efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493041002181

Form 990

Department of the Treasury
Internal Revenue Service

# Return of Organization Exempt From Income Tax

**Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)**

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

OMB No 1545-0047

2009

**Open to Public Inspection**

**A For the 2009 calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010**

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
American Lung Association

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
14 Wall Street No 8C

City or town, state or country, and ZIP + 4
New York, NY 10005

**D Employer identification number**
13-1632524

**E Telephone number**
(212) 315-8700

G Gross receipts $ 58,580,179

F Name and address of principal officer
ADRIENNE GLASGOW
14 Wall Street No 8C
New York, NY 10005

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) **Are all affiliates included?** ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number

I Tax-exempt status ☑ 501(c) ( 3 ) (insert no ) ☐ 4947(a)(1) or ☐ 527

J **Website:** www lungusa org

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation 1918

M State of legal domicile ME

## Part I Summary

**Activities & Governance**

1 Briefly describe the organization's mission or most significant activities
THE MISSION OF THE AMERICAN LUNG ASSOCIATION IS TO SAVE LIVES BY IMPROVING LUNG HEALTH AND PREVENTING LUNG DISEASE

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

| | | | |
|---|---|---|---|
| 3 | Number of voting members of the governing body (Part VI, line 1a) | 3 | 24 |
| 4 | Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 24 |
| 5 | Total number of employees (Part V, line 2a) | 5 | 114 |
| 6 | Total number of volunteers (estimate if necessary) | 6 | 335,000 |
| 7a | Total gross unrelated business revenue from Part VIII, column (C), line 12 | 7a | 0 |
| b | Net unrelated business taxable income from Form 990-T, line 34 | 7b | 0 |

| | | | Prior Year | Current Year |
|---|---|---|---|---|
| Revenue | 8 | Contributions and grants (Part VIII, line 1h) | 49,063,592 | 18,197,281 |
| | 9 | Program service revenue (Part VIII, line 2g) | | 27,977,401 |
| | 10 | Investment income (Part VIII, column (A), lines 3, 4, and 7d ) | -1,483,663 | 851,200 |
| | 11 | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 215,419 | 747,614 |
| | 12 | Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 47,795,348 | 47,773,496 |
| Expenses | 13 | Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) | 6,358,649 | 5,848,208 |
| | 14 | Benefits paid to or for members (Part IX, column (A), line 4) | | 0 |
| | 15 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) | 8,995,365 | 8,388,484 |
| | 16a | Professional fundraising fees (Part IX, column (A), line 11e) | | 0 |
| | b | Total fundraising expenses (Part IX, column (D), line 25) 690,188 | | |
| | 17 | Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f) | 36,517,884 | 33,314,059 |
| | 18 | Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) | 51,871,898 | 47,550,751 |
| | 19 | Revenue less expenses Subtract line 18 from line 12 | -4,076,550 | 222,745 |
| Net Assets or Fund Balances | | | Beginning of Current Year | End of Year |
| | 20 | Total assets (Part X, line 16) | 27,777,434 | 28,345,476 |
| | 21 | Total liabilities (Part X, line 26) | 20,087,201 | 20,687,576 |
| | 22 | Net assets or fund balances Subtract line 21 from line 20 | 7,690,233 | 7,657,900 |

## Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

**Sign Here**

****** | 2011-02-10
Signature of officer | Date

ADRIENNE GLASGOW CFO
Type or print name and title

**Paid Preparer's Use Only**

Preparer's signature | Date | Check if self-employed ☐ | Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4: O'Connor Davies Munns & Dobbins LLP
60 East 42nd Street 36th Fl
New York, NY 101653698

EIN

Phone no (212) 286-2600

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

## Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

The American Lung Association's mission is to save lives by improving lung health and preventing lung disease, with the ultimate vision of a world free of lung disease The National Headquarters of the American Lung Association fights lung disease through its own activities and by servicing, supporting, and leading its local Lung Associations Among its varied responsibilities, the National Headquarters *Funds research into the causes, prevention, and cures of lung disease *Advocates at the national level for policies that protect lung health, including fighting for healthy air *Provides a broad array of health educational programs and services to support smoking cessation, help prevent lung disease and to assist people with lung disease in better managing their condition *Supports local Lung Associations' implementation of health educational programs and dissemination of educational material [SEE CONTINUATION OF MISSION STATEMENT ON PAGE 57 OF THE RETURN ON SCHEDULE O]

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . . . . . . . . . . . . . . . . ☐ Yes ☑ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . . . . . . . . . . . . . . . . . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

**4a** (Code ) (Expenses $ 17,783,216 including grants of $ 497,897 ) (Revenue $ 13,988,701 )

PUBLIC HEALTH EDUCATIONEvery year, the American Lung Association helps people manage their lung disease, overcome their nicotine addiction, and live healthier lives The two key components of the National Headquarters' work are supporting our network of local Lung Associations and developing lung health education materials for the public Local Lung Associations rely on us to develop health programs and provide expert training, guidance and materials to support their mission outreach We are also a trusted resource where the public can find information on myriad lung diseases, make treatment decisions, and get support and tools to manage their conditions or care for a loved one This past year we provided a wide array of services to help prevent and treat lung disease In 2009-10 we substantially advanced this mission, touching lives from coast to coast Lung Disease Connected Patient and Families with Expert Advice - In all of our programs and health education materials, people with questions about lung health are referred to the American Lung Association's Lung HelpLine at 1-800-LUNG-USA In 2010, the nurses and respiratory therapists who staff the Lung HelpLine answered almost 100,000 calls on topics ranging from clean air to helping a family member quit smoking Matched Lung Cancer Patients with Help - The Lung Cancer Clinical Trials Matching Service is specifically designed for lung cancer patients and their families and is being conducted in collaboration with twelve lung cancer advocacy organizations This service provides personalized education and helps to identify clinical trial options based on a person's specific diagnosis, stage and treatment history Each person is also assigned a specially trained Clinical Trials Navigator who serves as a guide though the process Provided Easy Way to Assist Lung Disease Patients -The American Lung Association provides "My Fighting for Air Community" (http //lungusa lotsahelpinghands com/caregiving/home/), a free and easy way for people with lung disease and their families to receive support from those that care about them Users can create private, secure web pages to post updates on medical matters and other aspects of their lives They can also use a "care coordination calendar" to post a list of items for which they need help, like transportation, meals or household chores Friends and family members can then sign up to assist the patient with those tasks Highlighted Disparities in Lung Health -This year, we introduced a new series of reports that spotlight groups disproportionately affected by lung disease in our society Too Many Cases, Too Many Deaths focused on the elevated rate of lung cancer in the African American population Smoking Out a Deadly Threat, our lung disparity report investigated the possible causes of and solutions to the high rate of tobacco use in lesbian, gay, bisexual and transgender (LGBT) communities Tobacco Helped Thousands of Smokers to Quit - The American Lung Association's "Freedom From Smoking(R)" and "Not-On-Tobacco(R)" (N-O-T) have helped hundreds of thousands of teen and adult smokers quit Each program guides the smokers through the quitting process, helping them to determine their smoking pattern, create an individualized quit plan and navigate the first few weeks as a nonsmoker In FY2010, the two programs helped around 25,000 smokers end their addiction to nicotine and transition to a new, smokefree lifestyle Extended Our Online Reach - We unveiled a "Freedom From Smoking(R)" Online in October 2009 The updated site features expanded social networking capabilities, downloadable relaxation exercises and improved navigation It also provides members with a space to blog about their experiences, ask questions, and give support to one another as they go through the process of quitting smoking The site includes resources for pregnant and postpartum women

**4b** (Code ) (Expenses $ 11,308,857 including grants of $ 0 ) (Revenue $ 10,071,864 )

FIELD FUNDRAISINGThe American Lung Association's Planned Giving team focuses its work on assisting with field development by providing support to the ALA chartered regional associations This support includes training local staff to be effective planned giving fundraisers, helping develop annual regional work plans, being informed on local follow up activities pertaining to requests from donors for planned giving information, reviewing quarterly reports on planned giving income and bequest notifications, sending reports to regional CEOs on the planned giving work in their geographic areas A variety of National staff provide Special Events support to the ALA chartered regional associations This support is designed to assist in the development, marketing and implementation of events and promotions strategies Among the assistance provided are planning (goal setting, strategic review, development of template material, feasibility studies), training (monthly conference calls, best practice staff training, listserv based materials, staff training calls, etc ), implementation (sponsorship calls, recruitment, event attendance/participation), coaching (staff, leadership, volunteers), coordination of collateral, providing a national incentive program, solicit national sponsors/teams, facilitate and integrate e-commerce platforms, and evaluation of new events The primary focus is to increase the Chartered Associations net revenue and fully integrate best practice strategies into the overall work plan The Major Gifts team works with the ALA chartered regional associations on joint funding prospects and provides one-on-one assistance when requested Among the support activities are compilation of research lists and development of research profiles, evaluation of funding proposals, strategic advice regarding funding initiatives and prospects, providing training at staff meetings and conference calls The Direct Response team develops and implements campaign plans for all direct mail appeals, telemarketing campaigns and the residential program in conjunction with our direct response consulting agency All funds generated are deposited directly into local association accounts on a regular (weekly or bi-weekly) basis with detailed reports by campaign for the current period and YTD Local associations are billed monthly for direct response expenses and quarterly for a 30% share of the net income generated by the programs Associations are provided with a budget for each program along with cash flow and billing schedules, as well as quarterly updates on actual performance Billed expenses are reconciled to actual costs at the end of the fiscal year Images of all rollout mailing packages are posted on LungNet for reference by local associations Monthly direct response calls or meetings are conducted to which all local CEOs are invited to participate for updates on the program and any issues or questions that arise

