o here lic Support Pe	rcentage		<del></del>	<del> </del>	<b>▶</b> X		
14	Public support percentage for 2011 (	line 6, column (f) d	livided by fine 11,	column (f))		14	%		
15	Public support percentage from 2010	Schedule A, Part	II, line 14			15	%		
16a	33 1/3% support test - 2011. If the	organization did no	ot check the box o	on line 13, and line	14 is 33 1/3% or r	nore, check this box	k and		
	stop here. The organization qualifies	as a publicly supp	orted organizatio	n	-		. ▶□		
b	33 1/3% support test - 2010. If the	organization did no	ot check a box on	line 13 or 16a, and	d line 15 is 33 1/39	6 or more, check thi	s box		
	and stop here. The organization qual	lifies as a publicly:	supported organiz	tation .			▶□		
17a	10% -facts-and-circumstances tes	t - 2011. If the org	anization did not	check a box on lin	e 13, 16a, or 16b,	and line 14 is 10% o	or more,		
	and if the organization meets the *fac	cts-and-circumstan	ices" test, check t	this box and stop	here. Explain in Pa	rt IV how the organi	zation		
	meets the "facts-and-circumstances"	test. The organiza	ation qualifies as a	publicly supporte	d organization		▶□		
b	10% -facts-and-circumstances test - 2010. 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-cin	cumstances" test.	The organization	qualifies as a publ	licly supported orga	anızatıon	▶□		
18	Private foundation. If the organization	n did not check a	box on line 13, 16	Sa, 16b, 17a, or 17	b, check this box a	and see instructions			
					Sche	edule A (Form 990	or 990-EZ) 2011		

# Schedule A (Form 990 or 990-EZ) 2011 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. If the organization fails to

Se	ction A. Public Support	ciow, piease com	piete Part II)	<del></del>			
$\overline{}$	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Gifts, grants, contributions, and		(-/	10,2000	(0/2010	(6) 2011	(i) rotai
	membership fees received. (Do not	i	1	ł			
	include any "unusual grants ")	ı		l		ļ	
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose		<del> </del>		ļ		
3	Gross receipts from activities that are not an unrelated trade or business under section 513	1				į į	
4	Tax revenues levied for the organ-		<b></b>				
	ization's benefit and either paid to or expended on its behalf		1			l 	
5	The value of services or facilities		<del> </del>	·	<del> </del>	<del></del>	<del></del>
•				}		}	
	furnished by a governmental unit to the organization without charge			•		Ì	ł
c	* '			<del></del>	<del>                                     </del>	<del></del>	<del></del>
	Total. Add lines 1 through 5			<del></del>	<del> </del>	<del></del>	
72	Amounts included on lines 1, 2, and 3 received from disqualified persons		t	1	Į.	l	[
	Amounts included on lines 2 and 3 received		<b></b>		<del> </del>	<del></del>	
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year		<b>[</b>				}
	Add lines 7a and 7b		<del></del>				
	Public support (Subtractime 7s from fre 6)						
	ction B. Total Support		<u></u>				
Cale	indar year (or fiscal year beginning in)	(a) 2007	(ъ) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 6		1				
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
t	Unrelated business taxable income			I			
	(less section 511 taxes) from businesses		1				
	acquired after June 30, 1975		]	<u> </u>			
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on						
12	Other income Do not include gain or loss from the sale of capital						
13	assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12.)		<del>                                     </del>	<del>                                     </del>			
	First five years. If the Form 990 is for	the omanization	e first second the	rd fourth or fifth t	ay year as a section	n 501(c)(3) oman:	zation
.~	check this box and stop here .	an organization	o mor, occorre, um	a, router, or intil t	س بند بن ما من الله الله الله الله الله الله الله الل	Jorgani	<b>▶</b>
Se	ction C. Computation of Publi	c Support Pe	ercentage			· ·· · · · · · · · · · · · · · · · · ·	
	Public support percentage for 2011 (I			column (fl)		15	%
	Public support percentage from 2010	• • •	•	soldinin (i),	••	16	%
	ction D. Computation of Inves				· · · · · · · · · · · · · · · · · · ·	**************************************	
	Investment income percentage for 20					17	%
	Investment income percentage for 20	•	•	10, 00iditii1 (i))	•	18	
	33 1/3% support tests - 2011. If the				e 15 is more than '		
,50	more than 33 1/3%, check this box ar	•		•			<b>▶</b> □
ь	33 1/3% support tests - 2010. If the						and
_	line 18 is not more than 33 1/3%, che	•					. —
20	Private foundation. If the organization						
20	Fireate foundation, if the organization	T GIG TIOL CITCON A	DOX OIT IIIE 14, 18	a, or 190, check t	ING DOX BITU SEG IT		

#### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2011 Open to Public Inspection

Name of the organization

Cares For Cancer, Inc.

Employer identification number 27-2025769

27 2709
Form 990, Part I, Line 1, Description of Organization Mission:
needs to area individuals under financial hardship, and to fight
cancer.
Form 990, Part VI, Section A, line 8b: There are no committees that can
act on behalf of the governing board.
Form 990, Part VI, Section B, line 11: The governing board was provided a
copy of the Form 990 before filing with the IRS.
Form 990, Part VI, Section B, Line 12c: Annually, board members are
required to review the conflict of interest policy. If the governing board
reviews and determines a conflict exists, the individual with the conflict
must abstain from voting on the issue.
Form 990, Part VI, Section B, Line 15: The organization does not
compensate the officers of the organization.
Form 990, Part VI, Section C, Line 19: The organization makes its
governing documents, conflict of interest policy, and financial statements
available to the public upon request.