Form 990 EZ Department of the Treasury Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$200,000 and total assets less than \$200,000 and the part of the year may use this form

The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-1150

Open to Public Inspection

Α	\ F	or t	he 2011 calendar year, or tax year beginning and	l ending					
В	C	heck oplica	C Name of organization		D Employe	r identification number			
		٦ .	tress change		İ				
] _{Nan}	ne change SURGEONS OF HOPE (CdE) FOUNDATION, INC		13-	4166264			
Ì] Initu	Number and street (or P.O. box, if mail is not delivered to street address)	Room/surte	E Telephone number				
Ì		ה <u>י</u>	ninated c/o Guibert & Co, 149 East 36th Street	l	212	474 5995			
Ì		Ame	ended return City or town, state or country, and ZIP + 4		F Group E	xemption			
Ì	\equiv	ī	reation pending New York, NY 10016		Number	•			
G	i A		inting Method:			the organization is not			
1			ite: > www.surgeonsofhope.org			to attach Schedule B			
j			xempt status (check only one) — X 501(c)(3) 501(c) () ◀(insert no.) 4947(a	(1) or 527	1	90, 990-EZ, or 990-PF).			
K			if the organization is not a section 509(a)(3) supporting organization or a section 527 organization						
•••	-		00. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be requi	-					
			rn, be sure to file a complete return.			•			
1			nes 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if	total assets (Part	:11.				
_			5, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ		_	<u> </u>			
П	_	rt I		es (see the instri					
_			Check if the organization used Schedule O to respond to any question in this Part I	•		X			
_		1	Contributions, gifts, grants, and similar amounts received		1	195940.			
		2	Program service revenue including government fees and contracts		2				
	- 1	3	Membership dues and assessments	3					
	ı	4	Investment income	4					
	1	5a	Gross amount from sale of assets other than inventory		ļ				
	- 1	Ь	Less: cost or other basis and sales expenses 5b						
	ļ	C	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c				
		6	Gaming and fundraising events						
	. 1	a	Gross income from gaming (attach Schedule G if greater than		ſ				
Ž			\$15,000) 6a		1				
Revenue	1	ь	Gross income from fundraising events (not including \$ of contribu	tions	— 1				
<u> </u>	•		from fundraising events reported on line 1) (attach Schedule G if the sum of such						
			gross income and contributions exceeds \$15,000)						
	ļ	C	Less: direct expenses from gaming and fundraising events 6c						
		đ	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	64				
	- 1	7 a	Gross sales of inventory, less returns and allowances 7a			1			
	ļ	b	Less; cost of goods sold 7b						
	- 1	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c				
	ł	8	Other revenue (describe in Schedule 0) Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	edule 0	8	55.			
		9_	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		9	195995.			
	T	10	Grants and similar amounts paid (list in Schedule 0).	edule Q	10	29649.			
		11	Benefits paid to or for members 8 MAY 1. 7 2012 6		11				
<u>≃</u> ≈	·	12	Salaries, other compensation, and employee benefits		12	59270.			
	1	13	Professional fees and other payments to independent contractors		13	22706.			
_့ နို	.	14	Occupancy, rent, utilities, and maintenance	edule Q	14	4535.			
Expenses	1	15	Printing, publications, postage, and shipping		15	2881.			
~	- -	16	Other expenses (describe in Schedule 0) See Sche	edule Q	16	80404.			
<u>=</u> _		<u> 17</u>	Total expenses. Add lines 10 through 16		17	199445.			
, ` ø	ŀ	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		18	-3450.			
Set	ŀ	19	Net assets or fund balances at beginning of year (from line 27, column (A))			1			
\$			(must agree with end-of-year figure reported on prior year's return)		19	101621.			
Net Assets	2	20	Other changes in net assets or fund balances (explain in Schedule 0)		20	0.			
		21	Net assets or fund balances at end of year. Combine lines 18 through 20	<u> </u>	▶ 21	98171.			
′ ሁ	łΑ	For	Paperwork Reduction Act Notice, see the separate instructions.			Form 990-EZ (2011)			

