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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

2010Open to Public
Inspection**A For the 2010 calendar year, or tax year beginning****and ending****B Check if applicable**

- ☐ Address change
☒ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization**CONQUER CANCER FOUNDATION OF THE
AMERICAN SOCIETY OF CLINICAL ONCOLOGY**

Doing Business As

Number and street (or P O box if mail is not delivered to street address) Room/suite
2318 MILL ROAD #800City or town, state or country, and ZIP + 4
ALEXANDRIA, VA 20164**F Name and address of principal officer: ALLEN LICHTER MD
SAME AS C ABOVE****D Employer identification number****31-1667995****E Telephone number****571/483-1300****G Gross receipts \$****28,213,702.****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) ☐ 501(c) () (insert no) ☐ 4947(a)(1) or ☐ 527**J Website:** ▶ **WWW.CONQUERCANCERFOUNDATION.ORG****K Form of organization** ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L Year of formation** **1999****M State of legal domicile** **VA****Part I Summary**

1 Briefly describe the organization's mission or most significant activities: CONQUER CANCER FOUNDATION OF THE AMERICAN SOCIETY OF CLINICAL ONCOLOGY (CCF) IS THE PHILANTHROPIC ARM	
2 Check this box <input type="checkbox"/> 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)	12
4 Number of independent voting members of the governing body (Part VI, line 1b)	10
5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	0
6 Total number of volunteers (estimate if necessary)	58
7a Total unrelated business revenue from Part VIII, column (C), line 12	0.
b Net unrelated business taxable income from Form 990-T, line 34	0.
8 Contributions and grants (Part VIII, line 1)	24,169,850.
9 Program service revenue (Part VIII, line 2g)	0.
10 Investment income (Part VIII, column (A), lines 3, 4, and 5d)	24,759.
11 Other revenue (Part VIII, column (A), lines 5, 6c, 8c, 9c, 10c, and 11e)	0.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	24,194,609.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	18,431,621.
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)	0.
16a Professional fundraising fees (Part IX, column (A), line 11e)	68,142.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,588,235.	199,150.
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	3,488,563.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	21,988,326.
19 Revenue less expenses. Subtract line 18 from line 12	2,206,283.
20 Total assets (Part X, line 16)	32,341,284.
21 Total liabilities (Part X, line 26)	7,510,139.
22 Net assets or fund balances. Subtract line 21 from line 20	24,831,145.

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	Signature of officer	Date
	PAUL AINES, CFO	7/28/11
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature
	DEBORAH G. KOSNETT	7/28/11
	Firm's name ▶ TATE AND TRYON	Firm's EIN ▶
	Firm's address ▶ 2021 L STREET, NW SUITE 400 WASHINGTON, DC 20036	Phone no (202) 293-2200

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes☐ No

032001 02-22-11

LHA For Paperwork Reduction Act Notice, see the separate instructions.

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SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

9-16

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Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

☒ X**1** Briefly describe the organization's mission:

THE MISSION STATEMENT FOR CONQUER CANCER FOUNDATION OF THE AMERICAN SOCIETY OF CLINICAL ONCOLOGY (CCF) (FORMERLY KNOWN AS THE ASCO CANCER FOUNDATION) IS: CONQUERING CANCER WORLDWIDE BY FUNDING BREAKTHROUGH RESEARCH AND SHARING CUTTING-EDGE KNOWLEDGE. CCF'S VISION IS A WORLD

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?☒ X 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 ☒ X 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 \$ 9,716,852. including grants of \$ 9,181,563.) (Revenue \$)
PROFESSIONAL EDUCATION -

THE FIELD OF ONCOLOGY IS A DYNAMIC ARENA WHERE DEVELOPMENTS AND DISCOVERIES OCCUR NEARLY EVERY DAY. STAYING ABREAST OF THESE DEVELOPMENTS IS CRITICAL IN ALLOWING CANCER PHYSICIANS AND OTHER HEALTHCARE PROFESSIONALS TO PROVIDE EACH PERSON WITH CANCER THE BEST TREATMENT OPTIONS AVAILABLE. THROUGH ITS SUPPORT OF THE EDUCATIONAL AND SCIENTIFIC PROGRAMS OF ITS NON-PROFIT, CHARITABLE, RELATED ORGANIZATION, THE AMERICAN SOCIETY OF CLINICAL ONCOLOGY, THE FOUNDATION PROVIDES EDUCATIONAL AND SCIENTIFIC OPPORTUNITIES FOR ONCOLOGISTS AND OTHER HEALTHCARE PROFESSIONALS FROM AROUND THE GLOBE. TO ENSURE THAT THE HIGHEST-QUALITY CANCER EDUCATION CONTINUES TO BE AVAILABLE TO DOCTORS IN AN INDEPENDENT AND UNBIASED FORUM, FUNDS FROM CCF ARE USED

4b (Code:) (Expenses \$ 8,964,676. including grants of \$ 7,900,868.) (Revenue \$)
RESEARCH -

IN THIS AGE OF SCIENTIFIC PROMISE, FEDERAL FUNDS FOR CANCER RESEARCH ARE DECLINING. FULFILLING THE PROMISE OF TODAY'S ADVANCES RELIES ON FUNDING FOR RESEARCH PROJECTS AND SUPPORT FOR INVESTIGATORS WHO WISH TO PURSUE A CAREER IN CLINICAL AND TRANSLATIONAL CANCER RESEARCH. WITHOUT CONTINUED, WELL-TARGETED RESEARCH, THERE WOULD BE NO MEANINGFUL PROGRESS. AS A CHARITABLE ORGANIZATION, THE FOUNDATION SUPPORTS PROGRESS BY FUNDING CANCER RESEARCHERS AT ALL STAGES OF THEIR CAREERS, ENABLING ONCOLOGY'S BEST AND BRIGHTEST TO PURSUE PROMISING RESEARCH. EACH YEAR, CCF FUNDS AND AWARDS MULTIPLE RESEARCH GRANTS DESIGNED TO HELP ATTRACT AND RETAIN THE BEST SCIENTIFIC MINDS IN CANCER RESEARCH AND TO SUPPORT THEIR EFFORTS. HIGHLIGHTS OF 2010 RESEARCH ACTIVITIES

4c (Code:) (Expenses \$ 3,516,038. including grants of \$ 3,452,188.) (Revenue \$)
QUALITY AND ACCESS TO CARE-

ADVANCES IN CANCER CARE ARE OCCURRING MORE AND MORE FREQUENTLY. YET, THE FULL PROMISE OF SUCH PROGRESS CANNOT BE REALIZED UNTIL HIGH-QUALITY CANCER CARE IS AVAILABLE TO EVERYONE. CONQUER CANCER FOUNDATION IS AWARE OF THE DIVIDE BETWEEN THOSE WITH ACCESS TO THE FRUITS OF RESEARCH AND TIMELY CARE, AND THOSE WITHOUT.

STATE/REGIONAL AFFILIATE PROGRAM

THE ASCO STATE/REGIONAL AFFILIATE PROGRAM IS DESIGNED TO ADDRESS THE PRACTICAL NEEDS OF PRACTICING ONCOLOGISTS ON THE LOCAL LEVEL ON THE EVER-CHANGING HEALTHCARE ENVIRONMENT BY PROVIDING THEM WITH A RANGE OF SERVICES. THE PROGRAM INCLUDES 48 STATE OR REGIONAL ONCOLOGY GROUPS WHO

4d Other program services. (Describe in Schedule O.)

(Expenses \$ 114,524. including grants of \$ 114,524.) (Revenue \$)

4e Total program service expenses 22,312,090.

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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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	N/A	
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? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>		X
b 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? <i>If "Yes," complete Schedule D, Part VII</i>		X
c 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? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d 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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f 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 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	X	
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 United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>	X	
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 United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>	X	
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? <i>If "Yes," complete Schedule G, Part I</i>	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		

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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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21 X	
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? <i>If "Yes," complete Schedule I, Parts I and III</i>	22 X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23 X	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		24a X
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? <i>If "Yes," complete Schedule L, Part I</i>		25a X
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? <i>If "Yes," complete Schedule L, Part I</i>		25b X
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? <i>If "Yes," complete Schedule L, Part II</i>		26 X
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? <i>If "Yes," complete Schedule L, Part III</i>		27 X
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? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
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? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34 X	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	X
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
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? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38 X	

Note. All Form 990 filers are required to complete Schedule O

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Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V ☐

		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 0		
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?		X	
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 0		
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. (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?			X
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			
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)?		X	
b If "Yes," enter the name of the foreign country: BERMUDA, CAYMAN ISLANDS See instructions for 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?			X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			X
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
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?			X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			
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?			X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?			
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		N/A	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		N/A	
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?	N/A		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	N/A		
b Did the organization make a distribution to a donor, donor advisor, or related person?	N/A		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	N/A		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	N/A		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	N/A		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	N/A		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c Enter the amount of reserves on hand			
14a Did the organization receive any payments for indoor tanning services during the tax year?			X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI

☒ X

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	12	
b Enter the number of voting members included in line 1a, above, who are independent	10	
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?		X
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?		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	X	
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	X	
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	X	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
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		X

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?		X
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?		
11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13 Does the organization have a written whistleblower policy?	X	
14 Does the organization have a written document retention and destruction policy?	X	
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	X	
b Other officers or key employees of the organization	X	
If "Yes" to line 15a or 15b, 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?		X
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?		

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, ME, WA, FL, GA, HI

18 Section 6104 requires an organization to make its Forms 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.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ►
PAUL AINES, CFO - 571/483-1300
SAME AS C ABOVE, ALEXANDRIA, VA 20164

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

Check if Schedule O contains a response to any question in this Part VII ☐

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.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. 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, and 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 neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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			
MARTIN J. MURPHY JR., PHD, DMEDSC CHAIR	1.00	X		X				0.	0.	0.
RICHARD L. SCHILSKY, MD SECRETARY	1.00	X		X				250.	0.	0.
ALLEN LICHTER MD BOARD MEMBER, CEO	4.00	X		X				0.	758,456.	18,656.
W. CHARLES PENLEY, MD TREASURER	1.00	X		X				0.	750.	0.
JOHN H. GLICK, MD BOARD MEMBER	1.00	X						0.	0.	0.
NORA ANITA JANJAN, MD BOARD MEMBER	1.00	X						0.	0.	0.
ROBERT J. MAYER, MD BOARD MEMBER	1.00	X						0.	0.	0.
THOMAS A. MARSLAND, MD BOARD MEMBER	1.00	X						0.	0.	0.
SANDRA M. SWAIN, MD BOARD MEMBER	1.00	X						0.	0.	0.
LAWRENCE H. EINHORN, MD BOARD MEMBER	1.00	X						0.	0.	0.
JOSEPH S BAILES, MD BOARD MEMBER	1.00	X						0.	77,000.	0.
NANCY DALY, MS, MPH BOARD MEMBER, CCF EXEC DIR.	37.50			X				0.	194,770.	25,874.
DINA MICHELS ESQ. GENERAL COUNSEL	4.00			X				0.	447,958.	31,884.
PAUL AINES, CPA CFO	4.00			X				0.	265,394.	32,122.

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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			
1b Sub-total								250.	1,744,328.	108,536.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								250.	1,744,328.	108,536.

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 **0**

- 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*
- 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*
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*

	Yes	No
3		X
4	X	
5		X

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) Name and business address	(B) Description of services	(C) Compensation
GRAHAM PELTON 39 BEACHWOOD ROAD, SUMMIT, NJ 07901	FUNDRAISING CONSULTING	199,150.

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 **1**

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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	1 a Federated campaigns	1a	2,798.				
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d	801,177.				
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	23,596,032.				
	g Noncash contributions included in lines 1a-1f \$		6,004.				
	h Total. Add lines 1a-1f			24,400,007.			
Program Service Revenue			Business Code				
	2 a _____						
	b _____						
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			136,059.			136,059.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross Rents	(i) Real	(ii) Personal				
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss)			129,614.			129,614.
	8 a 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						
	9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
	10 a 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				
11 a _____							
b _____							
c _____							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total revenue. See instructions				24,665,680.	0.	0.	265,673.

