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#### DLN: 93493187002020

Department of the Treasury

**Return of Organization Exempt From Income Tax** Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung

2009

OMB No 1545-0047

Open to Public

benefit trust or private foundation)

_		calelidai yea	r, or tax year beginning 01-01-2009 C Name of organization	and ending 12-31-2009	9	D Employer id	entification number
Add	ck if app	Ficuse	The ASCO Cancer Foundation				
	ress char	label or	Doing Business As			31-16679 E Telephone n	
	ne chang	type. See				(571) 483-	1300
	al return	Specific Instruc-	Number and street (or P O box if mail is 2318 Mill Road 800	not delivered to street addres	ss) Room/suite	<b>G</b> Gross receipts	
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lax —	k-exemp	t status 🖊 501(c)	(3) ◀ (insert no )	527	H(c) Grou	ıp exemption n	umber 🟲
W	ebsite:	www ascocanc	erfoundation org				
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Pai	rt I	Summary			•		
			e organization's mission or most sig · Foundation (TACF) is the philanthr		Society of C	liniani Oncolor	Inc (ASCO) TACE
			roundation (TACF) is the philanting rough research, patient information,	•	•		,,,
		•	caregivers powerful resources to ac				-
	<u> </u>	nproves the lives	of those impacted by cancer				
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	2 0	heck this box 🛏	if the organization discontinued its	operations or disposed	of more than	25% of its net	assets
		,	nembers of the governing body (Part				3
		_	dent voting members of the governi				1
			nployees (Part V, line 2a)		,		·
			lunteers (estimate if necessary) .				5
			ted business revenue from Part VIII				'a
		_	ness taxable income from Form 990		•		'b
		Tot am crated bas			Prio	or Year	Current Year
	8	Contributions and	i grants (Part VIII, line 1h)		PIIO	32,873,924	24,169,850
<u> </u>			revenue (Part VIII, line 2g)			32,873,924	24,109,030
			ne (Part VIII, column (A), lines 3, 4			110,254	24,75
			art VIII, column (A ), lines 5, 6d, 8c			110,254	24,73
		•	dd lines 8 through 11 (must equal Pa		<u>,                                    </u>		'
						32,984,178	24,194,60
			ır amounts paıd (Part IX, column (A)			19,657,483	18,431,62
		Benefits paid to o	r for members (Part IX, column (A),	line 4)			(
	14			rt IX column (A) lines F			
		Salaries, other co	mpensation, employee benefits (Pa	ic in, column (A), mics c			
363	15	10)					
, callaca	15	10)	raising fees (Part IX, column (A), lir			62,403	
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Form 990 (2009)

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Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

The ASCO Cancer Foundation is a 501(c)(3) charitable organization that supports educational programs of the highest quality in cancer care and prevention, facilitates the dissemination of information about cancer and cancer treatment to patients and their families, and through its grant program, supports, encourages and recognizes excellence in clinical research in the field of oncology

7,540,143 including grants of \$ 6,964,059 ) (Revenue \$ Research - In this age of scientific promise, federal funds for cancer research are declining Fulfilling the promise of today's advances relies on funding for research projects and support for investigators who wish to pursue a career in clinical and translational cancer research. Without continued, well-targeted research, there would be no meaningful progress. As a charitable organization, The ASCO Cancer Foundation (TACF) supports progress by funding cancer researchers at all stages of their careers, enabling oncology's best and brightest to pursue promising research. Each year, TACF funds and awards multiple research grants designed to help attract and retain the best scientific minds in cancer research and to support their efforts. Highlights of 2009 research activities and accomplishments include Advanced Clinical Research Award (ACRA)-\$1,000,000 in funding provided two (2) three-year awards intended to fund investigators who are committed to a clinical cancer study and who wish to conduct original research currently not funded. Translational Research Professorship Award (TRPA)-\$550,000 in funding provided a five-year award designed to provide flexible funding to outstanding translational researchers who have made, and are continuing to make, significant contributions that have changed the direction of cancer research, and who provide mentorship to future translational researchers. Career Development Award (CDA)- \$2,500,000 in funding provided twelve (12)three-year awards intended to support clinical research of clinical investigators who have received their initial faculty appointment and are establishing an independent clinical cancer research program. Young Investigator Award (YIA)-\$3,600,000 in funding provided fifty-five (55)one-year awards designed to encourage and promote high-quality research in clinical oncology by providing funds to promising investigators during the transition from a fellowship program to a faculty appointment Gianni Bonadonna Breast Cancer Research Fellowship -\$50,000 in funding provided a one-year fellowship that enables an early-career investigator to undertake a breast cancer project under the mentorship of the Gianni Bonadonna Breast Award RecipientClinical Trials Participation Award (CTPA)-\$27,000 in funding provided a program that publicly honors oncology practices and institutions that actively participate in clinical trials research. This program is designed to encourage oncology practices that currently participate in clinical trials to increase their accrual rates in order to support cancer research and advances. Merit Awards- \$301,500 provided funding for the Bradley Stuart Beller Merit Award along with 175 Merit awards which promote clinical research by young scientists and provide fellows with an opportunity to present their research and interact with other clinical cancer investigators at ASCO scientific meetings and disease-specific symposia. A select number of TACF Merit Awards were given out to recognize outstanding abstracts submitted for presentation consideration at different ASCO scientific meetings. The ASCO Cancer Foundation also raised funds for a number of awards provided by ASCO in order to recognize and encourage individuals or organizations that have made significant contributions to ASCO, the practice of clinical oncology, and cancer patients Highlights of awards supported by the Foundation in 2009 included Gianni Bonadonna Breast Cancer Award and Lecture- This award recognized an active clinical or translational researcher with a distinguished record of accomplishments in advancing the field of breast cancer as well as exceptional mentoring abilities The Award winner gave a lecture during the Breast Cancer Symposium

**4b** (Code ) (Expenses \$ 10,823,694 including grants of \$ 10,178,782 ) (Revenue \$ )

Professional EducationThe field of oncology is a dynamic arena where developments and discoveries occur nearly every day. Staying abreast of these developments is critical in allowing cancer physicians and other healthcare professionals to provide each person with cancer the best treatment options available. Through its support of the educational and scientific programs of its non-profit, charitable, related organization, the American Society of Clinical Oncology, the Foundation provides educational and scientific opportunities for oncologists and other healthcare professionals from around the globe. To ensure that the highest-quality cancer education continues to be available to doctors in an independent and unbiased forum, funds from the Foundation are used to support ASCO's comprehensive scientific and educational programs that provide the latest data to cancer doctors and other healthcare professionals worldwide through both live meetings and print and electronic education offerings. Highlights of the professional educational and scientific meetings supported by the Foundation and presented to the public in 2009 include \* The 2009 Annual Meeting featured over 250 educational and scientific sessions. Over 4,000 abstracts were presented or published. Over 1,000 presentations were captured in audio and video to be made available electronically. The ASCO Annual Meeting is the world's premier scientific and educational event in the oncology community. It is structured as a series of educational and scientific sessions in disease-specific or oncology-related topics. \* GI Symposium - The Gastrointestinal Cancers Symposium is an annual three-day scientific and educational meeting on new advances in the prevention, screening and treatment of gastrointestinal cancers. The meeting is co-sponsored by ASCO, the American Gastroenterological Association Institute, the American Society for Radiation Oncology, and the Society of Surgical Oncology \* GU Symposium - The annual Genitourinary Cancers Symposium offers educational sessions and abstract oral and poster presentations focused on cancers of the testis, bladder, kidney and prostate organs. The 2009 GU Symposium was co-sponsored by ASCO, the American Society for Radiation Oncology, and the Society of Urologic Oncology \* Breast Cancer Symposium - The Breast Cancer Symposium features presentations on the latest multidisciplinary research from selected, theme-based translational and clinical abstracts, as well as related educational sessions. The meeting is co-sponsored by ASCO, the American Society of Breast Disease, The American Society of Breast Surgeons, the American Society for Radiation Oncology, the National Consortium of Breast Centers, Inc , the Society of Surgical Oncology and has as its primary supporter Susan G. Komen for the Cure \* ASCO/COG Symposium - Childhood cancer is the leading cause of death by disease among children in the U.S. between infancy and 15 years of age. By addressing the ethical and practical challenges in drug discovery and development for children with cancer, the 2009 ASCO-Children's Oncology Group Symposium aimed to narrow competency gaps in efforts to improve pediatric patient care and outcomes The 2009 ASCO-Children's Oncology Group Symposium centered on 21st Century Challenges to Pediatric Oncology Drug Improvement \* Best of ASCO Atlanta & Los Angeles - The Best of ASCO Meetings deliver highlights from the ASCO Annual Meeting in local settings. A panel of ASCO experts selects abstracts from the ASCO Annual Meeting to create the Best of ASCO Meeting program \* ASCO/AACR Methods Workshop - This intensive workshop, in partnership with the American Association of Cancer Research, brings together clinical fellows and junior faculty clinical researchers in all oncology subspecialties to learn about the essentials of effective clinical trial designs of therapeutic interventions in the treatment of cancer Print and Electronic Education Highlights of print and electronic education materials supported by the Foundation and available to the public in 2009 include Proceedings - The Proceedings publications for the ASCO Annual Meeting and select ASCO Thematic Symposia contain all the abstracts selected for presentation at the live educational meeting and allows those not able to attend access to the ground-breaking abstracts that were presented Educational Books -The Annual Meeting Educational Book contains manuscripts written by the faculty of the ASCO Annual Meeting's educational program Over 100 original manuscripts representing over 65 total sessions are captured in the Educational Books Abstracts on ASCO org - Abstracts on ASCO org provide the results of the latest clinical cancer research to healthcare professionals involved in multidisciplinary clinical cancer care The Abstracts on ASCO org comprise ASCO's comprehensive online database of oncology-related research abstracts from ASCO Scientific and Educational meetings dating back to 1995 Virtual Meetings on ASCO org - The Virtual Meetings website provides the results of the latest clinical cancer research to healthcare professionals involved in multidisciplinary clinical cancer care Each session included on the Virtual Meetings has its own objectives. The Virtual Meetings on ASCO org use the latest technology to deliver over 30,000 oral presentations, abstracts, and posters from ASCO Scientific and Educational meetings dating back navigation and advanced search capabilities. The ASCO online platform hosts disease-specific portal sites. These "Cancer Portals" are organized thematically to allow site users to easily access the wealth of disease-specific information available