	m 990-EZ (2011) SURGEONS OF HOPE (CdE) FO		INC	•	<u> 13-</u>	41662	64 Page 2
P	Balance Sheets. (see the instructions for Part II.)		4:	. :- Abio Dont II			[₩]
_	Check if the organization used Schedule O to res	spond to any qu				(D) F	x x
			(A) Beginning of year	+	(B) E	nd of year
22				74391	\rightarrow		<u>95903.</u>
23	· · · · · · · · · · · · · · · · · · ·			21000	23		10450
24	, , , , , , , , , , , , , , , , , , , ,)		31002			12450.
25				105393			108353.
26)		3772			10182.
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)		<u> </u>	101621			98171.
P	art III Statement of Program Service Accomplishme					_	penses for section
	Check if the organization used Schedule O to res		estior	n in this Part III	لكيا		and 501(c)(4)
Wh	at is the organization's primary exempt purpose? See Schedule C)					ons and section
	cribe the organization's program service accomplishments for each of its three largest program			In a clear and concise		4947(a)(1 for others.) trusts; optional)
	ner, describe the services provided, the number of persons benefited, and other relevant inform	nation for each program title	e 			10. 0	
28	See Schedule O			_			
		 				1	
	10.5040		.		_		453050
	(Grants \$ 195940.) If this amount includes foreign g	grants, check here			<u> </u>	28a	<u> 153960.</u>
29							
						1	
					_		
	(Grants \$) If this amount includes foreign (grants, check here			ليسا	29a	
30							
		·					
	(O				-	00-	
• •	(Grants \$) If this amount includes foreign (grants, check here			لــــا	30a	
31	Other program services (describe in Schedule O)			_			
~~	(Grants \$) If this amount includes foreign (rants, check here			<u> </u>	31a	153060
32	Total program service expenses (add lines 28a through 31a)					32	<u> 153960.</u>
I D	art IV List of Officers Directors Trustees and Key F	mnlovees					D - 4 0 4 5
P	art IV List of Officers, Directors, Trustees, and Key E					instructions fo	
<u>P</u>	art IV List of Officers, Directors, Trustees, and Key E Check if the organization used Schedule O to res	spond to any qu	estion	n in this Part IV			X
<u>P</u>	art IV List of Officers, Directors, Trustees, and Key E Check if the organization used Schedule O to res	pond to any qu (b) Title and average	estior hours	(c) Reportable compensation (Forms	(d) He	alth benefits,	(e) Estimated
<u>P</u>	art IV List of Officers, Directors, Trustees, and Key E	spond to any qu	estior hours	(c) Reportable	(d) He contremple plans,	alth benefits, ibutions to byee benefit and deferred	X
	art IV List of Officers, Directors, Trustees, and Key E Check if the organization used Schedule O to res (a) Name and address	(b) Title and average per week devoted position	estior hours I to	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) He contremple plans,	alth benefits, butions to eyee benefit	(e) Estimated amount of other
Ph	art IV List of Officers, Directors, Trustees, and Key E Check if the organization used Schedule O to res (a) Name and address nilippe Lerch	(b) Title and average per week devoted position Executive	estior hours I to	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) He contremple plans,	aith benefits, ibutions to lyee benefit and deferred pensation	(e) Estimated amount of other compensation
Ph 82	Check if the organization used Schedule O to res (a) Name and address nilippe Lerch 25 Eight Avenue, New York, NY	spond to any qu (b) Title and average per week devoted position Executive 40.00	estion hours to Dir	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) He contremple plans,	alth benefits, ibutions to byee benefit and deferred	(e) Estimated amount of other
Ph 82 De	Check if the organization used Schedule O to res (a) Name and address nilippe Lerch 25 Eight Avenue, New York, NY elos Cosgrove, MD	(b) Title and average per week devoted position Executive 40.00 Board Memb	estion hours to Dir	n in this Part IV (c) Reportable compensation (Forms W-2/1089-MISC) (if not paid, enter -0-) ector 33521.	(d) He contremple plans,	alth benefits, ibutions to butions to your benefit and deferred pensation	(e) Estimated amount of other compensation
Ph 82 De Th	Check if the organization used Schedule O to res (a) Name and address nilippe Lerch 25 Eight Avenue, New York, NY elos Cosgrove, MD ne Cleveland Clinic, Cleveland, OH	spond to any qu (b) Title and average per week devoted position Executive 40.00 Board Memb 0.00	estion hours to Dir	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) He contremple plans,	aith benefits, ibutions to lyee benefit and deferred pensation	(e) Estimated amount of other compensation
Ph 82 De Th Re	Check if the organization used Schedule O to res (a) Name and address nilippe Lerch 25 Eight Avenue, New York, NY elos Cosgrove, MD ne Cleveland Clinic, Cleveland, OH ev. Douglas Grandgeorge, Central	(b) Title and average per week devoted position Executive 40.00 Board Memb 0.00 Secretary	estion hours to Dir	n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-) ector 33521.	(d) He contremple plans,	alth benefits, ibutions to	(e) Estimated amount of other compensation 0.
Ph 82 De Th Re	Check if the organization used Schedule O to res (a) Name and address (a) Name and address nilippe Lerch 25 Eight Avenue, New York, NY elos Cosgrove, MD ne Cleveland Clinic, Cleveland, OH ev. Douglas Grandgeorge, Central resbyterian Church, New York, NY	spond to any qu (b) Title and average per week devoted position Executive 40.00 Board Memb 0.00 Secretary 0.00	estion hours to Dir	n in this Part IV (c) Reportable compensation (Forms W-2/1089-MISC) (if not paid, enter -0-) ector 33521.	(d) He contremple plans,	alth benefits, ibutions to butions to your benefit and deferred pensation	(e) Estimated amount of other compensation
Ph 82 De Th Re Pr	Check if the organization used Schedule O to resched the organization used Schedule O to resched the control of	spond to any qu (b) Title and average per week devoted position Executive 40.00 Board Memb 0.00 Secretary 0.00 Treasurer	estion hours to Dir	n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-) ector 33521. 0.	(d) He contremple plans,	alth benefits, buttons to to to the series of the series o	(e) Estimated amount of other compensation 0.
Ph 82 De Th Re Pr Mi	Check if the organization used Schedule O to resched the organization used Schedule O to resched the company of	spond to any qu (b) Title and average per week devoted position Executive 40.00 Board Memb 0.00 Secretary 0.00 Treasurer 0.00	estion hours ito Dir	n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-) ector 33521.	(d) He contremple plans,	alth benefits, ibutions to	(e) Estimated amount of other compensation 0.
Ph 82 De Th Re Pr Mi 3	Check if the organization used Schedule O to resched the organization used Schedule O to resched the company of	spond to any qu (b) Title and average per week devoted position Executive 40.00 Board Memb 0.00 Secretary 0.00 Treasurer 0.00 Board Memb	estion hours ito Dir	n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-) ector 33521. 0.	(d) He contremple plans,	alth benefits, toutions to tour benefit and deferred pensation 0. 0.	(e) Estimated amount of other compensation 0. 0.
Ph 82 De Th Re Pr Mi	Check if the organization used Schedule O to res (a) Name and address (a) Name and address nilippe Lerch 25 Eight Avenue, New York, NY elos Cosgrove, MD ne Cleveland Clinic, Cleveland, OH ev. Douglas Grandgeorge, Central resbyterian Church, New York, NY chel Longchampt Main Street, Nayack, NY ndith O'Neill okhota LLC, New York, NY	spond to any qu (b) Title and average per week devoted position Executive 40.00 Board Memb 0.00 Secretary 0.00 Treasurer 0.00 Board Memb 0.00	estion hours ito Dir	n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-) ector 33521. 0.	(d) He contremple plans,	alth benefits, buttons to to to the series of the series o	(e) Estimated amount of other compensation 0.
Ph 82 De Th Re Pr Mi 3 Ju	Check if the organization used Schedule O to res (a) Name and address (a) Name and address nilippe Lerch 25 Eight Avenue, New York, NY elos Cosgrove, MD ne Cleveland Clinic, Cleveland, OH ev. Douglas Grandgeorge, Central resbyterian Church, New York, NY ichel Longchampt Main Street, Nayack, NY ndith O'Neill okhota LLC, New York, NY duardo Da Cruz, MD	bond to any qu (b) Title and average per week devoted position Executive 40.00 Board Memb 0.00 Secretary 0.00 Treasurer 0.00 Board Memb 0.00 President	estion hours ito Dir	n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-) ector 33521. 0. 0.	(d) He contremple plans,	alth benefits, ibutions to to to the series of the series	(e) Estimated amount of other compensation 0. 0. 0.
Ph 82 De Th Re Pr Mi 3 Ju No Ch	Check if the organization used Schedule O to res (a) Name and address (a) Name and address nilippe Lerch 25 Eight Avenue, New York, NY elos Cosgrove, MD ne Cleveland Clinic, Cleveland, OH ev. Douglas Grandgeorge, Central resbyterian Church, New York, NY ichel Longchampt Main Street, Nayack, NY ndith O'Neill okhota LLC, New York, NY duardo Da Cruz, MD nildrens Hospital, Denver, CO	spond to any qu (b) Title and average per week devoted position Executive 40.00 Board Memb 0.00 Secretary 0.00 Treasurer 0.00 Board Memb 0.00 President 0.00	Dir	n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-) ector 33521. 0.	(d) He contremple plans,	alth benefits, toutions to tour benefit and deferred pensation 0. 0.	(e) Estimated amount of other compensation 0. 0.
PI 82 De TI Re Pr Mi 3 Ju Ec	Check if the organization used Schedule O to resched le O to reschedule O to resched the organization used Schedule O to resched the organization used Schedule O to resched the organization used Schedule O to reschedule O to reschedule O to resched the organization used Schedule O to reschedule O to reschedule O to resched the organization used Schedule O to reschedule O to reschedul	spond to any qu (b) Title and average per week devoted position Executive 40.00 Board Memb 0.00 Secretary 0.00 Treasurer 0.00 Board Memb 0.00 President 0.00 Board Memb 0.00	Dir	n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-) ector 33521. 0. 0.	(d) He contremple plans,	alth benefits, buttons to to to the control of the	(e) Estimated amount of other compensation 0. 0. 0.
Ph 82 De Th Re Pr Mi 3 Ju No Ch Mi	Check if the organization used Schedule O to resched le O to resched the organization used Schedule O to reschedule O to reschedule O to resched the organization used Schedule O to reschedule O to reschedul	spond to any qu (b) Title and average per week devoted position Executive 40.00 Board Memb 0.00 Secretary 0.00 Treasurer 0.00 Board Memb 0.00 President 0.00 Board Memb 0.00 Board Memb 0.00 Board Memb 0.00	Dir Der	n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-) ector 33521. 0. 0.	(d) He contremple plans,	alth benefits, ibutions to to to the series of the series	(e) Estimated amount of other compensation 0. 0. 0.
Ph 82 De Th Re Pr Mi 3 Ju No Ch Mi Ne Ar	Check if the organization used Schedule O to resched le O to resched the organization used Schedule O to reschedule O to resch	spond to any qu (b) Title and average per week devoted position Executive 40.00 Board Memb 0.00 Secretary 0.00 Treasurer 0.00 Board Memb 0.00 President 0.00 Board Memb 0.00	Dir Der	n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-) ector 33521. 0. 0. 0.	(d) He contremple plans,	alth benefits, buttons to type benefit and deferred pensation O. O. O.	(e) Estimated amount of other compensation 0. 0. 0. 0.
PI 82 De TI Re Pr Mi 3 UNC Chi Ne Ar	Check if the organization used Schedule O to resched the organization used Schedule O to resched the check if the organization used Schedule O to resched the check if the organization used Schedule O to resched the check if the organization used Schedule O to resched the check if the organization used Schedule O to resched the check if the organization of the check if the organization of the check if the organization used Schedule O to resched the check if the organization of the organization used Schedule O to resched the organization of t	spond to any qu (b) Title and average per week devoted position Executive 40.00 Board Memb 0.00 Secretary 0.00 Treasurer 0.00 Board Memb 0.00 President 0.00 Board Memb 0.00	Dir Der	n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-) ector 33521. 0. 0.	(d) He contremple plans,	alth benefits, buttons to to to the control of the	(e) Estimated amount of other compensation 0. 0. 0.
PI 82 De TI Ree Pri Mi 3 June Chi Nee Ar CBe	Check if the organization used Schedule O to resched the organization, New York, NY to the organization of the organizatio	spond to any qu (b) Title and average per week devoted position Executive 40.00 Board Memb 0.00 Secretary 0.00 Treasurer 0.00 Board Memb 0.00 President 0.00 Board Memb	Dir Der	n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-) ector 33521. 0. 0. 0.	(d) He contremple plans,	alth benefits, ibutions to topyee benefit and deferred pensation O. O. O. O.	(e) Estimated amount of other compensation O. O. O. O. O.
Ph 82 Det Pr Mi 3 June Ch Mi Ar Co Be	Check if the organization used Schedule O to resched the organization of the organization of the organization of the organization of the organization used Schedule O to resched the organization of t	spond to any qu (b) Title and average per week devoted position Executive 40.00 Board Memb 0.00 Treasurer 0.00 Board Memb 0.00 President 0.00 Board Memb 0.00	Dir Der Der	n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-) ector 33521. 0. 0. 0.	(d) He contremple plans,	alth benefits, buttons to type benefit and deferred pensation O. O. O.	(e) Estimated amount of other compensation 0. 0. 0. 0.
PI 82 DTI RE PI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO CI NO NO NO NO NO NO NO NO NO NO NO NO NO	Check if the organization used Schedule O to resched the organization of the o	spond to any qu (b) Title and average per week devoted position Executive 40.00 Board Memb 0.00 Treasurer 0.00 Board Memb 0.00 President 0.00 Board Memb	Dir Der Der	n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-) ector 33521. 0. 0. 0. 0.	(d) He contremple plans,	o . O . O . O . O . O .	(e) Estimated amount of other compensation 0. 0. 0. 0. 0. 0. 0.
PI 82 DEC PI MI ECC MI NECC BE HO PE	Check if the organization used Schedule O to resched the organization of the o	spond to any qu (b) Title and average per week devoted position Executive 40.00 Board Memb 0.00 Treasurer 0.00 Board Memb 0.00 President 0.00 Board Memb 0.00	Dir Der Der Der	n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-) ector 33521. 0. 0. 0.	(d) He contremple plans,	alth benefits, ibutions to topyee benefit and deferred pensation O. O. O. O.	(e) Estimated amount of other compensation O. O. O. O. O.
PI 8 De TI Re Pr Mi 3 June Cl Mi Ar Cl Be Pr Em	Check if the organization used Schedule O to resched the organization of the organ	spond to any qu (b) Title and average per week devoted position Executive 40.00 Board Memb 0.00 Treasurer 0.00 Board Memb 0.00 President 0.00 Board Memb	Dir Der Der Der	n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-) ector 33521. 0. 0. 0. 0. 0.	(d) He contremple plans,	alth benefits, buttons to type benefit and deferred pensation O. O. O. O. O.	(e) Estimated amount of other compensation O. O. O. O. O. O. O.
PI 82 DE TI 8	Check if the organization used Schedule O to resched the organization of the organization of the organization of the organization of the organization used Schedule O to reschedule organization of the organization of th	spond to any qu (b) Title and average per week devoted position Executive 40.00 Board Memb 0.00 Treasurer 0.00 Board Memb 0.00 President 0.00 Board Memb 0.00	Dir Der Der Der	n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-) ector 33521. 0. 0. 0. 0.	(d) He contremple plans,	o . O . O . O . O . O .	(e) Estimated amount of other compensation 0. 0. 0. 0. 0. 0. 0.
PI 82 DE TI REE PI 1 S DE CI LE CI L	Check if the organization used Schedule O to res (a) Name and address (b) Eight Avenue, New York, NY (c) Eight Avenue, New York, NY (d) Name and address (e) Douglas Cleveland, OH (e) Douglas Grandgeorge, Central (f) Sesbyterian Church, New York, NY (f) Chel Longchampt (f) Main Street, Nayack, NY (f) Main Street, Nayack, NY (f) Main Street, New York, NY (f) Main Garreaud, Publicis Healthcare (f) Main Garreaud, Publici	spond to any qu (b) Title and average per week devoted position Executive 40.00 Board Memb 0.00 Treasurer 0.00 Board Memb 0.00 President 0.00 Board Memb 0.00	Dir Der Der Der	n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter-0-) ector 33521. 0. 0. 0. 0. 0. 0.	(d) He contremple plans,	alth benefits, buttons to type benefit and deferred pensation O. O. O. O. O. O.	(e) Estimated amount of other compensation O. O. O. O. O. O. O. O. O. O
PI 8 DE TI BE PI S DE TI BE PI	Check if the organization used Schedule O to resched the organization of the organization of the organization of the organization of the organization used Schedule O to reschedule organization of the organization of th	spond to any qu (b) Title and average per week devoted position Executive 40.00 Board Memb 0.00 Treasurer 0.00 Board Memb 0.00 President 0.00 Board Memb 0.00	Dir Der Der Der	n in this Part IV (c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-) ector 33521. 0. 0. 0. 0. 0.	(d) He contremple plans,	alth benefits, buttons to type benefit and deferred pensation O. O. O. O. O. O. O.	(e) Estimated amount of other compensation O. O. O. O. O. O. O.

