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Form 990

Return of Organization Exempt From Income Tax

2011

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

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011

B Check if applicable	C Name of organization AMERICAN ASSOCIATION FOR CANCER RESEARCH INC	D Employer identification number 23-6251648
<input type="checkbox"/> Address change	Doing Business As	E Telephone number (215) 440-9300
<input type="checkbox"/> Name change	Number and street (or P O box if mail is not delivered to street address)	F Gross receipts \$ 60,838,781
<input type="checkbox"/> Initial return	615 CHESTNUT STREET 17TH FLOOR	
<input type="checkbox"/> Terminated		
<input type="checkbox"/> Amended return	City or town, state or country, and ZIP + 4 PHILADELPHIA, PA 19106	
<input type="checkbox"/> Application pending	F Name and address of principal officer MICHAEL STEWART 615 CHESTNUT STREET 17TH FLOOR PHILADELPHIA, PA 19106	H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

I Tax-exempt status 501(c)(3) 501(c) () (insert no) 4947(a)(1) or 527H(b) Are all affiliates included? Yes No
If "No," attach a list (see instructions)

H(c) Group exemption number ►

J Website: ► WWW AACR.ORG

K Form of organization Corporation Trust Association Other ► L Year of formation 1907 M State of legal domicile NY

Part I Summary

1 Briefly describe the organization's mission or most significant activities SEE FORM 990, PAGE 2, PART III, STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS	
2 Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets	
3 Number of voting members of the governing body (Part VI, line 1a)	3 19
4 Number of independent voting members of the governing body (Part VI, line 1b)	4 19
5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5 169
6 Total number of volunteers (estimate if necessary)	6 5,000
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a 862,933
b Net unrelated business taxable income from Form 990-T, line 34	7b 360,939

8 Contributions and grants (Part VIII, line 1h)	Prior Year 18,232,876	Current Year 26,337,939
9 Program service revenue (Part VIII, line 2g)	27,050,699	28,901,312
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,679,772	1,418,283
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	560,601	512,037
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	47,523,948	57,169,571

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	28,992,160	14,774,198
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	11,772,305	13,378,777
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ► 1,189,320		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	22,815,961	23,542,589
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	63,580,426	51,695,564
19 Revenue less expenses Subtract line 18 from line 12	-16,056,478	5,474,007

20 Total assets (Part X, line 16)	Beginning of Current Year 99,214,285	End of Year 86,282,981
21 Total liabilities (Part X, line 26)	53,329,822	37,949,070
22 Net assets or fund balances Subtract line 21 from line 20	45,884,463	48,333,911

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 MICHAEL STEWART CHIEF FINANCIAL OFFICER Type or print name and title	2012-08-14 Date
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Paid Preparer's Use Only	Preparer's signature ► MARIANNE MAK	Date	Check if self-employed ► <input type="checkbox"/>	Preparer's taxpayer identification number (see instructions) P00297744
	Firm's name (or yours if self-employed), address, and ZIP + 4 ► BBD LLP 1835 MARKET STREET 26TH FLOOR PHILADELPHIA, PA 19103			EIN ► 23-2896692
				Phone no ► (215) 567-7770

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

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III **1** Briefly describe the organization's mission

THE MISSION OF THE AMERICAN ASSOCIATION FOR CANCER RESEARCH ("AACR") IS TO PREVENT AND CURE CANCER THROUGH RESEARCH, EDUCATION, COMMUNICATION, AND COLLABORATION THROUGH ITS PROGRAMS AND SERVICES, THE AACR FOSTERS RESEARCH IN CANCER (SEE SCHEDULE O FOR CONTINUATION) AND RELATED BIOMEDICAL SCIENCE, ACCELERATES THE DISSEMINATION OF NEW RESEARCH FINDINGS AMONG SCIENTISTS AND OTHERS DEDICATED TO THE CONQUEST OF CANCER, PROMOTES SCIENCE EDUCATION AND TRAINING, AND ADVANCES THE UNDERSTANDING OF CANCER ETIOLOGY, PREVENTION, DIAGNOSIS, AND TREATMENT THROUGHOUT THE 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? Yes No

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

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

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured 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 \$ 16,161,058 including grants of \$ 14,036,443) (Revenue \$)
RESEARCH GRANTS, SCIENTIFIC AWARDS, FELLOWSHIPS AND CAREER DEVELOPMENT AWARDS

4b (Code) (Expenses \$ 14,624,709 including grants of \$ 553,155) (Revenue \$ 14,033,353)
ANNUAL MEETING AND SPECIAL CONFERENCES ATTENDED BY MEMBERS AND NON-MEMBERS FOR THE PRESENTATION OF SCIENTIFIC RESEARCH ALSO INCLUDES EDUCATIONAL WORKSHOPS FOR TRAINING YOUNG INVESTIGATORS