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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	19,966,720.	19,966,720.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	443,424.	443,424.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	238,999.	238,999.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management	2,550,588.	1,413,026.	438,701.	698,861.
b Legal	6,223.		6,223.	
c Accounting	5,000.		5,000.	
d Lobbying				
e Professional fundraising services See Part IV, line 17	199,150.			199,150.
f Investment management fees	55,948.		55,948.	
g Other	79,023.	61,080.	17,943.	
12 Advertising and promotion	499,788.			499,788.
13 Office expenses	48,262.	21,797.	13,476.	12,989.
14 Information technology	38,795.		38,795.	
15 Royalties				
16 Occupancy	211,536.	117,191.	36,384.	57,961.
17 Travel	172,484.	23,829.	106,041.	42,614.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	25,802.		25,802.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a DUES & SUBSCRIPTIONS	65,003.	17,500.	45,861.	1,642.
b BANK & CREDIT CARD FEES	42,687.		73.	42,614.
c POSTAGE	32,616.			32,616.
d PRINTING & DISTRIBUTION	9,688.	8,524.	1,164.	
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	24,691,736.	22,312,090.	791,411.	1,588,235.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	<1,356,846.>	1	<1,446,413.>
	2 Savings and temporary cash investments	6,007,900.	2	7,295,112.
	3 Pledges and grants receivable, net	5,887,166.	3	6,725,883.
	4 Accounts receivable, net	3,082.	4	1,133.
	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)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	42,919.	9	30,450.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b	10c	
	11 Investments - publicly traded securities	18,778,273.	11	21,727,452.
	12 Investments - other securities. See Part IV, line 11	2,605,451.	12	1,454,926.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	373,339.	15	396,529.
16 Total assets. Add lines 1 through 15 (must equal line 34)	32,341,284.	16	36,185,072.	
Liabilities	17 Accounts payable and accrued expenses	5,722,854.	17	7,386,469.
	18 Grants payable		18	
	19 Deferred revenue	1,381,623.	19	1,306,001.
	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		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D	405,662.	25	1,058,340.
	26 Total liabilities. Add lines 17 through 25	7,510,139.	26	9,750,810.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	17,484,832.	27	17,511,782.
	28 Temporarily restricted net assets	7,229,350.	28	8,840,239.
	29 Permanently restricted net assets	116,963.	29	82,241.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> 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	24,831,145.	33	26,434,262.
	34 Total liabilities and net assets/fund balances	32,341,284.	34	36,185,072.

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Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	24,665,680.
2	Total expenses (must equal Part IX, column (A), line 25)	2	24,691,736.
3	Revenue less expenses. Subtract line 2 from line 1	3	<26,056.>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	24,831,145.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	1,629,173.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	26,434,262.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII ☒

- 1** Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____
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?
- b** Were the organization's financial statements audited by an independent accountant?
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 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 separate basis, consolidated basis, or both:
☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- 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.

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

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CONQUER CANCER FOUNDATION OF THE

Schedule A (Form 990 or 990-EZ) 2010 **AMERICAN SOCIETY OF CLINICAL ONCOLOGY** 31-1667995 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	26,031,754.	5,055,674.	32,873,924.	24,169,849.	24,400,007.	112,531,208.
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	26,031,754.	5,055,674.	32,873,924.	24,169,849.	24,400,007.	112,531,208.
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)						49,700,822.
6 Public support. Subtract line 5 from line 4						62,830,386.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	26,031,754.	5,055,674.	32,873,924.	24,169,849.	24,400,007.	112,531,208.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	711,412.	238,350.	481,663.	195,182.	136,059.	1,762,666.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						114,293,874.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	54.97 %
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	52.71 %
16a 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input checked="" type="checkbox"/>		
b 33 1/3% support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 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 ► <input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2009. 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 ► <input type="checkbox"/>		
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 ► <input type="checkbox"/>		

Schedule A (Form 990 or 990-EZ) 2010

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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 section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2010. 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 - 2009. 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 ☐

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

2010Open to Public
InspectionName of the organization **CONQUER CANCER FOUNDATION OF THE
AMERICAN SOCIETY OF CLINICAL ONCOLOGY**Employer identification number
31-1667995**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?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can 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?		<input type="checkbox"/> Yes <input type="checkbox"/> 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).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 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 Tax 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, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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 section 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 (ASC 958), 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 (ASC 958), 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 (ASC 958) 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 acquisition, 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
1c	
1d	
1e	
1f	

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

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	116,963.	103,356.	154,283.		
b Contributions	15,930.	14,492.			
c Net investment earnings, gains, and losses	1,348.	1,115.	6,573.		
d Grants or scholarships	52,000.	2,000.	57,500.		
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	82,241.	116,963.	103,356.		

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

- a Board designated or quasi-endowment ☐ .00 %
 b Permanent endowment ☐ 100.00 %
 c Term endowment ☐ .00 %

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

- (i) unrelated organizations
 (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

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

Part VI 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				
d Equipment				
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c))

0.

Schedule D (Form 990) 2010

**CONQUER CANCER FOUNDATION OF THE
AMERICAN SOCIETY OF CLINICAL ONCOLOGY**

Schedule D (Form 990) 2010

31-1667995 Page **3**

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
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Col (b) must 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
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col (b) must 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
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	

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

(a) Description of liability	(b) Amount
1.	
(1) Federal income taxes	
(2) DUE TO RELATED ORGANIZATION	1,058,340.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	
1,058,340.	

FIN 48 (ASC 740) 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 (ASC 740)

032053
12-20-10

Schedule D (Form 990) 2010

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	24,665,680.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	24,691,736.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	<26,056.>
4	Net unrealized gains (losses) on investments	4	1,629,173.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	1,629,173.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	1,603,117.

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	99,004,885.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	1,629,173.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	72,710,032.
e	Add lines 2a through 2d	2e	74,339,205.
3	Subtract line 2e from line 1	3	24,665,680.
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 must equal Form 990, Part I, line 12.)	5	24,665,680.

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

1	Total expenses and losses per audited financial statements	1	83,093,427.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	58,401,691.
e	Add lines 2a through 2d	2e	58,401,691.
3	Subtract line 2e from line 1	3	24,691,736.
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 must equal Form 990, Part I, line 18.)	5	24,691,736.

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, line 2; 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.

PART V, LINE 4: PERMANENTLY RESTRICTED NET ASSETS OF DONOR-RESTRICTED

ENDOWMENT FUNDS ARE PRESERVED, ABSENT EXPLICIT DIRECTION FROM THE DONOR.

**PART V, LINE 1A-1G: ENDOWMENT FUNDS ARE BASED ON GAAP AND AGREE TO THE
RESTRICTED FUNDS ON THE AUDITED FINANCIAL STATEMENTS.**

**PART X, LINE 2: THE ORGANIZATION BELIEVES THAT IT HAS APPROPRIATE
SUPPORT FOR ANY TAX POSITIONS TAKEN, AND THEREFORE, DOES NOT HAVE ANY**

Part XIV Supplemental Information (continued)

UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE CONSOLIDATED FINANCIAL STATEMENTS. AT A MINIMUM, THE 2007 THROUGH 2010 TAX YEARS ARE OPEN FOR EXAMINATION BY TAXING AUTHORITIES.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RELATED ENTITY REVENUE REPORTED ON A SEPARATE BASIS 72,710,032.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

RELATED ENTITY EXPENSE REPORTED ON A SEPARATE BASIS 58,401,691.

PART XII, LINE 2D - RECONCILIATION OF REVENUE - RELATED ENTITY REVENUE REPORTED ON A SEPARATE BASIS. PART XIII, LINE 2D - RECONCILIATION OF EXPENSE - RELATED ENTITY EXPENSE REPORTED ON A SEPARATE BASIS.

PART IV; QUESTION 4 - INTEREST FROM THE PERMANENTLY RESTRICTED FUNDS IS INTENDED TO FUND FUTURE RESEARCH AND/OR EDUCATIONAL AWARDS.

**SCHEDULE F
(Form 990)**Department of the Treasury
Internal Revenue Service**Statement of Activities Outside the United States**▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010Open to Public
Inspection

Name of the organization

CONQUER CANCER FOUNDATION OF THE
AMERICAN SOCIETY OF CLINICAL ONCOLOGY

Employer identification number

31-1667995

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 For grantmakers. 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 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
NORTH AMERICA	0	0	GRANTS ISSUED TO INDIVIDUALS AND RECIPIENT ORGANIZATION(S), PROGRAM SERVICES	MERIT AWARDS (\$20,500) AND YOUNG INVESTIGATOR AWARD (\$50,000)	70,500.
EAST ASIA & THE PACIFIC	0	0	GRANTS ISSUED TO INDIVIDUALS AND RECIPIENT ORGANIZATION(S), PROGRAM SERVICES	MERIT AWARDS (\$10,500) AND YOUNG INVESTIGATOR AWARD (\$100,000)	110,500.
EUROPE	0	0	GRANTS ISSUED TO INDIVIDUALS, PROGRAM SERVICES	MERIT AWARDS (\$42,000)	42,000.
SOUTH ASIA	0	0	GRANTS ISSUED TO INDIVIDUAL, PROGRAM SERVICES	MERIT AWARD (\$1,000)	1,000.
SOUTH AMERICA	0	0	GRANTS ISSUED TO INDIVIDUAL, PROGRAM SERVICES	MERIT AWARD (\$1,500)	1,500.
3 a Sub-total	0	0			225,500.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			225,500.

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

Schedule F (Form 990) 2010

Page 2

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000

Part II can be duplicated if additional space is needed.

[illegible]

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) ☐ Yes ☒ No
- 2 Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A) ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations (see Instructions for Form 5471) ☐ Yes ☒ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621) ☐ Yes ☒ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships (see Instructions for Form 8865) ☐ Yes ☒ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713) ☐ Yes ☒ No

Schedule F (Form 990) 2010

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

SCHEDULE F, PART I, LINE 2: CCF GRANTS ARE AWARDED BASED ON MERIT THROUGH A PEER-REVIEW PROCESS OF REVIEW CONDUCTED BY MEMBERS OF CCF'S GRANT SELECTION COMMITTEE USING ELIGIBILITY CRITERIA ESTABLISHED FOR EACH SPECIFIC GRANT. GRANTEEES ARE REQUIRED TO SIGN A GRANT AGREEMENT WITH CCF THAT ESTABLISHES CERTAIN REQUIREMENTS FOR THE GRANT. GRANTEEES MUST REQUEST CCF'S APPROVAL FOR ANY CHANGES IN THE GRANT PROJECT AND THE GRANTEE'S STATUS. GRANTEEES MUST SUBMIT A FORMAL REQUEST FOR A CHANGE IN OBJECTIVES OR SCOPE TO CCF AND INCLUDE JUSTIFICATION FOR THE CHANGES, WHICH IS SUBJECT TO CCF'S REVIEW AND APPROVAL.

GRANTEEES ARE REQUIRED TO NOTIFY CCF IF THERE ARE SIGNIFICANT DELAYS THAT WILL MATERIALLY AFFECT THE ABILITY TO ATTAIN THE OBJECTIVES OF THE GRANT PROJECT OR TO MEET SUCH TIME SCHEDULES AS MAY HAVE BEEN PROPOSED.

GRANTEEES ARE REQUIRED TO NOTIFY CCF IF THEY PLAN TO LEAVE AN ORGANIZATION DURING THE COURSE OF A GRANT AND MUST SUBMIT A REQUEST FOR APPROVAL OF INSTITUTION TRANSFER OF THE GRANT BEFORE ANY TRANSFER TAKES PLACE. CHANGES IN THE GRANT BUDGET ARE SUBJECT TO THE REVIEW AND APPROVAL OF CCF.

CCF REQUIRES TECHNICAL PROJECT REPORTS (PROGRESS REPORTS) AND BUDGET SUMMARIES (FINANCIAL REPORTS) FOR ALL GRANTS. UNLESS OTHERWISE SPECIFIED IN THE GRANT TERMS AND CONDITIONS, AN ANNUAL PROGRESS REPORT AND A BUDGET SUMMARY ARE REQUIRED TO BE SUBMITTED WITHIN 30 DAYS FOLLOWING THE END OF THE GRANT BUDGET PERIOD. CCF REVIEWS THE REPORTS AND PROVIDES THE GRANTEE AN APPROVAL NOTIFICATION.

CCF REQUIRES A FINAL PROJECT REPORT AND BUDGET SUMMARY WITHIN 30 DAYS

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

FOLLOWING EXPIRATION OF THE GRANT. CCF REVIEWS THE REPORTS AND IF APPROVED, PROVIDES THE GRANTEE AN APPROVAL NOTIFICATION. ALL UNUSED FUNDS AT THE END OF THE AWARD TERM MUST BE RETURNED TO CCF

GRANTS ARE ADMINISTRATIVELY CLOSED BY CCF AFTER RECEIPT OF THE FINAL PROJECT REPORT AND FINAL BUDGET SUMMARY AND AFTER CCF'S DETERMINATION THAT ANY OTHER ADMINISTRATIVE REQUIREMENTS IN THE GRANT HAVE BEEN MET. CCF RESERVES THE RIGHT TO ASK THE GRANTEE TO RETURN FUNDS THAT WERE SPENT INCONSISTENTLY WITH THE APPROVED BUDGET.

PART III, COLUMN (A):

REGION: EAST ASIA & PACIFIC

(A) TYPE OF GRANT OR ASSISTANCE: AWARDS WERE GIVEN TO ONCOLOGY FELLOWS WHO ARE FIRST AUTHORS ON ABSTRACTS SELECTED FOR PRESENTATION AT AN ASCO SCIENTIFIC MEETING, INCLUDING THE ANNUAL MEETING, BREAST CANCER SYMPOSIUM, GASTROINTESTINAL CANCERS SYMPOSIUM, AND GENITOURINARY CANCERS SYMPOSIUM.