_	990-EZ (2011) SURGEONS OF HOPE (CdE) FOUNDATION, INC. 13-4166			Page 3
Pa	Other Information (Note the Schedule A and personal benefit contract statement requirement instructions for Bort V). Check if the agreement record Sch. O to reappoint to any question in the			
	instructions for Part V.) Check if the organization used Sch. O to respond to any question in the	IIS Pa		X
	Puri programa de la compansa del compansa de la compansa del compansa de la compa		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each	22		v
0.4	activity in Schedule 0	33		X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		x
35.2	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported	04		
55 a	on lines 2, 6a, and 7a, among others)?	35a		x
ь	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b	N/	
	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax			
	requirements during the year? If "Yes," complete Schedule C, Part III	35c		X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes,"			
	complete applicable parts of Schedule N	36		X
	Enter amount of political expenditures, direct or indirect, as described in the instructions.	7		
	Did the organization file Form 1120-POL for this year?	37b		X
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made	1		
	in a prior year and still outstanding at the end of the tax year covered by this return?	38a		X
	If "Yes," complete Schedule L, Part II and enter the total amount involved Section 504(x)(3) properties a Section 1.	-		
39	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on line 9 N/A			
	Gross receipts, included on line 9, for public use of club facilities 39b N/A	1		
	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under:	-		ŀ
	section 4911 ► 0 • ; section 4912 ► 0 • ; section 4955 ► 0 •			}
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the			
	year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	40b		Х
C	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers			
	or disqualified persons during the year under sections 4912, 4955, and 4958			ì
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the			ļ
	organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter	400		x
41	transaction? If "Yes," complete Form 8886-T List the states with which a copy of this return is filed. > NY	40e		<u> </u>
	The organization's books are in care of ► Surgeons of Hope Telephone no. ► 212474	599	5	
	Located at ▶ 1675 Broadway, New York, NY ZIP+4 ▶ 1			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority			
	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	No
	account)?	42b		X
	If "Yes," enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
C	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	l	<u> </u>
40	If "Yes," enter the name of the foreign country:			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year 43	N/A		ш
	43	11/17	•	
			Yes	No
44 a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of			
	Form 990-EZ	44a		X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead			
	of Form 990-EZ	44b	<u> </u>	X
	Did the organization receive any payments for indoor tanning services during the year?	44c	L	X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation		ĺ	
	in Schedule O	44d	<u> </u>	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	 	X
45 D	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)2 If "Yes." Form 990 and Schedule R may need to be completed instead of Form 990-F7 (see instructions)	45b		
_	512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)		00 E7	(2011)