**4c** (Code ) (Expenses $ 6,017,545 including grants of $ 5,153,022 ) (Revenue $ 2,517,966 )

RESEARCHFunding research has been a cornerstone of the Lung Association's fight against lung disease for more than a century In 2009-10, our donors again made it possible to fund high quality researchers seeking treatments and cures for an array of lung diseases from asthma to lung cancer Our Nationwide Research Awards and Grants Program fosters laboratory and patient-centered and social behavior research to prevent, treat and hopefully find a cure for all lung diseases In 2009-10, our program funded 55 grants to further promising, cutting-edge research Additional support in funding this year's research program came from partnerships with Alpha-1 Foundation, LUNGevity Foundation, the CHEST Foundation, NTM Info and the National Sleep Foundation The Lung Association's Asthma Clinical Research Centers Network (ACRC) continues to contribute major improvements to asthma treatments through a network of 18 clinical centers throughout the country In 2009-10, ongoing ACRC research centered on two major questions what is the interaction between acid reflux and asthma in children, is methacholine challenge still a sensitive test in the diagnosis and/or confirmation of asthma Two ACRC manuscripts, TAPE and SIRNA were published in the Journal of Allergy and Immunology and CHEST, respectively The TAPE trial found that neither the presence of a placebo nor enhancing patients expectancy about the effectiveness of a drug had an effect on lung function However, study participants in the placebo with enhanced messages group reported an improvement in their asthma symptoms despite no improvement in lung function The SIRNA trial developed a simple and reliable five-item questionnaire that could accurately screen for sinonasal disease, reducing the need for expensive CT scans and invasive endoscopy

**4d** Other program services (Describe in Schedule O ) **See also Additional Data for Description**

(Expenses $ 5,985,213 including grants of $ 197,289 ) (Revenue $ 1,398,870 )

**4e** **Total program service expenses**▶$ 41,094,831

**Part IV Checklist of Required Schedules**

| | | | 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 | | No |
| 4 | **Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II* | 4 | Yes | |
| 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 | | No |
| 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? *If "Yes," complete Schedule D, Part II* | 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 | | No |
| 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 | Yes | |
| 12A | Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional* — 12A Yes: ; No: No | | | |
| 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 | | No |
| 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 | | No |
| 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 ? *If "Yes," complete Schedule F, Part III* | 16 | | No |
| 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 | | No |
| 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 | | No |
| 20 | Did the organization operate one or more hospitals? *If "Yes," complete Schedule H* | 20 | | No |

**Part IV Checklist of Required Schedules** *(continued)*

| | | | Yes | No |
|---|---|---|---|---|
| 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 | | No |
| 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 |
| b | 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 | | No |
| 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 | | No |
| 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) | | | |
| a | A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV* | 28a | | No |
| b | A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV* | 28b | | No |
| c | 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? *If "Yes," complete Schedule L, Part IV* | 28c | | No |
| 29 | Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M* | 29 | | No |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M* | 30 | | No |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I* | 31 | | No |
| 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 | | No |
| 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 | | No |
| 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 | | No |
| 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 | | No |
| 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 | | No |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O | 38 | Yes | |

## Part V Statements Regarding Other IRS Filings and Tax Compliance

| | | | | Line | 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* | 1a | 27 | | | |
| b | Enter the number of Forms W-2G included in line 1a *Enter -0- if not applicable* | 1b | 0 | | | |
| c | 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 return | 2a | 114 | | | |
| 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 | Yes | |
| 3a | Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return? | | | 3a | | No |
| b | 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 | | No |
| b | If "Yes," enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts | | | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | | | 5a | | No |
| 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).** | | | | | |
| a | 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 | Yes | |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | | | 7b | Yes | |
| c | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | | | 7c | | No |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | 7d | | | | |
| e | Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | | | 7e | | No |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | | | 7f | | No |
| g | For all contributions of qualified intellectual property, did the organization file Form 8899 as required? | | | 7g | | No |
| h | For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? | | | 7h | | No |
| 8 | **Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** 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.** | | | | | |
| a | 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 | | | | | |
| a | 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 | 10b | | | | |
| 11 | **Section 501(c)(12) organizations.** Enter | | | | | |
| a | Gross income from members or shareholders | 11a | | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) | 11b | | | | |
| 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 | 12b | | | | |

**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

| | | | | Yes | No |
|---|---|---|---|---|---|
| 1a | Enter the number of voting members of the governing body . . | 1a 24 | | | |
| b | Enter the number of voting members that are independent . . | 1b 24 | | | |
| 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 | | No |
| 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 | | No |
| 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 | | No |
| 6 | Does the organization have members or stockholders? | | 6 | | No |
| 7a | Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? | | 7a | | No |
| b | Are any decisions of the governing body subject to approval by members, stockholders, or other persons? | | 7b | | No |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following | | | | |
| a | 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 | | No |

## Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

| | | | Yes | No |
|---|---|---|---|---|
| 10a | Does the organization have local chapters, branches, or affiliates? | 10a | Yes | |
| b | 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 | Yes | |
| 11 | Has the organization provided a copy of this Form 990 to all members of its governing body before filing 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? | | | |
| a | The organization's CEO, Executive Director, or top management official | 15a | Yes | |
| b | 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 | | No |
| b | 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 | | |

## Section 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 , DC , FL , GA , HI , IL , KS , KY , MA , MD , ME , MI , MN , NM , NC , ND , NH , NM , NY , NJ , OH , OK , OR , PA , RI , SC , TN , VA , WA , WI , WV

18 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 ☑ Upon request

19 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 ▶

ADRIENNE GLASGOW CFO
14 WALL STREET SUITE 8C
NEW YORK, NY 10005
(212) 315-8762

**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

| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W- 2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|---|---|---|---|---|---|---|---|---|---|
| See add'l data | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

| | | | |
|---|---|---|---|
| **1b Total** . . . . . . . . . . . . . . . . . ▶ | 2,108,825 | 0 | 299,970 |

**2** Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶14

| | | Yes | No |
|---|---|---|---|
| **3** Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual* . . . . . . . . . . . . . . . . | **3** | | No |
| **4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual* . . . . . . . . . . . . . . . . . . . . . . . . . . | **4** | Yes | |
| **5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? *If "Yes," complete Schedule J for such person* . . . . . . . . . . . . . . | **5** | | No |

## Section B. Independent Contractors

**1** Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization

| **(A)**<br>Name and business address | **(B)**<br>Description of services | **(C)**<br>Compensation |
|---|---|---|
| Moore Wallace<br>PO Box 93514<br>ChICAGO, IL 60673 | Marketing | 3,782,738 |
| Quadgraphics Inc<br>4333 DAVENPORT ROAD<br>fREDERICKSBURG, VA 22408 | Printing | 3,437,544 |
| LABEL TECH INC<br>16 INTERSTATE DRIVE<br>SOMERSWORTH, NH 03878 | PRINTING | 2,668,718 |
| RR Donnelly Response Marketing Services<br>135 S LaSalle<br>ChICAGO, IL 60673 | Marketing | 2,175,282 |
| Infocision Management Corp<br>325 Springside Drive<br>Akron, OH 44333 | Telemarketing | 1,903,794 |

**2** Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶40

**Part VIII Statement 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 campaigns . . . | 1a | | | | | |
| | b | Membership dues . . . . | 1b 31,881 | | | | |
| | c | Fundraising events . . . . | 1c | | | | |
| | d | Related organizations . . . | 1d | | | | |
| | e | Government grants (contributions) | 1e 796,159 | | | | |
| | f | All other contributions, gifts, grants, and similar amounts not included above | 1f 17,369,241 | | | | |
| | g | Noncash contributions included in lines 1a-1f $ | | | | | |
| | h | **Total.** Add lines 1a-1f . . . . . . . ▶ | | 18,197,281 | | | |
| **Program Service Revenue** | | | Business Code | | | | |
| | 2a | direct response rev fr | 900,099 | 27,977,401 | 27,977,401 | | |
| | b | | | | | | |
| | c | | | | | | |
| | d | | | | | | |
| | e | | | | | | |
| | f | All other program service revenue | | | | | |
| | g | **Total.** Add lines 2a–2f . . . . . . . . ▶ | | 27,977,401 | | | |
| **Other Revenue** | 3 | Investment income (including dividends, interest and other similar amounts) . . . . . ▶ | | 371,289 | | | 371,289 |
| | 4 | Income from investment of tax-exempt bond proceeds . . ▶ | | | | | |
| | 5 | Royalties . . . . . . . . . . . . ▶ | | 614,448 | | | 614,448 |

| | (i) Real | (ii) Personal |
|---|---|---|
| 6a Gross Rents | | |
| b Less rental expenses | | |
| c Rental income or (loss) | | |
| d Net rental income or (loss) . . . . . . . ▶ | | |

| | (i) Securities | (ii) Other |
|---|---|---|
| 7a Gross amount from sales of assets other than inventory | 11,286,594 | |
| b Less cost or other basis and sales expenses | 10,806,683 | |
| c Gain or (loss) | 479,911 | |

| | | | (A) | (B) | (C) | (D) |
|---|---|---|---|---|---|---|
| 7d | Net gain or (loss) . . . . . . . . . . ▶ | | 479,911 | | | 479,911 |
| 8a | Gross income from fundraising events (not including $ ______ of contributions reported on line 1c) See Part IV, line 18 . . . | a | | | | |
| b | Less direct expenses . . . | b | | | | |
| c | Net income or (loss) from fundraising events . . ▶ | | | | | |
| 9a | Gross income from gaming activities See Part IV, line 19 . . . | a | | | | |
| b | Less direct expenses . . . | b | | | | |
| c | Net income or (loss) from gaming activities . . ▶ | | | | | |
| 10a | Gross sales of inventory, less returns and allowances . | a | | | | |
| b | Less cost of goods sold . . | b | | | | |
| c | Net income or (loss) from sales of inventory . . ▶ | | | | | |
| | Miscellaneous Revenue | Business Code | | | | |
| 11a | OTHER REVENUE | 900,099 | 133,166 | | | 133,166 |
| b | | | | | | |
| c | | | | | | |
| d | All other revenue . . . . | | | | | |
| e | **Total.** Add lines 11a–11d . . . . . ▶ | | 133,166 | | | |
| 12 | **Total revenue.** See Instructions . . . ▶ | | 47,773,496 | 27,977,401 | 0 | 1,598,814 |