4c (Code) (Expenses \$ 10,602,486 including grants of \$ 0) (Revenue \$ 14,750,317)
PUBLICATIONS - PRODUCTION & DISTRIBUTION OF THE JOURNALS "CANCER RESEARCH", "MOLECULAR CANCER RESEARCH", "CANCER EPIDEMIOLOGY BIOMARKERS & PREVENTION", "CLINICAL CANCER RESEARCH", "MOLECULAR CANCER THERAPEUTICS", "CANCER PREVENTION RESEARCH", "CANCER DISCOVERY" AND "CANCER TODAY"

(Code) (Expenses \$ 1,489,868 including grants of \$) (Revenue \$)
[1] SCIENCE POLICY AND LEGISLATIVE AFFAIRS

(Code) (Expenses \$ 1,183,797 including grants of \$) (Revenue \$)
[2] COMMUNICATIONS

(Code) (Expenses \$ 911,150 including grants of \$ 184,600) (Revenue \$ 100,245)
[3] SPECIAL CONSTITUENCIES - CONSISTS OF SERVICES TO UNDER-REPRESENTED POPULATIONS (WOMEN, MINORITIES, UNDERGRADUATES) TO ENHANCE THEIR SCIENTIFIC CAREERS

(Code) (Expenses \$ 347,447 including grants of \$) (Revenue \$)
[4] SCIENTIFIC INITIATIVES

(Code) (Expenses \$ 266,610 including grants of \$) (Revenue \$ 5,928)
[5] PROGRAMS FOR PATIENTS AND PATIENT ADVOCATES

4d Other program services (Describe in Schedule O)

(Expenses \$ 4,198,872 including grants of \$ 184,600) (Revenue \$ 106,173)

4e Total program service expenses \$ 45,587,125

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A.	1 Yes	
2 Is the organization required to complete Schedule B, <i>Schedule of Contributors</i> (see instructions)?	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4 Yes	
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? If "Yes," complete Schedule C, Part III.	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I.	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II.	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8	No
9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.	10	No
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? If "Yes," complete Schedule D, Part VI.	11a Yes	
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? If "Yes," complete Schedule D, Part VII.	11b	No
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? If "Yes," complete Schedule D, Part VIII.	11c	No
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? If "Yes," complete Schedule D, Part IX.	11d Yes	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e Yes	
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)? If "Yes," complete Schedule D, Part X.	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.	12b Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I.	14b Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U.S.? If "Yes," complete Schedule F, Part II and IV.	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U.S.? If "Yes," complete Schedule F, Part III and IV.	16	Yes
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b	

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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	372
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	2a	169
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes
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?	3a	Yes
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes
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 or securities account)?	4a	No
b	If "Yes," enter the name of the foreign country ► 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?	5a	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).	7a	No
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?	7b	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7c	No
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7d	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7e	No
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7f	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7h	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	8	
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?	9a	
9	Sponsoring organizations maintaining donor advised funds.	9b	
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter	10a	
a	Initiation fees and capital contributions included on Part VIII, line 12	10b	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter	11a	
a	Gross income from members or shareholders	11b	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a	
a	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13b	
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13c	
c	Enter the aggregate amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

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

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

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	1a	19
b Enter the number of voting members included in line 1a, above, who are independent	1b	19
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6 Did the organization have members or stockholders?	6	Yes
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a The governing body?	8a	Yes
b Each committee with authority to act on behalf of the governing body?	8b	Yes
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

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

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	No
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
b Describe in Schedule O the process, if any, used by the organization to review the Form 990		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13 Did the organization have a written whistleblower policy?	13	Yes
14 Did the organization have a written document retention and destruction policy?	14	Yes
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a	Yes
b Other officers or key employees of the organization	15b	Yes
If "Yes," to line 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?	16a	No
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made 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 made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization
 MICHAEL STEWART CHIEF FINANCIAL OFFICER
 615 CHESTNUT ST 17TH FLOOR
 PHILADELPHIA, PA 19106
 (215) 440-9300

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, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor any related organizations compensated any current or former officer, director, or trustee.