REGION: SOUTH ASIA

(A) TYPE OF GRANT OR ASSISTANCE: AWARDS WERE GIVEN TO ONCOLOGY FELLOWS WHO ARE FIRST AUTHORS ON ABSTRACTS SELECTED FOR PRESENTATION AT AN ASCO SCIENTIFIC MEETING, INCLUDING GASTROINTESTINAL CANCERS SYMPOSIUM.

REGION: NORTH AMERICA

(A) TYPE OF GRANT OR ASSISTANCE: AWARDS WERE GIVEN TO ONCOLOGY FELLOWS WHO ARE FIRST AUTHORS ON ABSTRACTS SELECTED FOR PRESENTATION AT AN ASCO SCIENTIFIC MEETING, INCLUDING THE ANNUAL MEETING, BREAST CANCER

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

SYMPOSIUM, GASTROINTESTINAL CANCERS SYMPOSIUM, AND GENITOURINARY CANCERS SYMPOSIUM.

REGION: EUROPE

(A) TYPE OF GRANT OR ASSISTANCE: AWARDS WERE GIVEN TO ONCOLOGY FELLOWS WHO ARE FIRST AUTHORS ON ABSTRACTS SELECTED FOR PRESENTATION AT AN ASCO SCIENTIFIC MEETING, INCLUDING THE ANNUAL MEETING, BREAST CANCER SYMPOSIUM, GASTROINTESTINAL CANCERS SYMPOSIUM, AND GENITOURINARY CANCERS SYMPOSIUM.

REGION: SOUTH AMERICA

(A) TYPE OF GRANT OR ASSISTANCE: AWARDS WERE GIVEN TO ONCOLOGY FELLOWS WHO ARE FIRST AUTHORS ON ABSTRACTS SELECTED FOR PRESENTATION AT AN ASCO SCIENTIFIC MEETING, INCLUDING THE ASCO ANNUAL MEETING.

SCHEDULE F, PART II, LINE 1; DESCRIPTION OF AWARDS DISTRIBUTED

ADVANCED CLINICAL RESEARCH AWARD (ACRA) IS DESIGNED FOR CLINICAL ONCOLOGY RESEARCHERS INVOLVED IN INVESTIGATIVE WORK FOR 5-10 YEARS AND INTENDED TO SUPPORT ORIGINAL RESEARCH NOT CURRENTLY FUNDED. TOTAL GRANT: \$450,000 OVER THREE YEARS.

TRANSLATIONAL RESEARCH PROFESSORSHIP AWARD (TRPA) IS INTENDED TO SUPPORT QUALIFIED RESEARCHERS WHO ARE DEDICATED TO BRINGING ADVANCES IN BASIC SCIENCES INTO THE CLINICAL ARENA AND TO MENTORING OTHER TRANSLATIONAL RESEARCHERS. TOTAL GRANT: \$500,000 OVER FIVE YEARS.

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

CAREER DEVELOPMENT AWARD (CDA) PROVIDES FUNDING TO CLINICAL INVESTIGATORS WHO HAVE RECEIVED THEIR INITIAL FACULTY APPOINTMENT TO ESTABLISH AN INDEPENDENT CLINICAL CANCER RESEARCH PROGRAM. TOTAL GRANT: \$200,000 OVER THREE YEARS.

GIANNI BONADONNA BREAST CANCER AWARD AND FELLOWSHIP RECOGNIZES AN ACTIVE CLINICAL OR TRANSLATIONAL RESEARCHER WITH A DISTINGUISHED RECORD OF ACCOMPLISHMENTS IN ADVANCING THE FIELD OF BREAST CANCER. THE RECIPIENT RECEIVES A \$10,000 AWARD AND DELIVERS A LECTURE DURING THE BREAST CANCER SYMPOSIUM. THE AWARD IS ACCOMPANIED BY A ONE-YEAR \$50,000 FELLOWSHIP AWARD TO AN EARLY-CAREER BREAST CANCER RESEARCHER AT THE AWARD RECIPIENT'S AFFILIATED INSTITUTION. THE FELLOWSHIP AWARD WILL FUND AN INVESTIGATOR WHOSE BREAST CANCER RESEARCH HAS A PATIENT-ORIENTED FOCUS, INCLUDING CLINICAL TRIALS OR TRANSLATIONAL RESEARCH INVOLVING HUMAN PARTICIPANTS.

YOUNG INVESTIGATOR AWARD PROVIDES FUNDING TO PROMISING INVESTIATORS TO ENCOURAGE AND PROMOTE QUALITY RESEARCH IN CLINICAL ONCOLOGY. THE PURPOSE OF THIS AWARD IS TO FUND PHYSICIANS DURING THE TRANSITION FROM A FELLOWSHIP PROGRAM TO A FACULTY APPOINTMENT. TOTAL GRANT: \$50,000 OVER ONE YEAR.

COMMUNITY ONCOLOGY RESEARCH GRANT (CORG) IS GIVEN TO COMMUNITY-BASED PRACTICES TO SUPPORT THEIR EFFORTS TO ENHANCE THEIR CLINICAL TRIALS PROGRAM. AREAS OF IMPROVEMENT ARE BASED ON THE AMERICAN SOCIETY OF CLINICAL ONCOLOGY STATEMENT OF MINIMUM STANDARDS AND EXEMPLARY ATTRIBUTES OF CLINICAL TRIAL SITES (JOURNAL OF CLINICAL ONCOLOGY, MAY 20 2008).

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

TOTAL GRANT: \$30,000 OVER ONE YEAR.

STATE AFFILIATE GRANT PROGRAM - THE AMERICAN SOCIETY OF CLINICAL ONCOLOGY CREATED THE STATE AFFILIATED GRANT PROGRAM IN 2005 TO PROVIDE FINANCIAL SUPPORT TO ITS STATE/REGIONAL AFFILIATES AS THEY SEEK TO ENHANCE THE SCOPE OF THEIR ACTIVITIES. ALL 48 AFFILIATES ARE ELIGIBLE TO APPLY FOR A GRANT. IN 2010, CCF PROVIDED FUNDING TO ASCO TO ALLOW SELECTED AFFILIATES TO ENGAGE IN PROJECTS THAT WILL HAVE AN OVERALL BENEFIT TO THEIR MEMBERS, ASCO MEMBERS, OTHER STATE SOCIETIES AND THE GENERAL ONCOLOGY COMMUNITY.

MERIT AWARDS ARE DESIGNED TO FURTHER PROMOTE CLINICAL RESEARCH BY YOUNG SCIENTISTS AND TO PROVIDE FELLOWS WITH AN OPPORTUNITY TO PRESENT THEIR RESEARCH AND INTERACT WITH OTHER CLINICAL CANCER INVESTIGATORS AT ASCO SCIENTIFIC MEETINGS. A SELECT NUMBER OF CCF MERIT AWARDS ARE GIVEN ANNUALLY TO RECOGNIZE OUTSTANDING ABSTRACTS SUBMITTED FOR CONSIDERATION FOR PRESENTATION AT AN ASCO SCIENTIFIC MEETING. THE AWARDS ARE GIVEN TO ONCOLOGY FELLOWS WHO ARE FIRST AUTHORS ON SELECTED ABSTRACTS, AND THE CRITERIA ARE DESCRIBED IN THE ELIGIBILITY AND AWARD TERMS SECTIONS.

CLINICAL TRIALS PARTICIPATION AWARD - INTENDED TO INCREASE AWARENESS AND PARTICIPATION IN CLINICAL TRIALS AMONG PHYSICIANS. NOMINATIONS ARE REQUESTED FROM THE ASCO CLINICAL PRACTICE COMMITTEE, COMMUNITY CLINICAL ONCOLOGY PROGRAM, EACH OF THE NCI COOPERATIVE GROUPS, AND VARIOUS COMMUNITY-BASED ONCOLOGY RESEARCH NETWORKS.

CCF PROVIDES THE FUNDING FOR THE INTERNATIONAL DEVELOPMENT AND EDUCATION

Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable.

Also complete this part to provide any additional information.

AWARD (IDEA). THE IDEA IS PROVIDED TO ONCOLOGISTS IN DEVELOPING COUNTRIES TO LEARN ABOUT ONCOLOGY AT THE ASCO ANNUAL MEETING, AT A CANCER CENTER, AND TO DEVELOP LONG-TERM RELATIONSHIPS TO IMPROVE CANCER CARE IN THEIR COUNTRIES.

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047

2010

Open To Public Inspection

Name of the organization

CONQUER CANCER FOUNDATION OF THE
AMERICAN SOCIETY OF CLINICAL ONCOLOGY

Employer identification number
31-1667995

Part I

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☒ Mail solicitations
b ☒ Internet and email solicitations
c ☒ Phone solicitations
d ☒ In-person solicitations
e ☒ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

- 2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes☐ No

- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
GRAHAM PELTON - 39 BEACHWOOD RD, SUMMIT, NJ 07901	FUNDRAISING CONSULTING		X	0.	199,150.	<199,150.>
Total					199,150.	<199,150.>

- 3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO
MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

CONQUER CANCER FOUNDATION OF THE

Schedule G (Form 990 or 990-EZ) 2010 **AMERICAN SOCIETY OF CLINICAL ONCOLOGY** 31-1667995 Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
	(event type)	(event type)	(total number)	
Revenue				
1 Gross receipts				
2 Less: Charitable contributions				
3 Gross income (line 1 minus line 2)				
Direct Expenses				
4 Cash prizes				
5 Noncash prizes				
6 Rent/facility costs				
7 Food and beverages				
8 Entertainment				
9 Other direct expenses				
10 Direct expense summary. Add lines 4 through 9 in column (d)				()
11 Net income summary. Combine line 3, column (d), and line 10				

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

	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue				
1 Gross revenue				
Direct Expenses				
2 Cash prizes				
3 Noncash prizes				
4 Rent/facility costs				
5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d)				()
8 Net gaming income summary. Combine line 1, column d, and line 7				

9 Enter the state(s) in which the organization operates gaming activities: _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: _____

- 11 Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13 Indicate the percentage of gaming activity operated in:
- | | | |
|-------------------------------|-----|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE G, PART I, LINE 2B, COLUMN (V): PAYMENTS MADE TO GRAHAM PELTON CONSULTING WERE FOR FUNDRAISING GUIDANCE ON BEST PRACTICE METHODS OF EFFECTIVE AND EFFICIENT FUNDRAISING. CCF'S RELATED ORGANIZATION, AMERICAN SOCIETY OF CLINICAL ONCOLOGY, INC. (ASCO), ALSO PAID COST FOR FUNDRAISING SERVICES PROVIDED TO CCF, WHICH ARE REFLECTED IN THE IRS FORM 990 OF ASCO.

**CONQUER CANCER FOUNDATION OF THE
AMERICAN SOCIETY OF CLINICAL ONCOLOGY**

31-1667995

Page 1

Schedule I (Form 990) Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

Part II	(a) Name and address of organization or government	(b) EIN	(c) IRC 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 UNIVERSITY 220 WEST MAIN STREET DURHAM, NC 27705	56-0532129	501 (C)(3)	100,000.	0.			YOUNG INVESTIGATOR AWARDS
	JOHN HOPKINS UNIVERSITY 550 NORTH BROADWAY, SUITE 1003 BALTIMORE, MD 21205-2009	52-0591627	501 (C)(3)	424,998.	0.			YOUNG INVESTIGATOR AWARDS, CAREER DEVELOPMENT AWARD
	KELLOGG CANCER CARE CENTERS 1301 CENTRAL STREET EVANSTON, IL 60201	36-4191793	501 (C)(3)	30,000.	0.			COMMUNITY ONCOLOGIST RESEARCH GRANT
	MASSACHUSETTS GENERAL HOSPITAL PO BOX 414876 BOSTON, MA 02241	04-1564655	501 (C)(3)	150,000.	0.			YOUNG INVESTIGATOR AWARDS
	MEMORIAL SLOAN-KETTERING CANCER CENTER - GENERAL POST OFFICE BOX 263633 THIRD AVE - NEW YORK, NY 10017	13-1924236	501 (C)(3)	1,294,992.	0.			YOUNG INVESTIGATOR AWARDS, CAREER DEVELOPMENT AWARDS
	MISSOURI BAPTIST MEDICAL CENTER 3015 N. BALLAS RD ST. LOUIS, MO 63131	43-0652656	501 (C)(3)	30,000.	0.			COMMUNITY ONCOLOGY RESEARCH GRANT
	MONTFIORE MEDICAL CENTER 111 EAST 210TH ST BRONX, NY 10467	13-1740114	501 (C)(3)	500,000.	0.			ADVANCED CLINICAL RESEARCH AWARD, YOUNG INVESTIGATOR AWARD
	OHIO STATE UNIVERSITY 901 WOODY HAYES DR. COLUMBUS, OH 43210	89-0330467	501 (C)(3)	100,000.	0.			YOUNG INVESTIGATOR AWARDS
	UNIVERSITY OF MICHIGAN 102 OBSERVATORY ANN ARBOR, MI 48109-0723	38-6006309	501 (C)(3)	249,998.	0.			YOUNG INVESTIGATOR AWARD, CAREER DEVELOPMENT AWARD

