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DLN: 93493012002114

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

2012

OMB No 1545-0047

2012

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

Open to Public
Inspection

A Fo	r the	2012 cal	lendar year, or tax year beginning	3 04-01-2012 , 2012, and ending 03	-31-2013		•
		applicable	C Name of organization SUSAN G KOMEN BREAST CANCER F			D Employe	er identification number
☐ Ad	dress c	change	Doing Business As			75-183	35298
	me cha	_	SUSAN G KOMEN FOR THE CURE				
	tıal retu		Number and street (or P O box if m 5005 LBJ Freeway	all is not delivered to street address) Room/	suite	E Telephon	e number
_	rmınate		Suite 250			(972)8	55-1600
		l return	City or town, state or country, and 2 Dallas, TX 752446125	YIP + 4			
J Ap	plicatio	n pending			1		ceipts \$ 182,276,852
			F Name and address of prind DrJudith Salerno CEOPRESI	•		s this a group r filiates?	eturn for Ves V No
			5005 LBJ Freeway Suite 250 Dallas,TX 752446125)			
			Bullus, TX 752116125				included? Tyes No ilist (see instructions)
I Ta	ıx-exer	mpt status	▼ 501(c)(3)	nsert no) 4947(a)(1) or 527			
J W	ebsit	e: ► ww	w komen org		H(c) G	Froup exemption	on number ► 7164
 K For	m of o	rganization	Corporation Trust Association	n Other ▶-	L Year o	of formation 1982	2 M State of legal domicile TX
	rt I		nmary	•	ı		
iance		TO END	NING/TREATMENT AND SUPPO	on or most significant activities G RESEARCH AND HEALTH PROGR RT PRIMARILY AIMED AT THE MEI			
. Governance	2	Check t	hıs box ▶┌ ıf the organızatıon dıs	scontinued its operations or disposed	d of more tha	ın 25% of its r	net assets
Activities &	3	Number	of voting members of the govern	ing body (Part VI, line 1a)		[3 10
Ě	1			of the governing body (Part VI, line 1		H-	4 9
₽CI			, ,	calendar year 2012 (Part V, line 2a)		-	5 320
			·	ecessary)		-	6 5,675 7a 0
				rom Form 990-T, line 34		<u> </u>	7b 0
	 					Prior Year	Current Year
	8	Contr	ıbutıons and grants (Part VIII, lıı	ne 1h)		159,779,66	118,656,952
nue	9 Program service revenue (Part VIII, I			ne 2g)		33,193,70	26,281,480
Revenue	10		tment income (Part VIII, column		7,951,63		
_	11			lines 5, 6d, 8c, 9c, 10c, and 11e) (must equal Part VIII, column (A), li		-3,836,54	-5,984,835
	12			(must equal Part VIII, Column (A), n	ille	197,088,45	146,321,937
	13	Grant	s and similar amounts paid (Part	IX, column (A), lines 1-3)		71,697,84	49,882,918
	14		·	X, column (A), line 4)			0 0
8	15	Saları 5–10		e benefits (Part IX, column (A), lines	5	26,312,02	25,941,318
Expenses	16a	Profes	ssional fundraising fees (Part IX,	column (A), line 11e)		1,160,10	1,598,294
ੜੇ	Ь	Total fu	undraising expenses (Part IX, column (D)), line 25) • 20,118,107			
	17	Other	expenses (Part IX, column (A), l	ınes 11a-11d, 11f-24e)		89,188,24	82,440,666
	18			st equal Part IX, column (A), line 25)		188,358,2	
Net Assets or Fund Balances	19	Rever	nue less expenses Subtract line	18 from line 12		8,730,24 ning of Current Year	
sset 3afa	20	Total	assets (Part X, line 16)			313,104,32	20 294,589,250
PA PE	21	Total	liabilities (Part X, line 26)			193,001,24	175,912,920
	22	_		line 21 from line 20		120,103,07	74 118,676,330
Unde my k	nowle	alties of edge and as any k	belief, it is true, correct, and com nowledge	amined this return, including accompa aplete Declaration of preparer (other) is based on a	
Sign		'	ature of officer			Date	
Her	e		k Nadolny CFO e or print name and title				
		<u> </u>	Print/Type preparer's name	Preparer's signature	Date	Check I If	PTIN
Pai	d					self-employed	
	pare		Firm's name 🕨 ERNST & YOUNG US LL	<u> </u>		Firm's EIN 🟲	
	On		Firm's address ► 1901 SIXTH AVE NORTH	STE 1200		Phone no (205)	254-1608

BIRMINGHAM, AL 35203

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

☐ Yes ☐ No

Form	1990 (2012)					Page
Par		ment of Program Serv f Schedule O contains a res			I	
1	Briefly describ	be the organization's mission	n			
		ANCER BY FUNDING RESE MARILY AIMED AT THE M			OCUSED ON EDUCATION, SCR U S AND 30 COUNTRIES	REENING/TREATMENT
2		zation undertake any signifi 990 or 990-EZ?			r which were not listed on	┌ Yes ┌ No
	If "Yes," descr	tbe these new services on S	Schedule O			
3	services? .	zation cease conducting, or		nt changes in how it co	onducts, any program	┌ Yes ┌ No
	If "Yes," descr	the these changes on Sche	dule O			
4	expenses Sec		(4) organization	s are required to repoi	nree largest program services, a t the amount of grants and alloc	·
4a	(Code) (Expenses \$	53,120,881	ıncludıng grants of \$	41,380,728) (Revenue \$	26,281,480)
	Grants to other of	charitable organizations to suppor	t research and clini	cal investigation of breast c	cancer See schedule O for additional de	tails
4b	(Code) (Expenses \$	64,057,427	including grants of \$	3,273,047) (Revenue \$	274,466)
	Public health edu additional details		public's awareness	of breast cancer including,	among other things, detection and trea	tment See schedule O for
4c	(Code) (Expenses \$	13,862,971	ıncludıng grants of \$	5,229,143) (Revenue \$	0)
	Health treatmen	it and screening programs and gra	ants See schedule	O for additional details		

) (Revenue \$

Other program services (Describe in Schedule O)

Total program service expenses ►

including grants of \$

131,041,279

4d

4e

(Expenses \$

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (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^{\bullet}	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 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, 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 $\sqrt{2}$	10	Yes	
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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
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 and XII	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 and XII 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, Parts I and IV	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 United States? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
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 hospital facilities? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1^2 If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Νo
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? 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 lines 24b through 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? <i>If</i> "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, highest 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 employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			1
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		N o
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νo
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? <i>If</i> "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, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, 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		
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 11b and 19?	38	Yes	

Par	Statements Regarding Other IRS Fillings 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 234		1 00	110
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country IS			
	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		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
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 as charitable contributions?	6a		Νo
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).		1	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	7c		No
d	file Form 8282?	76		NO
u	The state the number of forms 5252 med during the year	_		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
L2a	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			
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand	<u> </u>		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule 0	14h		

Form 990 (2012) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management **1a** Enter the number of voting members of the governing body at the end of the tax 1a 10 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O **b** Enter the number of voting members included in line 1a, above, who are Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any 2 Νo Did the organization delegate control over management duties customarily performed by or under the direct 3 Nο supervision of officers, directors or trustees, or key employees to a management company or other person? . Did the organization make any significant changes to its governing documents since the prior Form 990 was 4 Yes Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 Nο 6 Νo 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or 7a Nο Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, Νo Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Yes Each committee with authority to act on behalf of the governing body? Yes 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 Nο Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes 10a Did the organization have local chapters, branches, or affiliates? Yes **b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b Yes affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing Yes 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 . . . 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 Yes 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12b Yes c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c Yes 13 13 Yes 14 Did the organization have a written document retention and destruction policy? 14 Yes 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 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 16a Νo **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?