**4c** (Code ) (Expenses \$ 1,104,806 including grants of \$ 1,036,696 ) (Revenue \$

Quality and Access to CareAdvances in cancer care are occurring more and more frequently. Yet, the full promise of such progress cannot be realized until high-quality cancer care is available to everyone. The ASCO Cancer Foundation is aware of the divide between those with access to the fruits of research and timely care, and those without. Programs related to quality and access to care supported by the Foundation in 2009 include State/Regional Affiliate ProgramThe ASCO State/Regional Affiliate Program provides guidance to community oncologists at the local level on the ever-changing healthcare environment and is designed to enhance their educational activities State Affiliate Grant ProgramASCO created the State Affiliate Grant Program to provide financial support to its separately incorporated State/Regional Affiliates as they seek to enhance the scope of their non-profit activities. All 48 Affiliates were eligible to apply for a grant. In 2009, TACF provided funding to ASCO to award five Affiliates grants of \$10,000 to engage in projects that will have an overall benefit to their members, ASCO members, other state societies, and the general oncology community Diversity in Oncology InitiativeThe ASCO Cancer Foundation Awards Program offers or provides funding for different types of award opportunities for oncology fellows, clinical practices, and international researchers. One of the programs offered through The ASCO Cancer Foundation is the ASCO Diversity in Oncology Initiative, funded by Susan G. Komen for the Cure. The ASCO Diversity in Oncology Initiative was structured to facilitate the recruitment and retention of individuals from populations underrepresented in medicine to cancer careers, with particular attention to the development of clinical practitioners and investigators. Beginning in 2009, \$71,165 in funding was provided to three programs for individuals interested or currently practicing in the oncology field. Loan Repayment Program Medical Student Rotation Resident Travel Award Although a number

(Code ) (Expenses \$ 163,244 including grants of \$ 160,084 ) (Revenue \$

Patient Education and InformationWell-informed, educated patients are their own best advocates, as well as invaluable partners for doctors. TACF supports both doctors and patients by funding accurate, doctor-approved cancer information, which is available publicly both in print and online, to provide trusted, authoritative information to people living with cancer and those who care for and about them. Funding in this area allows the Foundation to continue and expand our work to inform patients Highlights of patient education and information programs and activities supported by TACF in 2009 include Patient Advocate Scholarship ProgramThe Patient Advocate Scholarship Program provides travel grants to a select number of patient advocates to attend the ASCO Annual Meeting and ASCO thematic meetings. In 2009, TACF supported the attendance of patient advocates at the 2009 ASCO Annual Meeting and ASCO thematic meetings. reviewed information on more than 120 cancers and cancer-related syndromes, as well as content on caregiving, coping strategies, clinical trials, managing side effects, and survivorship, and finding an oncologist. Information is delivered in written articles, videos, and audio podcasts. This information is made available free to the public In 2009, there were more than 5,750,000 page views of Cancer Net -TACF continues to support the production of ASCO's printed patient information materials, such as Cancer Advances Summaries of research advances in clinical oncology from the Journal of Clinical Oncology, ASCO's Annual Meetings, and ASCO's Symposia Cancer News and Meetings. Find information on ASCO's clinical cancer advances report, ASCO's annual meetings and symposia, and perspectives on breaking scientific findings ASCO Cancer Education Slides Prepared cancer slide presentations, adapted from select Cancer Net guides to cancer, are available for free download for oncologists, oncology nurses, and other members of the health care team Cancer Net en Espanol A growing amount of Cancer Net's information is being translated into Spanish, including 25 guides to cancer, information on managing Patient Guides. Patient Guides are printed booklets containing comprehensive cancer information, including an overview of specific cancer types, symptoms, diagnosis, staging, treatment, clinical trials, and after treatment International ProgramsASCO and The ASCO Cancer Foundation share an international mission to engage the physician and healthcare professional community on a global scale to improve care to cancer patients and enhance the exchange of knowledge to facilitate advances in the care of people with cancer everywhere TACF funds support international programs including education, fellowship and grant opportunities to enable oncologists from opposite ends of the world to share ideas and build lasting collaborations that can enhance patient care locally and globally TACF supports these programs through its international International Development and Education Award provides support for oncologists in developing countries to participate in the ASCO Annual Meeting and visit a cancer center in the United States or Canada. This award was designed to provide continuing medical education, assist in career development and help to establish strong relationships with leading ASCO members who serve as scientific mentors to each recipient. Advanced Cancer Courses (ACC)The Advanced Cancer Courses are carefully designed to fill the need for advanced learning for international oncologists. These courses can be chosen from ASCO's portfolio of educational products, or developed with the collaboration of volunteer oncologists.

4d Other program services (Describe in Schedule O )

(Expenses \$ 163,244 including grants of \$ 160,084 ) (Revenue \$ )

**4e** Total program service expenses►\$ 19,631,887

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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Νο
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D,  Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		No
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? <i>If "Yes," complete Schedule F, Part III</i>	16	Yes	
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		Νο
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Νο
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	IV	28a		Νο
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		Νο
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		Νο
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νο
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," complete Schedule M	30		N o
31	Part I	31		N o
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		N o
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Νο
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Νο
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Νο
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

form 990 (	.2009)		Page <b>5</b>
Part V	Statements Regarding Other IRS Filings and Tax Compliance		
		Yes	No

			Yes	NO
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this		165	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		No
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	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 account)?	4a	Yes	
Ь	If "Yes," enter the name of the foreign country   BD , CJ  See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		No
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a	-		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b

	, , ,
	below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances,
	processes, or changes in Schedule O. See instructions.
Section	A. Governing Body and Management

	Action At Governing Body and Hanagement			
			Yes	No
1a	Enter the number of voting members of the governing body 1a 13	1		
b	Enter the number of voting members that are independent 11			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νο
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νο
6	Does the organization have members or stockholders?	6		Νο
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	, ,		
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νo
	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	evenue Code.)		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11				
	Thus the digular growned a copy of this form 550 to an members of its governing body before ming the form.	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
ь	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions )			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νο
ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed AL, AK, AZ, AR, CA, CO, CT, ME, V			
	KS KY MD MA MI MN MS MO	NH N	1 NM	NY

- NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WV, WI
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you make these available Check all that apply

Own website Another's website V Upon request

- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 Paul Aines CFO

same as C above Alexandria, VA 20164 (571) 483-1300

## Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- ◆ List all of the organization's current key employees See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if the organization did not compensate any current or former officer, director, trustee or key employee											
<b>(A)</b> Name and Title	(B) Average hours	(C) Position (check all that apply)						( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other	
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	rrom tne organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
Joseph Bailes MD (07-10) Chair 2009	1 00	х		х				0	77,000	0	
Hyman Muss MD (06-09) Secretary 2009	1 00	х		х				0	3,500	0	
Allen Lichter MD CEO (ex-officio)Board Member	4 00	х		х				0	814,063	19,203	
Robert Mayer MD Board Member (09-11)	1 00	Х						0	1,000	0	
Lawrence Einhorn MD Board Member (06-09)	1 00	Х						0	0	0	
John Glick MD Board Member (07-10)	1 00	Х						0	500	0	
Michael Goldstein MD Board Member (06-09)	1 00	Х						0	0	0	
Martin Murphy Jr PhD Board Member (09-11)	1 00	Х						0	0	0	
Sandra Swain MD Board Member (07-10)	1 00	Х						0	0	0	
Charles Penley MD (09-11) Treasurer 2009	1 00	Х		х				0	1,500	0	
Paul Bunn Jr MD Board Member (06-09)	1 00	Х						0	500	0	
Nora Janjan MD Board Member (06-09)	1 00	Х						0	0	0	
Dına Mıchels Esq General Counsel	4 00			х				0	448,603	35,323	
Paul Aines CPA CFO	4 00			х				0	266,445	33,873	
Nancy Daly Exec Dir (ex-officio)Board Member	37 50			х				0	195,721	28,348	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) Average hours		(( tion (	(che		II		(D) Reportable compensation	(E) Reportable compensation		<b>(F)</b> Estima amount o	ited fother
		per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)		compens from t organizati relato organiza	he on and ed
											_		
1b	Total			<u> </u>	<u> </u>	<u>.                                    </u>	<u>.                                    </u>	<b> </b>	0	1,808,8	32		116,747
2	Total number of individuals (includ \$100,000 in reportable compensa	ıng but not	lımıted t				d abov	e) wh	no received more th	an			
												Yes	No
3	Did the organization list any <b>forme</b> on line 1a? <i>If</i> "Yes," complete Sched					key •	emplo	yee, •	or highest compens	sated employee	3		No
4	For any individual listed on line 1a organization and related organization										4	Yes	-
5	Did any person listed on line 1a re rendered to the organization? If "Y								elated organization	for services	5	163	No
	ection B. Independent Contr	actors											
1	Complete this table for your five hi \$100,000 of compensation from t	ghest comp		linde	pen	dent	contr	acto	rs that received mor	re than			
	+ = = 0 /0 00 0. Companion nom to	J. guilleut											

<b>(A)</b> Name and business address	( <b>B)</b> Description of services	(C) Compensation
Heather Lawrence 1924 Freedom Lane Falls Church, VA 22043	Marketing Mission Endowment program Dev	113,805

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►1

Form 99	•	•						Page <b>9</b>
	<b>/1111</b>	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated cam	paigns 1a					
ᅙᆵ	ь	Membership du	es <b>1b</b>					
ું."	c	Fundraising eve	ents 1c					
<u>#</u> 5,₩	d	Related organiz	ations 1d	860,359				
<u>₹</u>	e	Government grants	s (contributions) <b>1e</b>					
ा इं	f	All other contribution	ons, gifts, grants, and <b>1f</b>	23,309,491				
돌	g		butions included in					
달		lines 1a-1f\$_						
ಽ೯	h		s 1a-1f	▶	24,169,850			
				Business Code				
Program Service Revenue	2a							
35 25	ь							
ъ. Н	c							
J.	d							
æ	e							
튵	f	All other progra	am service revenue					
္န								
<u></u>	g		s 2a-2f					
	3		ome (including dividen		10E 193			10E 102
	١.		ar amounts)		195,183			195,183
	4		tment of tax-exempt bond					
	5	Royalties	(1) Papi					
	6a	Gross Rents	(ı) Real	(II) Personal				
	ь	Less rental						
		expenses Rental income						
	C	or (loss)						
	d	Net rental inco	me or (loss)					
	_	Gross amount	(i) Securities 507,705	(II) O ther				
	7a	from sales of	307,703					
		assets other than inventory						
	Ь	Less cost or other basis and	678,129					
		sales expenses Gain or (loss)	-170,424					
	c d		s)	<b>b</b> -	-170,424			-170,424
	8a	Gross income f			170,121			170,121
<u> </u>	"	events (not inc						
Other Revenue		\$						
ě		See Part IV, lin	reported on line 1c)					
Œ			а					
ŧ	ь		penses <b>b</b>					
Ò	С	Net income or (	loss) from fundraising	events 🕨				
	9a	Gross income f See Part IV, lin	rom gaming activities					
		See Part IV, IIII	a					
	ь	Less direct ex	penses b					
	c		loss) from gaming activ	vities				
	10a	Gross sales of returns and allo	inventory, less					
	Ь	less cost of a	oods sold <b>b</b>					
	c		(loss) from sales of inve	entory 🛌				
		Miscellaneous		Business Code				
	11a							
	ь							
	c							
	d	All other reven	ue					
	e	Total. Add lines						
				<b>•</b>				
	12	Total revenue.	See Instructions	▶	24,194,609	0	0	24,759