Schedule I (Form 990)

**CONQUER CANCER FOUNDATION OF THE
AMERICAN SOCIETY OF CLINICAL ONCOLOGY**

31-1667995

Page 1

Schedule I (Form 990) Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC 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 CALIFORNIA - LOS ANGELES - 11000 KINROSS AVE - LOS ANGELES, CA 90095	95-6006143	501 (C)(3)	500,000.	0.			COMPARATIVE EFFECTIVENESS RESEARCH PROFESSORSHIP AWARD
UNIVERSITY OF CALIFORNIA - SAN FRANCISCO - 3333 CALIFORNIA STREET - SAN FRANCISCO, CA 94118	94-2829914	501 (C)(3)	150,000.	0.			YOUNG INVESTIGATOR AWARDS
SAINT FRANCIS MEDICAL CENTER 2620 W FAIDLEY AVE GRAND ISLAND, NE 68802	47-0376601	501 (C)(3)	30,500.	0.			COMMUNITY ONCOLOGIST RESEARCH GRANT, CLINICAL TRIAL PARTICIPATION
ST. LUKE'S ROOSEVELT HOSPITAL 432 WEST 58TH STREET NEW YORK, NY 10019	13-2997301	501 (C)(3)	50,000.	0.			YOUNG INVESTIGATOR AWARD
STANFORD UNIVERSITY 301 RAVENSWOOD AVE STANFORD MENLO PARK, CA 94025	94-1156365	501 (C)(3)	100,000.	0.			YOUNG INVESTIGATOR AWARDS
TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA - 3451 WALNUT STREET - PHILADELPHIA, PA 19104	23-1352685	501 (C)(3)	100,000.	0.			YOUNG INVESTIGATOR AWARDS ADVANCED CLINICAL RESEARCH AWARDS, CAREER DEVELOPMENT AWARDS, ONCOLOGY TRAINEE TRAVEL
UNIVERSITY OF TEXAS, M.D. ANDERSON CANCER CENTER - PO BOX 4486 - HOUSTON, TX 77210	74-6000203	501 (C)(3)	906,998.	0.			
UNIVERSITY OF CHICAGO 5801 SOUTH ELLIS AVENUE CHICAGO, IL 60637	36-2177139	501 (C)(3)	150,000.	0.			YOUNG INVESTIGATOR AWARDS
UNIVERSITY OF LOUISVILLE SERVICE COMPLEX, 2ND FL LOUISVILLE, KY 40292	23-7078461	501 (C)(3)	199,998.	0.			CAREER DEVELOPMENT AWARD

Schedule I (Form 990)

**CONQUER CANCER FOUNDATION OF THE
AMERICAN SOCIETY OF CLINICAL ONCOLOGY**

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Schedule I (Form 990) Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

Part II	(a) Name and address of organization or government	(b) EIN	(c) IRC 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 PITTSBURGH 3100 CATHEDRAL OF LEARNING PITTSBURGH, PA 15260	12-5096559	501 (C)(3)	274,998.	0.			CAREER DEVELOPMENT AWARD, GIANNI BONADONNA AWARD, AND YOUNG INVESTIGATOR AWARD
	UNIVERSITY OF ROCHESTER 910 GENESEE STREET ROCHESTER, NY 14611	16-0743209	501 (C)(3)	199,998.	0.			CAREER DEVELOPMENT AWARD
	UNIVERSITY OF TEXAS, S.WESTERN 5323 HARRY HINES BLVD DALLAS, TX 75390	75-6002868	501 (C)(3)	50,000.	0.			YOUNG INVESTIGATOR AWARD
	VAIL CLINIC 410 MCGREGOR DRIVE GYPSUM, CO 81637	84-0563230	501 (C)(3)	1,350,000.	0.			IMPROVING CANCER CARE GRANT
	VANDERBILT UNIVERSITY MEDICAL CTR 1640 PHOENIX BLVD; SUITE 100 COLLEGE PARK, GA 30349	62-0476822	501 (C)(3)	100,000.	0.			YOUNG INVESTIGATOR AWARDS
	WASHINGTON UNIVERSITY ST LOUIS 700 ROSEDALE AVE ST. LOUIS, MO 63112	43-0653611	501 (C)(3)	57,500.	0.			LONG-TERM INTERNATIONAL FELLOWSHIP GRANT

**CONQUER CANCER FOUNDATION OF THE
AMERICAN SOCIETY OF CLINICAL ONCOLOGY**

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Schedule I (Form 990) (2010)

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.
Part III can be duplicated 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
ONCOLOGY TRAINEE TRAVEL AWARDS ALLOW FOR THE SUPPORT OF CONTINUING EDUCATION AND PROFESSIONAL DEVELOPMENT OF TRAINEE ONCOLOGISTS BY PROVIDING THEM INDIVIDUAL TRAVEL GRANT TO DEFRAY TRAVEL	106	216,000.	0.		
MERIT AWARDS WERE GIVEN TO ONCOLOGY FELLOWS WHO ARE FIRST AUTHORS ON ABSTRACTS SELECTED FOR PRESENTATION AT AN ASCO SCIENTIFIC MEETING.					
PATIENT ADVOCATE SCHOLARSHIP WERE PROVIDED FOR	176	227,424.	0. CHECK		

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

SCHEDULE I, PART I, LINE 2: SEE SCHEDULE F; PART I; LINE 2 FOR DESCRIPTION

OF PROCEDURE FOR MONITORING THE USE OF GRANT FUNDS IN THE UNITED STATES.

MERIT AWARDS ARE TO FUND TRAVEL EXPENSE FOR ONCOLOGISTS TO PRESENT THEIR

RESEARCH AT ASCO SCIENTIFIC MEETINGS. THESE AWARDS ARE NOT TRACKED.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT:

UNIVERSITY OF TEXAS, M.D. ANDERSON CANCER CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: ADVANCED CLINICAL RESEARCH AWARDS,

032102 01-13-11

43

SEE PART IV FOR COLUMN (A) DESCRIPTIONS

Schedule I (Form 990) (2010)

Part IV Supplemental Information

CAREER DEVELOPMENT AWARDS, ONCOLOGY TRAINEE TRAVEL GRANTS, YOUNG
INVESTIGATOR AWARDS, AND MERIT AWARDS

PART III, COLUMN (A):

(A) TYPE OF GRANT OR ASSISTANCE: ONCOLOGY TRAINEE TRAVEL AWARDS ALLOW
FOR THE SUPPORT OF CONTINUING EDUCATION AND PROFESSIONAL DEVELOPMENT OF
TRAINEE ONCOLOGISTS BY PROVIDING THEM INDIVIDUAL TRAVEL GRANT TO DEFRAY
TRAVEL EXPENSES FOR ATTENDING THE ASCO ANNUAL MEETING.

(A) TYPE OF GRANT OR ASSISTANCE: MERIT AWARDS WERE GIVEN TO ONCOLOGY
FELLOWS WHO ARE FIRST AUTHORS ON ABSTRACTS SELECTED FOR PRESENTATION AT
AN ASCO SCIENTIFIC MEETING. PATIENT ADVOCATE SCHOLARSHIP WERE PROVIDED
FOR ADVOCATES TO ATTEND THE SCIENTIFIC AND EDUCATIONAL SESSIONS AT THE
ASCO ANNUAL MEETING

**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, line 23.**

▶ **Attach to Form 990.** ▶ **See separate instructions.**

OMB No 1545-0047

2010

**Open to Public
Inspection**

Name of the organization

**CONQUER CANCER FOUNDATION OF THE
AMERICAN SOCIETY OF CLINICAL ONCOLOGY**

Employer identification number

31-1667995

Part I Questions Regarding Compensation

1a Check the appropriate 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.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or
reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

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?

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

- | | |
|--|--|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> 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 from the organization or a related organization?
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?
c Participate in, or receive payment from, an equity-based compensation arrangement?
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations 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?
b Any related organization?

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?
b Any related organization?

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

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the
initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in
Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

X

X

X

X

X

X

X

X

X

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

Schedule J (Form 990) 2010

CONQUER CANCER FOUNDATION OF THE

AMERICAN SOCIETY OF CLINICAL ONCOLOGY 31-1667995

Page 2

Schedule J (Form 990) 2010

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is 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				
1 ALLEN LICHTER MD	(i) 0. (ii) 606,893.	0. 91,563.	0. 60,000.	0. 0.	0. 18,656.	0. 777,112.	0. 0.
2 NANCY DALY, MS, MPH	(i) 194,770. (ii) 0.	0. 0.	0. 0.	0. 0.	0. 25,874.	0. 220,644.	0. 0.
3 DINA MICHELS ESQ.	(i) 445,244. (ii) 0.	0. 0.	2,714. 0.	0. 0.	0. 31,884.	0. 479,842.	0. 0.
4 PAUL AINES, CPA	(i) 261,394. (ii) 0.	4,000. 0.	0. 0.	0. 0.	0. 32,122.	0. 297,516.	0. 0.
5	(i) (ii)	 	 	 	 	 	
6	(i) (ii)	 	 	 	 	 	
7	(i) (ii)	 	 	 	 	 	
8	(i) (ii)	 	 	 	 	 	
9	(i) (ii)	 	 	 	 	 	
10	(i) (ii)	 	 	 	 	 	
11	(i) (ii)	 	 	 	 	 	
12	(i) (ii)	 	 	 	 	 	
13	(i) (ii)	 	 	 	 	 	
14	(i) (ii)	 	 	 	 	 	
15	(i) (ii)	 	 	 	 	 	
16	(i) (ii)	 	 	 	 	 	

Schedule J (Form 990) 2010

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization

CONQUER CANCER FOUNDATION OF THE
AMERICAN SOCIETY OF CLINICAL ONCOLOGY

Employer identification number
31-1667995

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

OF THE AMERICAN SOCIETY OF CLINICAL ONCOLOGY, INC. (ASCO). CCF'S
FUNDING OF BREAKTHROUGH RESEARCH, PATIENT INFORMATION, PROFESSIONAL
EDUCATION, AND QUALITY IMPROVEMENT PROGRAMS IN CANCER CARE GIVES
PATIENTS AND CAREGIVERS POWERFUL RESOURCES TO ADDRESS THE DISEASE.
THROUGH THESE EFFORTS, CCF IMPROVES THE LIVES OF THOSE IMPACTED BY
CANCER.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

FREE FROM THE FEAR OF CANCER.

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

FOUR NEW PROGRAMS WERE OFFERED FOR INDIVIDUALS INTERESTED OR CURRENTLY
PRACTICING IN THE ONCOLOGY FIELD:

IMPROVING CANCER CARE GRANT (ICCG), FUNDED BY SUSAN G. KOMEN FOR THE
CURE(R), PROVIDES EXTRAMURAL RESEARCH FUNDING TO ADDRESS IMPORTANT
ISSUES REGARDING ACCESS TO HEALTHCARE, QUALITY OF CARE, AND DELIVERY OF
CARE, WITH GENERAL APPLICABILITY TO BREAST CANCER. THE GOAL OF THIS
PROGRAM IS TO ENCOURAGE MULTI-DISCIPLINARY RESEARCH THAT WILL HAVE A
MAJOR IMPACT ON CANCER CARE, WITH GENERAL APPLICABILITY IN THE BREAST
CANCER ARENA.

COMPARATIVE EFFECTIVENESS RESEARCH PROFESSORSHIP (CERP) - IN RESPONSE
TO THE RAPID GROWTH OF THE COMPARATIVE EFFECTIVENESS RESEARCH (CER)
FIELD AND THE GOVERNMENTAL RECOMMENDATION TO INCREASE TRAINING

Name of the organization	CONQUER CANCER FOUNDATION OF THE AMERICAN SOCIETY OF CLINICAL ONCOLOGY	Employer identification number 31-1667995
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OPPORTUNITIES IN COMPARATIVE EFFECTIVENESS METHODS, CCF HAS CREATED A COMPARATIVE EFFECTIVENESS RESEARCH PROFESSORSHIP (CERP). THE CERP IS DESIGNED TO PROVIDE FLEXIBLE FUNDING TO OUTSTANDING RESEARCHERS WHO HAVE MADE AND ARE CONTINUING TO MAKE SIGNIFICANT CONTRIBUTIONS THAT HAVE CHANGED THE DIRECTION OF CANCER RESEARCH AND WHO PROVIDE MENTORSHIP TO JUNIOR RESEARCHERS.