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

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►20

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A)	Name and business address	(B)	Description of services	(C)	Compensation
DARTMOUTH JOURNAL SERVICES INC	PO BOX 415740				
PO BOX 415740	BOSTON, MA 02241				1,705,665
BENERATION LLC	PO BOX 608				
MOORESTOWN, NJ 08057				BENEFITS SERVICE PROVIDER	1,127,662
PSAV	23918 NETWORK PLACE				
CHICAGO, IL 60673				AUDIO VISUAL SERVICES	1,070,571
FREEMAN COMPANIES	PO BOX 650036				
DALLAS, TX 75265				EXHIBIT SERVICES	647,850
HIGHWIRE PRESS	STANFORD UNIVERSITY				
STANFORD, CA 94305				E-PUBLISHING	490,615
2. Total number of independent contractors (including but not limited to those listed above) who received more than					

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **►5**

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514			
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a							
	b Membership dues	1b	2,872,761						
	c Fundraising events	1c							
	d Related organizations	1d	22,506,320						
	e Government grants (contributions)	1e	958,858						
	f All other contributions, gifts, grants, and similar amounts not included above	1f							
	g Noncash contributions included in lines 1a-1f \$								
	h Total. Add lines 1a-1f		26,337,939						
Program Service Revenue	Business Code								
			2a PUBLICATIONS	541800	14,756,245	14,026,559	729,686		
			b CONFERENCES/WORKSHOPS	541800	14,133,598	11,084,649	133,247	2,915,702	
			c						
			d						
			e						
			f All other program service revenue		11,469	11,469			
			g Total. Add lines 2a-2f		28,901,312				
Other Revenue									
			3 Investment income (including dividends, interest and other similar amounts)		836,737			836,737	
			4 Income from investment of tax-exempt bond proceeds						
			5 Royalties		512,037			512,037	
			6a Gross rents	(I) Real	(II) Personal				
			b Less rental expenses						
			c Rental income or (loss)						
			d Net rental income or (loss)						
7a Gross amount from sales of assets other than inventory	(I) Securities	(II) Other							
b Less cost or other basis and sales expenses	4,250,756								
c Gain or (loss)	3,669,210								
d Net gain or (loss)	581,546					581,546			
8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a								
b Less direct expenses	b								
c Net income or (loss) from fundraising events									
9a Gross income from gaming activities See Part IV, line 19	a								
b Less direct expenses	b								
c Net income or (loss) from gaming activities									
10a Gross sales of inventory, less returns and allowances	a								
b Less cost of goods sold	b								
c Net income or (loss) from sales of inventory									
Miscellaneous Revenue	Business Code								
11a									
b									
c									
d All other revenue									
e Total. Add lines 11a-11d									
12 Total revenue. See Instructions		57,169,571	25,122,677	862,933	4,846,022				

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)

Check if Schedule O contains a response to any question in this Part IX **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 United States See Part IV, line 21				
2 Grants and other assistance to individuals in the United States See Part IV, line 22	14,667,898	14,667,898		
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	106,300	106,300		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	870,139	629,434	240,705	
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	9,845,464	8,134,882	1,710,582	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	455,102	344,748	110,354	
9 Other employee benefits	1,515,382	1,120,721	394,661	
10 Payroll taxes	692,690	573,332	119,358	
11 Fees for services (non-employees)				
a Management				
b Legal	105,322	69,814	35,508	
c Accounting	96,150	63,734	32,416	
d Lobbying				
e Professional fundraising See Part IV, line 17				
f Investment management fees	168,240	111,520	56,720	
g Other	1,730,498	1,443,065	287,433	
12 Advertising and promotion	482,551	439,365	43,186	
13 Office expenses	1,083,123	861,632	221,491	
14 Information technology	787,513	695,385	92,128	
15 Royalties				
16 Occupancy	2,731,201	1,871,225	859,976	
17 Travel	1,980,622	1,900,049	80,573	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	7,771,218	7,667,684	103,534	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	490,910	229,314	261,596	
23 Insurance	107,128	77,625	29,503	
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 UNRELATED BUS INC TAX	123,870	123,870		
b PRINTING AND PRODUCTION	4,433,898	4,243,594	190,304	
c DEV'T FEE TO FDN (SUB)	1,189,320			1,189,320
d MISCELLANEOUS	179,330	130,239	49,091	
e				
f All other expenses	81,695	81,695		
25 Total functional expenses. Add lines 1 through 24f	51,695,564	45,587,125	4,919,119	1,189,320
26 Joint costs. Check here <input checked="" 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				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	4,895,160	1	1,919,144
	2 Savings and temporary cash investments	7,485,536	2	7,025,472
	3 Pledges and grants receivable, net	32,149,922	3	22,600,392
	4 Accounts receivable, net	1,064,331	4	994,718
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	1,285,671	9	1,656,342
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	4,948,425	10a	
	b Less accumulated depreciation	3,834,112	10b	712,609
			10c	1,114,313
	11 Investments—publicly traded securities	45,478,442	11	44,732,256
	12 Investments—other securities See Part IV, line 11		12	
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	6,142,614	15	6,240,344
	16 Total assets. Add lines 1 through 15 (must equal line 34)	99,214,285	16	86,282,981
Liabilities	17 Accounts payable and accrued expenses	3,912,610	17	4,691,547
	18 Grants payable	35,055,939	18	17,856,087
	19 Deferred revenue	8,500,729	19	9,934,383
	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 (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	5,860,544	25	5,467,053
	26 Total liabilities. Add lines 17 through 25	53,329,822	26	37,949,070
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	36,603,877	27	37,743,987
	28 Temporarily restricted net assets	9,280,586	28	10,589,924
	29 Permanently restricted net assets		29	
	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	45,884,463	33	48,333,911
	34 Total liabilities and net assets/fund balances	99,214,285	34	86,282,981