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).								
			(B), (C), and	(D).	(D)				
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses				
1	Grants and other assistance to governments and organizations								
	in the U.S. See Part IV, line 21	17,920,805	17,920,805						
2	Grants and other assistance to individuals in the								
	U.S. See Part IV, line 22	208,150	208,150						
3	Grants and other assistance to governments,								
	organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	302,666	302,666						
4	Benefits paid to or for members	302,000	302,000	1					
5	Compensation of current officers, directors, trustees, and								
_	key employees								
6	Compensation not included above, to disqualified persons								
	(as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$								
7	Other salaries and wages								
8	Pension plan contributions (include section 401(k) and section								
Ü	403(b) employer contributions)								
9	Other employee benefits								
10	Payroll taxes								
11	Fees for services (non-employees)								
а	Management	2,432,200	907,233	548,035	976,932				
b	Legal	4,900		4,900					
c	Accounting	4,343		4,343					
d	Lobbying								
e	Professional fundraising See Part IV, line 17	68,142			68,142				
f	Investment management fees	23,761		23,761					
g	Other	48,589		798	47,791				
12	Advertising and promotion	47,680			47,680				
13	Office expenses	78,291	15,218	15,940	47,133				
14	Information technology								
15	Royalties								
16	Occupancy	203,936		203,936					
17	Travel	167,384	95,664	21,743	49,977				
18	Payments of travel or entertainment expenses for any federal,								
	state, or local public officials								
19	Conferences, conventions, and meetings	93,722	15,778	13,878	64,066				
20	Interest								
21	Payments to affiliates								
22	Depreciation, depletion, and amortization								
23	Insurance								
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)								
а	Bad debt	150,501	150,501						
Ь	Printing & Distribution	107,752	9,528	3,214	95,010				
С	Bank & Credit Card Fees	67,322		67,322	· ·				
d	Dues & Subscriptions	32,795	536	18,813	13,446				
e	Postage	25,387	5,808	1,000	18,579				
f	All other expenses	·	, , , , , , , , , , , , , , , , , , ,	<u> </u>	· · · · · · · · · · · · · · · · · · ·				
25	Total functional expenses. Add lines 1 through 24f	21,988,326	19,631,887	927,683	1,428,756				
26	Joint costs. Check here ► ☐ If following SOP 98-2								
	Complete this line only if the organization reported in								
	column (B) joint costs from a combined educational campaign and fundraising solicitation								
	campaign and idinaraising solicitation	l	<u> </u>						

Pa	rt X	Balance Sheet							
				(A) Beginning of year		<b>(B)</b> End of year			
	1	Cash—non-interest-bearing		-325,503	1	-1,356,846			
	2	Savings and temporary cash investments		21,029,667	2	6,007,900			
	3	Pledges and grants receivable, net		7,013,240	3	5,887,166			
	4	Accounts receivable, net		36,000	4	3,082			
	5	Receivables from current and former officers, directors, trustees, key highest compensated employees   Complete Part II of	employees, and						
		Schedule L			5				
	6	Receivables from other disqualified persons (as defined under section persons described in section 4958(c)(3)(B) Complete Part II of	4958(f)(1)) and						
		Schedule L			6				
Assets	7	Notes and loans receivable, net			7				
SS	8	Inventories for sale or use			8				
⋖	9	Prepaid expenses and deferred charges	d expenses and deferred charges						
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	a						
	ь	Less accumulated depreciation	ь		10c				
	11	Investments—publicly traded securities		2,782,686	11	18,778,273			
	12	Investments—other securities See Part IV, line 11	714,366	12	2,605,451				
	13	Investments—program-related See Part IV, line 11		13					
	14	Intangible assets		14					
	15	Other assets See Part IV, line 11		237,835	15	373,339			
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)		31,528,461	16	32,341,284			
	17	Accounts payable and accrued expenses .	5,584,751	17	5,722,854				
	18	Grants payable		18					
	19	Deferred revenue	2,507,187	19	1,381,623				
	20	Tax-exempt bond liabilities			20				
<u>je</u>	21	Escrow or custodial account liability $\ensuremath{\textit{Complete Part IV of Schedule D}}$ .			21				
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified							
17		persons Complete Part II of Schedule L	•		22				
	23	Secured mortgages and notes payable to unrelated third parties .			23				
	24	Unsecured notes and loans payable to unrelated third parties			24				
	25	Other liabilities Complete Part X of Schedule D		1,778,355	25	405,662			
	26	Total liabilities. Add lines 17 through 25		9,870,293	26	7,510,139			
Fund Balances		Organizations that follow SFAS 117, check here ▶ 🔽 and complete li through 29, and lines 33 and 34.	nes 27						
an	27	Unrestricted net assets		14,103,171	27	17,484,832			
Ba	28	Temporarily restricted net assets		7,451,641	28	7,229,350			
E	29	Permanently restricted net assets		103,356	29	116,963			
Fu		Organizations that do not follow SFAS 117, check here ► ¬ and com	plete						
P		lines 30 through 34.							
	30	Capital stock or trust principal, or current funds			30				
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			31				
	32	Retained earnings, endowment, accumulated income, or other funds		24 272 472	32	0.000.00			
Net	33	Total net assets or fund balances		21,658,168	33	24,831,145			
l	34	Total liabilities and net assets/fund balances		31,528,461	34	32,341,284			

#### Part XI Financial Statements and Reporting

			Yes	No	
L	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No	
b	Were the organization's financial statements audited by an independent accountant?				
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both				
	☐ Separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b			

Form **990** (2009)

### OMB No 1545-0047

#### **SCHEDULE A**

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

The ASCO Cancer Foundation

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

**Public Charity Status and Public Support** 

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

Inspection **Employer identification number** 

Da	rt I	Door	on for Del	blic Charity Stat	ue /All ara	anizations	must same	lata this pa	31-166799			
				<b>blic Charity Stat</b> e foundation because						u ucuons		
1				on of churches, or as					/			
2	<u>'</u>			in <b>section 170(b)(1</b> )				(=)(=)(-).				
3	<u>'</u>			perative hospital ser				170(6)(1)(4	A ACIIIA			
4	<u>'</u>			organization operate						(A)(iii) Ent	artha	
•	'			y, and state	eu ili conjunc	ction with a n	iospital desci	ibed ill <b>secti</b>	OII 170(B)(1)	((A)(III). EIIC	er the	
5	Γ	_	-	erated for the benefit		or university	owned or op	erated by a g	jovernmental	l unit describ	ed in	
	_		section 170(b)(1)(A)(iv). (Complete Part II)									
6	<u> </u>		federal, state, or local government or governmental unit described in <b>section 170(b)(1)(A)(v).</b>									
7	<b> </b> ~	describ	ed ın	t normally receives a <b>A)(vi)</b> (Complete Pa		part of its s	upport from a	ı government	al unit or froi	m the genera	l public	С
8	$\sqcap$	A comn	nunity trust	described in <b>section</b>	170(b)(1)(A	(Com	plete Part II	)				
9	$\sqcap$	Anorga	nızatıon tha	t normally receives	(1) more tha	n 331/3% of	fıts support f	rom contribu	tions, membe	ership fees, a	and gro	SS
		receipt	s from activi	ties related to its ex	empt functio	ns—subject	to certaın ex	ceptions, and	d (2) no more	than 331/3%	6 of	
		ıts supp	ort from gro	ss investment incon	ne and unrela	ated busines	s taxable ınc	ome (less se	ction 511 ta	x) from busıı	nesses	
		acquire	its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See <b>section 509(a)(2).</b> (Complete Part III.)									
10	$\Gamma$	Anorga	anızatıon org	anızed and operated	exclusively	to test for pu	ublic safety S	See <b>section 5</b> 0	09(a)(4).	a)(4).		
11 e	Г	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h  a										
g		followin	g persons?	006, has the organiz	•			•				<del></del>
				ectly or indirectly co governing body of the	•			ersons descr	ribed in (II)	11g(i)	Yes	No
			-	r of a person describ		=	.1011			11g(i)		+-
		• •	•	ed entity of a person	• •		1012			11g(iii	+	+
h				g information about t						119(111	<u>′1                                    </u>	<u> </u>
				/iii)					1			
(i) Name suppor organiza		ne of (ii) (described on col (i) listed in your governing document?		organızat col (ı) of	Did you notify the organization in col (i) of your col (i)		(vi) Is the lanization in (i) organized in the US?		( <b>vii)</b> ount of pport?			
				(see instructions))	Yes	No	Yes	No	Yes	No		
											1	
								1				
Tota			İ	1			1	1		İ	1	

#### Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Part II

_	cation A Dublic Company	ou checkeu the	DOX OII IIIIC 3,	, or o or raic.	· · <i>)</i>		
	ection A. Public Support	T	T				
Cal	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	<b>(c)</b> 2007	(d) 2008	(e) 2009	<b>(f)</b> Total
1	Gifts, grants, contributions, and						
-	membership fees received (Do						
	not include any "unusual	23,353,847	26,031,754	5,055,674	32,873,924	24,169,849	111,485,048
	grants ")						
2	Tax revenues levied 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	23,353,847	26,031,754	5,055,674	32,873,924	24,169,849	111,485,048
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						51,646,116
	on line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public Support. Subtract line 5						59,838,932
	from line 4						
	ection B. Total Support						
Cal	endar year (or fiscal year	(a) 2005	<b>(b)</b> 2006	(c) 2007	( <b>d)</b> 2008	(e) 2009	<b>(f)</b> Total
_	beginning in)	23,353,847	711,412	5,055,674	32,873,924	24,169,849	111,485,048
7	A mounts from line 4	23,333,647	711,412	3,033,074	32,673,924	24,109,049	111,463,046
8	Gross income from interest,						
	dividends, payments received on	418,879	711,412	238,350	481,663	195,182	2,045,486
	securities loans, rents, royalties and income from similar	410,075	711,712	230,330	401,003	173,102	2,043,400
	sources						
9	Net income from unrelated						
9	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income (Explain in Part						
10	IV ) Do not include gain or loss						
	from the sale of capital						
	assets						
11	Total support (Add lines 7						113,530,534
	through 10)						113,330,334
12	Gross receipts from related activit	ies, etc (See ins	tructions )			12	
13	First Five Years If the Form 990 is	for the organizat	ion's first, second	. third. fourth. or	fifth tax vear as a	501(c)(3) organiz	ation.
	check this box and stop here			,,,	,	(- )(- ) 3	<b>▶</b> □
	·						
S	ection C. Computation of Pu	blic Support I	Percentage				_
14	Public Support Percentage for 200			11 column (f))		14	52 710 %
15	Public Support Percentage for 200	18 Schedule A Pa	art II line 14			15	
	,,	•	•				52 040 %
16a	33 1/3% support test—2009. If the				line 14 is 33 1/3%	or more, check t	
L	and <b>stop here.</b> The organization qu	·			5 a and line 1 Fie 1	2.2.1/20/	
D	<b>33 1/3% support test—2008.</b> If th box and <b>stop here.</b> The organization	-			oa, and line 15 is .	5 5 1/3% of more,	Eneck this
172	10%-facts-and-circumstances test			-	no 13 162 or 161	and line 14	<b>F</b> 1
L/a	is 10% or more, and if the organization	-					
	in Part IV how the organization me						ed
	organization	ets the lacts and	u circuinstances	test The Organiz	ation quannes as	a publicly support	
h	10%-facts-and-circumstances test		anization did not	check a hov on lu	ne 13, 16a 16b d	or 17a and line	- 1
_	15 is 10% or more, and if the orga						
	Explain in Part IV how the organize						
	supported organization				J	F/	<b>▶</b> □
18	Private Foundation If the organiza	tion did not check	c a box on line 13.	16a, 16b, 17a o	r 17b, check this	box and see	
	instructions		,	, ,	,		<b>▶</b> ┌