**Part IX Statement of Functional Expenses**

**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).**

| **Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.** | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|---|---|---|---|---|
| 1 Grants and other assistance to governments and organizations in the U S See Part IV, line 21 | 5,848,208 | 5,848,208 | | |
| 2 Grants and other assistance to individuals in the U S See Part IV, line 22 | | | | |
| 3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16 | | | | |
| 4 Benefits paid to or for members | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | 1,681,948 | 759,609 | 786,628 | 135,711 |
| 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 | 4,689,811 | 2,950,961 | 1,482,720 | 256,130 |
| 8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) | 760,806 | 443,017 | 270,999 | 46,790 |
| 9 Other employee benefits | 805,438 | 469,007 | 286,897 | 49,534 |
| 10 Payroll taxes | 450,481 | 262,315 | 160,461 | 27,705 |
| 11 Fees for services (non-employees) | | | | |
| a Management | | | | |
| b Legal | 888,319 | | 888,319 | |
| c Accounting | 92,055 | | 92,055 | |
| d Lobbying | 215,494 | 215,494 | | |
| e Professional fundraising *See Part IV, line 17* | | | | |
| f Investment management fees | 48,329 | | 48,329 | |
| g Other | 3,809,779 | 3,582,490 | 227,289 | |
| 12 Advertising and promotion | 314,827 | 314,827 | | |
| 13 Office expenses | 535,979 | 357,471 | 154,711 | 23,797 |
| 14 Information technology | 305,856 | 179,413 | 100,813 | 25,630 |
| 15 Royalties | | | | |
| 16 Occupancy | 1,286,242 | 720,513 | 471,441 | 94,288 |
| 17 Travel | 521,274 | 410,994 | 110,280 | |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 Conferences, conventions, and meetings | 372,265 | 299,721 | 72,544 | |
| 20 Interest | | | | |
| 21 Payments to affiliates | | | | |
| 22 Depreciation, depletion, and amortization | 176,370 | 103,457 | 58,133 | 14,780 |
| 23 Insurance | 115,037 | 69,733 | 36,121 | 9,183 |
| 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 ) | | | | |
| a ASSOC PUB AW & FLD SUPP | 23,981,361 | 23,981,361 | | |
| b Bad Debt Expenses | 491,872 | | 491,872 | |
| c MISCELLANEOUS | 156,717 | 124,901 | 25,367 | 6,449 |
| d Service Charges | 2,283 | 1,339 | 753 | 191 |
| e | | | | |
| f All other expenses | | | | |
| 25 **Total functional expenses.** Add lines 1 through 24f | 47,550,751 | 41,094,831 | 5,765,732 | 690,188 |
| 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 | | | | |

**Part X** **Balance Sheet**

| | | | | | (A) Beginning of year | | (B) End of year |
|---|---|---|---|---|---|---|---|
| Assets | 1 | Cash—non-interest-bearing | | | 140,907 | 1 | 162,222 |
| | 2 | Savings and temporary cash investments | | | 8,843,129 | 2 | 9,283,322 |
| | 3 | Pledges and grants receivable, net | | | | 3 | |
| | 4 | Accounts receivable, net | | | 8,130,218 | 4 | 4,149,762 |
| | 5 | Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L | | | | 5 | |
| | 6 | Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L | | | | 6 | |
| | 7 | Notes and loans receivable, net | | | 791,981 | 7 | 142,564 |
| | 8 | Inventories for sale or use | | | | 8 | |
| | 9 | Prepaid expenses and deferred charges | | | 990,880 | 9 | 746,881 |
| | 10a | Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D* | 10a | 2,715,675 | | | |
| | b | Less accumulated depreciation | 10b | 2,266,708 | 548,395 | 10c | 448,967 |
| | 11 | Investments—publicly traded securities | | | 7,074,560 | 11 | 12,014,575 |
| | 12 | Investments—other securities See Part IV, line 11 | | | | 12 | |
| | 13 | Investments—program-related See Part IV, line 11 | | | | 13 | |
| | 14 | Intangible assets | | | | 14 | |
| | 15 | Other assets See Part IV, line 11 | | | 1,257,364 | 15 | 1,397,183 |
| | 16 | **Total assets.** Add lines 1 through 15 (must equal line 34) | | | 27,777,434 | 16 | 28,345,476 |
| Liabilities | 17 | Accounts payable and accrued expenses | | | 3,433,352 | 17 | 2,199,083 |
| | 18 | Grants payable | | | 2,542,055 | 18 | 2,530,340 |
| | 19 | Deferred revenue | | | 1,772,733 | 19 | 1,618,561 |
| | 20 | Tax-exempt bond liabilities | | | | 20 | |
| | 21 | Escrow or custodial account liability *Complete Part IV of Schedule D* | | | | 21 | |
| | 22 | Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L* | | | | 22 | |
| | 23 | Secured mortgages and notes payable to unrelated third parties | | | 3,030,274 | 23 | 2,579,183 |
| | 24 | Unsecured notes and loans payable to unrelated third parties | | | | 24 | |
| | 25 | Other liabilities Complete Part X of Schedule D | | | 9,308,787 | 25 | 11,760,409 |
| | 26 | **Total liabilities.** Add lines 17 through 25 | | | 20,087,201 | 26 | 20,687,576 |
| Net Assets or Fund Balances | | **Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.** | | | | | |
| | 27 | Unrestricted net assets | | | 5,343,566 | 27 | 5,068,395 |
| | 28 | Temporarily restricted net assets | | | 549,024 | 28 | 791,862 |
| | 29 | Permanently restricted net assets | | | 1,797,643 | 29 | 1,797,643 |
| | | **Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.** | | | | | |
| | 30 | Capital stock or trust principal, or current funds | | | | 30 | |
| | 31 | Paid-in or capital surplus, or land, building or equipment fund | | | | 31 | |
| | 32 | Retained earnings, endowment, accumulated income, or other funds | | | | 32 | |
| | 33 | Total net assets or fund balances | | | 7,690,233 | 33 | 7,657,900 |
| | 34 | Total liabilities and net assets/fund balances | | | 27,777,434 | 34 | 28,345,476 |

## Part XI Financial Statements and Reporting

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ______________<br>If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O | | | |
| 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? . . . . . . . . | 2b | Yes | |
| 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?<br>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<br>☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated 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 | Yes | |
| 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 | Yes | |

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493041002181

# SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

## Public Charity Status and Public Support

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

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

OMB No 1545-0047

2009

**Open to Public Inspection**

Name of the organization
American Lung Association

**Employer identification number**
13-1632524

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box )

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

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E )

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

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II )

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II )

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )

9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III )

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

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

**a** ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Other

**e** ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

**f** If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box ☐

**g** Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

| | | Yes | No |
|---|---|---|---|
| **(i)** a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization? | **11g(i)** | | |
| **(ii)** a family member of a person described in (i) above? | **11g(ii)** | | |
| **(iii)** a 35% controlled entity of a person described in (i) or (ii) above? | **11g(iii)** | | |

**h** Provide the following information about the supported organization(s)

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions)) | (iv) Is the organization in col (i) listed in your governing document? Yes | (iv) No | (v) Did you notify the organization in col (i) of your support? Yes | (v) No | (vi) Is the organization in col (i) organized in the U S ? Yes | (vi) No | (vii) Amount of support? |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| **Total** | | | | | | | | | |

**Part II** **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.)

## Section A. Public Support

| **Calendar year** (or fiscal year beginning in) | **(a)** 2005 | **(b)** 2006 | **(c)** 2007 | **(d)** 2008 | **(e)** 2009 | **(f)** Total |
|---|---|---|---|---|---|---|
| 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") | 20,957,733 | 24,681,358 | 13,991,885 | 14,100,696 | 18,165,400 | 91,897,072 |
| 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 | 20,957,733 | 24,681,358 | 13,991,885 | 14,100,696 | 18,165,400 | 91,897,072 |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | 1,689,642 |
| 6 **Public Support.** Subtract line 5 from line 4 | | | | | | 90,207,430 |

## Section B. Total Support

| **Calendar year** (or fiscal year beginning in) | **(a)** 2005 | **(b)** 2006 | **(c)** 2007 | **(d)** 2008 | **(e)** 2009 | **(f)** Total |
|---|---|---|---|---|---|---|
| 7 Amounts from line 4 | 20,957,733 | 2,435,520 | 13,991,885 | 14,100,696 | 18,165,400 | 91,897,072 |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 1,871,260 | 2,435,520 | 1,454,604 | 584,295 | 985,737 | 7,331,416 |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 Other income (Explain in Part IV ) Do not include gain or loss from the sale of capital assets | 44,413 | 52,144 | 121,136 | 101,141 | 133,166 | 452,000 |
| 11 **Total support** (Add lines 7 through 10) | | | | | | 99,680,488 |

12 Gross receipts from related activities, etc (See instructions ) **12** 143,407,179

13 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ☐

## Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) **14** 90 500 %

15 Public Support Percentage for 2008 Schedule A, Part II, line 14 **15** 96 530 %

16a **33 1/3% support test—2009.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☑

b **33 1/3% support test—2008.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

17a **10%-facts-and-circumstances test—2009.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ☐

b **10%-facts-and-circumstances test—2008.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ☐

18 **Private Foundation** If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ☐

**Part III** **Support Schedule for Organizations Described in IRC 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I.)