LONG-TERM INTERNATIONAL FELLOWSHIP (LIFE) PROVIDES EARLY-CAREER ONCOLOGISTS IN DEVELOPING NATIONS THE SUPPORT AND RESOURCES NEEDED TO ADVANCE THEIR TRAINING BY DEEPENING THEIR RELATIONSHIP WITH A UNITED STATES OR CANADIAN COLLEAGUE AND HIS OR HER INSTITUTION. THROUGH A ONE OR TWO YEAR FELLOWSHIP THE RECIPIENT WILL EARN VALUABLE TRAINING AND EXPERIENCE WITH WHICH THEY CAN AFFECT CHANGE IN CANCER CARE IN THEIR HOME COUNTRY. RECIPIENTS MUST RETURN TO THEIR HOME INSTITUTIONS AFTER COMPLETING THEIR FELLOWSHIP AND ARE EXPECTED TO DISSEMINATE THE KNOWLEDGE THEY HAVE GAINED.

ONCOLOGY TRAINEE TRAVEL AWARDS (OTTA) ALLOW FOR THE SUPPORT OF CONTINUING EDUCATION AND PROFESSIONAL DEVELOPMENT OF TRAINEE ONCOLOGISTS BY PROVIDING THEM INDIVIDUAL TRAVEL GRANT TO DEFRAY TRAVEL EXPENSES FOR ATTENDING THE ASCO ANNUAL MEETING.

*ASCO UNIVERSITY - THIS COLLABORATION BETWEEN CCF, ASCO AND LIVESTRONG ALLOWED FOR THE CREATION OF TWO CME COURSES FOCUSING ON CANCERS IN ADOLESCENT AND YOUNG ADULTS. THE COURSES INCLUDED WERE: FOCUS UNDER FORTY: CANCER CARE MODULE; AND THE FOCUS UNDER FORTY: SUPPORTIVE CARE MODULE

Name of the organization	CONQUER CANCER FOUNDATION OF THE AMERICAN SOCIETY OF CLINICAL ONCOLOGY	Employer identification number 31-1667995
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FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

TO SUPPORT ASCO'S COMPREHENSIVE SCIENTIFIC AND EDUCATIONAL PROGRAMS THAT PROVIDE THE LATEST DATA TO CANCER DOCTORS AND OTHER HEALTHCARE PROFESSIONALS WORLDWIDE THROUGH BOTH LIVE MEETINGS AND PRINT AND ELECTRONIC EDUCATION OFFERINGS.

HIGHLIGHTS OF THE PROFESSIONAL EDUCATIONAL AND SCIENTIFIC MEETINGS SUPPORTED BY CCF AND PRESENTED TO THE PUBLIC IN 2010 INCLUDE:

* THE 2010 ANNUAL MEETING FEATURED NEARLY 250 EDUCATIONAL AND SCIENTIFIC SESSIONS. OVER 4,000 ABSTRACTS WERE PRESENTED OR PUBLISHED. OVER 1,000 PRESENTATIONS WERE CAPTURED IN AUDIO AND VIDEO TO BE MADE AVAILABLE ELECTRONICALLY. THE ASCO ANNUAL MEETING IS THE WORLD'S PREMIER SCIENTIFIC AND EDUCATIONAL EVENT IN THE ONCOLOGY COMMUNITY. IT IS STRUCTURED AS A SERIES OF EDUCATIONAL AND SCIENTIFIC SESSIONS IN DISEASE-SPECIFIC OR ONCOLOGY-RELATED TOPICS.

* GI SYMPOSIUM - THE ANNUAL GASTROINTESTINAL CANCERS SYMPOSIUM IS THE PREMIERE MULTIDISCIPLINARY GI CANCER SCIENTIFIC AND EDUCATIONAL MEETING OFFERING THE MOST UP-TO-DATE STRATEGIES IN PREVENTION, SCREENING, AND TREATMENT OF GASTROINTESTINAL CANCERS. THE SYMPOSIUM IS JOINTLY DEVELOPED BY THE AMERICAN GASTROENTEROLOGICAL ASSOCIATION INSTITUTE, THE AMERICAN SOCIETY OF CLINICAL ONCOLOGY, THE AMERICAN SOCIETY FOR RADIATION ONCOLOGY, AND THE SOCIETY OF SURGICAL ONCOLOGY.

* GU SYMPOSIUM - THE ANNUAL GENITOURINARY CANCERS SYMPOSIUM IS THE PREEMINENT GENITOURINARY CANCER SCIENTIFIC AND EDUCATIONAL MEETING PROVIDING THE LATEST STRATEGIES IN SCREENING, DIAGNOSIS, TREATMENT, MANAGEMENT AND CONTROVERSIES IN THE FIELD OF GENITOURINARY CANCERS. THE

Name of the organization	CONQUER CANCER FOUNDATION OF THE AMERICAN SOCIETY OF CLINICAL ONCOLOGY	Employer identification number 31-1667995
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SYMPOSIUM IS JOINTLY DEVELOPED BY THE AMERICAN SOCIETY OF CLINICAL ONCOLOGY, THE AMERICAN SOCIETY FOR RADIATION ONCOLOGY, AND THE SOCIETY OF UROLOGIC ONCOLOGY.

* BREAST CANCER SYMPOSIUM - THE ANNUAL BREAST CANCER SYMPOSIUM FEATURES PRESENTATIONS ON THE LATEST MULTIDISCIPLINARY RESEARCH FROM SELECTED, THEME-BASED TRANSLATIONAL AND CLINICAL ABSTRACTS, AS WELL AS RELATED EDUCATIONAL SESSIONS. THE SYMPOSIUM PROVIDES AN OPPORTUNITY FOR EDUCATION REGARDING THE MOST CUTTING-EDGE SCIENTIFIC RESEARCH IN BREAST CANCER TODAY. THE MEETING IS JOINTLY DEVELOPED BY THE AMERICAN SOCIETY OF CLINICAL ONCOLOGY, THE AMERICAN SOCIETY OF BREAST DISEASE, THE AMERICAN SOCIETY OF BREAST SURGEONS, THE AMERICAN SOCIETY FOR RADIATION ONCOLOGY, THE NATIONAL CONSORTIUM OF BREAST CENTERS, INC., THE SOCIETY OF SURGICAL ONCOLOGY.

* BEST OF ASCO HELD IN SAN FRANCISCO, CA AND BOSTON, MA - THE BEST OF ASCO MEETINGS ARE DESIGNED AS A WORKSHOP, FOCUSED ON THE PRESENTATION AND DISCUSSION OF 50 OF THE TOP ASCO ANNUAL MEETING ABSTRACTS. A PANEL OF ASCO EXPERTS SELECTS ABSTRACTS THAT HIGHLIGHT THE IMPORTANT SCIENTIFIC INFORMATION TO CREATE THE BEST OF ASCO MEETING PROGRAM.

* ASCO/AACR METHODS WORKSHOP - THIS INTENSIVE ANNUAL WORKSHOP, IN PARTNERSHIP WITH THE AMERICAN ASSOCIATION OF CANCER RESEARCH, BRINGS TOGETHER CLINICAL FELLOWS AND JUNIOR FACULTY CLINICAL RESEARCHERS IN ALL ONCOLOGY SUBSPECIALTIES TO LEARN ABOUT THE ESSENTIALS OF EFFECTIVE CLINICAL TRIAL DESIGNS OF THERAPEUTIC INTERVENTIONS IN THE TREATMENT OF CANCER.

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* ASCO-NCI-EORTC ANNUAL MEETING ON MOLECULAR MARKERS IN CANCER- THIS ANNUAL MEETING'S PURPOSE IS TO ACCELERATE PROGRESS IN THE FIGHT AGAINST CANCER AND TO IMPROVE INTERNATIONAL SCIENTIFIC COLLABORATION BETWEEN EUROPE AND THE UNITED STATES IN THIS RAPIDLY ADVANCING FIELD OF CANCER MARKERS. THE MEETING AIMS TO STRENGTHEN SCIENTIFIC COLLABORATIONS AMONG RESEARCHERS AND CLINICIANS, AND FOSTER A PATIENT CENTERED APPROACH TO TRANSLATING CLINICALLY USEFUL INFORMATION FROM THE LABORATORY BENCH TO THE BEDSIDE.

HIGHLIGHTS OF PRINT AND ELECTRONIC PROFESSIONAL EDUCATION MATERIALS SUPPORTED BY CCF AND AVAILABLE TO THE PUBLIC IN 2010 INCLUDE:

*PROCEEDINGS - THE PROCEEDINGS PUBLICATIONS FOR THE ASCO ANNUAL MEETING AND SELECT ASCO THEMATIC SYMPOSIA CONTAIN ALL THE ABSTRACTS SELECTED FOR PRESENTATION AT THE LIVE EDUCATIONAL MEETING AND ALLOWS THOSE NOT ABLE TO ATTEND ACCESS TO THE GROUND-BREAKING ABSTRACTS THAT WERE PRESENTED.

*EDUCATIONAL BOOKS -THE ANNUAL MEETING EDUCATIONAL BOOK CONTAINS MANUSCRIPTS WRITTEN BY THE FACULTY OF THE ASCO ANNUAL MEETING'S EDUCATIONAL PROGRAM. OVER 100 ORIGINAL MANUSCRIPTS REPRESENTING OVER 65 TOTAL SESSIONS ARE CAPTURED IN THE EDUCATIONAL BOOKS.

*ABSTRACTS ON ASCO.ORG - ABSTRACTS ON ASCO.ORG PROVIDE THE RESULTS OF THE LATEST CLINICAL CANCER RESEARCH TO HEALTHCARE PROFESSIONALS INVOLVED IN MULTIDISCIPLINARY CLINICAL CANCER CARE. THE ABSTRACTS ON ASCO.ORG COMPRISE ASCO'S COMPREHENSIVE ONLINE DATABASE OF

ONCOLOGY-RELATED RESEARCH ABSTRACTS FROM ASCO SCIENTIFIC AND

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EDUCATIONAL MEETINGS DATING BACK TO 1995.

*VIRTUAL MEETINGS ON ASCO.ORG - THE VIRTUAL MEETINGS WEBSITE PROVIDES THE RESULTS OF THE LATEST CLINICAL CANCER RESEARCH TO HEALTHCARE PROFESSIONALS INVOLVED IN MULTIDISCIPLINARY CLINICAL CANCER CARE. EACH SESSION INCLUDED ON THE VIRTUAL MEETINGS HAS ITS OWN OBJECTIVES. THE VIRTUAL MEETINGS ON ASCO.ORG USE THE LATEST TECHNOLOGY TO DELIVER OVER 30,000 ORAL PRESENTATIONS, ABSTRACTS, AND POSTERS FROM ASCO SCIENTIFIC AND EDUCATIONAL MEETINGS DATING BACK TO 1999 - THE MOST COMPREHENSIVE COLLECTION OF ONCOLOGY-RELATED MULTIMEDIA LECTURES AVAILABLE ON THE WEB.

*ONLINE PORTALS - ASCO WEBSITES PROVIDE FAST, EASY NAVIGATION AND ADVANCED SEARCH CAPABILITIES. THE ASCO ONLINE PLATFORM HOSTS DISEASE-SPECIFIC PORTAL SITES. THESE "CANCER PORTALS" ARE ORGANIZED THEMATICALLY TO ALLOW SITE USERS TO EASILY ACCESS THE WEALTH OF DISEASE-SPECIFIC INFORMATION AVAILABLE.

*ASCO UNIVERSITY - ASCO UNIVERSITY IS AN ONLINE EDUCATIONAL PLATFORM THAT IS A RESOURCE FOR EDUCATION AND INFORMATION FOR ONCOLOGISTS. ASCO UNIVERSITY SERVES AS THE EDUCATIONAL HOME AND SOURCE FOR LIFE-LONG LEARNING ACTIVITIES FOR PRACTICING ONCOLOGISTS AND THE NEXT GENERATION OF FELLOWS AND RESIDENTS. THE ACTIVITIES ON ASCO UNIVERSITY INCORPORATE FLEXIBLE, ROBUST CURRICULA WITH COLLATERAL PRODUCTS THAT TRANSLATE KEY ADULT LEARNING PRINCIPLES INTO INTERACTIVE EDUCATIONAL EXPERIENCES.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

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Schedule O (Form 990 or 990-EZ) (2010)

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AND ACCOMPLISHMENTS INCLUDE:

IMPROVING CANCER CARE GRANT FUNDED BY SUSAN G. KOMEN FOR THE CURE(R)
(ICCG) - \$2.7 MILLION PROVIDED TWO (2) GRANTS TO ADDRESS IMPORTANT
ISSUES REGARDING ACCESS TO HEALTHCARE, QUALITY OF CARE, AND DELIVERY OF
CARE, WITH GENERAL APPLICABILITY TO BREAST CANCER. THE GOAL OF THIS
PROGRAM WAS TO ENCOURAGE MULTI-DISCIPLINARY RESEARCH THAT WILL HAVE A
MAJOR IMPACT ON CANCER CARE, WITH GENERAL APPLICABILITY IN THE BREAST
CANCER ARENA.