orm 990-EZ (2	2011)	SURGEONS	OF HOPE	(CdE)	<u>FOUNDA:</u>	NOI?	<u>INC</u>	•	<u>13-4166</u>	<u> 264</u>		Page 4
	•										Yes	No
	-	n engage, directly or in	idirectly, in politica	al campaign acti	vities on beha	f of or in	opposition	n to candidates for p	ublic office?	١		
		chedule C, Part I n 501(c)(3) orga			4047/0\/4	nono	vommt		sto only A	46	- 504	<u>X</u>
		tions and section 4					-					(C)(3)
		50 and 51 Check if							and complete	: 1110 12	ibies	\Box
	ioi iiiies	SO AND ST ONECK II	the Organization	Tused Scried	ule O to resp	Ond to a	iny quest	IOTHIT WHIST CALL VI	·		Yes	No
47 Did the or	roanizatioi	n engage in lobbying a	ctivities or have a	section 501(h)	election in effe	ct durina	the tax ve	ar? If "Yes." complet	e Sch. C. Part II	47		Х
	-	a school as described						, ,	,	48		X
-		n make any transfers t								49a		X
b If "Yes," w	vas the rel	ated organization a se	ction 527 organiza	ation?						49b		L
50 Complete	this table	for the organization's	five highest comp	ensated employ	ees (other tha	n officers	, directors	s, trustees and key ei	mployees) who	each re	ceived i	more
than \$100	•	ompensation from the		iere is none, ent				T	T			
	(a)	Name and address of paid more than \$	each employee			and avera		(C) Reportable compensation (Forms	(d) Health benef	⊸اہ	e) Estimi lount of	
	·				perw	eek devo	ieu io	W-2/1099-MISC)	/1099-MISC) employee benefit plans, and deferre			ation
			NONE						compensation	\dashv		
			· · · · · · · · · · · · · · · · · · ·									
									<u> </u>	+		
					\dashv							
							•	-		\top		
		-										
								<u> </u>				
f Total num	nber of oth	ner employees paid ov	er \$100,000									
		for the organization's		ensated indepe	ndent contrac	ors who	each recer	ved more than \$100	,000 of compen	sation 1	from the	3
		e is none, enter "None							<u> </u>			
(a) Name and	<u>a address</u>	of each independent of	ontractor paid mo	re than \$100,00)()		(b) Type o	T SERVICE	(c)	Comp	ensatio	<u>a</u>
												
·						_						
				T. 18		_						
											-	
	_											
		ner independent contr		•								
52 Did the or	rganızatıoı	n complete Schedule A	Note: All section	n 501(c)(3) org	anızatıons and	4947(a)(1) nonexe	mpt			_	_
charitable	e trusts mi	ust attach a completed leclare that I have examine	Schedule A	ng accompanying s	schedules and st	atements a	nd to the be	est of my knowledge and	belief it is true o	X Y	es L	No No
Declaration of pre	parer (other	than officer) is based on a	Il information of whic	h preparer has any	knowledge				1			
Sign	Signature	of officer				1	- A		Date	-		
Here	Wi a	hel Longch	M.		- /s	1)	11/-	5/10	//:	?	
		rint name and title	lampe, T	reasure	<u>r</u> v-	7-	-/-	V	/			
	Print/Tv	pe preparer's name	Pi	regarer's signati	JEE .	1	Date	Check	ıf PTIN			
Paid	1 '	aroline de			0 1 1		ار "	self- emplo	-			
Preparer	1	clapon	, Ravel 6	1 dan	1 dela	·,	\$1.		·	960	923	
Use Only		ame ► Guiber	t & Co.	<u>-</u>		V		Firm's FIN	▶ 13-34			
•		ddress ▶ 149 €		n Stree	t	•		Phone no		47	130	0
	<u>L</u> _		ork, NY						- .		J	-
May the IRS dis	scuss this	return with the prepai			S					Y	es 🗌	No
											990-EZ	(2011)

SCHEDULE A

Department of the Treasury Internal Revenue Service

(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.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

		SURGEON	S OF HOPE (C	dE) F	OUNDA	TION,	INC.		13	-4166	264	
Part I	Reason		ity Status (All organiz					ructions.				
The organ	ization is not a	private foundation	because it is: (For lines 1	1 through 1	11, check of	only one b	ox.)					
1 🔲	A church, cor	nvention of churches	s, or association of chur	ches desc	ribed in se	ction 170	(b)(1)(A)(i)					
2	A school des	cribed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E)								
3			tal service organization		n section	170(b)(1)(A)(iii).					
4	•	•	operated in conjunction			• • • • • • • • • • • • • • • • • • • •		(b)(1)(A)(ii	i). Enter th	ne hospital'	s name	∍,
-	city, and state	е										
5	An organizati	on operated for the	benefit of a college or ur	niversity ov	wned or op	erated by	a governr	nental uni	describe	d in		
	_	(b)(1)(A)(iv). (Comple	=	•	·	•	•					
6			ent or governmental uni	t described	d in sectio	n 170(b)(1)(A)(v).					
7		•	eives a substantial part					r from the	general p	ublic descr	ıbed ır	1
	•	b)(1)(A)(vi). (Comple	•	• • •		J			•			
8 🗔			ection 170(b)(1)(A)(vi).	(Complete	Part II)							
9 X												
	activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment											
		•	axable income (less sect	•		•				_		
		509(a)(2). (Complete	· · · · · · · · · · · · · · · · · · ·		•		•	, ,				
10 🗔			perated exclusively to te	st for publ	c safety S	ee sectio	n 509(a)(4	I).				
11 🔲	-	-	perated exclusively for th	•	-				y out the p	ourposes o	f one c	or
	more publicly	supported organiza	ations described in secti	on 509(a)(1	1) or section	n 509(a)(2) See sec	tion 509(a	a)(3). Che	ck the box	that	
	describes the	type of supporting	organization and compl	ete lines 1	1e through	11h						
	a Type I	_	_	: 🔲 тур			egrated		d 🗔	Type III - C	ther	
е 🔲	By checking	this box, I certify tha	at the organization is not	controlled	directly o	r indirectly	by one or	more disc	qualified p	ersons oth	er thar	1
	foundation m	anagers and other t	han one or more publicly	y supporte	d organiza	itions desc	cribed in s	ection 509	a)(a)(1) or s	ection 509	(a)(2)	
f	If the organiz	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
	supporting or	rganization, check th	nis box									
g	Since August	t 17, 2006, has the o	organization accepted ar	ny gift or co	ontribution	from any	of the folk	owing pers	sons?			
	(i) A person	n who directly or ind	lirectly controls, either al	one or tog	ether with	persons d	escribed i	ın (II) and (I	ııi) below,		Yes	No
	the gove	erning body of the si	upported organization?							11g(i)		
	(ii) A family	member of a persor	n described in (i) above?	•						11g(iı)		
	(iii) A 35% d	controlled entity of a	person described in (i) o	or (ii) above	∍?					11g(iii)		
h	Provide the fo	ollowing information	about the supported or	ganization	(s)							
(i) Name	of supported	(ii) EIN	(iii) Type of		organization			(vi) Is	the	(vii) Am	ount of	i
	anization	'	organization (described on lines 1-9		sted in your			organizatio (i) organiz U.S	ed in the	Supp		
			above or IRC section	governing	document?	(i) of your	support	U.S	.7			
			(see instructions))	Yes	No	Yes	No	Yes	No			
	:			1					 			
					_			 	 			
					 			ļ	 			
			-	<u> </u>	 			-				