Section C. Disclosure

- List the States with which a copy of this Form 990 is required to be filed AL , AK , AZ , AR , CA , CO , CT , DC , DC , FL , GA , HI , IL ,

 IN , KS , KY , ME , MD , MA , MI , MN , MS , MO , NH , NJ ,

 NM , NY , NC , ND , OH , OK , OR , PA , RI , SC , TN , UT ,

 UT , VA , WA , WV , WI
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply on website. Another's website. Upon request. Other (explain in Schedule O)
- 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 during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►Mark Nadolny CFO 5005 LBJ Freeway Suite 250 Dallas, TX (972)855-1600

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					ess er e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation	
	for related organizations below dotted line)	Individual trustée or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations	
(1) Robert C Taylor	1 0										
Chair of the Board (Beg 4/1/12)	0 0	Х						0	0	0	
(2) Linda Custard	1 0										
BM/Vice Chair (Beg 11/7/12)	0 0	Х						0	0	0	
(3) Jane Abraham	10										
BOD Member		Х						0	0	0	
(4) Elyse Gellerman	0 0 1 0										
		Х						0	0	0	
BOD Member (End 3/31/13) (5) Connie O'Neill	0 0										
		Х		х				0	0	0	
BOD Member & Treasurer (6) John D Raffaellı	0 0										
		Х						0	0	0	
BOD Member	0 0										
(7) Tricia Ory	10	Х						0	0	0	
BOD Member (Beg 9/21/12)	0 0										
(8) Dr LaSalle LeFall	1 0	X						0	0	0	
BOD Member (end 9/15/12)	0 0										
(9) Linda Law	1 0	X		×				0	0	0	
BOD & Asst Sec'y (End 8/2/12)	0 0	^						Ŭ	Ŭ	<u> </u>	
(10) Alan D Feld	1 0	_						0	0	0	
BOD Member (Beg 9/21/12)	0.0	Х						0	0	0	
(11) Brenda Lauderback	1 0	.,,									
BOD Member (End 8/2/12)	0 0	Х						0	0	0	
(12) Dr Olofunmlayo Olopade	1 0										
BOD Member (Beg 2/28/13)	0 0	Х						0	0	0	
(13) Nancy G Brinker	55 0										
Founder, BOD Member & CEO	0 0	Х		Х				560,896	0	23,739	
(14) Ellen Willmott	55 0				\vdash						
Gen Counsel & Secy (beg 6/12)	0 0			х				141,415	0	4,180	
(15) Lesley Lurie	55 0										
				х				181,205	0	26,651	
Assistant Secretary (16) Elizabeth Thompson	0 0 55 0				\vdash						
				х				606,461	0	26,052	
President (end 9/7/12) (17) Katrina McGhee	0.0										
(1/) Naulia Mudilee	55 0	l		L		l					
Executive VP, CMO(end 5/4/12)				Х				120,941	0	13,157	

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

(A) Name and Title	(B) Average hours per week (list any hours	more pers	than on is	one bot	not box h ar	chec (, unle n offic rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(18) Mark Nadolny	55 0			х				307,664	0	31,464
Chief Financial Officer	0 0							307,664	0	31,464
(19) David Dawson	55 0				х			200 675	0	29,985
VP, Information Technology	0 0				^			208,675	0	29,983
(20) Chandini Portteus	55 0				х			107.752	0	22 522
VP,Resrch Eval & Science Prog	0 0				^			197,753	U	32,533
(21) Dorothy Jones	55 0				, ,			167 176	0	0.573
VP, Marketing	0 0				Х			167,176	0	9,572
(22) Carol Corcoran	55 0				V			242.752	0	16 212
SVP, Global Networks	0 0				Х			242,753	0	16,312
(23) Margo Lucero	55 0				,			472 275	0	24 024
VP,Bus Dev & PTPS(end 11/9/12)	0 0				Х			172,275	0	31,824
(24) Lynn Erdman	55 0				,			100.000		20 544
VP, Community Health	0 0				Х			188,069	0	20,541
(25) Kay Rohlman	55 0				Ī.,			472.704		20.240
VP, Human Resources	0 0				Х			173,784	0	30,340
(26) Nancy MacGregor	55 0					.,		472.060		42.704
VP, Global Netwks (end 6/2/12)	0 0					X		173,960	0	13,791
(27) British Robinson	55 0					,,		202 502		0.040
VP, Global Strategy & Programs	0 0					X		202,593	0	8,948
(28) Larry Lundy	55 0					,		165 516	0	16 204
Director, Bus Dev(end 11/8/12)	0 0					X		165,516	0	16,304
(29) Samuel Cheng	55 0							.=. =		
Controller (End 9/17/12)	0 0					X		158,506	0	14,955
(30) Nora Davis	55 0					\ ,		456.000	_	46.100
Senior Attorney	0 0					X		156,892	0	16,130
1b Sub-Total						▶				
c Total from continuation sheets to Pa	art VII, Section A					▶				
d Total (add lines 1b and 1c)						▶ ⊨		4,126,534	0	366,478
2 Total number of individuals (including					oove	e) who	rec	eıved more than	-	

\$100,000 of reportable compensation from the organization \-47

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

Section B. Independent Contractors

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)	(B)	(C)
Name and business address	Description of services	Compensation
Event 360 Inc , 205 N Michigan Avenue Chicago IL 606015927	Event Management	9,815,072
Convio Inc , POBox 671445 Dallas TX 752671445	Donation Processing	2,204,968
Merkle Response Services Inc , PO Box 64897 Baltimore MD 21264	Donation Processing	2,114,126
Radarworks , 6100 Wilshire Blvd Los Angeles CA 90048	Marketing	1,565,798
Adecco Employment Services , 175 Broadhollow Road MELVILLE NY 11747	Temp Staffing Svcs	986,107
Takal musikan aftin dan andank a arkin akana (maludun a kuk nak limikad ka kha a a limbad a kaus)		

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 >39

Part V	***	Statement of Revenue Check if Schedule O contains a respoi	nse to any question	in this Part VIII			
		check if Schedule o contains a respon	ise to any question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
s	1a	Federated campaigns 1a	1,398,689				
ons, Giffs, Grants Similar Amounts	ь	Membership dues 1b	0				
6ra 1101	c	Fundraising events 1c	53,942,160				
S. A							
Gif ila	d	Related organizations 1d					
ış,	e	Government grants (contributions) 1e					
ţi S z	f	All other contributions, gifts, grants, and 1f similar amounts not included above	63,316,103				
Contributions, and Other Sim	g	Noncash contributions included in lines	101,886		i		
n tr		1a-1f \$					
Con	h	Total. Add lines 1a-1f	· · · · •	118,656,952			
<u> </u>			Business Code				
æm	2a	Affiliate Payments	900099	26,281,480	26,281,480	0	0
æ	ь						
JC e	С						
<u>.</u>	d						
Ë	e						
Program Serwoe Revenue	f	All other program service revenue					
査	g	Total. Add lines 2a-2f		26,281,480			
	3	Investment income (including dividen		4,443,483			4,443,483
	4	and other similar amounts) Income from investment of tax-exempt bond	F	0			, ,
	5	Royalties	▶	367,325			367,325
		(ı) Real	(11) Personal				
	6a	Gross rents					
	ь	Less rental expenses					
	С	Rental income 0 or (loss)	0				
	d	Net rental income or (loss)		0			
		(ı) Securities	(II) O ther				
	7a	Gross amount from sales of 27,496,010 assets other than inventory					
	ь	Less cost or other basis and 24,571,153					
		sales expenses Gain or (loss) 2,924,857					
	d d	Net gain or (loss)	L .	2,924,857			2,924,857
	8a	Gross income from fundraising	· · · · · · ·	2,32 1,637			2,32.1,667
Other Revenue		events (not including \$53,942,160 of contributions reported on line 1c) See Part IV, line 18					
<u>.</u>		а	3,622,575				
Ě		Less direct expenses b	10,600,543	(077 060			6 077 060
Ü	c 9a	Net income or (loss) from fundraising Gross income from gaming activities See Part IV, line 19	events 🛌	-6,977,968			-6,977,968
	ь	Less direct expenses b					
	C 100	Net income or (loss) from gaming acti	vities	0			
	10a	Gross sales of inventory, less returns and allowances .	557,685				
	ь	Less cost of goods sold b	783,219				
	С	Net income or (loss) from sales of inv		-225,534	-225,534		
	4.	Miscellaneous Revenue	Business Code 900099	500,000	500,000	0	
	11a	Support services	900099	351,342	500,000	0	351,342
	b	O ther	900099	331,342	U	U	331,342
	C d	All other revenue					
	e e	Total. Add lines 11a-11d	🕨				
	12	Total revenue. See Instructions .		851,342			
	**	iotal levenue. See Instructions .	🟲	146,321,937	26,555,946	0	1,109,039