## Section A. Public Support

| **Calendar year** (or fiscal year beginning in) | **(a)** 2005 | **(b)** 2006 | **(c)** 2007 | **(d)** 2008 | **(e)** 2009 | **(f)** 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 purpose | | | | | | |
| 3 Gross receipts from activities that 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 Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| b 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 | | | | | | |
| c Add lines 7a and 7b | | | | | | |
| 8 **Public Support** (Subtract line 7c from line 6 ) | | | | | | |

## Section B. Total Support

| **Calendar year** (or fiscal year beginning in) | **(a)** 2005 | **(b)** 2006 | **(c)** 2007 | **(d)** 2008 | **(e)** 2009 | **(f)** Total |
|---|---|---|---|---|---|---|
| 9 Amounts from line 6 | | | | | | |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| c Add lines 10a and 10b | | | | | | |
| 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly 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, 11 and 12 ) | | | | | | |

14 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

## Section C. Computation of Public Support Percentage

| | | |
|---|---|---|
| 15 Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f)) | 15 | |
| 16 Public support percentage from 2008 Schedule A, Part III, line 15 | 16 | |

## Section D. Computation of Investment Income Percentage

| | | |
|---|---|---|
| 17 Investment income percentage for **2009** (line 10c column (f) divided by line 13 column (f)) | 17 | |
| 18 Investment income percentage from **2008** Schedule A, Part III, line 17 | 18 | |

19a **33 1/3% support tests—2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support tests—2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

20 **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

| Explanation |
|---|
| Schedule A, Part IV, Supplemental Information SCHEDULE A, PART II, SECTION B, LINE 10, EXPLANATION FOR OTHER INCOME OTHER INCOME CONSIST OF MISCELLANEOUS SERVICE FEES |
| |
| |

**SCHEDULE C**
**(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

# Political Campaign and Lobbying Activities

**For Organizations Exempt From Income Tax Under section 501(c) and section 527**
▶ Complete if the organization is described below.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047
**2009**
**Open to Public Inspection**

**If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then**
- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

**If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**
- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

**If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35a (regarding proxy tax), then**
- Section 501(c)(4), (5), or (6) organizations Complete Part III

| Name of the organization | Employer identification number |
|---|---|
| American Lung Association | 13-1632524 |

## Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV

2 Political expenditures ▶ $

3 Volunteer hours

## Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ **Yes** ☐ **No**

4a Was a correction made? ☐ **Yes** ☐ **No**

b If "Yes," describe in Part IV

## Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities ▶ $

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ $

4 Did the filing organization file **Form 1120-POL** for this year? ☐ **Yes** ☐ **No**

5 State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

| **(a)** Name | **(b)** Address | **(c)** EIN | **(d)** Amount paid from filing organization's funds If none, enter -0- | **(e)** Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
|---|---|---|---|---|
| | | | | |

**Part II-A** **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

**A** Check ☐ if the filing organization belongs to an affiliated group
**B** Check ☐ if the filing organization checked box A and "limited control" provisions apply

| **Limits on Lobbying Expenditures** (The term "expenditures" means amounts paid or incurred.) | **(a)** Filing Organization's Totals | **(b)** Affiliated Group Totals |
|---|---|---|
| **1a** Total lobbying expenditures to influence public opinion (grass roots lobbying) | | |
| **b** Total lobbying expenditures to influence a legislative body (direct lobbying) | | |
| **c** Total lobbying expenditures (add lines 1a and 1b) | | |
| **d** Other exempt purpose expenditures | | |
| **e** Total exempt purpose expenditures (add lines 1c and 1d) | | |
| **f** Lobbying nontaxable amount Enter the amount from the following table in both columns | | |

| **If the amount on line 1e, column (a) or (b) is:** | **The lobbying nontaxable amount is:** |
|---|---|
| Not over $500,000 | 20% of the amount on line 1e |
| Over $500,000 but not over $1,000,000 | $100,000 plus 15% of the excess over $500,000 |
| Over $1,000,000 but not over $1,500,000 | $175,000 plus 10% of the excess over $1,000,000 |
| Over $1,500,000 but not over $17,000,000 | $225,000 plus 5% of the excess over $1,500,000 |
| Over $17,000,000 | $1,000,000 |

| | (a) | (b) |
|---|---|---|
| **g** Grassroots nontaxable amount (enter 25% of line 1f) | | |
| **h** Subtract line 1g from line 1a If zero or less, enter -0- | | |
| **i** Subtract line 1f from line 1c If zero or less, enter -0- | | |

**j** If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☐ **No**

### 4-Year Averaging Period Under Section 501(h)
### (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

**Lobbying Expenditures During 4-Year Averaging Period**

| **Calendar year (or fiscal year beginning in)** | **(a)** 2006 | **(b)** 2007 | **(c)** 2008 | **(d)** 2009 | **(e)** Total |
|---|---|---|---|---|---|
| **2a** Lobbying non-taxable amount | | | | | |
| **b** Lobbying ceiling amount (150% of line 2a, column(e)) | | | | | |
| **c** Total lobbying expenditures | | | | | |
| **d** Grassroots non-taxable amount | | | | | |
| **e** Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | |
| **f** Grassroots lobbying expenditures | | | | | |

**Part II-B** **Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

| | | (a) Yes | (a) No | (b) Amount |
|---|---|---|---|---|
| **1** | During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of | | | |
| **a** | Volunteers? | Yes | | |
| **b** | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | Yes | | |
| **c** | Media advertisements? | Yes | | |
| **d** | Mailings to members, legislators, or the public? | Yes | | 13,777 |
| **e** | Publications, or published or broadcast statements? | Yes | | 21,030 |
| **f** | Grants to other organizations for lobbying purposes? | Yes | | 5,625 |
| **g** | Direct contact with legislators, their staffs, government officials, or a legislative body? | Yes | | 156,843 |
| **h** | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | Yes | | 2,253 |
| **i** | Other activities? If "Yes," describe in Part IV | Yes | | 15,966 |
| **j** | Total lines 1c through 1i | | | 215,494 |
| **2a** | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | No | |
| **b** | If "Yes," enter the amount of any tax incurred under section 4912 | | | |
| **c** | If "Yes," enter the amount of any tax incurred by organization managers under section 4912 | | | |
| **d** | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | | |

**Part III-A** **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

| | | | Yes | No |
|---|---|---|---|---|
| **1** | Were substantially all (90% or more) dues received nondeductible by members? | **1** | | |
| **2** | Did the organization make only in-house lobbying expenditures of $2,000 or less? | **2** | | |
| **3** | Did the organization agree to carryover lobbying and political expenditures from the prior year? | **3** | | |

**Part III-B** **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".**

| | | | |
|---|---|---|---|
| **1** | Dues, assessments and similar amounts from members | **1** | |
| **2** | Section 162(e) non-deductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).** | | |
| **a** | Current year | **2a** | |
| **b** | Carryover from last year | **2b** | |
| **c** | Total | **2c** | |
| **3** | Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | **3** | |
| **4** | If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? | **4** | |
| **5** | Taxable amount of lobbying and political expenditures (see instructions) | **5** | |

**Part IV** **Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

| Identifier | Return Reference | Explanation |
|---|---|---|
| Part II-B, Line 1i | Explanation of Other Lobbying Activities | THE AMERICAN LUNG ASSOCIATION VOLUNTEERS AND STAFF ENGAGE IN A WIDE RANGE OF ADVOCACY ACTIVITIES TO FURTHER OUR MISSION TO SAVE LIVES BY IMPROVING LUNG HEALTH AND PREVENTING LUNG DISEASE OUR WORK INCLUDES EFFORTS TO EDUCATE MEMBERS OF CONGRESS, THEIR STAFF AND THE PUBLIC ON LUNG HEALTH ISSUES WE ADVOCATE FOR CLEAN, HEALTHY AIR TO REDUCE THE HEALTH IMPACTS OF AIR POLLUTION WE FOCUS ON SUPPORTING THE IMPLEMENTATION AND STRENGTHENING OF the Nation's CLEAN AIR LAWS WE STRONGLY SUPPORT LUNG HEALTH RESEARCH FUNDING INCLUDING FUNDING FOR LUNG CANCER, CHRONIC OBSTRUCTIVE PULMONARY DISEASE, ASTHMA, TUBERCULOSIS AND OTHER LUNG DISEASES FURTHERMORE, THE American LUNG ASSOCIATION VOLUNTEERS AND STAFF ACTIVELY ADVOCATE IN WASHINGTON D C AND IN THE STATES FOR TOBACCO CONTROL LAWS INCLUDING EFFORTS TO REGULATE TOBACCO PRODUCTS, PROMOTE SMOKING CESSATION AND ELIMINATE EXPOSURES TO SECONDHAND SMOKE |

**SCHEDULE D** (Form 990)

Department of the Treasury
Internal Revenue Service

# Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

**2009**

**Open to Public Inspection**

**Name of the organization**
American Lung Association

**Employer identification number**
13-1632524

## Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

| | | (a) Donor advised funds | (b) Funds and other accounts |
|---|---|---|---|
| 1 | Total number at end of year | | |
| 2 | Aggregate contributions to (during year) | | |
| 3 | Aggregate grants from (during year) | | |
| 4 | Aggregate value at end of year | | |

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 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 impermissible private benefit ☐ Yes ☐ No