ADVANCED CLINICAL RESEARCH AWARD (ACRA)-\$1,500,000 IN FUNDING PROVIDED
THREE (3) THREE-YEAR AWARDS INTENDED TO FUND INVESTIGATORS WHO ARE
COMMITTED TO A CLINICAL CANCER STUDY AND WHO WISH TO CONDUCT ORIGINAL
RESEARCH CURRENTLY NOT FUNDED.

COMPARATIVE EFFECTIVENESS RESEARCH PROFESSORSHIP AWARD (CERP)-\$550,000
IN FUNDING PROVIDED A FIVE-YEAR AWARD DESIGNED TO PROVIDE FLEXIBLE
FUNDING TO AN OUTSTANDING RESEARCHER WHO HAS MADE, AND IS CONTINUING TO
MAKE, SIGNIFICANT CONTRIBUTIONS THAT HAVE CHANGED THE DIRECTION OF
CANCER RESEARCH, AND WHO PROVIDES MENTORSHIP TO FUTURE COMPARATIVE
EFFECTIVENESS RESEARCHERS.

CAREER DEVELOPMENT AWARD (CDA)- \$3,300,000 IN FUNDING PROVIDED FIFTEEN
(15)THREE-YEAR AWARDS INTENDED TO SUPPORT CLINICAL RESEARCH OF CLINICAL
INVESTIGATORS WHO HAVE RECEIVED THEIR INITIAL FACULTY APPOINTMENT AND
ARE ESTABLISHING AN INDEPENDENT CLINICAL CANCER RESEARCH PROGRAM.

YOUNG INVESTIGATOR AWARD (YIA)-\$3,407,500 IN FUNDING PROVIDED

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FIFTY-THREE (53) ONE-YEAR AWARDS DESIGNED TO ENCOURAGE AND PROMOTE HIGH-QUALITY RESEARCH IN CLINICAL ONCOLOGY BY PROVIDING FUNDS TO PROMISING INVESTIGATORS DURING THE TRANSITION FROM A FELLOWSHIP PROGRAM TO A FACULTY APPOINTMENT.

LONG-TERM INTERNATIONAL FELLOWSHIP (LIFE) - \$127,777 IN FUNDING PROVIDED A ONE-YEAR FELLOWSHIP TO AN EARLY-CAREER ONCOLOGIST IN A DEVELOPING COUNTRY THE SUPPORT AND RESOURCES NEEDED TO ADVANCE THEIR TRAINING BY DEEPENING THEIR RELATIONSHIP WITH A UNITED STATES OR CANADIAN COLLEAGUE AND HIS OR HER INSTITUTION.

GIANNI BONADONNA BREAST CANCER RESEARCH FELLOWSHIP -\$50,000 IN FUNDING PROVIDED A ONE-YEAR FELLOWSHIP THAT ENABLES AN EARLY-CAREER INVESTIGATOR TO UNDERTAKE A BREAST CANCER PROJECT UNDER THE MENTORSHIP OF THE GIANNI BONADONNA BREAST AWARD RECIPIENT

CLINICAL TRIALS PARTICIPATION AWARD (CTPA)-\$27,000 IN FUNDING PROVIDED A PROGRAM THAT PUBLICLY HONORS HIGH-QUALITY, COMMUNITY-BASED ONCOLOGY PRACTICES AND INSTITUTIONS THAT ACTIVELY PARTICIPATE IN CLINICAL TRIALS RESEARCH. THIS PROGRAM IS DESIGNED TO ENCOURAGE ONCOLOGY PRACTICES THAT CURRENTLY PARTICIPATE IN CLINICAL TRIALS TO INCREASE THEIR ACCRUAL RATES IN ORDER TO SUPPORT CANCER RESEARCH AND ADVANCES.

COMMUNITY ONCOLOGY RESEARCH GRANTS (CORG) - \$100,000 IN FUNDING PROVIDED THREE ONE-YEAR GRANTS TO COMMUNITY-BASED PRACTICES TO SUPPORT THEIR EFFORTS TO ENHANCE THEIR CLINICAL TRIALS PROGRAM.

MERIT AWARDS- \$301,500 PROVIDED FUNDING FOR THE BRADLEY STUART BELLER

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MERIT AWARD ALONG WITH 182 MERIT AWARDS WHICH PROMOTE CLINICAL RESEARCH BY YOUNG SCIENTISTS AND PROVIDE FELLOWS WITH AN OPPORTUNITY TO PRESENT THEIR RESEARCH AND INTERACT WITH OTHER CLINICAL CANCER INVESTIGATORS AT ASCO SCIENTIFIC MEETINGS AND DISEASE-SPECIFIC SYMPOSIA. A SELECT NUMBER OF MERIT AWARDS WERE GIVEN OUT TO RECOGNIZE OUTSTANDING ABSTRACTS SUBMITTED FOR PRESENTATION CONSIDERATION AT DIFFERENT ASCO SCIENTIFIC MEETINGS.

CCF ALSO RAISED FUNDS FOR A NUMBER OF AWARDS PROVIDED BY ASCO IN ORDER TO RECOGNIZE AND ENCOURAGE INDIVIDUALS OR ORGANIZATIONS THAT HAVE MADE SIGNIFICANT CONTRIBUTIONS TO ASCO, THE PRACTICE OF CLINICAL ONCOLOGY, AND CANCER PATIENTS. HIGHLIGHTS OF AWARDS SUPPORTED BY THE FOUNDATION IN 2010 INCLUDED:

GIANNI BONADONNA BREAST CANCER AWARD AND LECTURE- THIS AWARD RECOGNIZED AN ACTIVE CLINICAL OR TRANSLATIONAL RESEARCHER WITH A DISTINGUISHED RECORD OF ACCOMPLISHMENTS IN ADVANCING THE FIELD OF BREAST CANCER AS WELL AS EXCEPTIONAL MENTORING ABILITIES. THE AWARD WINNER GAVE A LECTURE DURING THE BREAST CANCER SYMPOSIUM.

BJ KENNEDY AWARD AND LECTURE- THIS AWARD RECOGNIZED A GERIATRIC ONCOLOGIST WHO HAS DEMONSTRATED OUTSTANDING LEADERSHIP AND ACHIEVEMENT IN THE FIELD OF GERIATRIC ONCOLOGY. THE AWARD WINNER GAVE A LECTURE DURING THE ASCO ANNUAL MEETING.

AMERICAN CANCER SOCIETY AWARD AND LECTURE - THIS AWARD RECOGNIZED AN ONCOLOGIST THAT HAS MADE A SIGNIFICANT CONTRIBUTION TO CANCER PREVENTION AND CONTROL RESEARCH OR PRACTICE. THE AWARD IS JOINTLY

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SUPPORTED BY THE AMERICAN CANCER SOCIETY. THE AWARD WINNER GAVE A LECTURE DURING THE ASCO ANNUAL MEETING.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

BENEFIT FROM THE SOCIETY'S EXPERTISE AND GUIDANCE ON WAYS TO STRENGTHEN THEIR ORGANIZATIONS, ENHANCE THEIR EDUCATIONAL ACTIVITIES, AND PROVIDE SUPPORT FOR THEIR MEMBERS. ASCO CREATED THE STATE AFFILIATE GRANT PROGRAM TO PROVIDE FINANCIAL SUPPORT TO ITS SEPARATELY INCORPORATED STATE/REGIONAL AFFILIATES AS THEY SEEK TO ENHANCE THE SCOPE OF THEIR NON-PROFIT ACTIVITIES. ALL 48 AFFILIATES IN COMPLIANCE WITH THE STATE/REGIONAL AFFILIATE PROGRAM ADMINISTRATIVE POLICIES, PROCEDURES, AND STANDARDS WERE ELIGIBLE TO APPLY FOR A GRANT. IN 2010, CCF PROVIDED FUNDING TO ASCO TO AWARD FIVE AFFILIATES GRANTS RANGING FROM \$5,000 TO \$10,000 TO ENGAGE IN PROJECTS THAT WILL HAVE AN OVERALL BENEFIT TO THEIR MEMBERS, ASCO MEMBERS, OTHER STATE SOCIETIES, AND THE GENERAL ONCOLOGY COMMUNITY.

DIVERSITY IN ONCOLOGY INITIATIVE

THE CONQUER CANCER FOUNDATION GRANTS AND AWARDS PROGRAM OFFERS OR PROVIDES FUNDING FOR DIFFERENT TYPES OF AWARD OPPORTUNITIES FOR ONCOLOGY FELLOWS, CLINICAL PRACTICES, AND INTERNATIONAL RESEARCHERS. ONE OF THE PROGRAMS OFFERED THROUGH CCF IS THE ASCO DIVERSITY IN ONCOLOGY INITIATIVE, FUNDED BY SUSAN G. KOMEN FOR THE CURE(R). THE ASCO DIVERSITY IN ONCOLOGY INITIATIVE WAS STRUCTURED TO FACILITATE THE RECRUITMENT AND RETENTION OF INDIVIDUALS FROM POPULATIONS UNDERREPRESENTED IN MEDICINE TO CANCER CAREERS, WITH PARTICULAR ATTENTION TO THE DEVELOPMENT OF CLINICAL PRACTITIONERS AND

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INVESTIGATORS. BEGINNING IN 2010, \$280,500 IN FUNDING WAS PROVIDED TO THREE PROGRAMS FOR INDIVIDUALS INTERESTED OR CURRENTLY PRACTICING IN THE ONCOLOGY FIELD:

LOAN REPAYMENT PROGRAM - THE ASCO LOAN REPAYMENT PROGRAM (LRP), FUNDED BY SUSAN G. KOMEN FOR THE CURE(R), PROVIDES REPAYMENT OF QUALIFYING EDUCATIONAL DEBT TO ONCOLOGISTS, OR TO ONCOLOGY FELLOWS UPON COMPLETION OF TRAINING, WHO COMMIT TO PRACTICING ONCOLOGY IN A MEDICALLY UNDERSERVED REGION OF THE UNITED STATES. IN 2010, \$210,000 FUNDED THREE (3) TWO-YEAR LOAN REPAYMENTS.

MEDICAL STUDENT ROTATION - THE ASCO MEDICAL STUDENT ROTATION (MSR), FUNDED BY SUSAN G. KOMEN FOR THE CURE(R), PROVIDES 8- TO 10-WEEK CLINICAL OR CLINICAL RESEARCH ONCOLOGY ROTATIONS FOR U.S. MEDICAL STUDENTS FROM POPULATIONS UNDERREPRESENTED IN MEDICINE WHO ARE INTERESTED IN PURSUING ONCOLOGY AS A CAREER. IN 2010, \$51,000 FUNDED SIX (6) MSRS.

RESIDENT TRAVEL AWARD - THE ASCO RESIDENT TRAVEL AWARD, FUNDED BY SUSAN G. KOMEN FOR THE CURE(R), PROVIDES FINANCIAL SUPPORT FOR RESIDENTS FROM UNDERREPRESENTED POPULATIONS TO ATTEND ASCO'S ANNUAL MEETING. THE INTENTION OF THIS AWARD IS TO ATTRACT RESIDENTS FROM UNDERREPRESENTED POPULATIONS TO A POSSIBLE CAREER IN ONE OF THE ONCOLOGY SPECIALTIES. THIS TRAVEL AWARD WILL ALLOW THE RECIPIENTS TO TRAVEL TO THE ASCO ANNUAL SCIENTIFIC MEETING, WHERE THEY WILL HAVE AN OPPORTUNITY TO MEET ONCOLOGISTS AND TO UNDERSTAND THE CAREER POSSIBILITIES IN THE IS AREA. IN 2010, \$19,500 FUNDED THIRTEEN (13)

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ALTHOUGH A NUMBER OF PROGRAMS EXIST TO RECRUIT INDIVIDUALS UNDERREPRESENTED IN MEDICINE, FEW OF THESE PROGRAMS FOCUS SPECIFICALLY ON RECRUITMENT TO CLINICAL ONCOLOGY. ULTIMATELY, IT IS HOPED THAT INCREASING DIVERSITY IN THE CLINICAL ONCOLOGY PROFESSION WILL LEAD TO INCREASED AND IMPROVED CANCER CARE FOR UNDERSERVED POPULATIONS AS WELL AS INCREASED RESEARCH ON HEALTH DISPARITIES.

THE DIVERSITY IN ONCOLOGY INITIATIVE IS PART OF THE SUSAN G. KOMEN FOR THE CURE/ASCO QUALITY OF CARE INITIATIVE, WHICH IS DESIGNED TO SUPPORT SPECIFIC PROJECTS ADDRESSING QUALITY CANCER CARE ISSUES, INCLUDING CANCER WORKFORCE, ACCESS TO CARE, DISPARITIES, CLINICAL TRIALS, AND SURVIVORSHIP, WITH GENERAL APPLICABILITY TO BREAST CANCER.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

PATIENT EDUCATION AND INFORMATION-

WELL-INFORMED, EDUCATED PATIENTS ARE THEIR OWN BEST ADVOCATES, AS WELL AS INVALUABLE PARTNERS FOR DOCTORS. CCF SUPPORTS BOTH DOCTORS AND PATIENTS BY FUNDING ACCURATE, DOCTOR-APPROVED CANCER INFORMATION, WHICH IS AVAILABLE PUBLICLY BOTH IN PRINT AND ONLINE, TO PROVIDE TRUSTED, AUTHORITATIVE INFORMATION TO PEOPLE LIVING WITH CANCER AND THOSE WHO CARE FOR AND ABOUT THEM. FUNDING IN THIS AREA ALLOWS CCF TO CONTINUE AND EXPAND OUR WORK TO INFORM PATIENTS.