Part IX Statement of Functional Expenses

	IX Statement of Functional Expenses				
Section	on $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns $$ Al	l other organizat	ions must comp	lete column (A)	
	Check if Schedule O contains a response to any question in this Pa	art IX		<u></u>	, 🔽
	ot include amounts reported on lines 6b, o, 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	45,152,375	45,152,375		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0	, ,		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	4,730,543	4,730,543		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	3,429,061	2,743,248	205,744	480,069
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0	0	0	0
7	Other salaries and wages	18,562,559	13,442,649	3,678,669	1,441,241
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	651,414	468,719	129,386	53,309
9	Other employee benefits	2,039,813	1,453,187	417,840	168,786
10	Payroll taxes	1,258,471	912,176	243,697	102,598
11	Fees for services (non-employees)				
а	Management	0	0	0	0
b	Legal	412,333	277,888	114,822	19,623
С	Accounting	684,267	492,528	115,568	76,171
d	Lobbying	4,053	4,053	0	0
e	Professional fundraising services See Part IV, line 17	1,598,294	,		1,598,294
f	Investment management fees	282,650	226,120	16,959	39,571
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	0	0	0	0
12	Advertising and promotion	25,377,706	19,882,579	605,439	4,889,688
13	Office expenses	9,457,437	5,280,930	111,319	4,065,188
14	Information technology	3,119,367	2,494,228	188,839	436,300
15	Royalties	3,113,307	2,131,220	0	0
16	Occupancy	1,952,448	1,450,503	339,306	162,639
17	Travel	2,705,682	2,157,127	298,304	250,251
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	2,137,127	0	0
19	Conferences, conventions, and meetings	1,652,775	1,028,228	57,632	566,915
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	1,379,701	1,035,451	195,295	148,955
23	Insurance	213,634	178,144	18,859	16,631
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	200,000	2. 5,2	23,000	20,002
а	CONSULTING & PROF SERVICES	18,131,846	15,016,579	845,184	2,270,083
b	EQUIP RENTAL & MAINTENANCE	1,124,831	408,827	315,504	400,500
c	EVENT PRODUCTION	5,586,156	4,638,852	252,340	694,964
d	BANK FEES	2,682,871	733,604	79,254	1,870,013
e	All other expenses	7,672,909	6,832,741	473,850	366,318
25	Total functional expenses. Add lines 1 through 24e	159,863,196	131,041,279	8,703,810	20,118,107
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ▼ if following SOP 98-2 (ASC 958-720)	E2 772 40F	24 057 704	1 610 064	10 204 740
		52,772,485	31,857,781		19,294,740

Part X Balance Sheet

Pai	rt X	Balance Sheet Check if Schedule O contains a response to any question in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	0	1	0
	2	Savings and temporary cash investments	56,524,309	2	28,421,714
	3	Pledges and grants receivable, net	45,091,699	3	41,066,118
	4	Accounts receivable, net	1,158,074	4	729,495
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	0	-	0
×	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		5	
Se.			0	6	0
Assets	7	Notes and loans receivable, net	4,281,900	7	4,170,597
•	8	Inventories for sale or use	508,986	8	399,594
	9	Prepaid expenses and deferred charges	2,016,583	9	1,812,789
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 12,491,627			
	Ь	Less accumulated depreciation 10b 10,975,607	2,632,862	10c	1,516,020
	11	Investments—publicly traded securities	200,889,907	11	205,933,377
	12	Investments—other securities See Part IV, line 11	0	12	10,539,546
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	313,104,320	16	294,589,250
	17	Accounts payable and accrued expenses	24,795,633	17	17,873,404
	18	Grants payable	166,183,341	18	156,557,964
	19	Deferred revenue	2,022,272	19	1,481,552
	20	Tax-exempt bond liabilities	0	20	0
Ø	21	Escrow or custodial account liability $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	0	21	0
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
qе		persons Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	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	0	25	0
	26	Total liabilities. Add lines 17 through 25	193,001,246	26	175,912,920
on do		Organizations that follow SFAS 117 (ASC 958), check here ► 🔽 and complete			
Š	27	lines 27 through 29, and lines 33 and 34. Unrestricted net assets	78,174,629	27	81,533,610
<u>ප</u>	28	Temporarily restricted net assets	41,603,445	28	36,817,720
<u> </u>	29	Permanently restricted net assets	325,000	29	325,000
or Fund Balance	29	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and	323,000	29	323,000
正		complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
455	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net .	33	Total net assets or fund balances	120,103,074	33	118,676,330
Ż	34	Total liabilities and net assets/fund balances	313,104,320	34	294,589,250
			1 , , , ,		

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		146,3	321,937
2	Total expenses (must equal Part IX, column (A), line 25)	2			363,196
3	Revenue less expenses Subtract line 2 from line 1				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3		-13,5	541,259
4	Net assets of fund balances at beginning of year (must equal Part X, fine 33, column (A))	4		120,1	103,074
5	Net unrealized gains (losses) on investments	5			302,998
6	Donated services and use of facilities	-		0,0	302,990
		6		-3	341,038
7	Investment expenses	7			
8	Prior period adjustments				
	<u> </u>	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		3,6	552,555
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		118,6	576,330
Par	t XII Financial Statements and Reporting			· · ·	
	Check if Schedule O contains a response to any question in this Part XII				. 厂
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis			1	
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	<u> </u>
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	☐ Separate basis ☐ Both consolidated and separate basis			1	
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	1			
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?	9	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equire	3b		

Software ID: **Software Version:**

EIN: 75-1835298

Name: SUSAN G KOMEN BREAST CANCER FOUNDATION INC

Form 990, Part VII - Compensation of Compensated Employees, and Independent	Officers, Dir	ectors	s,Tru	uste	ees,	, Key	/ En	nployees, Highe	st	
(A) Name and Title	(B) Average hours per week (list any	Positio more unless an dire	than	o not one on i er an trust	box s bo d a tee)	th		(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
	hours for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Office	Key employee	Highest compensated employee	Former			organizations
Robert C Taylor Chaır of the Board(Beg 4/1/12)	10	×						0	0	О
Linda Custard BM/Vice Chair (Beg 11/7/12)	10	х						0	0	0
Jane Abraham BOD Member	1 0	х						0	0	0
Elyse Gellerman BOD Member (End 3/31/13)	1 0 0 0	х						0	0	0
Connie O'Neill BOD Member & Treasurer	10	х		х				0	0	0
John D Raffaellı BOD Member	10	х						0	0	0
Tricia Ory BOD Member (Beg 9/21/12)	1 0	х						0	0	0
Dr LaSalle LeFall BOD Member (end 9/15/12)	1 0	х						0	0	0
Linda Law BOD & Asst Sec'y (End 8/2/12)	10	х		х				0	0	0
Alan D Feld BOD Member (Beg 9/21/12)	10	х						0	0	0
Brenda Lauderback BOD Member (End 8/2/12)	10	х						0	0	0
Dr Olofunmlayo Olopade BOD Member (Beg 2/28/13)	10	х						0	0	0
Nancy G Brinker Founder, BOD Member & CEO	55 0 0 0	х		х				560,896	0	23,739
Ellen Willmott Gen Counsel & Secy (beg 6/12)	55 0 0 0			х				141,415	0	4,180
Lesley Lurie Assistant Secretary	55 0 0 0			х				181,205	0	26,651
Elizabeth Thompson President (end 9/7/12)	55 0 0 0			х				606,461	0	26,052
Katrına McGhee Executive VP, CMO(end 5/4/12)	55 0 0 0			х				120,941	0	13,157
Mark Nadolny Chief Financial Officer	55 0 0 0			х				307,664	0	31,464
David Dawson VP, Information Technology	55 0 0 0				х			208,675	0	29,985
Chandini Portteus VP,Resrch Eval & Science Prog	55 0 0 0				х			197,753	0	32,533
Dorothy Jones VP, Marketing	55 0 0 0				х			167,176	0	9,572
Carol Corcoran SVP, Global Networks	55 0 0 0				х			242,753	0	16,312
Margo Lucero VP,Bus Dev & PTPS(end 11/9/12)	55 0 0 0				х			172,275	0	31,824
Lynn Erdman VP, Community Health	55 0 0 0				х			188,069	0	20,541
Kay Rohlman VP, Human Resources	55 0 0 0				×			173,784	0	30,340