Part III Support Schedule for Organizations Described in IRC 509(a)(2)

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support				1	T	ı
Cale	ndar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	( <b>d)</b> 2008	(e) 2009	<b>(f)</b> Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
_	include any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt						
3	purpose Gross receipts from activities that				+		
3	are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5				-		
7a	A mounts included on lines 1, 2, and 3 received from disqualified						
	persons				1		
ь	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						
с	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	from line 6 )						
	ction B. Total Support		1			1	Γ
Cale	ndar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	<b>(c)</b> 2007	( <b>d)</b> 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
ь	Unrelated business taxable						
	ıncome (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
c 11	Net income from unrelated						
	business activities not included						
	ın lıne 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support (Add lines 9, 10c,						
14	11 and 12 ) First Five Years If the Form 990 is for	or the organizat	lon's first, second	L third fourth or	l fifth tax vear as a	1 a 501(c)(3) organ	l uzation
	check this box and <b>stop here</b>	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	<b>▶</b> ┌
	ction C. Computation of Publ						
15	Public Support Percentage for 2009	(line 8 column	(f) divided by line	13 column (f))		15	
16	Public support percentage from 200	8 Schedule A , F	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ge			
17	Investment income percentage for 2	<b>009</b> (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	<b>2008</b> Schedule	A, Part III, line 1	L 7		18	
19a	33 1/3% support tests—2009. If the	organization di	d not check the b	ox on line 14, and	d line 15 is more	than 33 1/3% and	d line 17 is not
	more than 33 1/3%, check this box a	ind <b>stop here.</b> T					
L	organization 33 1/3% support tests—2008. If the	► C	d not chastes here	on line 14 amilion	100 and line 4	5 ic mara +ha= 22	1/20/2 and line
b	שר בו בע suppoit tests—zouo. If the	organization (I	и посепеска вох	OILLINE TH OLINE	= ⊥⊃a, anu nne 1(	us more man 33	1/370 and ine

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV

**Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

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DLN: 93493187002020

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury

**Supplemental Financial Statements** ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public

ernal	nal Revenue Service							
	me of the organi			Employer identifie	cation number			
ıne	ASCO Cancer Found	ааиоп		31-1667995				
Pa			dvised Funds or Other Similar F		s. Complete if the			
	organiz	ation answered "Yes" to Form 99		/b> =				
	Total number at	and of year	(a) Donor advised funds	(b) Funds and	other accounts			
		ributions to (during year)						
	55 5	ts from (during year)						
, L	Aggregate value	, , ,						
i	Did the organiz	ation inform all donors and donor advi	L sors in writing that the assets held in dor organization's exclusive legal control?	nor advised	┌ Yes ┌ No			
,	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose							
	conferring impe	rmissible private benefit			┌ Yes ┌ No			
aı	TIII Consei	rvation Easements. Complete	ıf the organızatıon answered "Yes" t	to Form 990, Part 1	IV, line 7.			
	Preservation Preservation Complete lines	of natural habitat on of open space	on or pleasure)	certified historic stru				
		,		Held at th	e End of the Year			
а	Total number o	f conservation easements		2a				
b	Total acreage r	estricted by conservation easements		2b				
c	Number of cons	servation easements on a certified his	2c					
d	Number of cons	2d						
}	Number of cons	servation easements modified, transfe	rred, released, extinguished, or terminate	ed by the organization	n durıng			
	the taxable yea	ir ►						
ļ.	Number of state	es where property subject to conserva	ation easement is located ►					
i		ızatıon have a wrıtten policy regardıng the conservation easements it holds?	the periodic monitoring, inspection, han	dling of violations, ar	nd <b>Yes No</b>			
•	Staff and volun	teer hours devoted to monitoring, insp	ecting and enforcing conservation easen	nents during the year	<b>-</b>			
,	A mount of expe	enses incurred in monitoring, inspecti	ng, and enforcing conservation easement	s during the year ► \$				
3		servation easement reported on line 2 and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of sec	ction	┌ Yes			
)	balance sheet,		onservation easements in its revenue and he footnote to the organization's financia nents					
ar			ns of Art, Historical Treasures,	or Other Similar	Assets.			
_		•	Yes" to Form 990, Part IV, line 8.  116, not to report in its revenue stateme	ent and halance shee	t works of			
.a	art, historical t	reasures, or other similar assets held	for public exhibition, education or resear ancial statements that describes these i	ch in furtherance of p				
b	historical treas	·	116, to report in its revenue statement a public exhibition, education, or research i		•			
	(i) Revenues ir	ncluded in Form 990, Part VIII, line 1		<b>►</b> \$				
	(ii) Assets incl	uded in Form 990, Part X		<b>►</b> \$				
!		non received or held works of art, historiats required to be reported under SFA	orical treasures, or other similar assets f S 116 relating to these items	or financial gain, prov	ride the			

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

сLi	<b>TIL</b> Organizations Maintaining Co	llections of Art,	, Hist	corica	al Tre	easur	es, or C	the	r Similaı	r Asse	ts (coi	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	ofthe	e follov	wing th	nat are	a sıgnıfıc	ant u	se of its co	llection		
а	Public exhibition		d		oan o	rexcha	inge prog	rams				
b	Scholarly research		e	$\Gamma$	Other							
С	Preservation for future generations											
1	Provide a description of the organization's co	ollections and explai	n how	they f	further	the org	ganızatıor	ı's ex	empt purp	ose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t		,	,					ıılar	Г	í es	┌ No
Pai	t IV Escrow and Custodial Arrang						answere	d "Y	es" to Fo	m 990	,	
	Part IV, line 9, or reported an an											
la	Is the organization an agent, trustee, custod included on Form 990, Part X?					ions or	other ass	ets r	not	۲	í es	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the f	ollowii	ng tab	le		г					
_										A mou	nt	
C	Beginning balance							1c				
d	Additions during the year							1d				
e	Distributions during the year							1e				
f	Ending balance						L	1f				
а	Did the organization include an amount on Fo	orm 990, Part X, line	21?							Γ,	í es	∏ No
	If "Yes," explain the arrangement in Part XIV											
a	rt V Endowment Funds. Complete										F W-	Dl-
	Beginning of year balance	(a)Current Year 103,356	(D) <del> </del>	Prior Ye 1	54,283	(c) Iwo	Years Back	(a)	Three Years	васк (е)	rour Ye	ars Back
a b	Contributions	14,492		1.	31,203							
c	Investment earnings or losses	1,115			6,573							
d	Grants or scholarships	2,000			, 57,500							
e	Other expenditures for facilities	,										
_	and programs											
f	Administrative expenses											
g	End of year balance	116,963		10	03,356							
	Provide the estimated percentage of the yea	r end balance held a	s									
а	Board designated or quasi-endowment 🕨	0 % %										
ь	Permanent endowment 🕨 100 000 % %											
c	Term endowment ► %											
a	Are there endowment funds not in the posses	ssion of the organiza	ition th	hat are	e held	and adı	mınıstere	d for	the	_		
	organization by										Yes	No
	(i) unrelated organizations			•				•		3a(i)		No_
L	(ii) related organizations							- '		3a(ii) 3b		N o
	Describe in Part XIV the intended uses of th							•		36		
	t VI Investments—Land, Buildings					0. Par	t X. line	10.				
	Description of investment			(a)	Cost or s (inves	other	(b)Cost or basis (ot	other	(c) Accur		( <b>d)</b> Bo	ok value
.a	Land								1			
b	Buildings											
	Leasehold improvements								1			
d	Equipment											
e	Other											

0

Part VII Investments—Other Securities. See  (a) Description of security or category		2. (c) Method of valuation
(including name of security)	(b)Book value	Cost or end-of-year market value
Financial derivatives  Closely-held equity interests		+
Other		
Alternative Investments	2,605,451	
		+
		1
Total. (Column (b) should equal Form 990, Part X, col (B) line 12 )	2,605,451	
Part VIII Investments—Program Related. See	, ,	
(a) Description of investment type	(b) Book value	(c) Method of valuation
(4,2 555, 1,2 1,5 1,5 1,5 1,5 1,5 1,5 1,5 1,5 1,5 1,5	(2) 20011 14114	Cost or end-of-year market value
		+
Tatal (Column (h) chould equal Form 990, Part V, col (B) line 12.)		
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)  Part IX Other Assets. See Form 990, Part X, line		
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)  Part IX Other Assets. See Form 990, Part X, lin (a) Descrip	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, Im (a) Descrip	e 15.	
Part IX Other Assets. See Form 990, Part X, Im (a) Descrip	5.)	(b) Book value
Part IX Other Assets. See Form 990, Part X, Im (a) Descrip	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)	

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	24,194,609
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	21,988,326
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	2,206,283
4	Net unrealized gains (losses) on investments	4	966,694
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	966,694
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	3,172,977
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue	er Re	eturn
1	Total revenue, gains, and other support per audited financial statements	1	108,174,873
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	83,980,264
3	Subtract line <b>2e</b> from line <b>1</b>	3	24,194,609
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12)	5	24,194,609
	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per	
1	Total expenses and losses per audited financial statements	1	77,832,664
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments	1	
c	Other losses		
d	Other (Describe in Part XIV) 2d 55,844,338	1	
e	Add lines <b>2a</b> through <b>2d</b>	2e	55,844,338
3	Subtract line <b>2e</b> from line <b>1</b>	3	21,988,326
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines <b>4a</b> and <b>4b</b>	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	21,988,326
Pa	rt XIV Supplemental Information		

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
Part V, Line 4	Description of Intended Use of Endowment Funds	Permanently restricted net assets of donor-restricted endowment funds are preserved, absent explicit direction from the donor Part V, line 1a-1g Prior Year Restricted Funds were restated due to an error in processing the tax form Endowment funds are based on GAAP and agree to the Restricted funds on the audited financial statements
Part X	Description of Uncertain Tax Positions Under FIN 48	Line 2 Management of the Organization has not identified any uncertain income tax positions. The Organization believes it is no longer subject to US federal, state and local income tax examinations by taxing authorities for years before 2006.
		Part XII, Line 2d - Reconciliation of Revenue - Related entity revenue reported on a separate basis Part XIII, Line 2d - Reconciliation of Expense - Related entity expense reported on a separate basis
		Part IV, question 4 Interest from the Permanently restricted funds is intended to fund future research and/or educational awards

DLN: 93493187002020

OMB No 1545-0047

Open to Public **Inspection** 

#### **SCHEDULE F** (Form 990)

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

**Statement of Activities Outside the United States** 

▶ Attach to Form 990. ▶ See separate instructions. Department of the Treasury Internal Revenue Service