## Part II Conservation Easements.
Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure) ☐ Preservation of an historically importantly land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

| | | | Held at the End of the Year |
|---|---|---|---|
| a | Total number of conservation easements | 2a | |
| b | Total acreage restricted by conservation easements | 2b | |
| c | Number of conservation easements on a certified historic structure included in (a) | 2c | |
| d | Number of conservation easements included in (c) acquired after 8/17/06 | 2d | |

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶________

4 Number of states where property subject to conservation easement is located ▶________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶________

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ ________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

## Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ ________

(ii) Assets included in Form 990, Part X ▶ $ ________

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ ________

b Assets included in Form 990, Part X ▶ $ ________

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table

| | | Amount |
|---|---|---|
| c Beginning balance | 1c | |
| d Additions during the year | 1d | |
| e Distributions during the year | 1e | |
| f Ending balance | 1f | |

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

**Part V Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

| | (a) Current Year | (b) Prior Year | (c) Two Years Back | (d) Three Years Back | (e) Four Years Back |
|---|---|---|---|---|---|
| 1a Beginning of year balance | 1,797,643 | 1,797,463 | | | |
| b Contributions | | 180 | | | |
| c Investment earnings or losses | | | | | |
| d Grants or scholarships | | | | | |
| e Other expenditures for facilities and programs | | | | | |
| f Administrative expenses | | | | | |
| g End of year balance | 1,797,643 | 1,797,643 | | | |

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ▶ 0 % %

b Permanent endowment ▶ 100 000 % %

c Term endowment ▶ 0 % %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

| | | Yes | No |
|---|---|---|---|
| (i) unrelated organizations | 3a(i) | Yes | |
| (ii) related organizations | 3a(ii) | | No |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? | 3b | | |

4 Describe in Part XIV the intended uses of the organization's endowment funds

**Part VI Investments—Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

| Description of investment | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|---|---|---|---|---|
| 1a Land | | | | |
| b Buildings | | | | |
| c Leasehold improvements | | 178,430 | 97,638 | 80,792 |
| d Equipment | | 1,673,533 | 1,594,981 | 78,552 |
| e Other | | 863,712 | 574,089 | 289,623 |
| **Total.** Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶ | | | | 448,967 |

**Part VII Investments—Other Securities.** See Form 990, Part X, line 12.

| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation Cost or end-of-year market value |
|---|---|---|
| Financial derivatives | | |
| Closely-held equity interests | | |
| Other | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| **Total.** *(Column (b) should equal Form 990, Part X, col (B) line 12 )* ▶ | | |

**Part VIII Investments—Program Related.** See Form 990, Part X, line 13.

| (a) Description of investment type | (b) Book value | (c) Method of valuation Cost or end-of-year market value |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| **Total.** *(Column (b) should equal Form 990, Part X, col (B) line 13 )* ▶ | | |

**Part IX Other Assets.** See Form 990, Part X, line 15.

| (a) Description | (b) Book value |
|---|---|
| BENEFICIAL INTEREST IN ASSETS HELD BY CONSTITUENTS | 1,217,089 |
| OTHER ASSETS | 180,094 |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| **Total.** *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . . . . . . . . . ▶ | 1,397,183 |

**Part X Other Liabilities.** See Form 990, Part X, line 25.

| 1 (a) Description of Liability | (b) Amount |
|---|---|
| Federal Income Taxes | |
| DUE TO CHARTERED AND CONSTITUENT ASSOCIATIONS | 2,272,872 |
| Other liabilities | 2,546,872 |
| ACCRUED PENSION AND RETIREE LIFE INSURANCE LIABILITY | 5,473,531 |
| ACCRUED VACATION EXPENSES | 580,775 |
| ACCRUED ANNUITIES | 496,173 |
| DEFERRED RENT | 390,186 |
| | |
| | |
| | |
| | |
| **Total.** *(Column (b) should equal Form 990, Part X, col (B) line 25 )* ▶ | 11,760,409 |

**2.** Fin 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

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

| | | | |
|---|---|---|---|
| 1 | Total revenue (Form 990, Part VIII, column (A), line 12) | 1 | 47,773,496 |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | 2 | 47,550,751 |
| 3 | Excess or (deficit) for the year Subtract line 2 from line 1 | 3 | 222,745 |
| 4 | Net unrealized gains (losses) on investments | 4 | 95,510 |
| 5 | Donated services and use of facilities | 5 | |
| 6 | Investment expenses | 6 | |
| 7 | Prior period adjustments | 7 | |
| 8 | Other (Describe in Part XIV) | 8 | -350,588 |
| 9 | Total adjustments (net) Add lines 4 - 8 | 9 | -255,078 |
| 10 | Excess or (deficit) for the year per financial statements Combine lines 3 and 9 | 10 | -32,333 |

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

| | | | | | |
|---|---|---|---|---|---|
| 1 | Total revenue, gains, and other support per audited financial statements | | | 1 | 55,284,490 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12 | | | | |
| a | Net unrealized gains on investments | 2a | 95,510 | | |
| b | Donated services and use of facilities | 2b | 7,415,484 | | |
| c | Recoveries of prior year grants | 2c | | | |
| d | Other (Describe in Part XIV) | 2d | | | |
| e | Add lines **2a** through **2d** | | | 2e | 7,510,994 |
| 3 | Subtract line **2e** from line **1** | | | 3 | 47,773,496 |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line **1** | | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | | |
| b | Other (Describe in Part XIV) | 4b | | | |
| c | Add lines **4a** and **4b** | | | 4c | 0 |
| 5 | Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12 ) | | | 5 | 47,773,496 |

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

| | | | | | |
|---|---|---|---|---|---|
| 1 | Total expenses and losses per audited financial statements | | | 1 | 54,966,235 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25 | | | | |
| a | Donated services and use of facilities | 2a | 7,415,484 | | |
| b | Prior year adjustments | 2b | | | |
| c | Other losses | 2c | | | |
| d | Other (Describe in Part XIV) | 2d | | | |
| e | Add lines **2a** through **2d** | | | 2e | 7,415,484 |
| 3 | Subtract line **2e** from line **1** | | | 3 | 47,550,751 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line **1:** | | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | | |
| b | Other (Describe in Part XIV) | 4b | | | |
| c | Add lines **4a** and **4b** | | | 4c | 0 |
| 5 | Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18 ) | | | 5 | 47,550,751 |

**Part XIV Supplemental Information**

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

| Identifier | Return Reference | Explanation |
|---|---|---|
| Part V, Line 4 | Description of Intended Use of Endowment Funds | Permanently restricted net assets are primarily dedicated to supporting research scholars in interstital related lung diseases Dalsemer Endowment In 1983 Leonard Dalsemer, the John A Hartford Foundation, and the Wheelabrator Foundation endowed the National Office with $500 thousand (the corpus) to fund research to find a cure for interstitial lung disease The earnings on the corpus are to fund an annual research award in a minimal amount of $30 thousand The term of each award is three years Annual expenditures are limited to 6% of the fair market value of the endowment The American Lung Association is to strive to grow the endowment by soliciting additional donor contributions The award is only to be conferred when the review committee deems the proposed research meritorious Mary Fuller Russell Research Fund In a settlement entered by American Lung Association of New Hampshire (ALANH) and National Office (ALA) on July 9, 2003, ALANH has agreed to set aside, as a segregated fund, within its endowment fund, the sum of $1,297,643 representing ALA's 10% share, and to maintain such segregated fund intact for the purpose of paying to and allowing ALA to use all the income and the annual net appreciation, if any, in the fair value of the segregated fund for research purposes determined by ALA Under the settlement, such segregated fund is to be held for ALA,s benefit in perpetuity ALANH and ALA agreed that distributions from the Mary Fuller Russell Research Fund shall be used to support research into lung health issues, and that research grants to recipients shall be made under the name Mary Fuller Russell Research Fund |
| Part X | Description of Uncertain Tax Positions Under FIN 48 | National Headquarters recognizes the effect of income tax positions only when they are more likely than not of being sustained Management has determined that National Headquarters had no uncertain tax positions that would require financial statement recognition or disclosure National Headquarters is no longer subject to audits by the applicable taxing jurisdictions for periods prior to June 30, 2007 |
| Part XI, Line 8 - Other Adjustments | | PENSION AND POSTRETIREMENT PLANS BENEFITS LIABILITY ADJUSTMENTS ($350,588) |

**Schedule I (Form 990)**

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

**2009**

**Open to Public Inspection**

Name of the organization
American Lung Association

**Employer identification number**
13-1632524

## Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

## Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed . . . . ▶ ☐

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|---|---|---|---|---|---|---|
| See Additional Data Table | | | | | | | |

2 Enter total number of section 501(c)(3) and government organizations . . . . ▶ 66

3 Enter total number of other organizations . . . . ▶ 0

**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) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
|---|---|---|---|---|---|
| | | | | | |

**Part IV** **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

| Identifier | Return Reference | Explanation |
|---|---|---|
| Procedure for Monitoring Grants in the U S | Part I, Line 2 | Schedule I, Part I, Line 2 Awardees are required to submit a renewal application after their first year of funding Renewal applications are then reviewed by our Research Committee Chairs for approval of second year funding At the time of termination (after the second year of funding), awardees are required to submit a summary report of their activities, copies of presentations and/or publications, and a cash disbursement report for the entire grant time |
| | | |