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

(A)	(B)	(C)					(D)	(E)	(F)	
Name and Title	Average	Positio	-					Reportable	Reportable	Estimated amount
	hours	more				•		compensation	compensation	of other
	per	unless				th		from the	from related	compensation
	week	1	office					organization (W-	organizations (W-	from the
	(list	aire	ctor/	trus				2/1099-MISC)	2/1099-MISC)	organization and
	any hours	[일호	[=	[♀	줎	Highest employe	[판]			related organizations
	for	[음불 [<u>@</u>	Office	<u>آ</u>	[룺剌]	Former			Organizacions
	related	[종급 -	∰	<u> </u>	Ι <u>϶</u>	[유호] 호				
	organizations	Individual trustee or director	Institutional		Key employee	ĕ g				
	below	👸			ě	골!				
	dotted	# J	≝		۱۳.	🖺				
	line)	a,	Trustee							
			•			st compensated see				
Nancy MacGregor	55 0				\top					
VP, Global Netwks (end 6/2/12)	0 0					X		173,960	0	13,791
- ' 	55 0	\vdash		├	\vdash	+				
British Robinson	33 0					X		202,593	0	8,948
VP, Global Strategy & Programs	0 0							,		,
Larry Lundy	55 0							465 546		46.204
Director, Bus Dev(end 11/8/12)	0 0					X		165,516	0	16,304
Samuel Cheng	55 0					\Box				
Controller (End 9/17/12)						X		158,506	0	14,955
	0 0	<u> </u>		Ь—	₩	++				
Nora Davis	55 0					l x		156,892	0	16,130
Senior Attorney	0 0					^		130,032	Ü	10,130

efile GRAPHIC print - DO NOT PROCESS

SUSAN G KOMEN BREAST CANCER FOUNDATION INC

As Filed Data -

DLN: 93493012002114

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

Inspection

									75-183		
Par				blic Charity Sta				•		ınstructioi	ns.
The o	rganı:			te foundation becaus			= -				
1	<u>_</u>		•	on of churches, or a				section 170	(b)(1)(A)(i)	•	
2	<u>L</u>	A scho	ol described	in section 170(b)(1	L)(A)(ii). (A	ttach Sche	dule E)				
3	Г	A hosp	ital or a cod	perative hospital se	rvice organi:	zatıon desc	rıbed ın sect	ion 170(b)(1)(A)(iii).		
4	Г			h organization opera	ted ın conjur	nction with	a hospital de	scribed in s	ection 170(b)(1)(A)(iii)	. Enter the
_	_			ty, and state	+ - f = 11						
5	ı	_	•	erated for the benefi	_	e or univers	ity owned or	operated by	/ a governme	ntai unit de	scribed in
_	_			(A)(iv). (Complete P	*			470(1)	(4)(4)(
6				local government or							
7	굣			at normally receives			s support fro	m a governn	nental unit or	from the ge	eneral public
8	\Box			on 170(b)(1)(A)(vi). : described in sectio i			mplete Part	Π)			
9	<u></u>			at normally receives			-	-	ibutions me	mhershin fe	es and dross
	'			ities related to its e							
				oss investment inco							
				ganızatıon after June						ı cax, nom	businesses
10	\vdash	-		ganized and operated	•			· ·		1	
11	<u>'</u>	_		ganized and operated ganized and operated							t the nurneses of
11	,			ly supported organiz							
				bes the type of supp							
		а	Type I	b	┌ Type II	I - Functio	nally integra	ted d	Type III -	Non-functio	nally integrated
e	Γ			ox, I certify that the							
				on managers and ot	her than one	or more pu	iblicly suppo	rted organız	ations descr	ıbed ın sect	ıon 509(a)(1) or
f			1509(a)(2)	received a written de	otormination	from the I	DC that it ic	Typo I Ty	no II or Tyn	o III cuppo	rting organization
•			this box	received a writteri d	etermination	i iioiii tile I	K3 tilat it is i	з гурет, гу	pe II, or Typ	e III suppo	
g				2006, has the organ	ızatıon acce	pted any gi	ft or contribu	tion from an	y of the		,
			ng persons?								
				irectly or indirectly o				h persons d	escribed in (Yes No
		and (III) below, the	governing body of th	ne supported	organizatio	on?			1	1g(i)
		(ii) A f	amıly memb	er of a person descr	ıbed ın (ı) ab	ove?				1:	lg(ii)
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı)	above?			11	.g(iii)
h		Provide	e the followi	ng information about	the support	ed organıza	ition(s)				
			1	T	•						
_) Nan		(ii) EIN	(iii) Type of	(iv) Is		(v) Did yo	•	(vi) I		(vii) A mount of
	uppoi			organization	organizat		the organ		organiza		monetary
or	ganız	ation		(described on	col (i) lis		ın col (i)	'	col (i) o		support
				lines 1-9 above or IRC section	your gove docume	_	supp	,	in the	03,	
				(see		•					
				instructions))	Yes	No	Yes	No	Yes	No	
					1.69	140	1 63	140	1 63	140	
						1		+			
 Total											
. Julai			i	1	1	1	1	1	1	1	1

Page 2

Part II

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)

(a) 2008

(b) 2009

(c) 2010

(d) 2011

(e) 2012

(f) Total

1 Gifts, grants, contributions, and

<u> </u>	ection A. Public Support	acion fallo to qu	am, ander the	tests listed belt	on, picase com	piece i di ciii.				
_	endar year (or fiscal year beginning	(2) 3000	(b) 2000	(a) 2010	(d) 2011	(2) 2012	(6) Tatal			
	in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total			
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	127,995,868	134,999,587	174,658,160	159,779,664	118,656,952	716,090,231			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	C	О	0	0	0			
3	The value of services or facilities furnished by a governmental unit to the organization without charge	0	C	0	0	0	0			
4	Total. Add lines 1 through 3	127,995,868	134,999,587	174,658,160	159,779,664	118,656,952	716,090,231			
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)						422,210			
6	Public support. Subtract line 5 from line 4						715,668,021			
S	ection B. Total Support	•	•		'	•				
Cal	endar year (or fiscal year	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total			
_	beginning in)	127,995,868	134,999,587	174,658,160	159,779,664	118,656,952	716,090,231			
8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from	6,957,976	3,548,746	3,812,083	4,528,150	4,810,808	23,657,763			
9	similar sources Net income from unrelated business activities, whether or not the business is regularly	0	0	0	0	0	0			
10	carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	71,369	2,589,864	84,038	378,313	351,342	3,474,926			
11	Total support (Add lines 7 through 10)						743,222,920			
12	Gross receipts from related activity	ties, etc (see inst	ructions)			12	186,603,111			
13	First five years. If the Form 990 is	s for the organizati	ion's first, second	d, third, fourth, or f	fifth tax year as a	501(c)(3) organi				
	this box and stop here					<u>▶</u> 厂				
	ection C. Computation of Pu			44 - 1 (6)						
14	Public support percentage for 201			: 11, column (f))		14	96 293 %			
15	Public support percentage for 201	.1 Schedule A, Pai	rt II, line 14			15	95 731 %			
b	33 1/3% support test—2012. 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 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2012. 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 18	organization 10%-facts-and-circumstances test—2011. 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 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see									

ınstructions

Schedule A (Form 990 or 990-EZ) 2012 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt

	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
	business under section 513			-			
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and 3						
_	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	Unrelated business taxable income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
11	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)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					
	ction C. Computation of Public			12		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. 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 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493012002114

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

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-B

◆ Section 527 organizations Complete Part I-A only If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

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

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** SUSAN G KOMEN BREAST CANCER FOUNDATION INC 75-1835298 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). 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 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 Was a correction made? ☐ Yes ┌ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 4 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 **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

section 4911 tax for this year?