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iii) and 170(b)(1)(A)(iii)		edule A (Form 990 or 990-EZ) 2011	 -					Page 2
Tails to qualify under the tests insted below, please complete Part III) Section A. Public Support Galendarysat (or frieat) year beginning in) (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total membership feet inceived (Ox not include any Yunusual grants ') 2 Tax revenues level for the organization's benefit and either part to creapended on its behalf with the organization without charge 3. The value of services or floatiest from 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 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) miculded on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6. Public support, Settle lines tentions 4 Section B. Total Support Calendar year (or fiseal year beginning in) (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total 7. Amounts from line 4 6. Gross income from interest, dividends, payments received on securities loans, rents, royatios and income from similar sources on securities loans, rents, royatios and income from similar sources on the sake of capital assets (Epilain in Part IV) 11. Total support. Add lines 7 through 10 12. Gross incomplate from the base of capital assets (Epilain in Part IV) 13. First five years, if the Form 900 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(e)(3) organization, thick this box and stop here. Section C. Computation of Public Support Percentage 14. Public support percentage from 2010 Schedule A, Part II, the 14 15. Section B. Total support device organization on the organization qualifies as a publicly supported organization 16. Which is support percentage from 2010 Schedule A, Part II, the 14 17. Section B. Total support device organization qualifies as a publicly supported organization meets the "facts and curroumstanc	Pa		•					-
Section A. Public Support Glendar years (or fixeal year beginning in) (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total Grits, grants, contributions, and membership fees received (ID on trucked any "unusual grants" 1) 2 Tax revenues leved for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facities turnshed by a governmental unit to the organization's benefit and either paid to or expended on its behalf 3 The value of services or facities turnshed by a governmental unit to the organization without charge the protrion 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) 5 Public support. Setsiste line 5 thought of sets of the sets o					•	on failed to qualify	under Part III. If the	e organization
Cleinfair year (or fissel year tegenning in) 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 2 Tax revenues level for the organization's benefit and either paid to or expended on fis behalf is the organization without charge in the strength of the organization without charge in the strength of the organization without charge in the strength of the organization without charge in the protion 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) 8 Public support, substrati has store level in the store level in			s listed below, plea	ase complete Fait	111)			
I Gifts, grants, contributions, and membership fees received (00 not miclude any "unusual grants") 2 Tax revenues leved 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's benefit and either paid to or expended on its behalf 4 Total. Add lives 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 (i) 6 Public support. Sebrection 5 tron lines Section B. Total Support 7 Amounts from line 4 8 Gross income from interest, dividendis, payments received on securities loans, rents, royalties and income from unreleted business activities, whether or not the business is regularly carned on 0 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 knowigh 10 12 Gross receipts from related activities, sic. (see instructions) 15 First five 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 stop here. Section C. Computation of Public Support Percentage 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 16 Rubic support percentage from 2010 Schedule A, Part II, line 14 18 33 1/3% support test. 2011. If the organization od into check a box on line 13, fai, 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, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets th		- - · · · · · · · · · · · · · · · · · ·	Ī	ī				
memborship fees received. (Do not include any "unusual grants") 2 Tax revenues leved for the organizations 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 (either than a governmental unit to the organization without charge and person (either than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 5. Public support, selevet line 8 non-line 4. 6. Gross income from mirrest, dividends, payments received on securities loans, rents, royalities and income from smilar sources. 9. Net income from smilar sources. 9. Net income from smilar sources. 9. Net income from windled business activities, whether or not the business including assists (Explain in Part IV.) 11. Total support. Add lines 7 through 10. 12. Gross receipts from related activities, etc. (see instructions). 13. First five years. If the Form 900 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. The organization qualifies as a publicly supported organization. 14. Public support percentage from 2010 Schedule A, Part II, line 14. 15. Public support percentage from 2010 Schedule A, Part II, line 14. 16. 33 1/3% support test - 2011. If the organization of do to check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization qualifies as a publicly supported 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 of and to check a box on line 13, 16a, 16b, or 17a, and line 15 i			(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
Tax revenues leved for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 The portion of total continutions 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) Public support. Subtract lies 8 ten lines Section B. Total Support Clientar year (or fiscal year beginning in) Amounts from line 4 Gross income from interest, dividendis, payments received on securities loans, rents, royaltes and income from interest, dividendis, payments received on securities loans, rents, royaltes and income from interest asserting to the public support. Add lines 7 through 10 Other income Do not include gain or loss from the sale of capital assests (Explain in Part IV) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization of Public Support Percentage 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 16 Sal 31 37% support test - 2011. If the organization od in ort check the box on line 13, flat, or 16b, and line 14 is 10% or more, and if the organization qualifies as a publicly supported organization 10 Ms. *facts-and-circumstances* test.* The organization of divide check the box on line 13, flat, or 16b, 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-circumstances" test.* The organization of divide organization organization meets the "facts-and-circumstances" test.* Check this box on line 13, flat, flot, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-	1							
2 Tax revenues leved 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 junctuded on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support, Sebrata lines 5 ton line 4 8 Gross income from inerest, dividends, payments received on securities loans, rents, royalines and income from similar sources 9 Net income from unrelated busness activities, whether or not the busness servicies, whether or not the busness sectivities, whether or not the busness is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explann in Part IV) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 90s is for the organization of Public Support Percentage 14 Public support percentage for 2011 fine 6, column (f) divided by line 11, column (f)) 15 First five years. If the Form 90s is for the organization of the horse of the public support percentage from 2010 Schedule. Plant It, line 14 16 33 1/3% support test-2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization person the "Column form or 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, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization organization meets the		·						
ication'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. Through 10 per		•				 		
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, Seditact lines 5 ton line4. Section B. Total Support Callendar year (or fissel year beginning in) ► (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total callendar year (or fissel year beginning in) ► (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total callendar year (or fissel year beginning in) ► (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total callendar year (or fissel year beginning in) ► (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total callendar year (or fissel year beginning in) ► (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total callendar year (or fissel year beginning in) ► (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total callendar year (or fissel year beginning in) ► (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total callendar year (or fissel year beginning in) ► (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total callendar year (or fissel year beginning in) ► (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total callendar year (or fissel year beginning in) ► (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total callendar year (or fissel year beginning in) ► (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total callendar year (or fissel year beginning in) ► (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total callendar year (or fissel year beginning in) ► (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total callendar year (or fissel year beginning in) ► (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total callendar year (or fissel year beginning in) ► (a) 2007 (b) 2008 (c) 2010 (d) 2010 (2	•	•					
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. Retrieve the store line 1. Callendar year (or fiscal year beginning in) b (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total Section B. Total Support Callendar year (or fiscal year beginning in) b (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total 8 Gross income from line 4 8 Gross income from Inerest, dividends, payments received on securities loans, rents, royalties and 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 (Explann in Part IV) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five 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 the box and stop here. The organization qualifies as a publicly supported organization. b 33 1/3% support test-2011. If the organization did not check the box on line 13, representation Part IV how 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, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization moreants the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization organization meets the "facts and circumstances" test, check this box		•						
turnished 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 (i) 6. Public support. Subtractines 5 trontines Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total and organization from line 4 8 Gross income from interest, dividends, payments received on securities loans, entits, royalties and income from smaler sources 9 Net income from smaler sources 9 Net income from smaler sources 9 Net income from unrelated business activities, whether or not the business is regularly camed on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organizations first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage Public support percentage from 2010 Schedule A, Part II, line 14 16a 33 1/3% support test - 2011. If the organization did not check be box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization between the organization meets the "facts and-circumstances test - 2011. 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. Check this box and stop here. Explain in Part IV how the organization organization meets the "facts and-circumstances" test. Check this box and stop here. Explain in Part IV how the organization organ	_	•		ļ <u></u>				
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. Soldinate Ins 5 tom line 4 8 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total 8 Gross income from interest, dividends, payments received on securities loans, ents, royalties and income from smilar sources 9 Net income from unrelated business activities, whether or not the business is regularly carned on 10 Other income Do not include gain or loss from the sale of capital assess(Explain in Part IV) 11 Total support, Add lines? through 10 12 Gross recepts from related activities, etc. (see instructions) 13 First five 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 stop here. Section C. Computation of Public Support Percentage 14 Public support percentage from 2010 Schedule A, Part II, line 14 16 33 1/3% support percentage from 2010 Schedule A, Part II, line 14 16 33 1/3% support percentage from 2010 Schedule A, Part II, line 14 16 33 1/3% support percentage from 2010 Schedule A, Part II, line 14 16 17 10% -facts-and-circumstances test - 2011. If the organization did not check he box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization percentage from 2010. 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 qualifies as a publicly supported organization percentage in the organization did not check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization organization meets the "facts and circumsta	3							
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, Setrectine 2 from line 4 8 Gross income from increst, 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 carned on 10 Other income from unrelated business activities, whether or not include gain or loss from the sale of capital assess (Explain in Part IV) in 17 total support Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization of Public Support Percentage Section C, Computation of Public Support Percentage Section C, Computation of Public Support Percentage Section B, 173% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization stop here. The organization qualifies as a publicly supported organization be 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization organization meets the "facts-and-circumstances"		• •						
5 The portion of total contributions by each person clother 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. Subract line 5 from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalines and income from unrelated business activities, whether or not the business activities, whether or not the business activities, whether or not the business is regulatly carned on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines? Through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years, if the Form 900 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here 14 Public support percentage for 2011 line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2010 Schedule A, Part II, line 14 16 33 1/3% support test - 2011. If the organization did not check tho box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization meets the "facts-and-circumstances" test, check this box and stop here. The organization qualifies as a publicly supported 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. E		•				-		
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. Subtreatines 5 nomines 4. Section B. Total Support Callendar year (or fiscal year beginning in) (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total organization, person 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 carned on 10. Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11. Total support. Add lines 7 through 10. 12. Gross receipts from related activities, etc. (see instructions) 13. First five 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 stop here. 5. Computation of Public Support Percentage 14. Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 15. Public support percentage from 2010 Schedule A, Part II, line 14 16. Business and stop here. The organization qualifies as a publicly supported organization 17. a 10% - facts-and-circumstances test - 2011. If the organization did not check he box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the	4	•			<u> </u>	 		
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 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Not income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Not income from unrelated business activities, whether or not the business is regularly carned on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 15 First five 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 stop here. Section C. Computation of Public Support Percentage 14 Public support percentage from 2010 Schedule A, Part II, line 14 15 96 16 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17 a 10% -facts-and-circumstances test - 2011. 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, check this box and stop here. Explain in Part IV how the organization more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization 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, check this box and stop here. Explain in Part IV how the organiza	5	•						
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 6 Public support Subtract line 5 from line 4 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Not 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 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five 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 stop here. 9 Section C. Computation of Public Support Percentage 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2010 Schedule A, Part II, line 14 9 Public support percentage from 2010 Schedule A, Part II, line 14 16 3 31 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17 al 10% - facts-and-circumstances test - 2011. 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. 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 15 Public apport and the facts and circumstances test 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 organiza		• •						