Name of the organization The ASCO Cancer Foundation Employer identification number

					31-1667995	5
Pa		rmation on Ac 990, Part IV, lır		de the United States	s. Complete if the organ	nization answered
1	For grantmakers. Do assistance, the grant	es the organiza	tion maintain r		the amount of the grants lection criteria used to a	
2	<b>For grant makers.</b> Descr United States	ribe in Part IV the	organization's pr	ocedures for monitoring th	ne use of grant funds outsıd	e the
3	Activites per Region (U	se Schedule F-1	(Form 990) If add	ditional space is needed )		
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Nort	:h A merica	0		Grants issued to individuals and recipient organization(s), Program Services	Merit A wards	24,500
East	t Asia & the Pacific	0		Grants issued to individuals and recipient organization, Program services	Career Development A ward and Young Investigator A ward	176,666
Euro	ppe	0		Grants issued to individuals and recipient organization(s), Program services	Young Investigator Award	50,000
Sout	th Asia	0	0	Grants issued to individuals and receipient institutions, Program services	Merit A wards	3,500
	nls	0	0			254,666

Part IV	line 15, for ai		<b>inizations or Entiti</b> ceived more than \$5, I space is needed.					
(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia & The Pacific	Career Development A ward(CDA),2nd Year,Issued to University of Sydney	66,666				
		Europe	Young Investigator Award (YIA) Issued to University of Oxford	50,000				
		East Asia & The Pacific	Young Investigator Award issued to National Cancer Centre Singapore	50,000				
		East Asia & The Pacific	Young Investigator Award issued to The University of Sydney	50,000				
tax-exempt I	by the IRS, or	for which the grant	sted above that are i ee or counsel has pro	ovided a section 501	(c)(3) equivalency	letter	· <b>-</b>	
3 Enter total n	imber of othei	organizations or e	ntities				. 🟲	4

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.

Use Schedule I	-1 (Form 990) if ad	ditional space	ıs needed.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	( <b>d)</b> A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
oncology fellows who are first authors on abstracts selected for presentation at an ASCO scientific meeting, including the Annual Meeting, Breast Cancer Symposium, Gastrointestinal Cancers Symposium, and Genitourinary Cancers Symposium	East Asia & Pacific	8	10,000				
A wards were given to oncology fellows who are first authors on abstracts selected for presentation at an ASCO scientific meeting, including the Annual Meeting, Breast Cancer Symposium, Gastrointestinal Cancers Symposium, and Genitourinary Cancers Symposium	South Asia	3	3,500				
A wards were given to oncology fellows who are first authors on abstracts selected for presentation at an ASCO scientific meeting, including the Annual Meeting, Breast Cancer Symposium, Gastrointestinal Cancers Symposium, and Genitourinary Cancers Symposium	North A merica	19	24,500				
-							

Schedule F (Form 990) 2009  Part IV Supplemental Information		Page 4
Identifier Procedure for Monitoring Grants Outside the U S	ReturnReference	Explanation  Schedule F, Part I, Line 2 TACF grants are awarded based on merit through a peer-review process of review conducted by members of TACF's Grant Selection Committee using eligibility criteria established for each specific grant Grantees are required to sign a grant agreement with TACF that establishes certain requirements for the grant Grantees must request TACF's approval for any changes in the grant project and the grantee's status Grantees must submit a formal request for a change in objectives or scope to TACF and include justification for the changes, which is subject to TACF's review and approval Grantees are required to notify TACF if there are significant delays that will materially affect the ability to attain the objectives of the grant project or to meet such time schedules as may have been proposed Grantees are required to notify TACF if they plan to leave an organization during the course of a grant and must submit a request for approval of institution transfer of the grant before any transfer takes place Changes in the grant budget are subject to the review and approval of TACF TACF requires technical project reports (progress reports) and budget summaries (financial reports) for all grants Unless otherwise specified in the grant terms and conditions, an annual progress report and a budget summary are required to be submitted within 30 days following the end of the grant budget period TACF reviews the reports and provides the grantee an approval notification TACF requires a final project report and budget summary within 30 days following expiration of the grant TACF reviews the reports and if approved, provides the grantee an approval notification All unused funds at the end of the award term must be returned to TACF Grants are administratively closed by TACF after receipt of the final project report and final budget summary and after TACF's determination that any other administrative requirements in the grant have been met TACF reserves the right to ask the grantee to return funds that
Schedule F, Part IV	Other Information	spent inconsistently with the approved budget  Schedule F, Part II, Line 1, Description of Awards Distributed Advanced Clinical Research Award (ACRA) is designed for clinical oncology researchers involved in investigative work for 5 10 years and intended to support original research not currently funded Total Award \$450,000 over three years Translational Research Professorship Award (TRPA) is intended to support qualified researchers who are dedicated to bringing advances in basic sciences into the clinical arena and to mentoring other translational researchers. Total Award \$500,000 over five years Career Development Award (CDA) provides funding to clinical investigators who have received their initial faculty appointment to establish an independent clinical cancer research program Total Award \$200,000 over three years Gianni Bonadonna Breast Cancer Award and Fellowship recognizes an active clinical or translational researcher with a distinguished record of accomplishments in advancing the field of breast cancer. The recipient receives a \$10,000 annual award from ASCO and deliver a lecture during the Breast Cancer Symposium The award is accompanied by a one-year \$50,000 fellowship award to an early-career breast cancer research as a patient-oriented focus, including clinical trials or translational research involving human participants. Young Investigator Award provides funding to promising investiators to encourage and promote quality research in clinical oncology. The purpose of this award is to fund physicians during the transition from a fellowship program to a faculty appointment. Total Award \$50,000 over one year Community Oncology Research Grant (CORG) is given to community-based practices to support their efforts to enhance their clinical trials program. Areas of improvement are based on the American Society of Clinical Oncology statement of minimum standards and exemplary attributes of clinical trial sites (Journal of Clinical Oncology, May 20 2008) Total Award \$30,000 over one year State Affiliate Gra

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SCHEDULE G (Form 990 or 990-EZ)

# **Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No. 1545-0047

Department of the Treasury

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Open to Public Inspection

Internal Revenue Service Attach to Form 990 or Form 990-EZ. See separate instructions.					
Name of the organization The ASCO Cancer Founda	tion			Employer iden	tification number
				31-1667995	
	<b>g Activities.</b> Comple I filers are not require	_		to Form 990, Part IV	, line 17.
1 Indicate whether the	organization raised fund	ls through any of the	following activities Ch	eck all that apply	
a Mail solicitations		e	Solicitation of nor	n-government grants	
<b>b</b> 🔽 Internet and e-m	ail solicitations	f	Solicitation of gov	vernment grants	
c Phone solicitatio	ns	g	☐ Special fundraisir	ng events	
d 🔽 In-person solicit	ations				
or key employees lis	have a written or oral ag ted in Form 990, Part VI	II) or entity in conne	ection with professional	fundraising activities?	<b>┌ Yes  ┌ !</b>
or key employees lis  b If "Yes," list the ten	ted in Form 990, Part VI	II) or entity in conne or entities (fundrais ganization Form 99	ection with professional ers) pursuant to agreem	fundraising activities? ents under which the fur	ndraiser is
or key employees lis  b If "Yes," list the ten	ted in Form 990, Part VI	(iii) or entity in connerganization Form 99  (iii) Did fundraiser have custody or control of contributions?	ection with professional ers) pursuant to agreem	fundraising activities? ents under which the fur	ndraiser is
or key employees lis  b If "Yes," list the ten to be compensated a  (i) Name of individua	ted in Form 990, Part VI nighest paid individuals t least \$5,000 by the or	(iii) Did fundraiser have custody or control of	ection with professional ers) pursuant to agreem 0-EZ filers are not requ (iv) Gross receipts	fundraising activities? ents under which the fur ired to complete this tab  (v) A mount paid to  (or retained by) fundraiser listed in	ndraiser is  ple  (vi) A mount paid to  (or retained by)

AL,AK,AZ,AR,CA,CO,CT,DE,FL,GA,HI,ID,IL,IN,IA,KS,KY,LA,ME,MD,MA,MI,MN,MS,MO,MT,NE,NV,NH,NJ,NM,NY,NC,ND,OH,OK,OR,PA,RI,

 ${\tt SC,SD,TN,TX,UT,VT,VA,WA,WV,WI,WY}$ 

Pa	<b>Part II</b> Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.							ted
			(a) Event #1	(b) Event #2	(c) O ther Events (total number)	( <b>d)</b> To	otal Eve ol <b>(a)</b> th ol <b>(c)</b> )	
Revenue	1 2 3	Gross receipts  Less Charitable contributions  Gross income (line 1 minus line 2)	(event type)		(total number)			
	4	Cash prizes						
Ses	5 6	Non-cash prizes				+		
Expenses	7	Food and beverages						
Direct B	8	Entertainment						
ឨ	9	Other direct expenses .				<u> </u>		
	10 11	Direct expense summary Add line Net income summary Combine lii			<b>.</b> 			
Par	t III		ganızatıon answered		irt IV, line 19, or repo	rted mo	re thar	1
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(Add co	otal gam I <b>(a)</b> th ol <b>(c)</b> )	
	1 (	Gross revenue						
Ses	2 (	Cash prizes				<u> </u>		
Expenses	s 1	Non-cash prizes				<u> </u>		
Direct E	4 F	Rent/facility costs						
<u></u>	5 (	Other direct expenses						
	6 \	Volunteer labor	∀es	│	Г Yes			
		Direct expense summary Add lines			<b>.</b>			
	8	Net gaming income summary Com	bine lines 1, column d, a	ind line 7	<u> <del>.</del> .</u>		Yes	No
9 a	Is th	er the state(s) in which the organiza ne organization licensed to operate				· 9a		
b		lo," Explain				_		
10a b		e any of the organization's gaming l es," Explain	ıcenses revoked, suspe	nded or terminated during	the tax year?	10a	3	
11		s the organization operate gaming a					.   _	
12		ne organization a grantor, beneficia ied to administer charitable gaming				.   .,		

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name 🟲		
	Address -		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
	revenue?	,	
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the	+	
	amount of gaming revenue retained by the third party 🟲 \$		
c	If "Yes," enter name and address		
	Name 🟲		
	Address •		
16			
16	Gaming manager information		
	Name 🟲		
	Name F		
	Gaming manager compensation 🕨 \$		
	Description of services provided -		
	Director/officer Employee Independent contractor		
	I Independent contractor		
<b>.7</b>	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	<u> </u>	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent		
	in the organization's own exempt activities during the tax year ▶ \$	1	

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DLN: 93493187002020 OMB No 1545-0047

**Grants and Other Assistance to Organizations, Governments and Individuals in the United States** 

Department of the Treasury Internal Revenue Service Name of the organization

Schedule I

(Form 990)

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990

Inspection Employer identification number

The ASCO Cancer Foundation						31-1667995	
Part I General Information	n on Grants and	d Assistance				•	
<ul> <li>Does the organization maintain r</li> <li>the selection criteria used to awa</li> <li>Describe in Part IV the organization</li> </ul>	ard the grants or as	sıstance?					▽ Yes
Form 990, Part IV, line Part IV and Schedule I	21 for any recip	nent that received n	nore than \$5,000. Ch	eck this box if no one	recipient receive	d more than \$5,000.	. Use
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
See Additional Data Table							