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493041002181

# Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

# 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.**

OMB No 1545-0047

**2009**

**Open to Public Inspection**

**Name of the organization**
American Lung Association

**Employer identification number**
13-1632524

## Part I Questions Regarding Compensation

| | | | Yes | No |
|---|---|---|---|---|
| **1a** | Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items<br>☐ First-class or charter travel ☐ Housing allowance or residence for personal use<br>☐ Travel for companions ☐ Payments for business use of personal residence<br>☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees<br>☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef) | | | |
| **b** | If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain | **1b** | | |
| **2** | Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? | **2** | | |
| **3** | Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply<br>☑ Compensation committee ☑ Written employment contract<br>☐ Independent compensation consultant ☑ Compensation survey or study<br>☑ Form 990 of other organizations ☑ Approval by the board or compensation committee | | | |
| **4** | During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization | | | |
| **a** | Receive a severance payment or change-of-control payment? | **4a** | Yes | |
| **b** | Participate in, or receive payment from, a supplemental nonqualified retirement plan? | **4b** | | No |
| **c** | Participate in, or receive payment from, an equity-based compensation arrangement? | **4c** | | No |
| | If "Yes" to any of lines 4a-c, list the persons and provide 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 1a, did the organization pay or accrue any compensation contingent on the revenues of | | | |
| **a** | The organization? | **5a** | | No |
| **b** | Any related organization? | **5b** | | No |
| | If "Yes," to line 5a or 5b, describe in Part III | | | |
| **6** | For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of | | | |
| **a** | The organization? | **6a** | | No |
| **b** | Any related organization? | **6b** | | No |
| | If "Yes," to line 6a or 6b, describe in Part III | | | |
| **7** | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III | **7** | | No |
| **8** | Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III | **8** | | No |
| **9** | If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)? | **9** | | |

**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)(i)-(iii) 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-MISC compensation | | | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation reported in prior Form 990 or Form 990-EZ |
|---|---|---|---|---|---|---|---|---|
| | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | | | | |
| Charles D CONNOR | (i) | 308,289 | 20,000 | 0 | 32,610 | 12,388 | 373,287 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Kim A SCHWARTZ-vp & CFO | (i) | 237,894 | 10,000 | 20,191 | 31,664 | 1,119 | 300,868 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| B SUSAN DAVIS | (i) | 201,000 | 0 | 0 | 26,753 | 9,180 | 236,933 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Bernadette Toomey-Pres | (i) | 0 | 0 | 356,686 | 0 | 0 | 356,686 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Susan J RAPPAPORT | (i) | 168,027 | 0 | 0 | 22,364 | 17,767 | 208,158 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| JanET WIDMER | (i) | 164,162 | 10,000 | 0 | 21,850 | 17,873 | 213,885 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| PauL BILLINGS | (i) | 158,533 | 10,000 | 0 | 21,101 | 1,013 | 190,647 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| DelIA NAUGHTON | (i) | 135,711 | 0 | 0 | 18,063 | 8,963 | 162,737 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| RusSELL BURWELL | (i) | 135,774 | 0 | 0 | 18,072 | 8,978 | 162,824 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Carrie Martin | (i) | 142,173 | 0 | 0 | 18,923 | 8,999 | 170,095 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

## 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

| Identifier | Return Reference | Explanation |
|---|---|---|
| | Part I, Line 4a | Bernadette Toomey, who held the position of President and CEO, received severance payments totaling $356,686 |

**SCHEDULE O**
**(Form 990)**

Department of the Treasury
Internal Revenue Service

# Supplemental Information to Form 990

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

OMB No 1545-0047

**2009**

**Open to Public Inspection**

**Name of the organization**
American Lung Association

**Employer identification number**
13-1632524

| Identifier | Return Reference | Explanation |
|---|---|---|
| Form 990, Part VI, Section B, line 11 | | The American Lung Association prepares its Form 990 and then submits it to an outside accounting firm for review and it has also established the following review process to ensure that the information reported is complete and accurate Then the Form 990 has been prepared, reviewed by management and the accounting firm, and is ready to be filed with the Internal Revenue Service, it is submitted electronically to members of the organization's governing body, the Finance Committee, for any comments prior to its submission These members of the governing body then has 10 days to review the form, they then meet by conference call, to review any comments by the group and agree to any changes that may need to be made to the form prior to its submission to the Internal Revenue Service Each of these comments are documented, addressed and finalized before the submission |
| Form 990, Part VI, Section B, line 12c | | ALA currently has in place a conflict of interest policy which it annually monitors and enforces The board currently mandates that all members of management, the governing body, and staffs annually sign a conflict of interest policy and disclose any potential or actual conflicts that may exist The signed conflict of interest policy is submitted to the governance committee These statements are reviewed for potential or actual conflicts If a potential or actual conflict of interest exists, the committee will notify members of management about such conflict and investigate the conflict If management establishes that an actual conflict exists, a member of management will be notified immediately and will not be allowed to vote or be a part of any decisions about any such transactions that have to do with the conflict until such time there is no longer a conflict |
| Form 990, Part VI, Section B, line 15 | | The American Lung Association has established a compensation policy for their leadership committee to follow in establishing the compensation for their CEO, top management official, other officers or key employees The policy mandates that executive compensation be periodically reviewed by the committee and that the committee should be free of conflicts of interest In addition, the approving committee needs to review appropriate and adequate data to determine the reasonableness of the compensation being considered The committee may use a variety of information and studies that are available to determine that the appropriate level of compensation is being paid to its executives The committee's decision on the amount of compensation paid is documented in a contemporaneously written format and should document the date of the decision, the members present during the meeting and those who voted on it, the details of the transaction that was approved and the comparable date used and relied upon to make the decision The compensation review process for the CEO and other officer or key employees was last undertaken on October 28, 2009 |
| Form 990, Part VI, Section C, line 19 | | Forms available to the public The three most recent years of Form 990 and Annual Reports are available on American Lung Association's website www lungusa org Governing documents and conflict of interest policy are available to the public per request Our website also provides the names of our Board of Directors and our Ethics Policy |
| FORM 990, PAGE 12, PART XI, LINE 2C | Finance/Audit Committee | The joint Finance/Audit Committee of the Board has the fiduciary responsibility for hiring of the audit firm, the review of the risk issues for the association and the final audit review and package that is accepted by the Board The Committee meets with the audit firm independently from staff during the audit review process and recommends to the Board the acceptance of the Audit and its findings |
| FORM 990, PAGE 3, PART III, LINE 1 MISSION STATEMENT CONTINUED FROM PAGE 5 | | *Provides an array of learning opportunities and tools to develop nationwide volunteer and staff leaders *Provides epidemiological data, medical and scientific advice and counsel to Lung Associations and the public *Provides the public with the latest information on lung disease, and national and local Lung Association activities through the American Lung Association web site, www lungusa org *Ensures that all programs and services are culturally sensitive and that they respond to the lung health needs of all communities The Program Services of the American Lung Association National Headquarters can be broken down into four broad categories Research, Advocacy, Public Health Education and Field Support |

**Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W- 2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|---|---|---|---|---|---|---|---|---|---|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| Charles D CONNOR<br>PRESIDENT & CEO | 35 00 | | | X | | | | 328,289 | 0 | 44,998 |
| Adrienne Glasgow - CFO<br>employ began 11/09/09 | 35 00 | | | X | | | | 30,385 | 0 | 2,290 |
| Kim A SCHWARTZ-vp CFO<br>employ ended 11/12/09 | 35 00 | | | X | | | | 268,085 | 0 | 32,783 |
| B SUSAN DAVIS<br>Chief DEVELOP OFFICER | 35 00 | | | X | | | | 201,000 | 0 | 35,933 |
| Bernadette Toomey- Pres<br>& CEO - term 12/2008 | 35 00 | | | X | | | | 356,686 | 0 | 0 |
| Susan J RAPPAPORT<br>VP of Research & Program | 35 00 | | | | X | | | 168,027 | 0 | 40,131 |
| JanET WIDMER<br>VP of Field Support | 35 00 | | | | | X | | 174,162 | 0 | 39,723 |
| PauL BILLINGS<br>VP of National Policy & | 35 00 | | | | | X | | 168,533 | 0 | 22,114 |
| DelIA NAUGHTON<br>VP of Business | 35 00 | | | | | X | | 135,711 | 0 | 27,026 |
| RusSELL BURWELL<br>VP of Data & Technology | 35 00 | | | | | X | | 135,774 | 0 | 27,050 |
| Carrie Martin<br>VP of Communications | 35 00 | | | | | X | | 142,173 | 0 | 27,922 |

**Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W- 2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|---|---|---|---|---|---|---|---|---|---|
| Lee A Baggott MD FCC<br>BOARD MEMBER | 2 00 | X | | | | | | 0 | 0 | 0 |
| Christine L Bryant<br>Secretary/Treasurer | 8 00 | X | | X | | | | 0 | 0 | 0 |
| Timothy D Byrum MSN C<br>BoaRD MEMBER | 2 00 | X | | | | | | 0 | 0 | 0 |
| Arthur A Cerullo JD<br>assembly Speaker | 2 00 | X | | | | | | 0 | 0 | 0 |
| John F Emanuel JD<br>BOARD MEMBER | 2 00 | X | | | | | | 0 | 0 | 0 |
| KathRYN A FORBES CPA<br>BOARD MEMBER | 2 00 | X | | | | | | 0 | 0 | 0 |
| Michael A Gardner<br>BOARD MEMBER | 2 00 | X | | | | | | 0 | 0 | 0 |
| Adam S Goldberg Esq<br>BOARD MEMBER | 2 00 | X | | | | | | 0 | 0 | 0 |
| H James Gooden<br>boaRD MEMBER | 4 00 | X | | | | | | 0 | 0 | 0 |
| VirGINIA L HALL<br>boaRD MEMBER | 2 00 | X | | | | | | 0 | 0 | 0 |
| ElIZABETH BAKER KEFFER<br>boaRD MEMBER | 2 00 | X | | | | | | 0 | 0 | 0 |
| Ross P Lanzafame<br>Assembly Speaker | 2 00 | X | | | | | | 0 | 0 | 0 |
| JeNNY H LEE<br>boaRD MEMBER | 2 00 | X | | | | | | 0 | 0 | 0 |
| Edward Miller<br>CLAS President | 2 00 | X | | | | | | 0 | 0 | 0 |
| Leslie M Newman JD<br>BOARD MEMBER | 2 00 | X | | | | | | 0 | 0 | 0 |
| Stephen J Nolan Esq<br>Past Chair | 2 00 | X | | | | | | 0 | 0 | 0 |
| Shola Oyewole<br>BOARD MEMBER | 2 00 | X | | | | | | 0 | 0 | 0 |
| Mary H Partridge<br>Chair | 6 00 | X | | X | | | | 0 | 0 | 0 |
| Albert A Rizzo MD<br>BOARD MEMBER | 2 00 | X | | | | | | 0 | 0 | 0 |
| Frank Scott Rotruck<br>BOARD MEMBER | 2 00 | X | | | | | | 0 | 0 | 0 |
| E Neil Schachter<br>BOARD MEMBER | 2 00 | X | | | | | | 0 | 0 | 0 |
| Robert G Tweel<br>boaRD MEMBER | 2 00 | X | | | | | | 0 | 0 | 0 |
| Dean A Zerbe JD LL<br>boaRD MEMBER | 2 00 | X | | | | | | 0 | 0 | 0 |
| James L McDaniel<br>BOARD MEMBER | 2 00 | X | | | | | | 0 | 0 | 0 |
| DON AWERKAMP<br>BOARD MEMBER | 2 00 | X | | | | | | 0 | 0 | 0 |

**Additional Data**

**Software ID:**
**Software Version:**
**EIN:** 13-1632524
**Name:** American Lung Association

## Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

**4d. Other program services**

(Code ) (Expenses $ 5,985,213 including grants of $ 197,289 ) (Revenue $ 1,398,870 )

AdvocacyEvery year, the American Lung Association fights for public policies to protect your right to breathe healthy air, free of air pollution or tobacco smoke In FY 2010, our advocacy efforts again yielded important victories Healthy Air -The Lung Association won a crucial victory in January when the EPA set stronger emissions standards for nitrogen dioxide, which will protect communities along major roads and highways Lung Association volunteers testified in Arlington, VA, Houston, and Sacramento in February to support the EPA's proposal to lower the nation's limit on ozone pollution For those living near major seaports, the Lung Association advocated for EPA's new rules, enacted in April, for ocean-going vessels to use cleaner fuel and emissions control technology The EPA's new sulfur dioxide standard, enacted in June, will provide additional public health protection near industrial facilities Our State of the Air 2010 report acknowledged progress against air pollution in many areas, but found that nearly six out of ten Americans live in areas where air pollution levels endanger lives This eleventh annual report also found that nearly every major city was still burdened by air pollution, although most of the cities with the highest ozone and short-term particle levels reduced their pollution levels The State of the Air report (www stateofthеair org) included a national air quality "report card" that assigned A-F grades to communities across the country It also ranks cities and counties most affected by the most widespread types of pollution, ozone and particle pollution, and details trends for the most polluted cities over the past decade Health Care -The American Lung Association fought for expanded access to quit-smoking treatments under the landmark Patient Protection and Affordable Care Act (PPACA) The law extends health insurance coverage to millions of Americans who are currently uninsured -- including those with lung disease The law puts a major emphasis on prevention and management of chronic diseases including COPD and asthma Asthma -The American Lung Association hosted a day-long workshop in June to develop strategies for national opportunities for improving healthy housing, including the adoption of smokefree public housing to help improve the asthma of especially vulnerable people Tobacco Control The American Lung helped ensure that FDA is moving forward with the new law that gives the U S Food and Drug Administration (FDA) effective authority to regulate tobacco products' manufacture, distribution, and sale to protect the public health A new Center for Tobacco Products at FDA in September 2009 banned the sale of candy and fruit flavored cigarettes that targeted children and teens In June, the FDA forbid companies from using misleading descriptors in the names of their cigarettes, such as light, low and mild Also in June, new restrictions took effect that eliminated cigarette vending machines, tobacco branded products like t-shirts and hats and banned free cigarette samples as part of a suite of requirements to block the sale, marketing and promotion of tobacco products to children In November 2009, we issued our 2nd annual comprehensive look at state coverage of tobacco cessation treatment, Helping Smokers Quit State Cessation Coverage The report showed states are missing a big opportunity to help smokers quit and to save themselves money by covering comprehensive tobacco treatments State of Tobacco Control 2009 graded the strength of state and federal laws to protect citizens from tobacco-caused illnesses at the heart of Americas chronic disease crisis The report found that the federal government and most states failed to enact critical policy measures to protect people from deadly tobacco products No state received all A's and six states received all F's Our 2009 State Legislated Actions on Tobacco Issues report and online database provided the data that underpins the State of Tobacco Control report Kansas and Michigan met our Smokefree Air Challenge, making the total 27 states as well as the District of Columbia with comprehensive laws protecting people from exposure to deadly secondhand smoke Eight additional states have strong, but not fully comprehensive laws

(Code ) (Expenses $ including grants of $ ) (Revenue $ )

SUPPORT OF AMERICAN LUNG ASSOCIATION CHARTERED ASSOCIATIONSThe American Lung Association national headquarters supports its 10 chartered associations through coaching, training, consultation and technical assistance American Lung Association staff and volunteers throughout the country are provided skill-building and other learning opportunities to help them successfully deliver the American Lung Association's mission Through implementation of these staff learning and volunteer development offerings, chartered associations are kept current on best practices in lung health programs and delivery, advocacy, financial management, fundraising, leadership development and volunteer management One-on-one coaching and consultation by national headquarters staff is offered as needed or requested Individual discipline groups (e g chief executive officers, chief financial officers, chief development officers, program managers, etc ) meet regularly with national headquarters peers to share ideas, problem-solve, and network The American Lung Association conducts a nationwide volunteer and staff recognition program Volunteers and staff are recognized on an ongoing basis for outstanding performance An annual recognition ceremony is held at a meeting of the American Lung Association Board of Directors and Nationwide Assembly where awards for highest achievement are given in specific categories The American Lung Association Board of Directors provides strategic direction for the national headquarters and its chartered associations Coordination and monitoring of national and chartered association strategic alignment is provided through a Board-approved metric-based performance management system The American Lung Association Board of Directors is responsible for oversight of chartered association compliance to policies and performance standards Assistance is provided by the national headquarters to those chartered associations that do not meet requirements and/or standards

**Additional Data** Return to Form

**Software ID:**
**Software Version:**
**EIN:** 13-1632524
**Name:** American Lung Association

**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)** EIN | **(c)** IRC Code section if applicable | **(d)** Amount of cash grant | **(e)** Amount of non-cash assistance | **(f)** Method of valuation (book, FMV, appraisal, other) | **(g)** Description of non-cash assistance | **(h)** Purpose of grant or assistance |
|---|---|---|---|---|---|---|---|
| Albany Medical College47 New Scotland Ave Alabany, NY 12208 | 14-1338310 | 501(c)(3) | 65,000 | | | | Research |
| Baylor College of Medicine One Baylor Plaza Houston, TX 77030 | 74-1613878 | 501(c)(3) | 118,800 | | | | Research |
| Board of Trustees of Univ of Illinois-Chicago506 S Wright M/C 339 urbana, IL 61801 | 37-6000511 | 501(c)(3) | 40,000 | | | | Research |
| Brigham & Women's Hospital 75 Francis Street Boston, MA 02115 | 04-2312909 | 501(c)(3) | 65,000 | | | | Research |
| Children's Hospital and Regional Medical Center 4800 Sand Point Way NE Seattle, WA 98105 | 91-0564748 | 501(c)(3) | 40,000 | | | | Research |
| children's hospital boston One Blackfam Circle Boston, MA 02115 | 04-2774441 | 501(c)(3) | 32,500 | | | | Research |
| Children's Hospital Los Angeles4661 W Sunset Blvd Los Angeles, CA 90027 | 95-1690977 | 501(c)(3) | 32,500 | | | | Research |
| Children's Hospital Medical Center-Cincinnati3333 Burnet Avenue Cincinnati, OH 45229 | 31-0833936 | 501(c)(3) | 40,000 | | | | Research |
| Colorado State University 200 West Lake Street Fort Collins, CO 80523 | 84-6000545 | Government Sec 3406 | 60,000 | | | | Research |
| Dana-Farber Cancer Institute44 Binney Street Boston, MA 02115 | 04-2263040 | 501(c)(3) | 74,100 | | | | Research |

**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) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|---|---|---|---|---|---|---|
| Duke UniversityBox 104132<br>Durham, NC 27708 | 56-0532129 | 501(c)(3) | 94,000 | | | | Research |
| Indiana UniversityPO Box 66057<br>Indianapolis, IN 46266 | 35-6001673 | 501(c)(3) | 99,200 | | | | Research |
| johns Hopkins University 1101 E33rd Street Suite D200<br>baltimore, MD 21218 | 52-0595110 | 501(c)(3) | 548,500 | | | | Research |
| lankenau Institute for Medical Research100 Lancaster Ave<br>wynnewood, PA 19096 | 23-2135659 | 501(c)(3) | 99,771 | | | | Research |
| louisiana State University Health Sciences Center3433 Bolivar Street<br>New Orleans, LA 70112 | 72-6087770 | Government | 82,600 | | | | Research |
| lovelace Respiratory Research Inst2425 Ridgecrest Drive SE<br>albuquerque, NM 87108 | 85-0110669 | 501(c)(3) | 72,500 | | | | Research |
| Montefiore Medical Center 3415 Bainbridge Avenue<br>Bronx, NY 10467 | 13-1740114 | 501(c)(3) | 40,000 | | | | Research |
| National Jewish Medical and Research Center1400 Jackson Street<br>Denver, CO 80206 | 74-2044647 | 501(c)(3) | 84,600 | | | | Research |
| Nemours Children's Clinic - Jacksonville10140 Centurion Parkwa N<br>Jacksonville, FL 32256 | 59-0634433 | 501(c)(3) | 132,200 | | | | Research |
| North Shore Long Island Jewish300 Community Drive<br>Manhasset, NY 11030 | 11-1562701 | 501(c)(3) | 141,000 | | | | Research |