Part XI Reconciliation of Net AssetsCheck 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	57,169,571
2	Total expenses (must equal Part IX, column (A), line 25)	2	51,695,564
3	Revenue less expenses Subtract line 2 from line 1	3	5,474,007
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	45,884,463
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-3,024,559
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	48,333,911

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII

	Yes	No
1 Accounting method used to prepare the Form 990	<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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?		2a
2b Were the organization's financial statements audited by an independent accountant?	2b Yes	No
c If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c
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 <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a Yes	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b Yes	

2011

Open to Public
Inspection**SCHEDULE A**
(Form 990 or 990EZ)**Public Charity Status and Public Support**

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

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

Department of the Treasury
Internal Revenue ServiceName of the organization
AMERICAN ASSOCIATION FOR CANCER RESEARCH INC

Employer identification number

23-6251648

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii) a family member of a person described in (i) above?

(iii) a 35% controlled entity of a person described in (i) or (ii) above?

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

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

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

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
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						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						
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 501(c)(3) organization, check this box and **stop here** 

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))	14
15 Public Support Percentage for 2010 Schedule A, Part II, line 14	15
16a 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization 	
b 33 1/3% support test—2010. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization 	
17a 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization 	
b 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization 	
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions 	

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

(Complete only if you checked the box on line 9 of Part I 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	13,982,742	49,735,404	40,457,376	18,232,876	26,337,939	148,746,337
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	23,812,515	22,941,165	23,771,425	24,049,996	25,122,677	119,697,778
3 Gross receipts from activities that are not an unrelated trade or business under section 513	2,518,282	2,304,330	2,308,980	2,315,889	2,915,702	12,363,183
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	40,313,539	74,980,899	66,537,781	44,598,761	54,376,318	280,807,298
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	10,120,810	43,394,173	36,678,656	14,679,979	22,506,320	127,379,938
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						0
c Add lines 7a and 7b	10,120,810	43,394,173	36,678,656	14,679,979	22,506,320	127,379,938
8 Public Support (Subtract line 7c from line 6)						153,427,360

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6	40,313,539	74,980,899	66,537,781	44,598,761	54,376,318	280,807,298
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,798,459	2,126,183	1,183,711	1,624,719	1,348,774	9,081,846
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	249,080	242,178	190,077	186,292	238,220	1,105,847
c Add lines 10a and 10b	3,047,539	2,368,361	1,373,788	1,811,011	1,586,994	10,187,693
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)	43,361,078	77,349,260	67,911,569	46,409,772	55,963,312	290,994,991
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15	52 730 %
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	54 080 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17	3 500 %
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	3 880 %
19a 33 1/3% support tests—2011. 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—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization		
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

SCHEDULE C

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below.
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

2011

**Open to Public
Inspection**

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-E
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then

• Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization

AMERICAN ASSOCIATION FOR CANCER RESEARCH INC

Employer identification number

23-6251648

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

1 Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV

2 Political expenditures ➤ \$ _____

3 Volunteer hours

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

1 Enter the amount of any excise tax incurred by the organization under section 4955 ► \$ _____

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

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

4a Was a correction made? Yes No

b If "Yes," describe in Part IV

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

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

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ► \$ _____

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

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

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

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

A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		105,047	
b Total lobbying expenditures to influence a legislative body (direct lobbying)		157,571	
c Total lobbying expenditures (add lines 1a and 1b)		262,618	
d Other exempt purpose expenditures		49,809,420	
e Total exempt purpose expenditures (add lines 1c and 1d)		50,072,038	
f Lobbying nontaxable amount Enter the amount from the following table in both columns		1,000,000	
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
g Grassroots nontaxable amount (enter 25% of line 1f)		250,000	
h Subtract line 1g from line 1a If zero or less, enter -0-		0	
i Subtract line 1f from line 1c If zero or less, enter -0-		0	
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No	

4-Year Averaging Period Under Section 501(h)

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying non-taxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	169,720	112,715	150,400	262,618	695,453
d Grassroots non-taxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures		45,086	60,160	105,047	210,293

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

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

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

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

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

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

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 11. Also, complete this part for any additional information

Identifier	Return Reference	Explanation

SCHEDULE D
(Form 990)**Supplemental Financial Statements****2011****Open to Public
Inspection**Department of the Treasury
Internal Revenue Service

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
 ► Attach to Form 990. ► See separate instructions.