┌ Yes ┌ No

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 E (The term "expenditures" means ar		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)	0	83,839
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)	4,053	60,995
c	Total lobbying expenditures (add lines 1a and 1i	o)	4,053	144,834
d	Other exempt purpose expenditures		151,155,333	302,332,256
e	Total exempt purpose expenditures (add lines 1	c and 1d)	151,159,386	302,477,090
f	Lobbying nontaxable amount Enter the amount f	rom the following table in both	1,000,000	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		
	Grassroots nontaxable amount (enter 25% of lin	ne 1f)	250,000	250,000
h	Subtract line 1g from line 1a If zero or less, ent	er -0 -		
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -		
j	If there is an amount other than zero on either lii	ne 1h or line 1i, did the organization file Form 472	0 reporting	

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 Expend	litures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a	Lobbying nontaxable 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
_с	Total lobbying expenditures	295,135	552,301	656,218	144,834	1,648,488
d	Grassroots nontaxable 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	219,954	439,745	519,831	83,839	1,263,369

Pa		rganization is exempt under (election under section 501(h		NOT				
For a		ugh 1ı below, provide in Part IV a detailed		(a	a)		(b)	
activ	•	agn 11 below, provide in Part 1V a detailed	i description of the lobbying	Yes	No	A	moun	nt
1	legislation, including any attempthrough the use of	ganization attempt to influence foreign ot to influence public opinion on a legis						
а	Volunteers?							
b C	Paid staff or management (inclu Media advertisements?	de compensation in expenses reported	I on lines 1c through 11)?					
d	Mailings to members, legislators	s, or the public?						
е	Publications, or published or bro	oadcast statements?						
f	Grants to other organizations fo	r lobbyıng purposes?						
g	Direct contact with legislators, t	their staffs, government officials, or a l	egislative body?					
h	Rallies, demonstrations, semina	irs, conventions, speeches, lectures, o	r any sımılar means?					
i	O ther activities?							
j	Total Add lines 1c through 1i							
2a	Did the activities in line 1 cause	e the organization to be not described	n section 501(c)(3)?					
b	If "Yes," enter the amount of an	y tax incurred under section 4912						
С	If "Yes," enter the amount of an	y tax incurred by organization manage	rs under section 4912					
		d a section 4912 tax, did it file Form 4						
Par		rganization is exempt under	section 501(c)(4), section	501(c)(5), c	r se	ctio	n
	501(c)(6).						Yes	No
1	Were substantially all (90% or r	more) dues received nondeductible by	members?		Г	1	103	140
2		in-house lobbying expenditures of \$2,0			⊢	2		
3		rry over lobbying and political expendi				3		
		organization is exempt under		501(c)(5).	r se	ctio	n
		either (a) BOTH Part III-A, lin						
1	Dues, assessments and similar			1 1				
2	•	obbying and political expenditures (do	not include amounts of political					
а	Current year	(.,		2a				
b	Carryover from last year			2b				
С	Total			2c				
3	Aggregate amount reported in s	ection 6033(e)(1)(A) notices of nonde	ductible section 162(e) dues	3				
4	does the organization agree to c	ount on line 2c exceeds the amount on arryover to the reasonable estimate o						
	political expenditure next year?			4				
5		political expenditures (see instruction	ns)	5				
P	art IV Supplemental Inf	formation						
		scriptions required for Part I-A, line 1, 1_Also, complete this part for any add		art II-A	(affiliat	ed gro	oup li	st),
	Identifier	Return Reference	Explana	ition				
Lobi	oying Expenses	Public policy initiatives have the partouched by BREAST CANCER RE ADVOCACY TO ACCOMPLISH I'S UPPORTS LIMITED LOBBYING EVIDENCE-BASED POLICY AND	COGNI TS MIS ACTIV	ZING T SION, ITIES	HE PO KOME TO AC	OWE N CHIE	R OF VE	

DESIGNED TO ELIMINATE BREAST CANCER AS A MAJOR

HEALTH PROBLEM

DLN: 93493012002114

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b

Open to Public Inspection ► Attach to Form 990. ► See separate instructions. **Employer identification number**

	me of the organization SAN G KOMEN BREAST CANCER FOUNDATION INC		Employer identification	n number
3U	MAIN O ROMEN DREAST CANCER FOUNDATION INC		75-1835298	
Pa	organizations Maintaining Donor Advorganization answered "Yes" to Form 990	, Part IV, line 6.	nds or Accounts. C	
		(a) Donor advised funds	(b) Funds and othe	eraccounts
•	Total number at end of year			
2	Aggregate contributions to (during year)			
;	Aggregate grants from (during year)			
ļ	Aggregate value at end of year			
;	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or			Yes No
•	Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the benef conferring impermissible private benefit?		y other purpose _	- Yes
Pa	rt III Conservation Easements. Complete if	the organization answered "Yes" to	Form 990, Part IV, li	ne 7.
!	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	or education) Preservation of an Preservation of a co	ertified historic structure	•
	easement on the last day of the tax year	Г	Hald at the For	I -6 + b - W
_	Total number of conservation easements	-	Held at the End	or the Year
a L	Total acreage restricted by conservation easements	-		
b	Number of conservation easements on a certified history	oric structure included in (a)	2b	
c		· · · ·	2c	
d	Number of conservation easements included in (c) acq historic structure listed in the National Register	fulled after 8/17/08, and not on a	2d	
}	Number of conservation easements modified, transferr the tax year -	ed, released, extinguished, or terminated	d by the organization dur	ng
	Number of states where property subject to conservati	ion easement is located ►	_	
	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	the periodic monitoring, inspection, hand		Yes No
,	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easem	ents during the year	
,	A mount of expenses incurred in monitoring, inspecting \$ \begin{align*}	, and enforcing conservation easements	during the year	
1	Does each conservation easement reported on line 2(or and section 170(h)(4)(B)(II)?	d) above satisfy the requirements of sect		Yes No
)	In Part XIII, describe how the organization reports corbalance sheet, and include, if applicable, the text of the	e footnote to the organization's financial :		
aı	the organization's accounting for conservation easeme till Organizations Maintaining Collection Complete if the organization answered "Y	s of Art, Historical Treasures, o	or Other Similar Ass	sets.
la	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	16 (ASC 958), not to report in its revenits held for public exhibition, education, o	r research in furtherance	
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to thes	ts held for public exhibition, education, o		
	(i) Revenues included in Form 990, Part VIII, line 1		- \$	
	(ii) Assets included in Form 990, Part X		▶ - \$	
!	If the organization received or held works of art, histor following amounts required to be reported under SFAS		' -	-
а	Revenues included in Form 990, Part VIII, line 1		► \$	

b Assets included in Form 990, Part X

Part	111 Organizations Maintaining Co	llections of Ar	t, His	stori	<u>cal Tı</u>	reasur	es, or O	<u>the</u>	<u>r Similar A</u>	ssets (continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other reco	rds, cl	heck	any of	the follo	wing that a	re a	sıgnıfıcant us	e of its	
а	Public exhibition		d	Γ	Loan	or exch	ange progr	ams			
b	Scholarly research		е	Γ	Othe	r					
c	Preservation for future generations										
4	Provide a description of the organization's c Part XIII	ollections and expl	aın ho	w the	y furthe	er the oı	rganızatıon	's ex	empt purpose	ın	
5	During the year, did the organization solicit	or receive donation	ıs of aı	rt, hıs	torical	treasur	es or other	rsım	ıılar		
	assets to be sold to raise funds rather than		•							☐ Yes	□ No
Par	Part IV, line 9, or reported an ar						answered	d "Y	es" to Form	990,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?		-			utions o	r other ass	ets r	not	┌ Yes	┌ No
Ь	If "Yes," explain the arrangement in Part XI	II and complete the	e follo	wing	table		Г				
_							-	4	A	mount	
C	Beginning balance						-	1c			
d	Additions during the year						-	1d			
e	Distributions during the year						-	1e			
f	Ending balance						L	1f			
2a	Did the organization include an amount on F	orm 990, Part X, Iır	ne 217	>						☐ Yes	□ No
_ь	If "Yes," explain the arrangement in Part XII										<u> </u>
Pa	rt V Endowment Funds. Complete										van en ha ak
1a	Beginning of year balance	(a)Current year 1,325,000	(D)	Prior y	ear 225,000		1,225,000		Three years back 1,225,000		1,318,022
b	Contributions	0			100,000		1,220,000		4,284		
c	Net investment earnings, gains, and losses	-							.,		
Ū		21			33		608	<u> </u>	-4,284	<u> </u>	5,240
d	Grants or scholarships	0			0		0		C	1	98,262
е	Other expenditures for facilities and programs	21			33		608		C		0
f	Administrative expenses										
g	End of year balance	1,325,000		1,	325,000		1,225,000		1,225,000		1,225,000
2	Provide the estimated percentage of the cur	rent year end balar	nce (lır	ne 1g	, colum	nn (a)) h	eld as				
а	Board designated or quasi-endowment	75 000 %	•	_	•						
ь	Permanent endowment ► 25 000 %										
c		0 %									
•	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%									
За	Are there endowment funds not in the posse	ssion of the organiz	zatıon	that	are hel	d and ac	dministered	for	the		
	organization by								_	Yes	s No
	(i) unrelated organizations		•					•		(i)	No
b	(ii) related organizations							•		(ii) Bb	No No
4	Describe in Part XIII the intended uses of the							•		ן טק	
	t VI Land, Buildings, and Equipme					10.					
	Description of property			(a) Cost o	r other	(b)Cost or o		(c) Accumulate	ed (d) I	Book value
				bas	sis (inves	stment)	basis (othe	r)	depreciation		
1a	Land										-
b	Buildings		•								
С	Leasehold improvements						795	,974	644,3	387	151,587
d	Equipment						4,133	,812	3,906,7	709	227,103
	Other						7,561	,841	6,424,!	511	1,137,330
Tota	I. Add lines 1a through 1e <i>(Column (d) must e</i>	equal Form 990, Part	X, colu	umn (B), line	10(c).)			🕨		1,516,020