HIGHLIGHTS OF PATIENT EDUCATION AND INFORMATION PROGRAMS AND ACTIVITIES SUPPORTED BY CCF IN 2010 INCLUDE:

PATIENT ADVOCATE SCHOLARSHIP PROGRAM- THE PATIENT ADVOCATE SCHOLARSHIP PROGRAM PROVIDES TRAVEL GRANTS TO A SELECT NUMBER OF PATIENT ADVOCATES TO ATTEND THE ASCO ANNUAL MEETING AND ASCO THEMATIC MEETINGS.

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IN 2010, CCF SUPPORTED THE ATTENDANCE OF PATIENT ADVOCATES AT THE 2010 ASCO ANNUAL MEETING AND ASCO THEMATIC MEETINGS.

CANCER.NET- CANCER.NET INCLUDES PEER-REVIEWED INFORMATION ON MORE THAN 124 TYPES OF CANCER AND SYNDROMES, INCLUDING RISK FACTORS, DIAGNOSIS, FINDING AN ONCOLOGIST, TREATMENT, MANAGING SIDE EFFECTS, CLINICAL TRIALS, AND AFTER TREATMENT, CAREGIVING, COPING STRATEGIES, AND SURVIVORSHIP, INFORMATION IS DELIVERED IN WRITTEN ARTICLES, VIDEOS, AND AUDIO PODCASTS. THIS INFORMATION IS MADE AVAILABLE FREE TO THE PUBLIC. IN 2010, THERE WERE MORE THAN 5,750,000 PAGE VIEWS OF CANCER.NET.

CCF CONTINUES TO SUPPORT THE PRODUCTION OF ASCO'S PRINTED PATIENT INFORMATION MATERIALS, SUCH AS:

ASCO ANSWERS FACT SHEETS- ASCO ANSWERS IS A SERIES OF FACT SHEETS THAT PROVIDE AN INTRODUCTION TO A SPECIFIC TYPE OF CANCER OR CANCER-RELATED TOPIC. EACH FACT SHEET INCLUDES AN OVERVIEW OF THE SUBJECT, TERMS TO KNOW, AND QUESTIONS TO ASK THE DOCTOR.

PATIENT GUIDES- PATIENT GUIDES ARE PRINTED BOOKLETS CONTAINING COMPREHENSIVE CANCER INFORMATION; INCLUDING AN OVERVIEW OF SPECIFIC CANCER TYPES, SYMPTOMS, DIAGNOSIS, STAGING, TREATMENT, CLINICAL TRIALS, AND AFTER TREATMENT.

CANCER ADVANCES: SUMMARIES OF RESEARCH ADVANCES IN CLINICAL ONCOLOGY FROM THE JOURNAL OF CLINICAL ONCOLOGY, ASCO'S ANNUAL MEETINGS, AND ASCO'S SYMPOSIA.

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CANCER NEWS AND MEETINGS: FIND INFORMATION ON ASCO'S CLINICAL CANCER ADVANCES REPORT, ASCO'S ANNUAL MEETINGS AND SYMPOSIA, AND PERSPECTIVES ON BREAKING SCIENTIFIC FINDINGS.

ASCO CANCER EDUCATION SLIDES: PREPARED CANCER SLIDE PRESENTATIONS, ADAPTED FROM SELECT CANCER.NET GUIDES TO CANCER, ARE AVAILABLE FOR FREE DOWNLOAD FOR ONCOLOGISTS, ONCOLOGY NURSES, AND OTHER MEMBERS OF THE HEALTH CARE TEAM.

INTERNATIONAL PROGRAMS-

ASCO AND THE CONQUER CANCER FOUNDATION SHARE AN INTERNATIONAL MISSION TO ENGAGE THE PHYSICIAN AND HEALTHCARE PROFESSIONAL COMMUNITY ON A GLOBAL SCALE TO IMPROVE CARE TO CANCER PATIENTS AND ENHANCE THE EXCHANGE OF KNOWLEDGE TO FACILITATE ADVANCES IN THE CARE OF PEOPLE WITH CANCER EVERYWHERE. FOUNDATION FUNDS SUPPORT INTERNATIONAL PROGRAMS INCLUDING EDUCATION, FELLOWSHIP AND GRANT OPPORTUNITIES TO ENABLE ONCOLOGISTS FROM OPPOSITE ENDS OF THE WORLD TO SHARE IDEAS AND BUILD LASTING COLLABORATIONS THAT CAN ENHANCE PATIENT CARE LOCALLY AND GLOBALLY. CCF SUPPORTS THESE PROGRAMS THROUGH ITS INTERNATIONAL PROGRAM MISSION AS WELL AS THROUGH CCF'S OTHER MISSION AREAS (RESEARCH, PROFESSIONAL EDUCATION, PATIENT EDUCATION AND INFORMATION AND QUALITY AND ACCESS TO CARE).

CCF FUNDS SPECIFICALLY SUPPORTING INTERNATIONAL ACTIVITIES INCLUDE:

LONG-TERM INTERNATIONAL FELLOWSHIP (LIFE) PROVIDES EARLY-CAREER

ONCOLOGISTS IN DEVELOPING NATIONS THE SUPPORT AND RESOURCES NEEDED TO

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ADVANCE THEIR TRAINING BY DEEPENING THEIR RELATIONSHIP WITH A UNITED STATES OR CANADIAN COLLEAGUE AND HIS OR HER INSTITUTION. THROUGH A ONE OR TWO YEAR FELLOWSHIP THE RECIPIENT WILL EARN VALUABLE TRAINING AND EXPERIENCE WITH WHICH THEY CAN AFFECT CHANGE IN CANCER CARE IN THEIR HOME COUNTRY. RECIPIENTS MUST RETURN TO THEIR HOME INSTITUTIONS AFTER COMPLETING THEIR FELLOWSHIP AND ARE EXPECTED TO DISSEMINATE THE KNOWLEDGE THEY HAVE GAINED.

INTERNATIONAL DEVELOPMENT AND EDUCATION AWARD (IDEA)-THE INTERNATIONAL DEVELOPMENT AND EDUCATION AWARD PROVIDES SUPPORT FOR ONCOLOGISTS IN DEVELOPING COUNTRIES TO PARTICIPATE IN THE ASCO ANNUAL MEETING AND VISIT A CANCER CENTER IN THE UNITED STATES OR CANADA. THIS AWARD WAS DESIGNED TO PROVIDE CONTINUING MEDICAL EDUCATION, ASSIST IN CAREER DEVELOPMENT AND HELP TO ESTABLISH STRONG RELATIONSHIPS WITH LEADING ASCO MEMBERS WHO SERVE AS SCIENTIFIC MENTORS TO EACH RECIPIENT.

ADVANCED CANCER COURSES (ACC)-THE ADVANCED CANCER COURSES ARE CAREFULLY DESIGNED TO FILL THE NEED FOR ADVANCED LEARNING FOR INTERNATIONAL ONCOLOGISTS. THESE COURSES CAN BE CHOSEN FROM ASCO'S PORTFOLIO OF EDUCATIONAL PRODUCTS, OR DEVELOPED WITH THE COLLABORATION OF VOLUNTEER ONCOLOGISTS.

EXPENSES \$ 114,524. INCLUDING GRANTS OF \$ 114,524. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 1: AS OF DECEMBER 31, 2010, THE BOARD OF DIRECTORS OF CCF INCLUDED ELEVEN (11) DIRECTORS WITH VOTING RIGHTS AND ONE (1) DIRECTOR WITHOUT VOTING RIGHTS. (12 DIRECTORS ARE PERMITTED BY THE BYLAWS, BUT ONE SEAT WAS VACANT AT YEAR END.) TEN (10) DIRECTORS WITH VOTING RIGHTS WERE APPOINTED BY THE BOARD OF DIRECTORS OF THE AMERICAN

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SOCIETY OF CLINICAL ONCOLOGY, INC. (ASCO) A NON-PROFIT, 501(C)(3) TAX EXEMPT ORGANIZATION, A RELATED ORGANIZATION. THERE WERE TWO EX OFFICIO DIRECTORS: THE CHIEF EXECUTIVE OFFICER (WITH VOTING RIGHTS) AND THE EXECUTIVE DIRECTOR (WITHOUT VOTING RIGHTS). ALL VOTING MEMBERS OF THE BOARD OF DIRECTORS HAVE THE SAME VOTING RIGHTS.

CONSISTENT WITH CCF'S BYLAWS, DURING THE REPORTED TAX YEAR, THE BOARD OF DIRECTORS DELEGATED AUTHORITY TO THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS. THE EXECUTIVE COMMITTEE IS COMPOSED OF THE CHAIR, CEO, SECRETARY, TREASURER, AND A FIFTH AT-LARGE EXECUTIVE COMMITTEE MEMBER ELECTED BY THE DIRECTORS. ALL EXECUTIVE COMMITTEE MEMBERS ARE MEMBERS OF CCF'S BOARD OF DIRECTORS.

THE SCOPE OF THE EXECUTIVE COMMITTEE'S AUTHORITY IS ESTABLISHED BY CCF'S BYLAWS, WHICH PROVIDE THAT EXCEPT TO THE EXTENT SPECIFICALLY PROHIBITED BY RESOLUTION OF THE BOARD OF DIRECTORS OR OTHERWISE PROHIBITED BY VIRGINIA LAW, THE EXECUTIVE COMMITTEE OF THE BOARD IS EMPOWERED TO MAKE AND IMPLEMENT DECISIONS BETWEEN BOARD MEETINGS AND IT MAY ACT ON ITEMS REQUIRING ACTION PRIOR TO THE NEXT ANNOUNCED BOARD MEETING. ACTIONS OF THE EXECUTIVE COMMITTEE ARE REPORTED TO THE BOARD OF DIRECTORS AT THE MEETING OF THE BOARD OF DIRECTORS IMMEDIATELY FOLLOWING THE ACTION TAKEN BY THE EXECUTIVE COMMITTEE, CONSISTENT WITH CCF'S BYLAWS.

FORM 990, PART VI, SECTION A, LINE 1B:

TWO VOTING MEMBERS OF CCF'S BOARD OF DIRECTORS DO NOT MEET THE DEFINITIONAL TEST OF AN INDEPENDENT MEMBER OF CCF'S GOVERNING BODY:

ALLEN LICHTER, M.D. IS AN EX-OFFICIO, VOTING MEMBER OF CCF'S BOARD OF

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DIRECTORS WHO SERVES AS THE CEO OF CCF AND THE CEO OF ASCO (A RELATED ORGANIZATION OF CCF). HE IS AN EMPLOYEE OF ASCO AND RECEIVED COMPENSATION FROM ASCO.

JOSEPH BAILES, M.D. IS ON THE CCF BOARD OF DIRECTORS AND IS A VOTING MEMBER OF CCF'S BOARD OF DIRECTORS. HE WAS COMPENSATED BY ASCO (A RELATED ORGANIZATION OF CCF) FOR SERVICES TO ASCO AS AN INDEPENDENT CONTRACTOR.

FORM 990, PART VI, SECTION A, LINE 4: DURING THE REPORTED TAX YEAR, CCF AMENDED ITS ARTICLES OF INCORPORATION TO CHANGE ITS NAME FROM THE ASCO CANCER FOUNDATION TO CONQUER CANCER FOUNDATION OF THE AMERICAN SOCIETY OF CLINICAL ONCOLOGY.

FORM 990, PART VI, SECTION A, LINE 7A: CCF DOES NOT HAVE MEMBERS. DIRECTORS OF CCF ARE APPOINTED AND SUBJECT TO REMOVAL BY THE BOARD OF DIRECTORS OF ASCO, EXCEPT FOR DIRECTORS SERVING EX-OFFICIO.

FORM 990, PART VI, SECTION A, LINE 7B: THE BOARD OF DIRECTORS OF CCF MAY VOTE TO AMEND OR REPEAL THE BYLAWS OF CCF, BUT THE BOARD OF DIRECTORS OF ASCO MUST APPROVE AN AMENDMENT OR REPEAL OF THE BYLAWS TO BE EFFECTIVE.