Name of the organization

AMERICAN ASSOCIATION FOR CANCER RESEARCH INC

Employer identification number

23-6251648

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

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

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

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

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

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

Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

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

	Held at the End of the Year
2a	
2b	
2c	
2d	

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

4 Number of states where property subject to conservation easement is located ► _____

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

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

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

► \$ _____

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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

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

(i) Revenues included in Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

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

a Revenues included in Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

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

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

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

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	

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					
b Contributions					
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

a Board designated or quasi-endowment ►

b Permanent endowment ►

c Term endowment ►

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

(i) unrelated organizations Yes No

(ii) related organizations Yes No

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

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 property	(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		552,156	328,446	223,710	
d Equipment		1,714,307	1,208,235	506,072	
e Other		2,681,962	2,297,431	384,531	
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)					1,114,313

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		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12.) ►		

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

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

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

(a) Description	(b) Book value
(1) INTEREST IN NET ASSETS OF AFFILIATE	6,240,344
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15.) ►	6,240,344

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

(a) Description of Liability	(b) Amount	
Federal Income Taxes		
PAYABLE TO AFFILIATE	5,467,053	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ►	5,467,053	

2. 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 (ASC740)

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	57,169,571
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	51,695,564
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	5,474,007
4	Net unrealized gains (losses) on investments	4	-3,122,289
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	97,730
9	Total adjustments (net) Add lines 4 - 8	9	-3,024,559
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	2,449,448

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

1	Total revenue, gains, and other support per audited financial statements	1	55,320,992
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	-3,122,289
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	24,969,350
e	Add lines 2a through 2d	2e	21,847,061
3	Subtract line 2e from line 1	3	33,473,931
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	23,695,640
c	Add lines 4a and 4b	4c	23,695,640
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	57,169,571

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

1	Total expenses and losses per audited financial statements	1	52,871,544
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	24,871,620
e	Add lines 2a through 2d	2e	24,871,620
3	Subtract line 2e from line 1	3	27,999,924
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	23,695,640
c	Add lines 4a and 4b	4c	23,695,640
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	51,695,564

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	UNCERTAIN TAX POSITIONS UNDER FIN 48 THE AACR BELIEVES THAT THEY HAD NO UNCERTAIN TAX POSITIONS AS DEFINED IN FIN 48 AND, AS A RESULT, THE ADOPTION OF FIN 48 HAS HAD NO IMPACT ON THE AACR'S FINANCIAL STATEMENTS
PART XI, LINE 8 - OTHER ADJUSTMENTS		CHANGE IN INTEREST IN NET ASSETS OF AFFILIATE-UNRESTRICTED -193,023 CHANGE IN INTEREST IN NET ASSETS OF AFFILIATE-TEMP RESTRICTED 90,037 CHANGE IN INTEREST IN NET ASSETS OF AFFILIATE-PERM RESTRICTED 200,716 TOTAL TO SCHEDULE D, PART XI, LINE 8 97,730
PART XII, LINE 2D - OTHER ADJUSTMENTS		REVENUE OF AFFILIATE 24,969,350
PART XII, LINE 4B - OTHER ADJUSTMENTS		INTERCOMPANY REVENUE 23,695,640
PART XIII, LINE 2D - OTHER ADJUSTMENTS		EXPENSES OF AFFILIATE 24,871,620
PART XIII, LINE 4B - OTHER ADJUSTMENTS		INTERCOMPANY EXPENSES 23,695,640

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.

Employer identification number

23-6251648

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 (Use Part V if additional space is needed)

Part II 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 Use Part V if additional space is needed.

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 ► _____

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

Part IV Foreign Forms

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 (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 and/or Form 3520-A. (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

Part V **Supplemental Information**

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

**Schedule I
(Form 990)**

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

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

► Attach to Form 990

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

AMERICAN ASSOCIATION FOR CANCER RESEARCH INC

Employer identification number

23-6251648

Part I General Information on Grants and Assistance

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

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

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) RESEARCH GRANTS AND FELLOWSHIPS	13	12,601,514			
(2) CAREER DEVELOPMENT FELLOWSHIPS	3	600,000			
(3) PRE & POST DOCTORAL FELLOWSHIPS	12	659,929			
(4) SCIENTIFIC AWARDS	17	175,000			
(5) TRAVEL AWARDS	505	631,455			

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

Identifier	Return Reference	Explanation

Schedule J
(Form 990)**Compensation Information**

OMB No 1545-0047

2011**Open to Public
Inspection**Department of the Treasury
Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.
► Attach to Form 990. ► See separate instructions.