	e Form 990, Part X, line 12.	
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives (2)Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	F	
Part VIII Investments—Program Related. S	ee Form 990, Part X, line 13	3.
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	F	
Part IX Other Assets. See Form 990, Part X, (a) Desc		(b) Book value
(a) Desc	Прстоп	(b) Book value
Total (Column (h) must equal Form 900, Part V, col (P) line	15.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part		
Part X Other Liabilities. See Form 990, Part	: X, line 25.	
Part X Other Liabilities. See Form 990, Part (a) Description of liability	X, line 25. (b) Book value	
Part X Other Liabilities. See Form 990, Part	: X, line 25.	
Part X Other Liabilities. See Form 990, Part (a) Description of liability	X, line 25. (b) Book value	
Part X Other Liabilities. See Form 990, Part (a) Description of liability	X, line 25. (b) Book value	
Part X Other Liabilities. See Form 990, Part (a) Description of liability	X, line 25. (b) Book value	
Part X Other Liabilities. See Form 990, Part (a) Description of liability	X, line 25. (b) Book value	
Part X Other Liabilities. See Form 990, Part (a) Description of liability	X, line 25. (b) Book value	
Part X Other Liabilities. See Form 990, Part (a) Description of liability	X, line 25. (b) Book value	
Part X Other Liabilities. See Form 990, Part (a) Description of liability	X, line 25. (b) Book value	
Part X Other Liabilities. See Form 990, Part (a) Description of liability	X, line 25. (b) Book value	
Part X Other Liabilities. See Form 990, Part (a) Description of liability	X, line 25. (b) Book value	
Part X Other Liabilities. See Form 990, Part (a) Description of liability	X, line 25. (b) Book value	
Part X Other Liabilities. See Form 990, Part (a) Description of liability	X, line 25. (b) Book value	
Part X Other Liabilities. See Form 990, Part (a) Description of liability	X, line 25. (b) Book value	
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes	X, line 25. (b) Book value	

Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Re	eturn
1	Total revenue, gains, and other support per audited financial statements	1	
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII) 2d		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)		
C	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)		
C	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
Part	Supplemental Information		
Comp			

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Identifier	Return Reference	Explanation
Schedule D, Part V , Line 4		There are three permanent endowments Goodman-Brinker, Firnberg and a General Endowment Goodman-Brinker Endowment to be used for Breast Cancer Research fellowships Firnberg Endowment to be used for breast cancer educational programs and research awards The General Endowment's earnings are restricted for organizational mission activities FIN 48 (ASC740) Financial Statement Disclosure Schedule D, Part X, Line 2 The Organization is subject to a recognition threshold and measurement attribute for financial statement recognition and measurement of a tax position taken or expected to be taken in a tax return. There were no uncertain tax positions recorded in the consolidated financial statements at March 31, 2013 or March 31, 2012.

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493012002114

Statement of Activities Outside the United States

OMB No 1545-0047

Open to Public **Inspection**

No

Employer identification number

Department of the Treasury

SCHEDULE F

(Form 990)

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

Internal Revenue Service Name of the organization

SUSAN G KOMEN BREAST CANCER FOUNDATION INC

75-1835298 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 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
- For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.
- Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
	See Add'l Data					
3a	Sub-total	0	36			5,516,835
	Total from continuation sheets to Part I					
С	Totals (add lines 3a and 3b)	0	36			5,516,835

art 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. Part II can be duplicated if additional space is needed.

•	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	See Add'l Data								

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

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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. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
		+	1		,		1
		+ +		'	+		+
		+		'	+		+
		+	<u> </u>		 		+
	 		 		 	 	+
					<u> </u>		
					<u> </u>	<u> </u>	
							<u> </u>
			1				
		+ + +			,		1
		+ + +			+		
	 	+			+		+
			1		-		+
	 		 		 	 	
			 		<u> </u>	 	
						1	

Part IV Foreign Forms

1	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Γ	Y	'es	<u> </u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organizationmay be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Γ	Y	'es	্য	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)	Г	Y	'es	<u> </u>	Νo
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)	Γ	Υ	'es	<u> </u>	Νo
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)	Г	Υ	'es	<u> </u>	Νo
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).	Γ	Υ	'es	<u> </u>	No

Schedule F (Form 990) 2012

Part V	Supplemental	Information
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Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

as applicable. Also co	omplete this part to provide any	additional information (see instructions).
Identifier	ReturnReference	Explanation
Procedures for monitoring Grant Funds outside of the United States	Schedule F, Part IV	All research, education, screening, and treatment grantees are required to submit, at a minimum, annual financial and progress reports and change requests to their projects. All progress reports and requests are reviewed by qualified staff. See Schedule I, Part IV for more details.
		Schedule F (Form 990) 2012

Additional Data

Software ID: Software Version:

EIN: 75-1835298

Name: SUSAN G KOMEN BREAST CANCER FOUNDATION INC

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Central America and the Caribbean	0	0	Grantmakıng	Education	230,138
East Asia and the Pacific	0	0	Grantmakıng	Research	376,299
Europe (Including Iceland and Greenland)	0	0	Grantmakıng	Education	393,765

Form 990 Schedule F Part I - Activities Outside The United States					
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)	0	0	Grantmakıng	Research	1,622,263
Middle East and North Africa	0	0	Grantmakıng	Education	173,700
Middle East and North Africa	0	0	Grantmakıng	Research	219,000

Form 990 Schedule F	Part I - Activit	<u>ties Outside T</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
North America	0	0	Grantmaking	Education	126,186
North America	0	0	Grantmaking	Research	1,375,428
South America	0	0	Grantmakıng	Education	133,764

Form 990 Schedule F Part I - Activities Outside The United States					
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Sub-Saharan Africa	0	0	Grantmakıng	Education	80,000
Central America and the Caribbean	0	5	Program Services	Educ & Event Support	56,130
Europe (Including Iceland and Greenland)	0	5	Program Services	Educ & Event Support	10,741

Form 990 Schedule F Part I - Activities Outside The United States					
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Middle East and North Africa	0	10	Program Services	Educ & Event Support	483,370
North America	0	10	Program Services	Educ & Event Support	189,084
Russia and the Newly Independent States	0	1	Program Services	Educ & Event Support	1,234

Form 990 Schedule F	<u>Part I - Activit</u>	ies Outside T	he United States	_	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
South America	0	4	Program Services	Educ & Event Support	43,718
Sub-Saharan Africa	0	1	Program Services	Educ & Event Support	2,015

, Form 990 Schedu	orm 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)			
		North America	Education	20,015	wire transf	0					
		Central America and the Caribbean	Education	67,500	wire transf	0					
		Europe (Including Iceland and Greenland)	Research	50,000	wire transf	0					
		Middle East and North Africa	Education	37,050	wire transf	0					

Form 990 Schedu	le F Part II	- Grants or Entitie	es Outside The Un	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)
		Mıddle East and North Africa	Research	200,000	wire transf	0		
		Central America and the Caribbean	Education	25,000	wire transf	0		
		Europe (Including Iceland and Greenland)	Research	21,000	wire transf	0		
		Europe (Including Iceland and Greenland)	Education	9,000	wire transf	0		

Form 990 Schedu	ıle F Part II	- Grants or Entiti	ies Outside The Un	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		Europe (Including Iceland and Greenland)	Education	50,000	wire transf	0		
		Europe (Including Iceland and Greenland)	Education	25,000	wire transf	0		
		Europe (Including Iceland and Greenland)	Research	281,820	wire transf	0		
		South America	Education	7,500	wire transf	0		

Form 990 Schedu	ıle F Part II	- Grants or Entitie	es Outside The Un	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	Education	22,000	wire transf	0		
		Central America and the Caribbean	Education	49,965	wire transf	0		
		Middle East and North Africa	Education	46,650	wire transf	0		
		North America	Education	106,171	wire transf	0		

Form 990 Schedi	ule F Part II	- Grants or Entiti	es Outside The Un	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	Education	20,000	wire transf	ol		
		South America	Education	49,996	wire transf	o		
		South America	Education	7,500	wire transf	o		
		South America	Education	48,768	wire transf	0'		