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	( <b>b)</b> Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Gianni Bonadonna Breast Cancer Award	1	10,000		check	
Merit Awards were given to oncology fellows who are first authors on abstracts selected for presentation at an ASCO scientific meeting Patient Advocate Scholarship were provided for advocates to attend the scientific and educational sessions at the ASCO Annual Meeting	157	198,150		check	
See Addıtıonal Data Table					

Part IV Supplem	ientai information: complete	this part to provide the information required in Part I, line 2, and any other additional information.
Ident if ier	Return Reference	Explanat ion
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 See Schedule F,Part I, Line 2 for description of procedure for monitoring the use of grant funds in the United States Merit Awards are to fund travel expense for oncologists to present their research at ASCO scientific meetings. These awards are not tracked

Software ID:

Software Version:

**EIN:** 31-1667995

Name: The ASCO Cancer Foundation

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Nebraska Cancer Specialists 8303 Dodge Street Suite 250 Omaha,NE 68114	47-0754790	501 (c)(3)	30,000				Community Oncology Research Grant
Billings Clinic2800 10th Ave N Billings, MT 59107	81-0231784	501 (c)(3)	30,000				Community Oncology Research Grant
Marion Shepard Cancer Center1209 Brown Street Washington, NC 27889	56-0675676	501 (c)(3)	30,000				Community Oncology Research Grant
Sloan-Kettering Institute for Cancer Research633 Third Ave 4th Floor New York, NY 10017	13-1924236	501 (c)(3)	150,000				Advanced Clinical Research Award, Year 3, Abstract from Dawn Hershman MD
H Lee Moffitt Cancer Center & Research Institute12902 Magnolia Drive Tampa,FL 33612	59-2451713	501 (c)(3)	150,000				Advanced Clinical Research Award, Year 3, Abstract from Eric Haura, MD
Vanderbilt University Medical Center3319 West End Avenue Suite 800 Nashville,TN 372036876	62-0476822	501 (c)(3)	150,000				Advanced Clinical Research Award, Year 3, Abstract from Pierre Massion, MD
Wayne State University Barbara Ann Karmanos Cancer Institute4201 Saint Antoine Suite 9D-UHC Detroit, MI 48201	38-6028429	501 (c)(3)	150,000				Advanced Clinical Research Award, Year 3, Abstract from David Gorski MD
Johns Hopkins University 550 North Broadway Suite 1003 Baltimore, MD 212052009	52-0591627	501 (c)(3)	150,000				Advanced Clinical Research Award, Year 2, Abstract from Mark Levis MD, PhD
University of TX MD Anderson Cancer CenterPO Box 4486 Houston, TX 772104486	74-6000203	501 (c)(3)	150,000				Advanced Clinical Research Award, Year2, Abstract from Lajos Pusztai, MD PhD
Regents of the University of Michigan3003 South State Stree Wolverine Tower Room 1054 Ann Arbor, MI 481091274	38-6006309	501 (c)(3)	150,000				Advanced Clinical Research Award, Year2, Abstract from Scott Scheutze MD, PhD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant valuation organization if applicable grant cash non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) Advanced Clinical Sloan-Kettering Institute for 13-1924236 501 (c)(3) Cancer Research633 Third Research Award, Year 150,000 Ave 4th Floor 1, Abstract from New York, NY 10017 Shanu Modi MD Advanced Clinical Sloan-Kettering Institute for 13-1924236 501 (c)(3) Cancer Research633 Third Research Award, Year 150,000 Ave 4th Floor 1, Abstract from Ingo New York, NY 10017 Mellinghoff MD Memorial Sloan-Kettering 13-1924236 501 (c)(3) Career Development Cancer CenterGeneral Post Award, Year 3, 66,667 Office Box 263633 Abstract from Ethan Third Avenue 4th Floor Baxch MD New York, NY 10017 74-6000203 University of TX MD 501 (c)(3) Career Development Anderson Cancer CenterPO Award, Year 3, 66,667 Box 4486 Abstract from Jan Houston, TX 772104486 Burger MD 13-5598093 501 (c)(3) Career Development Columbia University 177 Fort Award, Year 3, Washington Ave MHB6GN-66,667 435 Abstract from New York, NY 10032 Katherine Crew MD Dana-Farber Cancer 04-2263040 501 (c)(3) Career Development Institute44 Binney Street Award, Year 3, 66,667 BP431C Abstract from Michael Boston, MA 02115 Hassett MD MPH Dana-Farber Cancer 04-2263040 501 (c)(3) Career Development Institute44 Binney Street Award, Year 3, 66,667 BP431C Abstract from Eric Boston, MA 02115 Jacobsen MD Duke University Medical 56-0532129 501 (c)(3) Career Development Center220 West Main Street Award, Year 3, 66,667 Abstract from Jeffrey Durham, NC 27705 Peppercorn MD Dana-Farber Cancer 04-2263040 501 (c)(3) Career Development Institute44 Binney Street Award, Year 3, 66,667 BP431C Abstract from Noopur Boston, MA 02115 Raje MD Weill Medical College of 15-0532082 501 (c)(3) Career Development Cornell University 100 Award, Year 3, 66,667 Broadway 8th Floor Abstract from Jia Ruan New York, NY 10005

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (a) Description of (h) Purpose of grant organization if applicable arant cash valuation non-cash assistance or assistance or government assistance (book, FMV, appraisal, other) University of TX MD 74-6000203 501 (c)(3) Career Development Anderson Cancer CenterPO Award, Year 3, 66,667 Box 4486 Abstract from Anne Houston, TX 772104486 Tsao MD 04-2263040 Dana-Farber Cancer Institute 501 (c)(3) Career Development 44 Binney Street BP431C Award, Year 3, 66,667 Boston, MA 02115 Abstract from Nancy Lin MD University of TX MD 74-6000203 501 (c)(3) Career Development Anderson Cancer CenterPO Award, Year 3, 66.667 Box 4486 Abstract from Houston, TX 772104486 Apostolia M Tsimberidou MD Dana-Farber Cancer Institute 04-2263040 501 (c)(3) Career Development 44 Binney Street BP431C Award, Year 2, 66.667 Boston, MA 02115 Abstract from Gregory AbelMD 62-0646012 Career Development St Jude Children's Research 501 (c)(3) Hospital332 North Award, Year 2. 66,666 Lauderdale Abstract from Gregory Memphis, TN 381052794 Armstrong MD Johns Hopkins University 550 52-0591627 501 (c)(3) Career Development North Broadway Suite 1003 Award, Year 2, 66,666 Baltimore, MD 212052009 Abstract from Dung Lee MD University of TX MD 74-6000203 501 (c)(3) Career Development Anderson Cancer CenterPO Award, Year 2, 66,666 Box 4486 Abstract from Guatam Houston, TX 772104486 Borthakur MD 74-6000203 University of TX MD 501 (c)(3) Career Development Anderson Cancer CenterPO Award, Year 2, 66,666 Box 4486 Abstract from George Houston, TX 772104486 Chang MD University of TX MD 74-6000203 501 (c)(3) Career Development Anderson Cancer CenterPO Award, Year 2, 66,666 Box 4486 Abstract from John De Houston, TX 772104486 Groot MD 74-6000203 501 (c)(3) University of TX MD Career Development Anderson Cancer CenterPO Award, Year 2, 66,666 Box 4486 Abstract from Bryan Houston, TX 772104486 Hennessy MD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (c) IRC Code section (a) Name and address of **(b)** EIN (d) A mount of cash (e) A mount of non-(f) Method of (a) Description of (h) Purpose of grant ıf applıcable organization grant cash valuation non-cash assistance or assistance or government assistance (book, FMV, appraisal, other) 43-0653611 501 (c)(3) Career Development Washington University Campus Box 1034 Award, Year 2, 66,666 St Louis, MO 631121408 Abstract from Cynthia MaMD 36-2177139 Career Development University of Chicago 5801 501 (c)(3) South Ellis Avenue Award, Year 2, 66.666 Chicago, IL 60637 Abstract from Blase Polite MD 74-6000203 Career Development University of TX MD 501 (c)(3) Anderson Cancer CenterPO Award, Year 2, 66,666 Box 4486 Abstract from Scott Houston, TX 772104486 Kopetz MD Cedars Sinai Medical Center 95-1644600 501 (c)(3) Career Development 8700 Wilshire Blvd 1150 Award, Year 2, 66,666 Los Angeles, CA 90048 Abstract received from Christine Walsh MD Fox Chase Cancer Center 23-2003072 501 (c)(3) Career Development 333 Cottman Avenue Award, Year 2, 66,666 Philadelphia, PA 19111 Abstract received from Yu-ning Wong MD Ohio State University 31-6401599 501 (c)(3) Career Development Research Foundation 1960 Award, Year 1, 66,666 Kenny Road Abstract received from Columbus, OH 43210 Don Benson MD, PhD 52-0591627 Johns Hopkins University 550 501 (c)(3) Career Development Award, Year 1, North Broadway Suite 1003 66,666 Baltimore, MD 212052009 A bstract received from Jaishri Blakeley MD Beth Israel Deaconess 13-5564934 501 (c)(3) Career Development Medical Center330 Brookline Award, Year 1, 66,666 Abstract received from Ave BR-259 Boston, MA 02115 Daniel Cho MD UT Southwestern Medical 501 (c)(3) Career Development Center at Dallas PO Box Award, Year 1, 66,666 841753 Abstract received from Dallas, TX 752841753 David Gerber MD 13-1924236 501 (c)(3) Sloan-Kettering Institute for Career Development Cancer Research633 Third Award, Year 1, 66,666 Ave 4th Floor A bstract received from New York, NY 10017 Rebecca Leboeuf MD

Form 990,Schedule I, Part	t II, Grants an	d Other Assistance	e to Governments	and Organization	s in the United Sta	tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Children's Research Institute 111 Michigan Ave NW 5400 Washington, DC 200102970	52-1654453	501 (c)(3)	66,666				Career Development Award, Year 1, Abstract received from Holly Meany MD
University of Pittsburgh139 University Place Pittsburgh, PA 152602600	25-0965591	501 (c)(3)	66,666				Career Development Award, Year 1, Abstract received from Deric Park MD
Thomas Jefferson University Hospital201 South 11th Street 303 Martin Bldg Philadelphia, PA 19107	23-2829095	501 (c)(3)	66,666				Career Development Award, Year 1, Abstract from Margaret Kasner MD
Massachusetts General HospitalPO Box 414876 Boston, MA 02241	04-1564655	501 (c)(3)	66,666				Career Development Award, Year 1, Abstract from Richard Lee MD
University of California Los Angeles11000 Kinross Avenue 102 Los Angeles, CA 900951406	95-6006143	501 (c)(3)	66,666				Career Development Award, Year 1, Abstract from Mary Sehl MD
Dana-Farber Cancer Institute 44 Binney Street BP431C Boston, MA 02115	04-4263040	501 (c)(3)	66,666				Career Development A ward, Year 1, A bstract from Brian Wolpin MD
Beth Israel Deaconess Medical Center330 Brookline Ave BR-259 Boston, MA 02115	13-5564934	501 (c)(3)	66,666				Career Development Award, Year 1, Abstract from Daniel Costa MD
University of Pennsylvania 3451 Walnut Street Philadelphia, PA 19104	23-1352685	501 (c)(3)	150,000				Young Investigator A ward, A bstract received from Sarah A dams MD, Gregory Beatty MD, Stephen Keefe MD
University of California Los Angeles11000 Kinross Avenue 102 Los Angeles, CA 900951406	95-6006143	501 (c)(3)	50,000				Young Investigator Award, Abstract received from David Andorsky MD,
Johns Hopkins University550 North Broadway Suite 1003 BAltimore, MD 212052009	52-0591627	501 (c)(3)	200,000				Young Investigator Award, Abstract received from E Antonarakis MD, Michaela Higgins MD, Christian Meyer MD, Margaret Showel MD,