## 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)** EIN | **(c)** IRC Code section if applicable | **(d)** Amount of cash grant | **(e)** Amount of non-cash assistance | **(f)** Method of valuation (book, FMV, appraisal, other) | **(g)** Description of non-cash assistance | **(h)** Purpose of grant or assistance |
|---|---|---|---|---|---|---|---|
| Northwestern University619 Clark Street<br>Evanston, IL 60208 | 36-2167817 | 501(c)(3) | 122,861 | | | | Research |
| NYU Medical CollegeChildren's & Women's Physicians of Westchester LLP40 Sunshine Cottage Road<br>Valhalla, NY 10595 | 13-1099420 | 501(c)(3) | 107,800 | | | | Research |
| NYU School of Medicine545 First Avenue<br>New York, NY 10016 | 13-5562308 | 501(c)(3) | 65,800 | | | | Research |
| Oregon Health & Science University3181 SW Sam Jackson Park Road<br>Portland, OR 97239 | 93-1176109 | government | 32,500 | | | | Research |
| Regents of the Univ of CA San Diego9500 Gilman Drive<br>La Jolla, CA 92093 | 95-6006144 | 501(c)(3) | 112,000 | | | | Research |
| Regents of the Univ of California (Irvine)Accounting Office Biological Sciences III Suite 1400<br>Irvine, CA 92697 | 95-2226406 | 501(c)(3) | 40,000 | | | | Research |
| Regents of the University of California SF3333 California St Suite 315 Box 0962<br>San Francisco, CA 94118 | 94-6036493 | 501(c)(3) | 80,000 | | | | Research |
| Regents of Univ of Michigan 3003 S State Street<br>Ann Arbor, MI 48109 | 38-6006309 | 501(c)(3) | 32,500 | | | | Research |
| Research Foundation of SUNY University at Buffalo3435 Main Street<br>Buffalo, NY 14214 | 14-6013200 | government | 40,000 | | | | Research |
| Stanford University3145 Porter Drive<br>Palo Alto, CA 94304 | 94-1156365 | 501(c)(3) | 140,000 | | | | Research |

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) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|---|---|---|---|---|---|---|
| The Ohio State University Research Foundation1960 Kenny Road Columbus,OH 43210 | 31-6401599 | 501(c)(3) | 198,200 | | | | Research |
| The University of Texas MD Anderson Cancer Center 1515 Holcombe Blvd Houston,TX 77030 | 74-6001118 | government | 100,000 | | | | Research |
| Thomas Jefferson University 1020 Walnut Street 5th FL Philadelphia,PA 19107 | 23-1352651 | 501(c)(3) | 140,000 | | | | Research |
| Trudeau Institute Inc154 Algonquin Ave Sarana Lake,NY 12983 | 14-1401413 | 501(c)(3) | 100,000 | | | | Research |
| Trustees of Columbia University722 W168th Street 4th FL New York,NY 10032 | 15-5598093 | 501(c)(3) | 37,000 | | | | Research |
| University of Colorado at Denver & Health Sciences 12800 E 19th Avenue Aurora,CO 80045 | 84-6000555 | government | 40,000 | | | | Research |
| University of South Florida 3802 Spectrum Blvd Suite 100 Tampa,FL 33612 | 59-2959590 | 501(c)(3) | 99,574 | | | | Research |
| University of Massachusetts 333 South Street Suite 450 Shrewsbury,MA 01545 | 04-3167352 | Government Sec 115 | 40,000 | | | | Research |
| University of Alabama at BirminghamUniversity Station Birmingham,AL 35294 | 63-6005396 | 501(c)(3) | 40,000 | | | | Research |
| University of ArizonaPO Box 3308 Tucson,AZ 85722 | 74-2652689 | 501(c)(3) | 37,000 | | | | Research |

## 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) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount 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 Chicago5801 South Ellis Avenue Chicago, IL 60637 | 36-2177139 | 501(c)(3) | 60,000 | | | | Research |
| University of Illinois at Urbana-Champaign601 S Matthews Avenue Urbana, IL 61801 | 37-6000511 | government | 40,000 | | | | Research |
| University of Kansas Medical Center Research Institute Inc3901 Rainbow Blvd Mail Stop 1039 Kansas City, KS 66160 | 48-1108830 | 501(c)(3) | 105,800 | | | | Research |
| University of Louisville Research Foundation580 S Preston St Ste 210 Louisville, KY 40202 | 61-1024882 | government | 99,567 | | | | Research |
| University of Massachusetts Amherst710 North Pleasant Street Amherst, MA 01003 | 04-3167352 | government | 40,000 | | | | Research |
| University of Miami Miller School of MedicinePO Box 025405 Miami, FL 33102 | 59-0624458 | 501(c)(3) | 50,000 | | | | Research |
| University of Minnesota2221 University Ave SE Suite 111 minneapolis, MI 55414 | 41-6007513 | government | 40,000 | | | | Research |
| University PittsburghOffice of Financial Information Pittsburgh, PA 15260 | 25-0965591 | 501(c)(3) | 100,000 | | | | Research |
| University of Rochester910 Genesee Street Suite 200 Rochester, NY 14611 | 16-0743209 | 501(c)(3) | 40,000 | | | | Research |
| University of Vermont85 South Prospect Street Burlington, VT 05405 | 03-0179440 | 501(c)(3) | 84,200 | | | | Research |

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) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount 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 VirginiaPO Box 400202<br>Charlottesville, VA 22904 | 54-6001796 | 501(c)(3) | 126,000 | | | | Research |
| University of Washington 3917 University Way NE<br>seattle, WA 98105 | 91-6001537 | government Sec 115 | 204,750 | | | | Research |
| Vanderbilt Univ Medical CenterDept at 40326<br>Atlanta, GA 31192 | 62-0476822 | 501(c)(3) | 40,000 | | | | Research |
| Wayne State University5057 Woodward Ave Suite 13202<br>detroit, MI 48202 | 38-6028429 | 501(c)(3) | 100,000 | | | | Research |
| Yale University2 Whitney Avenue 6th Fl<br>New Haven, CT 06510 | 06-0646973 | 501(c)(3) | 39,898 | | | | Research |
| ALA of Atlantic CoastPO Box 35010<br>Richmond, VA 23235 | 56-0547515 | 501(c)(3) | 63,761 | | | | Federal Grants & Program Site Grants (4730, 4920, 4950, 4980) |
| Ala of California424 Pendleton Way<br>oakland, CA 94621 | 94-0362650 | 501(c)(3) | 52,962 | | | | Federal Grants & Program Site Grants (4720, 4880, 4920, 4950, 4980) |
| AlA of AIW2625 Third Avenue<br>Seattle, WA 98121 | 26-4010540 | 501(c)(3) | 10,000 | | | | Federal Grants & Program Site Grants (4920) |
| ALA of Mid-Atlantic3001 Old Gettyburg Road<br>Camp Hill, PA 17011 | 25-1825116 | 501(c)(3) | 40,000 | | | | Federal Grants & Program Site Grants (4730, 4920, 4980) |
| ALA of Mountain Pacific7420 SW Bridgeport Road<br>Tigard, OR 97224 | 93-0386887 | 501(c)(3) | 50,688 | | | | Federal Grants & Program Site Grants (4720, 4890,4920, 4980) |

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)** EIN | **(c)** IRC Code section if applicable | **(d)** Amount of cash grant | **(e)** Amount of non-cash assistance | **(f)** Method of valuation (book, FMV, appraisal, other) | **(g)** Description of non-cash assistance | **(h)** Purpose of grant or assistance |
|---|---|---|---|---|---|---|---|
| ALA of New York116 John Street<br>New York, NY 10038 | 26-2818624 | 501(c)(3) | 87,000 | | | | Federal Grants & Program Site Grants (4920, 4950) |
| ALA of the Central States<br>8150 Brookriver Dr S-102<br>Dallas, TX 75247 | 43-0662525 | 501(c)(3) | 275,753 | | | | Federal Grants & Program Site Grants (4720, 4730, 4890, 4920, 4950,4980) |
| ALA of the Mid SOUTH2325 SEVERN AVENUE SUITE 8<br>MetAIRIE, LA 70001 | 63-0320189 | 501(c)(3) | 1,102 | | | | Federal Grants & Program Site Grants (4720, 4880, 4980) |
| ALA of the Southeast6852 Belfort Oaks Place<br>Jacksonville, FL 32216 | 59-0662271 | 501(c)(3) | 10,000 | | | | Federal Grants & Program Site Grants (4720, 4920) |
| ALA of the Southwest5600 Greenwood Plaza Blvd Suite 100<br>100<br>Greenwood Village, CO 80111 | 86-0111676 | 501(c)(3) | 56,406 | | | | Federal Grants & Program Site Grants (4720, 4880, 4920, 4950, 4980) |
| ALA of Upper Midwest3000 Kelly Lane<br>Springfield, IL 62707 | 20-4392201 | 501(c)(3) | 97,328 | | | | Federal Grants & Program Site Grants (4720, 4880, 4920, 4950, 4980) |