Name of the organization

AMERICAN ASSOCIATION FOR CANCER RESEARCH INC

Employer identification number

23-6251648

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 checked="" 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 in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all 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 checked="" type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract
<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" 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?

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 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

a The organization?

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 Regs 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	Yes	
2	Yes	
4a		No
4b		No
4c		No
5a		No
5b		No
6a		No
6b		No
7		No
8		No
9		

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

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

Note. The sum of columns (B)(i)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual.

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
	PART I, LINE 1A	SCHEDULE J, PART I, LINE 1A FIRST-CLASS OR CHARTER TRAVEL IT IS THE POLICY OF THE ASSOCIATION TO AUTHORIZE FIRST CLASS TRAVEL ARRANGEMENTS FOR THE CHIEF EXECUTIVE OFFICER IN ORDER TO ACCOMMODATE BUSINESS TRAVEL SCHEDULES AND FACILITATE ONGOING BUSINESS TRANSACTIONS

Schedule L

Transactions with Interested Persons

OMB No 1545-0047

2011

Department of the Treasury
Internal Revenue Service

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.

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

**Open to Public
Inspection**

Name of the organization

AMERICAN ASSOCIATION FOR CANCER RESEARCH INC

Employer identification number

23-625164

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 \$ _____

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance
(1) FRANK MCCORMICK PHD FRS	GOVERNING BOARD MEMBER	100,000

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No

Part V Supplemental Information

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

Identifier	Return Reference	Explanation

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 to provide any additional information.
► Attach to Form 990 or 990-EZ.

2011**Open to Public
Inspection**Name of the organization
AMERICAN ASSOCIATION FOR CANCER RESEARCH INC**Employer identification number**

23-6251648

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	MEMBERS THE ORGANIZATION HAS ONE CLASS OF VOTING MEMBER EACH VOTING MEMBER IS ELIGIBLE TO VOTE OR TO HOLD THE OFFICE AND HAS THE SAME VOTING RIGHT - ONE VOTE PER MEMBER
	FORM 990, PART VI, SECTION A, LINE 7A	ELECTION OF MEMBERS OF GOVERNING BODY ELECTION OF MEMBERS OF THE GOVERNING BODY SHALL BE BY BALLOT DISTRIBUTED BY MAIL TO VOTING MEMBERS OF THE ORGANIZATION THE CANDIDATE RECEIVING THE HIGHEST NUMBER OF VOTES CAST SHALL BE ELECTED
	FORM 990, PART VI, SECTION A, LINE 7B	GOVERNING BODY DECISIONS SUBJECT TO APPROVAL BY MEMBERS DECISIONS OF THE BOARD TO AMEND THE BY-LAWS OR TO AUTHORIZE THE ESTABLISHMENT OF A LOCAL SECTION REQUIRE APPROVAL BY MEMBERSHIP OF THE ASSOCIATION
	FORM 990, PART VI, SECTION B, LINE 11	GOVERNING BODY REVIEW OF FORM 990 PRIOR TO ITS FILING WITH THE IRS, A COPY OF THE FINAL FORM 990 IS PROVIDED TO EACH VOTING MEMBER OF THE GOVERNING BODY AND TO THE FINANCE AND AUDIT COMMITTEE ON AN ANNUAL BASIS AS PART OF THEIR FIDUCIARY RESPONSIBILITY TO UNDERSTAND AND REVIEW THE ORGANIZATION'S FINANCES
	FORM 990, PART VI, SECTION B, LINE 12C	MONITORING AND ENFORCEMENT OF CONFLICT OF INTEREST POLICY EACH VOTING MEMBER OF THE GOVERNING BODY IS REQUIRED TO ANNUALLY ACKNOWLEDGE ANY CONFLICTS BY SIGNING THE CORPORATE CONFLICT OF INTEREST STATEMENT AND DETAILING ALL POTENTIAL CONFLICTS
	FORM 990, PART VI, SECTION B, LINE 15	PROCESS FOR DETERMINING COMPENSATION INDEPENDENT DATA DETAILING COMPARABLE COMPENSATION IS PURCHASED ANNUALLY AND PROVIDED TO A COMPENSATION COMMITTEE WHICH EVALUATES SALARY LEVELS IN COMPARISON TO PEER GROUPS
	FORM 990, PART VI, SECTION C, LINE 19	PUBLIC AVAILABILITY OF OTHER DOCUMENTS THE FINANCIAL STATEMENT AND FORM 990 ARE POSTED ON THE ORGANIZATION'S WEBSITE (WWW AACR.ORG) THEY WILL BE PROVIDED ON REQUEST, AND ARE ALSO AVAILABLE FOR INSPECTION AT THE ORGANIZATION'S OFFICE
	FORM 990, PART VII, SECTION A, HOURS DEVOTED TO RELATED ORGANIZATION	THE FOLLOWING INDIVIDUALS ALSO SERVE ON THE RELATED ORGANIZATION'S GOVERNING BOARD HERE ARE THEIR HOURS DEVOTED TO THE RELATED ORGANIZATION PER WEEK (1) DR MARGARET FOTI - SECRETARY/TREASURER/CEO OF RELATED ORGANIZATION - 1 00 HOURS PER WEEK (2) DR ELIZABETH BLACKBURN - BOARD MEMBER OF RELATED ORGANIZATION - 1 0 HOURS PER WEEK (3) DR JUDY GARBER - BOARD MEMBER OF RELATED ORGANIZATION - 1 0 HOURS PER WEEK (4) DR WILLIAM HAIT - BOARD MEMBER OF RELATED ORGANIZATION - 1 0 HOURS PER WEEK (5) MICHAEL STEWART - CFO OF RELATED ORGANIZATION - 5 0 HOURS PER WEEK
	FORM 990, PART VII, SECTION A, COMPENSATION FROM RELATED ORGANIZATION	FOR THE CEO AND CFO, THE ALLOCATION IS BASED UPON AN ESTIMATE OF THE AMOUNT OF THEIR TIME SPENT IN THIS AREA - 10% FOR THE CEO, 5% FOR THE CFO
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -3,122,289 CHANGE IN INTEREST IN NET ASSETS OF AFFILIATE-UNRESTRICTED -193,023 CHANGE IN INTEREST IN NET ASSETS OF AFFILIATE- TEMP RESTRICTED 90,037 CHANGE IN INTEREST IN NET ASSETS OF AFFILIATE-PERM RESTRICTED 200,716 TOTAL TO FORM 990, PART XI, LINE 5 -3,024,559
	SCHEDULE R, PART II, COL B PRIMARY ACTIVITY	THE PURPOSE OF THE AACR FOUNDATION IS TO RAISE FUNDS AND SOLICIT GRANTS AND CONTRIBUTIONS TO BENEFIT, SUPPORT AND PROMOTE ITS PARENT ORGANIZATION - AACR'S MISSION IS DESCRIBED ON PAGE 2, PART III