Form 990,Schedule I, Par	t II, Grants an	d Other Assistance	to Governments	and Organization	s in the United Sta	tes	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of TX MD Anderson Cancer CenterPO Box 4486 Houston, TX 772104486	74-6000203	501 (c)(3)	200,000				Young Investigator Award, Abstract from Tiffany Avery MD, Wei Lin MD, William William Jr MD, Scott Woodman MD
Massachusetts General HospitalPO Box 414876 Boston, MA 02241	04-1564655	501 (c)(3)	100,000				Young Investigator Award, Abstract from David Barbie MD,Shrikanta Chattopadhyay MBBS,
Baylor College of Medicine One Baylor Plaza BCM 206 Houston, TX 77030	74-1613878	501 (c)(3)	100,000				Young Investigator Award, Abstract from Patricia Baxtor MD, Nino Rainusso MD
Children's Hospital of Orange County455 South Main Street Orange,CA 92868	95-6097416	501 (c)(3)	50,000				Young Investigator Award, Abstract from David Buchbinder MD
Sloan-Kettering Institute for Cancer Research633 Third Ave 4th Floor New York, NY 10017	13-1924236	501 (c)(3)	400,000				Young Investigator Award, Abstract from Kristen O'Dwyer, Mark Dickson MD, Darren Feldman MD, Yelena Janjigian MD, Nicholas Mitsiades MD, Alexei Morozov MD, Jonathan Schatz MD, Sohail Tavazoie MD
University of Chicago5801 South Ellis Avenue Chicago, IL 60637	36-2177139	501 (c)(3)	150,000				Young Investigator A ward, A bstract received from Daniel Catenacci MD, Peter O'Donnell MD, Mandira Ray MD
Stanford UniversityPO Box 44253 San Francisco, CA 94144	94-1156365	501 (c)(3)	200,000				Young Investigator Award, Abstract from Russell Pachynski MD, Lauren Harshman MD, Daniel Pollyea MD, Melinda Telli MD
Fred Hutchinson Cancer Research Center1100 Fairview Ave North Seattle, WA 98109	23-7156071	501 (c)(3)	100,000				Young Investigator Award, Abstract received from Jeffrey Chou MD, Phoenix Ho MD, Slyvia Lee MD
Oregon Health & Science University2525 SW 1st Ave 220 Portland,OR 97201	23-7083114	501 (c)(3)	50,000				Young Investigator Award, Abstract from Patrick Gagnon MD
St Jude Children's Research Hospital332 North Lauderdale Memphis, TN 381052794	62-0646012	501 (c)(3)	50,000				Young Investigator A ward, A bstract received from Salil Goorhamd MD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (c) IRC Code section (a) Name and address of **(b)** EIN (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable grant cash valuation non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) 84-6000555 501 (c)(3) University of Colorado Young Investigator DenverPO Box 238 Award, Abstract from 50,000 Denver, CO 80291 Peter Kabos MD University of Pittsburgh139 25-0965591 501 (c)(3) Young Investigator University Place Award, Abstract 50,000 Pittsburgh, PA 152602600 received from Patricia Kropf M D Thomas Jefferson University 23-2829095 501 (c)(3) Young Investigator Hospital201 South 11th Award, Abstract 50,000 Street 303 Martin received from Richard Blda Lawrence MD Philadelphia, PA 19107 34-1018992 501 (c)(3) Case Western Reserve Young Investigator University10900 Euclid Ave Award, Abstract from 50,000 Cleveland, OH 441064919 Rom Leidner MD 13-5564934 501 (c)(3) Beth Israel Hospital 160 Young Investigator Waters Street 24th Fl Award, Abstract from 50,000 New York, NY 10038 Benjamin Levy MD Weill Medical College of 15-0532082 501 (c)(3) Young Investigator Cornell University100 Award, Abstract from 50,000 Broadway 8th Floor Peter Martin MD New York, NY 10005 501 (c)(3) Children's Hospital of 23-1352166 Young Investigator PhiladelphiaPO Box 822350 Award, Abstract from 50,000 Philadelphia, PA 19182 Robin Perry MD Vanderbilt University Medical 62-0476822 501 (c)(3) Young Investigator CenterDept AT 40303 Award, Abstract from 50,000 Atlanta, GA 40303 Brent Rexer MD 501 (c)(3) Northwestern University 750 36-2167817 Young Investigator N Lake Shore Dr Award, Abstract from 50,000 Chicago, IL 60611 Veena Shankaran MD 501 (c)(3) Dana-Farber Cancer Institute 04-2263040 Young Investigator Award, Abstract from 44 Binney Street BP431C 100,000 Boston, MA 02115 Elizabeth T Loggers MD, Alexi Wright MD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Indiana University620 Union Drive Indianapolis,IN 46202	35-6001673	501 (c)(3)	50,000				Young Investigator Award, Abstract from Matthew Strother MD		
Washington University700 Rosedale Avenue St Louis, MO 631121408	43-0653611	501 (c)(3)	50,000				Young Investigator Award, Abstract from Giridharan Ramsingh MD		
Regents of the University of California333 California St San Francisco, CA 94118	94-6036493	501 (c)(3)	50,000				Young Investigator Award, Abstract from Jennifer Schutzman MD		
University of Chicago5801 South Ellis Avenue Chicago, IL 60637	36-2177139	501 (c)(3)	100,000				Translational Professorship Award, Year 2, Abstract from Everett Vokes MD		
Dana-Farber Cancer Institute 44 Binney Street BP431C Boston, MA 02115	04-2263040	501 (c)(3)	100,000				Translational Professorship Award, Year 2, Abstract from Bruce Johnson MD		
Sloan-Kettering Institute for Cancer Research633 Third Ave 4th Floor New York, NY 10017	13-1924236	501 (c)(3)	100,000				Translational Professorship Award, Year 1, Abstract from Merrill J Egorin MD		

DLN: 93493187002020

**Employer identification number** 

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

**Compensation Information** For certain Officers, Directors, Trustees, Key Employees, and Highest

**Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

rne	ASCO Cancer Foundation	31-1667995			
Pa	rt I Questions Regarding Compensation	<u> </u>			
				Yes	Νo
1a	Check the appropriate box(es) if the organization provid 990, Part VII, Section A, line 1a Complete Part III to				
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organ reimbursement orprovision of all the expenses describe		1b		
2	Did the organization require substantiation prior to reim officers, directors, trustees, and the CEO/Executive Di		2		
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all that				
	Independent compensation consultant	Compensation survey or study			
	Form 990 of other organizations	Approval by the board or compensation committee			
	, Tomasso or other organizations	, Approval by the board of compensation committee			
4	During the year, did any person listed in Form 990, Par or a related organization	t VII, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control pay	ment?	4a		Νο
b	Participate in, or receive payment from, a supplemental	nonqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-base	d compensation arrangement?	4c		Νο
	If "Yes" to any of lines 4a-c, list the persons and provide	de the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must	complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line compensation contingent on the revenues of	a 1a, did the organization pay or accrue any			
а	The organization?		5a		Νo
b	Any related organization?		5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in form 990, Part VII, Section A, line compensation contingent on the net earnings of	1a, did the organization pay or accrue any			
а	The organization?		6a		Νo
b	Any related organization?		6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A, lin payments not described in lines 5 and 6? If "Yes," described in lines 5 and 6.		7		No
8	Were any amounts reported in Form 990, Part VII, paid subject to the initial contract exception described in Re in Part III		8		No
9	If "Yes" to line 8, did the organization also follow the re	buttable presumption procedure described in Regulations			""

section 53 4958-6(c)?

### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Allen Lichter MD CEO	(1) (11)	594,256	159,807	60,000		19,203	833,266	
Dina Michels Esq	(1) (11)	448,603				35,323	483,926	
Paul Aines CPA	(1) (11)	257,945	8,500			33,873	300,318	
Nancy Daly Exec Dir	(ı) (ıı)	185,121	10,600			28,348	224,069	

### Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

if ie	er Return Reference	Explanation
if ie	Reference	Explanat ion

Schedule J (Form 990) 2009

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## **SCHEDULE 0** (Form 990)

Department of the Treasury Internal Revenue Service

**Supplemental Information to Form 990** 

OMB No 1545-0047

Inspection

Name of the organization The ASCO Cancer Foundation

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. ► Attach to Form 990.