, Form 990 Scheav	Me F Part II	- Grants or Entiti	ies Outside The Un	iited States				_
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		Europe (Including Iceland and Greenland)	Research	958,242	wire transf	01		
		Europe (Including Iceland and Greenland)	Education	30,000	wire transf	01		
		North America	Research	148,778	wire transf	0'		
		Europe (Including Iceland and Greenland)	Research	175,000	wire transf	0		

Form 990 Schedu	ıle F Part II	- Grants or Entitie	es Outside The Un	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		Mıddle East and North Africa	Education	50,000	wire transf	0		
		Europe (Including Iceland and Greenland)	Research	30,000	wire transf	0		
		Europe (Including Iceland and Greenland)	Education	75,000	wire transf	0		
		Central America and the Caribbean	Education	51,169	wire transf	0		

, Form 990 Schedu	ie F Part II	- Grants or Entition	ies Outside The Un	ited States	_			
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		North America	Research	799,579	wire transf	0'		
		Middle East and North Africa	Education	10,000	wire transf	0,		
		East Asia and the Pacific	Research	198,098	wire transf	0		
		Europe (Including Iceland and Greenland)	Research	71,200	wire transf	0		

, Form 990 Scheau	ie E Part II	- Grants or Entitle	s Outside The Un	ited States				· _
(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		Sub-Saharan Africa	Education	80,000	wire transf	0'		
		North America	Research	226,500	wire transf	0,		
		Central America and the Caribbean	Education	14,504	wire transf	0		
		Europe (Including Iceland and Greenland)	Research	35,000	wire transf	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(1) Method of valuation (book, FMV, appraisal, other)			
	Europe (Including Iceland and Greenland)	Education	34,135	wire transf	0					
1	North America	Research	40,331	wire transf	0'					
	East Asia and the Pacific	Research	178,201	wire transf	0'					
1	North America	Research	160,240	wire transf	0					
	(b) IRS code section and EIN(if applicable)	(b) IRS code section and EIN(if applicable) Europe (Including Iceland and Greenland) North America East Asia and the Pacific	(b) IRS code section and EIN(if applicable) Europe (Including Iceland and Greenland) North America Research	(b) IRS code section and EIN(if applicable) (c) Region (d) Purpose of grant (e) Amount of cash grant Europe (Including Iceland and Greenland) Education 34,135 North America Research 40,331 East Asia and the Pacific Research 178,201	(b) IRS code section and EIN(if applicable) Europe (Including Iceland and Greenland) Education Research Au,331 Wire transf	(b) IRS code section and EIN(if applicable) (c) Region (d) Purpose of grant (e) Amount of cash grant (f) Manner of cash disbursement (g) Amount of non-cash assistance Europe (Including Iceland and Greenland) Education 34,135 wire transf 0 North America Research 40,331 wire transf 0 East Asia and the Pacific Research 178,201 wire transf 0	(b) IRS code section and EIN(if applicable) (c) Region (d) Purpose of grant (e) A mount of cash grant (f) Manner of cash disbursement (g) A mount of non-cash assistance Europe (Including Iceland and Greenland) Education 34,135 wire transf 0 North A merica Research 40,331 wire transf 0 East A sia and the Pacific Research 178,201 wire transf 0			

Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)		
		Middle East and North Africa	Research	19,000	wire transf	0				
		Europe (Including Iceland and Greenland)	Education	170,630	wire transf	0				
		Middle East and North Africa	Education	25,000	wire transf					

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493012002114

Employer identification number

OMB No 1545-0047

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Name of the organization

SCHEDULE G

Supplemental Information Regarding

Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.

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

Open to Public Inspection

USAN G KOMEN BREAST CA	NCER FOUNDATION	NINC			75-1835298	
Part I Fundraising Ac	ctivities. Complete	e if the o	rganızat	ion answered "Yes"	to Form 990, Part IV,	, line 17.
1 Indicate whether the orga	nızatıon raısed funds	through a	ny of the	following activities Ch	eck all that apply	
a 🔽 Mail solicitations			е	Solicitation of nor	n-government grants	
b 🔽 Internet and email so	licitations		f	Solicitation of gov	vernment grants	
c Phone solicitations			g	Special fundraisir	ng events	
d 🔽 In-person solicitation	ns					
2a Did the organization have or key employees listed ii						Γ _{Yes} Γ Ν
b If "Yes," list the ten higher to be compensated at lea			fundraisei	rs) pursuant to agreem	ents under which the fun	draiser is
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai cust cont contrib	Did ser have ody or trol of putions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
Merkle Inc	Direct Marketing	Yes	No	-		
PO Box 64897	Direct Marketing		N	15.027.044	1 201 157	14.426.70
			No	15,827,944	1,391,157	14,436,787
Baltimore, MD 21264 McKenna Associates	Fundroising					
2000 Clarendon Boulevar	Fundraising d					
Arlington, VA 22201			No	C	207,137	C
				15 927 044	1 500 204	14 426 70
otal	organization is regis	tered or li	censed to	15,827,944 o solicit funds or has be		14,436,787 from registration or

		G (Form 990 or 990-EZ) 2012				Page 2
Pai	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts of	aising event contribut			
		evente mai grees receipte g	(a) Event #1 Gbl Race fr cur	(b) Event #2 Brst Cancr 3dy	(c) O ther events	(d) Total events (add col (a) through col (c))
			(event type)	(event type)	(total number)	
Ē	1	Gross receipts	3,371,339	51,358,064	2,835,332	57,564,735
Revenue	2	Less Contributions	2,411,797	49,027,676	2,502,687	53,942,160
	3	Gross income (line 1 minus line 2)	959,542	2,330,388	332,645	3,622,575
	4	Cash prizes				
မှာ	5	Noncash prizes	8,417	1,384	5,203	15,004
Expenses	6	Rent/facility costs	78,797	1,987,897	116,322	2,183,016
ă	7	Food and beverages .	87,016	1,736,260	288,203	2,111,479
Direct	8	Entertainment				
à	9	Other direct expenses .	65,737	6,225,307		6,291,044
	10	Direct expense summary Add lir	nes 4 through 9 in column	n (d)		(10,600,543)
	11	Net income summary Combine I	-	•		-6,977,968
Par	t III			"Yes" to Form 990, Pa	rt IV, line 19, or repo	
Revenue		\$15,000 on Form 990-EZ, li	ne 6a. (a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Æ	1	Gross revenue				
Ses	2	Cash prizes				
kpenses	3	Non-cash prizes				
Direct B	4	Rent/facility costs				
Ě	5	Other direct expenses				
	6	Volunteerlabor	☐ Yes	☐ Yes	Г Yes Г No	
	7	Direct expense summary Add line	s 2 through 5 in column ((d)		
	8	Net gaming income summary Com	nbine lines 1 and 7 in coli	umn (d)	🛌	
9 a b	Ist	er the state(s) in which the organiz he organization licensed to operate No," explain	gaming activities in eac	h of these states?		. 「Yes 「No
10a b	Wer	re any of the organization's gaming Yes," explain	licenses revoked, suspei	nded or terminated during	the tax year?	

Joes	the organization operate gaming	, activities with nonmembers?			• •	Ye	es l	No	
12	Is the organization a grantor, be	eneficiary or trustee of a trust	or a mem	ber of a partnership or other entity					
	formed to administer charitable	gaming?					Γ	Yes [– No
.3	Indicate the percentage of game								
а	The organization's facility .				13a				
b					-				
l 4	Enter the name and address of t	the person who prepares the o	rganızatıc	on's gaming/special events books a	ind reco	ords			
	Name 🟲								
	Address ►								
L5a	Does the organization have a co	ontract with a third party from	whom the	organization receives gaming					
	revenue?						Γ	Yes [- Nо
b	If "Yes," enter the amount of ga	ming revenue received by the	organiza	tion 🟲 \$ and	d the				
	amount of gaming revenue retai	ned by the third party 🕨 \$							
c	If "Yes," enter name and addres	ss of the third party							
	Name 🕨								
	Address ▶								
L6	Gaming manager information								
	Name 🟲								
	Gaming manager compensation	> \$							
	Description of services provided	d ►							
	Director/officer	F Employee		☐ Independent contractor					
.7	Mandatory distributions								
а	Is the organization required und	ler state law to make charitabl	le dıstrıbı	utions from the gaming proceeds to					
	retain the state gaming license?	,					厂、	Yes [– _{No}
b	Enter the amount of distribution	s required under state law dis	trıbuted t	o other exempt organizations or sp	ent				
	ın the organızatıon's own exemp	ot activities during the tax yea	r ▶ \$						
Par	columns (III) and (v),		0b, 15b	ovide the explanations require, 15c, 16, and 17b, as applicabons).					
	Identifier	Return Reference		Explanat	tion				
Sch	edule G, Part II	Net Income Summary		Gross receipts are reduced by the IRS instructions The contributions					