SCHEDULE R
(Form 990)

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2011

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization

AMERICAN ASSOCIATION FOR CANCER RESEARCH INC.

Employer identification number

23-6251648

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

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

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

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III or IV

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 (iv) rent from a controlled entity
- b Gift, grant, or capital contribution to related organization(s)
- c Gift, grant, or capital contribution from related organization(s)
- d Loans or loan guarantees to or for related organization(s)
- e Loans or loan guarantees by related organization(s)
- f Sale of assets to related organization(s)
- g Purchase of assets from related organization(s)
- h Exchange of assets with related organization(s)
- i Lease of facilities, equipment, or other assets to related organization(s)
- j Lease of facilities, equipment, or other assets from related organization(s)
- k Performance of services or membership or fundraising solicitations for related organization(s)
- l Performance of services or membership or fundraising solicitations by related organization(s)
- m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- n Sharing of paid employees with related organization(s)
- o Reimbursement paid to related organization(s) for expenses
- p Reimbursement paid by related organization(s) for expenses
- q Other transfer of cash or property to related organization(s)
- r Other transfer of cash or property from related organization(s)

	Yes	No
1a		No
1b		No
1c	Yes	
1d		No
1e		No
1f		No
1g		No
1h		No
1i		No
1j		No
1k		No
1l	Yes	
1m		No
1n	Yes	
1o		No
1p	Yes	
1q	Yes	
1r		No

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

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) AACR FOUNDATION FOR THE PREVENTION AND CURE OF CANCER (SUPPORTING ORG)	C	22,506,320	ACCURAL METHOD
(2) AACR FOUNDATION FOR THE PREVENTION AND CURE OF CANCER (SUPPORTING ORG)	L	1,189,320	ACCURAL METHOD
(3) AACR FOUNDATION FOR THE PREVENTION AND CURE OF CANCER (SUPPORTING ORG)	N	79,968	ACCURAL METHOD
(4) AACR FOUNDATION FOR THE PREVENTION AND CURE OF CANCER (SUPPORTING ORG)	P	2,285,332	ACCURAL METHOD
(5) AACR FOUNDATION FOR THE PREVENTION AND CURE OF CANCER (SUPPORTING ORG)	Q	188,299	ACCURAL METHOD
(6)			

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

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

Part VII Supplemental Information

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

Identifier	Return Reference	Explanation
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Additional Data

Software ID:
Software Version:
EIN: 23-6251648
Name: AMERICAN ASSOCIATION FOR CANCER RESEARCH
INC