on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4 Section B. Total Support 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 or include gain or loss from the sale of capital assets (Explain in Part IV) 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add line 87 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five 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 stop here. Section C. Computation of Public Support Percentage 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2010 Schedule A, Part II, line 14 16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization in Part IV or 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 15 b 10% -facts-and-circumstances test The organization qualifies as a publicly supported organization 16 b 10% -facts-and-circumstances test The organization qualifies as a publicly supported organization 17 a 10% -facts-and-circumstances test The organization qualifies as a publicly supported organization 18 part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 19 b 10% -facts-and-circumstances test The organization qualifies as a publicly supported organization 10 b 10% -facts-and-circumstanc		• •						
amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from smiral 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 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five 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 stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2010 Schedule A, Part II, line 14 16 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17 In 10% -facts-and-circumstances test - 2011. 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. 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. 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. The organization dualifies as a publicly supported organization 15 10% -facts-and-circumstances test - 2010. If the organization dualifies as a publicly supported organization 16 16 16 17 2 and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test. The organizati		· · · · · · · · · · · · · · · · · · ·						
column (f) 6 Public support. Subtract line 3 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 interest dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from interest dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from interest debusiness activities, whether or not the business is regularly carned on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five 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 stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 16 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2011. 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 17a 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. The organization dualifies as a publicly supported organization 18a 17b -facts-and-circ			•					
Section B. Total Support Calendar year (or fiscal year beginning in) ▶ 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Not income from on the debusiness activities, whether or not the business is regularly carried on or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five 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 stop here Section C. Computation of Public Support Percentage 14 Public support percentage from 2010 Schedule A, Part II, line 14 15 Public support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2011. If the organization qualifies as a publicly supported organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 bit (14 cats-and-circumstances) test. The organization qualifies as a publicly supported organization 19 bit (15 cats-and-circumstances) test. The organization qualifies as a publicly supported organization 10 bit (15 cats-and-circumstances) test. The organization qualifies as a publicly supported organization 10 bit (16 cats-and-circumstances) test. The organization qualifies as a publicly supported organization 10 bit (16 cats-and-circumstances) test. The organization qualifies as a publicly supported organization 10 bit (17 cats-and-circumstances) test. The organization qualifies as a publicly supported organization 10 bit (17 cats-and-circumstances) test. The organization qualifies as a publicly supported organization 10 bit (18 cats-and-circumstances) test. The organization qualifies as a								
Section B. Total Support Calendar year (or liseal year beginning in) (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assests (Explain in Part IV) Total support. Add lines 7 through 10 Gross receipts from related activities, etc. (see instructions) First five 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 stop here Section C. Computation of Public Support Percentage Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) Public support percentage from 2010 Schedule A, Part II, line 14 Public support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization Sal 1/3% support test - 2010. If the organization did not check a box on line 13, 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. Check this box and stop here. Explain in Part IV how 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. Check this box and stop here. Explain in Part IV how 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. Check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. Check this box and stop here.	6							
Calendar year (or fiscal year beginning in) (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Not income from ourselated business activities, whether or not the business is regularly carned on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. Add lines 7 through 10 Gross receipts from related activities, etc. (see instructions) First five 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 stop here. Section C. Computation of Public Support Percentage 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 15 Public support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2010. 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 - 2010. If the organization did not check a box on line 13, 16a, or 16b, 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-circumstances" test, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV h			<u> </u>					
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 carned on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five 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 stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2010 Schedule A, Part II, line 14 16 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 16 33 1/3% support test - 2010. 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, check this 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 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-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and post here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and post here. Explain in Part IV how the organization mee			(a) 2007	(b) 2008	(c) 2009	(d) 2010	(a) 2011	(f) Total
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from smilar sources 9 Net income from unrelated business activities, whether or not the business is regularly carned on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five 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 stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2010 Schedule A, Part II, line 14 16 a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 10 b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported 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 dualifies as a publicly supported organization 15 10% -facts-and-circumstances test - 2010. If the organization dualifies as a publicly supported organization in Part IV how the organization meets the "facts-and-circumstances" test. The organization dualifies as a publicly supported organization 16 10% -facts-and-circumstances test - 2010. If the organization dualifies as a publicly supported organization 17 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 du			(4) 2007	(6) 2000	(6) 2000	(4) 2010	(6) 2011	(i) iotai
dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net 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 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five 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 stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2010 Schedule A, Part II, line 14 16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2011. 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. The organization dualifies as a publicly supported organization meets the "facts-and-circumstances" test. The organization dualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2011. If the organization dualifies as a publicly supported organization meets the "facts-and-circumstances" test. The organization dualifies as a publicly supported organization 18	-					-		
securities loans, rents, royalities 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 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five 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 stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2010 Schedule A, Part II, line 14 16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2011. 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. The organization dualifies as a publicly supported organization 18		·						
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 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five 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 stop here Section C. Computation of Public Support Percentage 4 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2010 Schedule A, Part II, line 14 16 a3 31/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2011. 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 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-circumstances" test. The organization qualifies as a publicly supported organization 10 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-circumstances" test. The organization qualifies as a publicly supported organization 10 10 -facts-and-circumstances test - 2010. If the organiz		• •			1			
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 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five 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 stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2010 Schedule A, Part II, line 14 16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2011. 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, check this box and stop here. Explain in Part IV how the organization more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how the organization more, and if the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10 the organization meets		•						
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 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First flive 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 stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2010 Schedule A, Part II, line 14 16 a3 31/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 16 b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17 a 10% -facts-and-circumstances test - 2011. 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 between the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how 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 18 10% -facts-and-circumstances test - 2010. If the organization qualifies as a publicly supported organization 19 10% -facts-and-circumstances	9	Net income from unrelated business	-					
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five 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 stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2010 Schedule A, Part II, line 14 16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2011. 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 dualifies as a publicly supported organization 10 % -facts-and-circumstances test - 2010. 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 be 10% -facts-and-circumstances" test. The organization dualifies as a publicly supported organization 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-circumstances" test. The organization qualifies as a publicly supported organization.		activities, whether or not the			İ			
or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five 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 stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2010 Schedule A, Part II, line 14 16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2011. 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 more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization 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 10		business is regularly carried on						
assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five 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 stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2010 Schedule A, Part II, line 14 16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2011. 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 17a 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-circumstances" test. 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, 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-circumstances" test. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2010. If the organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstance	10	Other income Do not include gain			1			
11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five 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 stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2010 Schedule A, Part II, line 14 16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 15a 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2011. 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how 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 15a 10% -facts-and-circumstances test - 2010. If the organization qualifies as a publicly supported organization 15a 10% -facts-and-circumstances test - 2010. If the organization qualifies as a publicly supported organization 15a 10% -facts-and-circumstances test - 2010. If the orga		or loss from the sale of capital						
12 Gross receipts from related activities, etc. (see instructions) 13 First five 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 stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2010 Schedule A, Part II, line 14 16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2011. 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 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-circumstances" test. The organization qualifies as a publicly supported organization 10 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-circumstances" test. The organization qualifies as a publicly supported organization 15		assets (Explain in Part IV)			<u> </u>		1	
13 First five 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 stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2010 Schedule A, Part II, line 14 16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2011. 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how 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	11	Total support. Add lines 7 through 10						
Section C. Computation of Public Support Percentage 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2010 Schedule A, Part II, line 14 16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2011. 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 more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how 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, 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.	12	Gross receipts from related activities,	etc. (see instructi	ons)			12	
Section C. Computation of Public Support Percentage 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2010 Schedule A, Part II, line 14 16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2011. 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 more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization 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, check this box and stop here. Explain in Part IV how 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 15	13	First five years. If the Form 990 is for	the organization'	s first, second, thu	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3)	
Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) Public support percentage from 2010 Schedule A, Part II, line 14 15 Public support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2011. 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 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-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								<u>▶□</u>
15 Public support percentage from 2010 Schedule A, Part II, line 14 16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2011. 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 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-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 15								
16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2011. 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 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-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				•	column (f))		14	
stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2011. 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 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-circumstances" test. The organization qualifies as a publicly supported organization								
b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2011. 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 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-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.	16a					14 is 33 1/3% or	more, check this bo	ox and
and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2011. 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 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-circumstances" test. The organization qualifies as a publicly supported organization				-		41 - 45 - 00 4 /01		. ▶□
17a 10% -facts-and-circumstances test - 2011. 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 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-circumstances" test. The organization qualifies as a publicly supported organization.	C					d line 15 is 33 1/39	% or more, check the	nis box
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 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-circumstances" test. The organization qualifies as a publicly supported organization.	47.					- 10 10 10		
meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported 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-circumstances" test. The organization qualifies as a publicly supported organization.	17a							
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-circumstances" test. The organization qualifies as a publicly supported organization.							art IV now the organ	nization
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.	Į.					-	17a and to 15	100/
organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.								
						•		, ▶□
	18							s S