Employer identification number

31-1667995

		31-1667995
ldentifier	Return Reference	Explanation
Form 990, Part III, line 2	New Program Services	The ASCO Diversity in Oncology Initiative, funded by Susan G. Komen for the Cure, was effectively launched in 2009 and is designed to facilitate the recruitment and retention of individuals from populations underrepresented in medicine to cancer careers, with particular attention to the development of clinical practitioners and investigators. Beginning this year, three programs will be offered for individuals interested or currently practicing in the oncology field. Loan Repayment Program Medical Student Rotation Resident Travel Award Although a number of programs exist to recruit individuals underrepresented in medicine, few of these programs focus specifically on recruitment to clinical oncology. Ultimately, it is hoped that increasing diversity in the clinical oncology profession will lead to increased and improved cancer care for underserved populations as well as increased research on health disparities. The Diversity in Oncology Initiative is part of the Susan G. Komen for the Cure/ASCO Quality of Care Initiative, which is designed to support specific projects addressing quality cancer care issues, including cancer workforce, access to care, disparities, clinical trials, and survivorship, with general applicability to breast cancer
Form 990, Part IV, Line 24 Tax Exempt Bond Issue		TACF did not have a tax exempt bond issue in 2009, but TACF guaranteed the interest rate swap and financing as part of ASCO's obligation for financing new headquarters
Form 990, Part VII, Section A		Nancy Daly is an employee of ASCO and served as the Executive Director of The ASCO Cancer Foundation Allen Lichter MD is an employee of ASCO and served as the Chief Executive Officer for TACF and served as the Chief Executive Officer of ASCO Paul Aines is an employee of ASCO and served as the Chief Financial Officer of TACF and served as the Chief Financial Officer of ASCO Dina Michels is an employee of ASCO and served as the General Counsel of TACF and served as the Vice President & General Counsel of ASCO and the Secretary of ASCO
Form 990, Part VI, Section A, line 1		As of December 31, 2009, the Board of Directors of TACF included 12 directors with voting rights and one director without voting rights. Twelve directors with voting rights were appointed by the Board of Directors of the American Society of Clinical Oncology, Inc. (ASCO) a non-profit, 501(c)(3) tax exempt organization. There were two ex officio directors the Chief Executive Officer (with voting rights) and the Executive Director (without voting rights). All voting members of the Board of Directors have the same voting rights. Consistent with TACF's Bylaws, during the reported tax year, the Board of Directors delegated authority to the Executive Committee of the Board of Directors. The Executive Committee is composed of the Chair, CEO, Secretary, Treasurer, and a fifth At-Large Executive Committee Member elected by the Directors. All Executive Committee members are members of TACF's Board of Directors. The scope of the Executive Committee's authority is established by TACF's Bylaws, which provide that except to the extent specifically prohibited by resolution of the Board of Directors or otherwise prohibited by Virginia law, the Executive Committee of the Board is empowered to make and implement decisions between Board Meetings and it may act on items requiring action prior to the next announced Board Meeting. Actions of the Executive Committee are reported to the Board of Directors at the meeting of the Board of Directors immediately following the action taken by the Executive Committee, consistent with TACF's Bylaws. Form.990, Part VI, Line 1b (and Part I, Line 4). Two members of TACF's Board of Directors do not meet the definitional test of an independent member of TACF's governing body. Allen Lichter, M.D. is an ex-officio, voting member of TACF's Board of Directors who serves as the CEO of TACF and the CEO of ASCO (a related organization of TACF). He is an employee of ASCO and received compensation from ASCO. Joseph Bailes, M.D. is the Chair of the TACF Board of Directors and is a voting member of TACF's Bo
Form 990, Part VI, Section A, line 7a		TACF does not have members. Directors of TACF are appointed and subject to removal by the Board of Directors of ASCO, except for directors serving ex-officio
Form 990, Part VI, Section A, line 7b		The Board of Directors of TACF may vote to amend or repeal the Bylaw's of TACF, but the Board of Directors of ASCO must approve an amendment or repeal of the Bylaw's to be effective
Form 990, Part VI, Section B, line 11		An electronic copy of TACF's Form 990 was e-mailed to each member of the Board of Directors before it was filed A copy of the Form 990 was discussed at a meeting of the Finance Committee of the Board of TACF. A copy of the Form 990 was discussed at a meeting of the Board of Directors of TACF. The Form 990 was reviewed by the Chief Financial Officer, the Chief Executive Officer, the Executive Director, and the General Counsel prior to filing
Form 990, Part VI, Section B, Iine 12c		The ASCO Cancer Foundation (TACF) maintains a number of written conflict of interest policies and standards regarding the disclosure and management of conflicts of interest. These policies and standards cover all TACF staff, directors, officers, committee members, and any person in a relationship with these individuals involving the sharing of income or assets (e.g., spouse, dependent children). Under TACF's policies, covered individuals are asked to disclose financial interests in or other relationships with entities that have relevant commercial interests, including employment or leadership positions, consultant or advisory roles, stock ownership, honoraria, research funding, and service as an expert witness. Completion of a disclosure form is required at the initiation of service, and updated annually thereafter or when any material changes occur. TACF's conflict of interest policies are intended to help guide the management of actual, potential, and perceived conflicts of interest through disclosure of financial interests or other relationships. Where the nature and extent of a financial relationship suggest disclosure is not adequate to manage a real or potential conflict, covered individuals are required to recuse themselves from decision making. Recusal may be self-selected, or may be requested by the committee chair, officer, or executive-level staff members. In addition, when TACF is contemplating entering into a transaction or arrangement that might benefit the private interest of any "interested person" (i.e., a TACF director, principal officer, or member of a committee with Board delegated powers who has a direct or indirect financial interest in the transaction), it must follow a specific procedure to manage the conflict, including considering alternative transactions that would not give rise to a conflict of interest.
ldentifier	Returr	Explanation

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		The following employees of ASCO serve as officers of TACF information regarding their compensation and the process for determining their compensation are described in the IRS Form 990 of ASCO CEO of TACF (also serves as CEO of ASCO) Executive Director of TACF CFO of TACF (also serves as CFO of ASCO) General Counsel of TACF (also serves as VP/General Counsel of ASCO) TACF staff are employees of ASCO who are leased to TACF Applicable information regarding their compensation is described in the IRS Form 990 of ASCO

Form 990, Part VI, Section C, line 19 TACF's governing documents are available to the public from TACF upon request TACF's Articles of Incorporation are also available to the public through the Virginia State Corporation Commission. The Annual Report of TACF is posted on TACF's website and is available to the public from TACF upon request. Form 990, Part IV, Line 12 Audited Financial Statements. TACF did not prepare a stand-alone financial statement, however, TACF did prepare a consolidated financial statement with ASCO, its related organization. This return was prepared in accordance with GAAP, GAAS and was independently audited. Form 990, Part XI, Line 2c Committee Oversight of the Audit. TACF has a committee that assumes responsibility for oversight of the audit of its financial statements and selection of an independent audit firm. This process has not changed from the previous Form 990, Schedule A, Part II, Section C, Line 15 Amending Public Support Percentage for 2008 The excess contribution calculation was not included in the preparation of the 2008 return. This created an overstated public support percentage of 98.15 instead of the correct percentage of 52.04 Schedule G, Part I, Line 2b, Column (v) Explanation of Fundraising Payments Payments made to Graham Pelton Consulting were for fundraising guidance on best practice methods of effective and efficient fundraising Form 990, Part IV, Line 27 During 2009, institutions of the following ASCO Board members received grant payments from The ASCO Cancer Foundation for grants awarded to them in 2008 by TACF -- The University of Chicago, a 501(c)(3) organization, received \$100,000 from TACF, representing the 2nd year grant payment for a Translational Research Professorship awarded to the University of Chicago in 2008 for the grant application submitted by Everett Vokes MD --The Dana-Farber Cancer Institute, a 501(c)(3) organization, received \$100,000 from TACF, representing the 2nd year grant payment for a Translational Research Professorship awarded to the Dana-Farber Cancer Institute in 2008 for the grant application submitted by Bruce E. Johnson, MD. Neither Dr. Vokes nor Dr. Johnson were ASCO Board members at the time their grant applications were reviewed and selected through the independent, peer-review grant review process of TACF. As grant recipients, the institutions of Dr. Vokes and Dr. Johnson For Paperwork Reduction Act Notice, see the Instructions for Form 990 Cat No 51056K Schedule O (Form 990) 2009

are subject to all standard requirements of TACF grantees

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DLN: 93493187002020

SCHEDULE R (Form 990)

# **Related Organizations and Unrelated Partnerships**

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

2009

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Part I

Name of the organization
The ASCO Cancer Foundation

31-1667995

Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a)
Name, address, and EIN of disregarded entity

**(b)** Primary activity (c)
Legal domicile (state
or foreign country)

(d) Total income (e) End-of-year assets (f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a)
Name, address, and EIN of related organization

(b) Primary activity (c) Legal domicile (state or foreign country) (d) Exempt Code section

Public charity status (if section 501(c)(3)) (f) Direct controlling entity

American Society of Clinical Oncology Inc

2318 Mill Road 800

Alexandria, VA 22314 13-6180380 Supports cancer research, education and quality improvement programs

NY

501(c)(3)

Line 9

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990,	, Part IV,	, line 34
	because it had one or more related organizations treated as a partnership during the tax year.)		

(a) Name, address, and EIN of related organization **(b)** Primary activity (c)
Legal
domicile
(state or
foreign
country)

(d) Direct controlling entity (e)
Predominant income
(related, unrelated,
excluded from tax
under sections 512514)

**(f)** Share of total income (g) Share of end-of-year assets (h)
Disproprtionate
allocations?

(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (j) General or managing partner?

Yes No

Yes No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a)
Name, address, and EIN of related organization

(b) Primary activity (c) Legal domicile (state or foreign country) (d) Direct controlling entity (e)
Type of entity
(C corp, S corp,
or trust)

**(f)** Share of total income

(g) Share of end-of-year assets (h) Percentage ownership

(3)

(4)

(5)

(6)

Sched	ule R (Form 990) 2009		Рa	ge <b>3</b>
Par	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)			
	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
<b>1</b> Du	ring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to other organization(s)	1b	Yes	
c	Gift, grant, or capital contribution from other organization(s)	1c	Yes	
d	Loans or loan guarantees to or for other organization(s)	1d	Yes	
e	Loans or loan guarantees by other organization(s)	1e		No
f	Sale of assets to other organization(s)	1f		No
g	Purchase of assets from other organization(s)	<b>1</b> g		No
h	Exchange of assets	1h		No
i	Lease of facilities, equipment, or other assets to other organization(s)	1i		No
i	Lease of facilities, equipment, or other assets from other organization(s)	1j	Yes	
k	Performance of services or membership or fundraising solicitations for other organization(s)	<u> </u>	Yes	
	Performance of services or membership or fundraising solicitations by other organization(s)	11		No
	Sharing of facilities, equipment, mailing lists, or other assets	1m		No
	Sharing of paid employees		Yes	
	Sharing of paid employees			
0	Reimbursement paid to other organization for expenses	10	Yes	
p	Reimbursement paid by other organization for expenses	<b>1</b> p	Yes	
q	O ther transfer of cash or property to other organization(s)	1q		No
-	Other transfer of cash or property from other organization(s)	1r		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction three	sholds		
	(a) (b) Transaction Name of other organization type(a-r)	Amouni	(c) t involv	ed
(1) Se [2)	e Addıtıonal Data Table			

Schedule R (Form 990) 2009

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a)
Name, address, and EIN of entity

(b) Primary activity (c) Legal domicile (state or foreign country) (d)
Are all
partners
section
501(c)(3)
organizations?

Yes No

(e) Share of end-of-year assets **(f)**Disproprtionate allocations?

No

Yes

(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (h) General or managing partner?

Yes No

Software ID: Software Version:

**EIN:** 31-1667995

Name: The ASCO Cancer Foundation

Form 990, Schedule R, Part V - Transact	tions With Related Organizations

	(a) Name of other organization	<b>(b)</b> Transaction type(a-r)	<b>(c)</b> A mount Involved (\$)
(1)	American Society of Clinical Oncology Inc (ASCO)	В	13,709,472
(2)	ASCO	С	725,141
(3)	ASCO	D	64,715,398
(4)	ASCO	К	2,091,107
(5)	ASCO	N	2,091,107
(6)	ASCO	J	203,936
(7)	ASCO	0	16,131,223
(8)	ASCO	Р	1,486,196

### **Additional Data**

Software ID:

**Software Version:** 

**EIN:** 31-1667995

Name: The ASCO Cancer Foundation

### Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Bad debt	150,501	150,501		
Printing & Distribution	107,752	9,528	3,214	95,010
Bank & Credit Card Fees	67,322		67,322	
Dues & Subscriptions	32,795	536	18,813	13,446
Postage	25,387	5,808	1,000	18,579