FORM 990, PART VI, SECTION B, LINE 11: AN ELECTRONIC COPY OF THE CCF FORM 990 WAS SENT, THROUGH A SECURE SITE, TO EACH MEMBER OF THE CCF FINANCE COMMITTEE AND WAS DISCUSSED AT A MEETING OF THE FINANCE COMMITTEE BEFORE IT WAS FILED. AN ELECTRONIC COPY OF THE CCF FORM 990 WAS SENT, THROUGH A SECURE SITE, TO EACH MEMBER OF THE BOARD OF DIRECTORS BEFORE IT WAS FILED. THE CCF FORM 990 WAS REVIEWED BY THE CHIEF FINANCIAL OFFICER, THE EXECUTIVE DIRECTOR, THE CHIEF EXECUTIVE OFFICER, AND THE GENERAL COUNSEL PRIOR TO FILING.

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FORM 990, PART VI, SECTION B, LINE 12C: CCF MAINTAINS A NUMBER OF WRITTEN CONFLICT OF INTEREST POLICIES AND STANDARDS REGARDING THE DISCLOSURE AND MANAGEMENT OF CONFLICTS OF INTEREST. THESE POLICIES AND STANDARDS COVER ALL CCF STAFF, DIRECTORS, OFFICERS, COMMITTEE MEMBERS, AND ANY PERSON IN A RELATIONSHIP WITH THESE INDIVIDUALS INVOLVING THE SHARING OF INCOME OR ASSETS (E.G., SPOUSE, DEPENDENT CHILDREN).

UNDER CCF'S POLICIES, COVERED INDIVIDUALS ARE ASKED TO DISCLOSE FINANCIAL INTERESTS IN OR OTHER RELATIONSHIPS WITH ENTITIES THAT HAVE RELEVANT COMMERCIAL INTERESTS, INCLUDING EMPLOYMENT OR LEADERSHIP POSITIONS, CONSULTANT OR ADVISORY ROLES, STOCK OWNERSHIP, HONORARIA, RESEARCH FUNDING, AND SERVICE AS AN EXPERT WITNESS. COMPLETION OF A DISCLOSURE FORM IS REQUIRED AT THE INITIATION OF SERVICE, AND UPDATED ANNUALLY THEREAFTER OR WHEN ANY MATERIAL CHANGES OCCUR.

CCF'S CONFLICT OF INTEREST POLICIES ARE INTENDED TO HELP GUIDE THE MANAGEMENT OF ACTUAL, POTENTIAL, AND PERCEIVED CONFLICTS OF INTEREST THROUGH DISCLOSURE OF FINANCIAL INTERESTS OR OTHER RELATIONSHIPS. WHERE THE NATURE AND EXTENT OF A FINANCIAL RELATIONSHIP SUGGEST DISCLOSURE IS NOT ADEQUATE TO MANAGE A REAL OR POTENTIAL CONFLICT, COVERED INDIVIDUALS ARE REQUIRED TO RECUSE THEMSELVES FROM DECISION MAKING. RECUSAL MAY BE SELF-SELECTED, OR MAY BE REQUESTED BY THE COMMITTEE CHAIR, OFFICER, OR EXECUTIVE-LEVEL STAFF MEMBERS. IN ADDITION, WHEN CCF IS CONTEMPLATING ENTERING INTO A TRANSACTION OR ARRANGEMENT THAT MIGHT BENEFIT THE PRIVATE INTEREST OF ANY "INTERESTED PERSON" (I.E., A CCF DIRECTOR, PRINCIPAL OFFICER, OR MEMBER OF A COMMITTEE WITH BOARD DELEGATED POWERS WHO HAS A DIRECT OR INDIRECT FINANCIAL INTEREST IN THE TRANSACTION), IT MUST FOLLOW A

Name of the organization	CONQUER CANCER FOUNDATION OF THE AMERICAN SOCIETY OF CLINICAL ONCOLOGY	Employer identification number 31-1667995
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SPECIFIC PROCEDURE TO MANAGE THE CONFLICT, INCLUDING CONSIDERING
ALTERNATIVE TRANSACTIONS THAT WOULD NOT GIVE RISE TO A CONFLICT OF
INTEREST.

FORM 990, PART VI, SECTION B, LINE 15: THE FOLLOWING EMPLOYEES OF ASCO
SERVE AS OFFICERS OF CCF. INFORMATION REGARDING THEIR COMPENSATION AND THE
PROCESS FOR DETERMINING THEIR COMPENSATION ARE DESCRIBED IN THE IRS FORM
990 OF ASCO:

CEO OF CCF (ALSO SERVES AS CEO OF ASCO)

EXECUTIVE DIRECTOR OF CCF

CFO OF CCF (ALSO SERVES AS CFO OF ASCO)

GENERAL COUNSEL OF CCF (ALSO SERVES AS VP/GENERAL COUNSEL OF ASCO)

CCF STAFF ARE EMPLOYEES OF ASCO WHO ARE LEASED TO CCF. APPLICABLE
INFORMATION REGARDING THEIR COMPENSATION IS DESCRIBED IN THE IRS FORM 990
OF ASCO.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
AL, AK, AZ, AR, CA, CO, CT, ME, WA, FL, GA, HI, IL, KS, KY, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY
NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WV, WI

FORM 990, PART VI, SECTION C, LINE 19: CCF'S GOVERNING DOCUMENTS ARE
AVAILABLE TO THE PUBLIC FROM CCF UPON REQUEST. CCF'S ARTICLES OF
INCORPORATION ARE ALSO AVAILABLE TO THE PUBLIC THROUGH THE VIRGINIA STATE
CORPORATION COMMISSION.

CONFLICT OF INTEREST POLICIES AND STANDARDS ARE POSTED ON CCF'S WEBSITE.

Name of the organization CONQUER CANCER FOUNDATION OF THE
AMERICAN SOCIETY OF CLINICAL ONCOLOGY

Employer identification number
31-1667995

THE ANNUAL REPORT OF CCF IS POSTED ON CCF'S WEBSITE AND IS AVAILABLE TO THE
PUBLIC FROM CCF UPON REQUEST.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED GAINS ON INVESTMENTS: 1,629,173.

FORM 990, PART XII, LINE 2C

THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization

CONQUER CANCER FOUNDATION OF THE
AMERICAN SOCIETY OF CLINICAL ONCOLOGY

Employer identification number
31-1667995

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
INSTITUTE OF CLINICAL EXCELLENCE, LLC - 27-1629211, 2318 MILL ROAD, ALEXANDRIA, VA 22314	QOPI CERTIFICATION PROGRAM	VIRGINIA	31,631.	36,053.	AMERICAN SOCIETY OF CLINICAL ONCOLOGY
ASCO LEASING LLC - 27-3378225 2318 MILL ROAD ALEXANDRIA, VA 22314	RENTAL OF 5TH FLOOR, ASCO HEADQUARTERS	VIRGINIA	211,145.	289,206.	AMERICAN SOCIETY OF CLINICAL ONCOLOGY

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
AMERICAN SOCIETY OF CLINICAL ONCOLOGY, INC - 13-6180380, 2318 MILL ROAD #800, ALEXANDRIA, VA 22314	SUPPORTS CANCER RESEARCH, EDUCATION AND QUALITY IMPROVEMENT PROGRAMS	NEW YORK	501(C)(3)	LINE 9			X

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2010

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

[illegible]

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

[illegible]

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

Note. Complete line 1 if any entry is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to other organization(s)

c Gift, grant, or capital contribution from other organization(s)

d Loans or loan guarantees to or for other organization(s)

e Loans or loan guarantees by other organization(s)

f Sale of assets to other organization(s)

g Purchase of assets from other organization(s)

h Exchange of assets

i Lease of facilities, equipment, or other assets to other organization(s)

j Lease of facilities, equipment, or other assets from other organization(s)

k Performance of services or membership or fundraising solicitations for other organization(s)

l Performance of services or membership or fundraising solicitations by other organization(s)

m Sharing of facilities, equipment, mailing lists, or other assets

n Sharing of paid employees

o Reimbursement paid to other organization for expenses

p Reimbursement paid by other organization for expenses

q Other transfer of cash or property to other organization(s)

r Other transfer of cash or property from other organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
AMERICAN SOCIETY OF CLINICAL ONCOLOGY (1) (ASCO)	C	813,607.	
(2) ASCO	B	8,931,139.	
(3) ASCO	D	64,715,398.	
(4) ASCO	K	2,933,944.	
(5) ASCO	N	2,477,241.	
(6) ASCO	J	211,536.	
	69		

CONQUER CANCER FOUNDATION OF THE
AMERICAN SOCIETY OF CLINICAL ONCOLOGY

31-1667995

Schedule R (Form 990)

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(a)	(b)	(c)	(d)	(e)
Name of other organization	Transaction type (a-r)	Amount involved	Method of determining amount involved	
(7) ASCO	O	8,966,365.		
(8) ASCO	P	489,823.		
(9)				
(10)				
(11)				
(12)				
(13)				
(14)				
(15)				
(16)				
(17)				
(18)				
(19)				
(20)				
(21)				
(22)				
(23)				
(24)				

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization CONQUER CANCER FOUNDATION OF THE AMERICAN SOCIETY OF CLINICAL ONCOLOGY	Employer identification number 31-1667995
	Number, street, and room or suite no. If a P.O. box, see instructions. 2318 MILL ROAD #800	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. ALEXANDRIA, VA 20164	

Enter the Return code for the return that this application is for (file a separate application for each return)

01

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

PAUL AINES, CFO

- The books are in the care of ► **SAME AS C ABOVE - ALEXANDRIA, VA 20164**
Telephone No. ► **571/483-1300** FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐ . If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2011**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
► ☒ calendar year **2010** or
► ☐ tax year beginning , and ending .

- 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.
LHA For Paperwork Reduction Act Notice, see Instructions. Form **8868** (Rev. 1-2011)

**COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

AT RICHMOND, OCTOBER 7, 2010

The State Corporation Commission has found the accompanying articles submitted on behalf of
**Conquer Cancer Foundation of the American Society of Clinical Oncology
(formerly ASCO Cancer Foundation, The)**

to comply with the requirements of law, and confirms payment of all required fees. Therefore, it
is **ORDERED** that this

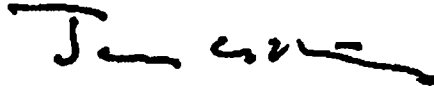
CERTIFICATE OF AMENDMENT

be issued and admitted to record with the articles of amendment in the Office of the Clerk of the
Commission, effective October 7, 2010.

The corporation is granted the authority conferred on it by law in accordance with the articles,
subject to the conditions and restrictions imposed by law.

STATE CORPORATION COMMISSION

By



**James C. Dimitri
Commissioner**

**10-09-24-0063
AMENACPT
CIS0436**

**ARTICLES OF AMENDMENT
OF
THE ASCO CANCER FOUNDATION**

The undersigned, for the purpose of amending the Articles of Incorporation of The ASCO Cancer Foundation, a nonstock corporation organized under the laws of the Commonwealth of Virginia (the "Corporation") pursuant to the Virginia Nonstock Corporation Act, hereby certifies:

FIRST: The name of the Corporation is The ASCO Cancer Foundation.

SECOND: The following amendment to the Articles of Incorporation was adopted on September 15, 2010, by the Corporation in the manner prescribed by the Virginia Nonstock Corporation Act:

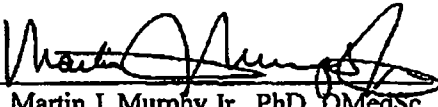
~~The First Article of the Articles of Incorporation of the Corporation, which sets forth the name of the Corporation, is hereby amended to read as follows:~~

The name of the Corporation is Conquer Cancer Foundation of the American Society of Clinical Oncology.

THIRD: The amendment was adopted at a meeting of the Board of Directors, and the amendment received the vote of at least two-thirds of the directors in office. Member approval of the amendment was not required because the Corporation has no members.

Date: September 15, 2010

THE ASCO CANCER FOUNDATION
Virginia State Corporation Commission ID No. R 158279-9

By: 
Martin J. Murphy Jr., PhD, DMedSc
Chair

Commonwealth of Virginia



State Corporation Commission

I Certify the Following from the Records of the Commission:

The foregoing is a true copy of the certificate of amendment of Conquer Cancer Foundation of the American Society of Clinical Oncology issued October 07, 2010.

Nothing more is hereby certified.



*Signed and Sealed at Richmond on this Date:
October 12, 2010*

Joel H. Peck
Joel H. Peck, Clerk of the Commission



COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

Office of the Clerk

October 7, 2010

UCC RETRIEVALS INC
BETH EPSTEIN
HOLD FOR PICK UP
*

RECEIPT

RE: Conquer Cancer Foundation of the American Society
of Clinical Oncology
ID: 0514338 - 3
DCN: 10-09-24-0063

Dear Customer:

This is your receipt for \$25.00 to cover the fee(s) for filing articles of amendment for a corporation with this office.

The effective date of the amendment is October 7, 2010.

Note: Prior to the effective date of this filing, the name of the above-referenced corporation was ASCO Cancer Foundation, The.

Thank you for contacting our office. If you have any questions, please call (804) 371-9733 or toll-free in Virginia, (866) 722-2551.

Sincerely,

Joel H. Peck
Clerk of the Commission

AMENACPT
CIS0436