Schedule A (Form 990 or 990 EZ) 2011 SURGEONS OF HOPE (CdE) FOUNDATION, INC. 13-4166264 Page 3 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 qualify under the tests listed below, please complete Part II)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")	149322.	183765.	188805.	147742.	195940.	865574.
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						
3			-				
•	are not an unrelated trade or bus-	;					
	iness under section 513						
							
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to	1	1				
_	or expended on its behalf	<u> </u>			-		
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	1 1 1 2 2 2 2					
	Total. Add lines 1 through 5	149322.	183765.	188805.	147742.	195940.	865574.
7 8	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						0.
t	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						0.
(Add lines 7a and 7b						0.
	Public support (Subtract line 7c from line 6)						865574.
<u>Se</u>	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	149322.	183765.	188805.	147742.	195940.	865574.
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar sources			i			
t	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b	F					· · · · · · · · · · · · · · · · · · ·
_	Net income from unrelated business	··	7				
	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			Ì			
42	assets (Explain in Part IV)	140222	102765	100005	147740	105040	065554
	Total support (Add lines 9, 10c, 11, and 12)	149322.	183765.	188805.	147742.	195940.	865574.
14	First five years. If the Form 990 is for	the organization's	first, second, third	I, fourth, or fifth ta	x year as a section	n 501(c)(3) organiza	ation,
800	check this box and stop here ction C. Computation of Publ	io Support Por	· · · · · · · · · · · · · · · · · · ·				
					 	1	100 00
	Public support percentage for 2011 (I			olumn (f))	ŀ		100.00 %
	Public support percentage from 2010					16	100.00 %
	ction D. Computation of Inves						
	Investment income percentage for 20	· ·	•	e 13, column (f))	ī	17	.00 %
	Investment income percentage from					18	%
19a	33 1/3% support tests - 2011. If the						
	more than 33 1/3%, check this box as				· ·		▶ [X]
b	33 1/3% support tests - 2010. If the						nd
	line 18 is not more than 33 1/3%, che			•		_	▶ <u></u>
20	Private foundation. If the organizatio	n did not check a b	ox on line 14, 19a	, or 19b, check thi	s box and see ins	tructions	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service 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

SURGEONS OF HOPE (CdE) FOUNDATION, INC.

Employer identification number 13-4166264

Form 990-EZ, Part I, Line 8, Other Revenue:	
Description of Other Revenue:	Amount:
Interest Income	55.
Form 990-EZ, Part I, Line 10, Grants and Allocations:	
Activity Classification: Open-Heart Surgery for children from	n Haiti
Grantee Name: Montefiore Medical Center	
Grantee Address: 1825 Eastchester Road Bronx, NY 10461	
Grantee Relationship: none	
Date of Gift: 07/15/11	
Amount Given:	12000.
Activity Classification: Open-Heart Surgery for children from Grantee Name: Project CURE	n Haiti
Grantee Address: 10377 E Geddes Ave Centennial, CO 80112	
Grantee Relationship: none	
Date of Gift: 01/04/11	
Amount Given:	8000.
Activity Classification: 3 heart operations for children	
Grantee Name: Clinique Lambert	
Grantee Address: 75 rue Lambert Petionville, HAITI	
Grantee Relationship: none	
Date of Gift: 10/25/11	
Amount Given:	9649.

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.

QMB No 1545-0047
2011
Open to Public Inspection

Name of the organization

SURGEONS OF HOPE (CdE) FOUNDATION, INC.

Employer identification number 13-4166264

SURGEONS OF HOPE (CdE) FOUNDATION	N, INC.	13-4166264
Total included on Form 990-EZ, line 10		29649.
Form 990-EZ, Part I, Line 14, Occupancy, Rent, U	tilities, a	
Description of Expenses:		Amount:
Depreciation/Amortization		2309.
Other Expenses		2226.
Total to Form 990-EZ, line 14		4535.
Form 990-EZ, Part I, Line 16, Other Expenses:		
Description of Other Expenses:		Amount:
conference convention		39135.
Travel expenses		41269.
Total to Form 990-EZ, line 16	-	80404.
Form 990-EZ, Part II, Line 24, Other Assets:		
Description	Beg. of Ye	ear End of Year
Prepaid expenses	2256	50. 7060.
Advance employee	74	13. 0.
Other Depreciable Assets	769	99. 5390.
Total to Form 990-EZ, line 24	3100	12450.
Form 990-EZ, Part II, Line 26, Other Liabilities	:	
Description	Beg. of Ye	ear End of Year
Accounts payable and accruals	377	72. 10182.

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

132211

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

SURGEONS OF HOPE (CdE) FOUNDATION, INC.

Employer identification number 13-4166264

activities and perform administrative services in connection with the delivery of onsite surgical care to disavantaged children in developing countries.

Form 990-EZ, Part III, Line 28, Program Service Accomplishments: In 2011 the Foundation continued its work in the Western Hemisphere and its multi-year commitment to La Mascota Children's Hospital in Nicaragua (the Latin American Program) by funding and equipping three surgical missions led by 12-member teams from top US and European teaching hospitals. An additional training/practicum mission in echocardiography was accomplished by a two member teaching team to continue with training and screening while the La Mascota operating rooms were closed for renovation. Since the program began in 2008, more than 350 children have undergone surgery during and between missions, as Surgeons of Hope has equipped and provided medical equipment and supplies to La Mascota. The newly renovated operating rooms are slated to re-open in April 2012. Medical packs were provided for the surgical missions, air shipped in pallets from Denver through Project CURE with assistance from the medical staff at the Children's Hospital of Colorado. 2011 also marked the start of construction of the new Pediatric Heart Center in Nicaragua being built adjacent to La Mascota, designed to serve as a magnet for medical training in the region and throughout Central America. Equipping the new center will be the responsability of Surgeons of Hope, so lists of equipment were finalized, in preparation for a capital fundraising campain to be conducted in 2011-2012. The new LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2011)

SCHEDULE O (Form 990 or 990-EZ)

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

Department of the Treasury Internal Revenue Service

Name of the organization

SURGEONS OF HOPE (CdE) FOUNDATION, INC.