Form 990, Special Condition Description:

Special Condition Description

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

4d. Other program services

(Code) (Expenses \$	1,489,868	including grants of \$) (Revenue \$)
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[1] SCIENCE POLICY AND LEGISLATIVE AFFAIRS

(Code) (Expenses \$	1,183,797	including grants of \$) (Revenue \$)
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[2] COMMUNICATIONS

(Code) (Expenses \$	911,150	including grants of \$	184,600) (Revenue \$	100,245)
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[3] SPECIAL CONSTITUENCIES - CONSISTS OF SERVICES TO UNDER-REPRESENTED POPULATIONS (WOMEN, MINORITIES, UNDERGRADUATES) TO ENHANCE THEIR SCIENTIFIC CAREERS

(Code) (Expenses \$	347,447	including grants of \$) (Revenue \$)
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[4] SCIENTIFIC INITIATIVES

(Code) (Expenses \$	266,610	including grants of \$) (Revenue \$	5,928)
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[5] PROGRAMS FOR PATIENTS AND PATIENT ADVOCATES

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee Or director	Institutional Trustee	Office	Key employee	Highest compensated employee			
DR ELIZABETH BLACKBURN PRESIDENT (2010-2011)	5 00	X		X			0	0	0
DR JUDY E GARBER PRESIDENT-ELECT (2010-2011)	5 00	X		X			0	0	0
DR JUDY E GARBER PRESIDENT (2011-2012)	5 00	X		X			0	0	0
DR FRANK MCCORMICK PRESIDENT-ELECT (2011-2012)	5 00	X		X			0	0	0
DR WILLIAM N HAIT TREASURER (2010-2012)	5 00	X		X			0	0	0
DR ELIZABETH H BLACKBURN PAST PRESIDENT (2011-2012)	2 00	X		X			0	0	0
DR JOSE BASELGA DIRECTOR (2010-2012)	2 00	X					0	0	0
DR JOAN S BRUGGE DIRECTOR (2011-2012)	2 00	X					0	0	0
DR ARUL M CHINNAIYAN DIRECTOR (2011-2012)	2 00	X					0	0	0
DR LISA M COUSSENS DIRECTOR (2010-2011)	2 00	X					0	0	0
DR TODD R GOLUB DIRECTOR (2010-2012)	2 00	X					0	0	0
DR JENNIFER RUBIN GRANDIS DIRECTOR (2010-2012)	2 00	X					0	0	0
DR TYLER JACKS DIRECTOR (2010-2011)	2 00	X					0	0	0
DR KENNETH W KINZLER DIRECTOR (2010-2011)	2 00	X					0	0	0
DR DAVID P LANE DIRECTOR (2010-2012)	2 00	X					0	0	0
DR JOAN MASSAGUE DIRECTOR (2010-2012)	2 00	X					0	0	0
DR JENNIFER A PIETENPOL DIRECTOR (2010-2012)	2 00	X					0	0	0
DR BRUCE AJ PONDER DIRECTOR (2010-2011)	2 00	X					0	0	0
DR KORNELIA POLYAK DIRECTOR (2010-2012)	2 00	X					0	0	0
DR EDDIE REED DIRECTOR (2010-2011)	2 00	X					0	0	0
DR THOMAS A SELLERS DIRECTOR (2011-2012)	2 00	X					0	0	0
DR MARGARET A SHIPP DIRECTOR (2010-2011)	2 00	X					0	0	0
DR MARGARET R SPITZ DIRECTOR (2010-2012)	2 00	X					0	0	0
DR CRAIG B THOMPSON DIRECTOR (2010-2012)	2 00	X					0	0	0
DR LAURA J VAN 'T VEER DIRECTOR (2011-2012)	2 00	X					0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Individual trustee	Official	Key employee	Highest compensated employee			
DR KRISTIINA VUORI DIRECTOR (2011-2012)	2 00	X					0	0	0
DR OWEN N WITTE DIRECTOR (2010-2012)	2 00	X					0	0	0
DR MARGARET FOTI CHIEF EXECUTIVE OFFICER	40 00			X			489,423	53,314	126,671
MICHAEL STEWART CHIEF FINANCIAL OFFICER	40 00			X			228,000	12,000	40,699
DIANE SCOTT-LICHTER SR DIR/PUBLISHING	40 00				X		211,700	0	33,896
JONG RETZLAFF SR DIR/SCIENCE POLICY	40 00				X		223,906	0	7,875
DEIGHTON E LIVERPOOL DIR/INFORMATION TECHNOLOGY	40 00				X		161,537	0	29,443
JOSEPH S PONTOSKI DIR/FINANCE	40 00				X		150,150	0	33,208
VERNETTA J MITCHELL DIR/HR	40 00				X		136,729	0	20,510