Employer identification number 13-4166264

center is scheduled to open in 013.
Intensive surgical training and education was provided for La Mascota
medical staff to make them ready to assume duties within the new
center. Such staff are receiving their advanced training in
Spanish-speaking medical center in Mexico and Venezuela.
In early 2011, Surgeons of Hope brought two Haitian children to New
York City for open-heart surgery at Montefiore Children's Hospital.
Later in the year, Surgeons of Hope provided funds to Lambert Clinic in
Haiti, designating those funds toward surgery for Haitian children at
that clinic.
2011 was a year of great progress in Surgeons of Hope's program in
Latin America.
Form 990-EZ, Part V, Information Regarding Personal Benefit Contracts:
The organization did not, during the year, receive any funds, directly,
or indirectly, to pay premiums on a personal benefit contract.
The organization, did not, during the year, pay any premiums, directly,
or indirectly, on a personal benefit contract.

Employer identification number Name of the organization SURGEONS OF HOPE (CdE) FOUNDATION, INC. 13-4166264

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (see the instructions for Part IV) (d) Health benefits, contributions to employee benefit plans, and deferred compensation (b) Title and average hours (e) Estimated (C) Reportable compensation (Forms W-2/1099-MISC) amount of other per week devoted to (a) Name and address position compensation (If not paid, enter -0-) James Jaggers Board Member 0. 0. Childrens Hospital, Denver, CO 0.00

Department of the Treasury Name(s) shown on return

Depreciation and Amortization 990-EZ (Including Information on Listed Property)

Business or activity to which this form relates

▶ See separate instructions. Attach to your tax return. OMB No 1545-0172

Sequence No 179

Identifying number

SURGEONS OF HOPE (CdE) FOUNDATION, INC. Form 990-EZ Page 1 13-4166264 Part | Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I 500000. 1 Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 2000000. 3 Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions (a) Description of property (b) Cost (business use only) (c) Elected cost 7 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2010 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2012 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year 14 15 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) 16 Part III | MACRS Depreciation (Do not include listed property) (See instructions) Section A 1224 17 MACRS deductions for assets placed in service in tax years beginning before 2011 17 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2011 Tax Year Using the General Depreciation System (b) Month and year placed in service (c) Basis for depreciation (business/investment use only - see instructions) (d) Recovery period (a) Classification of property (a) Depreciation deduction 19a 3-year property b 5-year property 7-year property C 10-year property d 15-year property е 20-year property 25-year property 25 yrs S/L MM 27 5 yrs S/L h Residential rental property мм 27 5 yrs S/L MM S/L 39 vrs i Nonresidential real property ММ S/L Section C - Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System Class life 20a b 12-year 12 yrs. S/L 40-year ММ 40 yrs S/L Part IV | Summary (See instructions) 21 Listed property Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return Partnerships and S corporations - see instr 1224. 22 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

Fo	rm 4562 (2011)	SUR	GEONS C	F HC	PE (CdE) FOU	NDA	TION,	INC	•	13-	-4166	264	Page 2
P	art V Listed Propert amusement)	y (Include a	utomobiles, ce	ertain ot	her vehic	des, ce	rtaın com	puters	s, and proj	perty us	ed for e	ntertaini	ment, rec	reation,	or
	, Note : For any v through (c) of S	Section A, all	of Section B,	and Sec	ction C if	applica	ible							_	nns (a)
			on and Other			aution:	See the i	nstruc	tions for li	mits for	passeng	er auto	mobiles.)		
24	a Do you have evidence to s			ent use cl	aimed?	<u> </u>	′es L	No	24b If "Y	es," is th	ne evide	nce wrr	tten?	J Yes և	No
	(a)	(b) Date	(c) Business/	Ì	(d)		(e)		_ (f)	1	(g)		(h)		(i)
	Type of property (list vehicles first)	placed in	investment		Cost or ther basis	l no	sis for depri		Recovery		thod/ ention		eciation luction		cted in 179
	(IIST FORMORES INST.)	service	use percenta	ge "	ilici Dasis		use only	/)	portou		CITION	1 000		CC	st
25	Special depreciation allo	wance for q	jualified listed	property	y placed	ın serv	ce during	the ta	ax year an	đ					
_	used more than 50% in										25	J			
<u>26</u>	Property used more that	n 50% ın a q	ualified busin	ess use					,			- 			
			9	%		_						ļ			
			9	%											
			9	%					<u>L</u>						
27	Property used 50% or le	ess in a quali	ified business	use						,				,	
_			. 9	%						S/L·					
_	···		9	%						S/L·					
_	<u></u>		9	%						S/L·					
28	Add amounts in column	(h), lines 25	through 27 E	nter her	e and or	line 21	, page 1				28	1			
<u>29</u>	Add amounts in column	(ı), line 26 E	nter here and	on line	7, page	1							29		
			9	Section	B - Infor	mation	on Use	of Veh	nicles						
Со	mplete this section for ve	hicles used	by a sole prop	netor, p	artner, o	r other	"more th	an 5%	owner," o	or related	persor	ר			
-	ou provided vehicles to y	our employe	ees, first answ	er the qı	uestions	ın Sect	ion C to	see if y	you meet a	an excep	otion to	complet	ting this s	ection fo	or
tho	se vehicles														
				(a)		(b)		(c)	(d)		(e)	(f)
30	Total business/investment i	miles driven d	uring the	Vel	Vehicle		hicle	l v	ehicle	Vel	ncle	Ve	hicle	Veh	ıcle
	year (do not include comn	nuting miles)													-
31	Total commuting miles of	Iriven during	the year												
32	Total other personal (no	ncommuting	ı) miles									1			
	driven	·	•							Ì					
33	Total miles driven during	the year.													
	Add lines 30 through 32	•		1						-					
34	Was the vehicle available	e for person	al use	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	during off-duty hours?	•											1	,,,,	
35	Was the vehicle used pr	marily by a	more						_			1	1		
	than 5% owner or relate	• •		l											
36	Is another vehicle availa	•	onal				1						† · · ·		
	use?	•													
		Section C	- Questions f	or Emp	lovers W	/ho Pro	vide Vel	icles 1	for Use b	v Their I	Employ	ees			
Ans	swer these questions to d								-				re not m	ore than	5%
	ners or related persons	•		•											
37	Do you maintain a writte	n policy stat	tement that pr	ohibits a	all persor	nal use	of vehicle	es, incl	ludina con	nmutina	. by you	Г		Yes	No
	employees?		•		•				• •		, -, ,				
38	Do you maintain a writte	n policy stat	tement that pr	ohibits i	ersonal	use of	vehicles.	excep	t commut	ına. by v	our				
	employees? See the ins														
39	Do you treat all use of ve														
	Do you provide more that	•				ınforma	tion from	vour e	emplovees	about					
	the use of the vehicles, a							, ,							
41	Do you meet the require					monstr	ation use	?							
•	Note: If your answer to 3								overed ve	hicles				-	'
P	art VI Amortization	.,,,,	<u> </u>	<u>.,</u>	<u> </u>	<u> </u>			070,00 10	,,,o,c.s.		·····			
_	(a)			(b)		(c)		T	(d)		(e)	I		(f)	
	Description of	costs	Date	amortization begins		Amortiza			Code section		Amortiza period or per	noti	Aı fc	nortization r this year	
42	Amortization of costs that	at begins du	ring your 201		ar						Patrion of her			, , , ,	
<u></u>				, , 00	Ī —					1			_		
_					 			+							
42	Amortization of costs that	at began het						1_				43		1	085.
4	ADDOUZATION OF COSTS OF	41 DECIAN NO	tore vour 2011	TAX VP2											