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

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

DLN: 93493012002114 OMB No 1545-0047

Open to Public

Department of the Treasury

Schedule I

(Form 990)

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

nternal Revenue Service			Attach to Form 990				Inspection
Name of the organization SUSAN G KOMEN BREAST CANCER	P EOUNDATION INC					Employer identification	on number
JUSAN G KOMEN BREAST CANCER	C FOUNDATION INC					75-1835298	
Part I General Information	on on Grants and	l Assistance					
 Does the organization maintain the selection criteria used to a Describe in Part IV the organiz 	ward the grants or as:	sistance?					√ Yes
Part II Grants and Other A	<u> </u>				nplete if the orga	ınızatıon answered "Y	es" to
			more than \$5,000. Pa				
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Addıtıonal Data Table							
		1	1	1		1	
2 Enter total number of section 5	01(c)(3) and governr	nent organizations lis	ted in the line 1 table .			-	179
3 Enter total number of other org.							

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a)T ype of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d) A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
				•	•

Part IV Supplemental Information.									
Complete this part to prov	vide the information required in Part :	I, line 2, Part III, column (b), and any other additional information							
Identifier	Return Reference	Explanation							
Form 990, Schedule I	Procedures for Monitoring the Use of Grants	Susan G Komen) policies for managing research grants from the time of initial award through completion seek to maximize flexibility while maintaining the highest standard of accountability and preserving the integrity of the review and funding process. Throughout the term of the grant, scientific progress is monitored by a Ph D -level Science Manager Grantee is required to submit scientific progress reports on each anniversary of the grant strict date for the duration of the project, except for the final year of the grant when a final report is due no later than 30 days after the end date of the grant term of acceleration of the Grant term. A scientific progress report allows on the Grantee, Komen may require additional reporting from Grantee and also may require Grantee to participate in site visits, telephone conferences, presentations or other speaking engagements. All Grant funds must be expended in accordance with the project's approved budget Komen will disburse the first year's budgeted Grant funds within thirty (30) days of the effective date of the Grant. For each additional year, excluding the final year of the Grant term, Komen will disburse enhanced percent (100%) of the budgeted funds for that year after review and approval of a satisfactory and timely scientific progress report and financial report for the prior year and any other documents requested by Komen for its approval? For the final year of the Grant, Komen will subsurse eight year eight of the approved budget funds after review and approval of a satisfactory scientific progress report and financial report for the prior year and any other documents requested by Komen for approval. The remaining twent percent (20%) of funds will be disburseed upon receipt of a satisfactory final research report, final financial report, and any other documents requested by Komen for approval. The remaining twent percent (20%) of funds will be disburseed upon receipt of a satisfactory final research report, final financial report, and any other documents requ							

Software ID:

Software Version:

EIN: 75-1835298

Name: SUSAN G KOMEN BREAST CANCER FOUNDATION INC

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Adventist Healthcare Inc 1801 Research Blvd Rockville, MD 20850	52-1532556	501c3	229,250	0			Screening
Albert Einstein College of Med Yeshiva U1300 Morris Park Ave Bronx,NY 104611975	13-1624225	501c3	413,999	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Alexandria Neighborhood Health Services2 East Glebe Road Alexandria,VA 22305	54-1849891	501c3	25,000	0			Education
A merican Association for Cancer Research615 Chestnut St Philadelphia, PA 19106	23-6251649	501c3	790,000	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
American Association on HealthDisabilities110 N Washington St Rockville,MD 20854	52-1884887	501c3	299,998	0			Research
American Jewish Joint711 Third Avenue New York, NY 100174014	13-1656634	501c3	231,885	0			Education

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
American Society of Clinical Oncology2318 Mill Road Alexandria,VA 22314	13-6180880	501c3	600,000	0			Research
Arab Community Center for Economic6450 Maple Street Dearborn,MI 48126	23-7444497	501c3	50,000	0			Education

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Arlington Free Clinic2921 11th Street South Arlington, VA 22204	54-1671883	501c3	50,000	0			Education
Baylor College MedicineOne Baylor Plaza Houston,TX 770303411	74-1613878	501c3	1,938,700	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Beckman Research Inst City of Hope1500 East Duarte Rd Duarte, CA 910103000	95-3432210	501c3	40,000	0			Research
Beth Israel Deaconess Medical Center330 Brookline Avenue Boston, MA 02215	04-2103881	501c3	530,000	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Boat People SOS6066 Leesburg Pike Falls Church, VA 22041	54-1563619	501c3	450,000	0			Education, Screening, Treatment
Boise State University1910 University Dr Boise,ID 837251247	82-0290701	501c3	160,000	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Boston University School of Medicine580 Harrison Avenue 3-W Boston, MA 02118	04-2103547	501c3	391,000	0			Research
Boston VA Research Institute150 S Huntington Ave Boston, MA 02130	04-3081524	501c3	15,952	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Brigham and Women's HospitalPO Box 3149 Boston,MA 022413149	04-2312909	501c3	521,005	0			Research
Burnham Institute for Medical Research10901 N Torrey Pines Rd La Jolla,CA 92037	51-0197108	501c3	150,000	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
California Pacific Medical Center475 Brannan St San Francisco, CA 94107	94-0562680	501c3	137,988	0			Research
Cancer Care275 Seventh Avenue New York, NY 10001	13-1825919	501c3	500,000	0			Treatment

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Cancer Support Community 1050 17th Street NW Washington, DC 20036	95-4163931	501c3	20,000	0			Education
Capital Breast Care Center 650 Pennsylvania Ave Washington, DC 20003	53-0196603	501c3	50,000	0			Education

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Capitol City Area Health Education Cente1700 E Capitol St Washington, DC 20003	26-3301051	501c3	300,000	0			Education, Screening, Treatment
CASA of Maryland Inc8151 15th Avenue Hyattsville, MD 20783	52-1372972	501c3	50,000	0			Education

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Case Western Reserve University10900 Euclid Av Cleveland,OH 44106	34-1018992	501c3	139,993	0			Research
C-Change1776 I Street Washington,DC 20006	16-1641769	501c3	225,000	0			Education

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Cedars Sınaı Medical Center 8700 Beverly Blvd Los Angeles,CA 90048	95-1644600	501c3	29,733	0			Research
Center for Infectious Disease Research5335 Wisconsin Ave NW Washington, DC 20015	98-0514692	501c3	20,300	0			Education

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Children's Hospital Boston PO Box 414413 Boston, MA 022414413	04-2774441	501c3	96,000	0			Research
Children's Memorial Hospital 225 E Chicago Box 205 Chicago,IL 60611	36-2170833	501c3	12,000	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Clemson University113 Riggs Hall Clemson,SC 296340901	57-6000254	501c3	11,999	0			Research
Cleveland Clinic Foundation 9500 Euclid Avenue P84 Cleveland, OH 44195	34-0714585	501c3	48,000	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Cold Spring Harbor Laboratory1 Bungtown Rd Cold Spring Harbor, NY 11724	11-2013303	501c3	132,000	O			Research
Columbia University Medical Center615 West 131st St New York, NY 10027	13-5598093	501c3	409,727	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CommonwealthPO Box 316 Bolinas,CA 94924	94-2366094	501c3	22,717	0			Education
Cornell University341 Pine Tree Road Ithaca,NY 14850	15-0532082	501c3	1,172,352	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Dana-Farber Cancer Institute44 Binney Street BP431C Boston, MA 02115	04-2263040	501c3	858,817	0			Research
Dartmouth College63 South Main Street Hanover, NH 03755	02-0222111	501c3	150,000	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
District of Columbia Cancer Consortium5225 Wisconsin Ave NW Washington, DC 20015	52-1653537	501c3	37,500	0			Education
Doctors Community Hospital 8116 Good Luck Rd Lanham, MD 207063502	52-1638026	501c3	750,000	0			Education, Screening, Treatment

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Duke University Medical Center2200 West Main St Durham, NC 27705	56-0532129	501c3	1,161,603	0			Research
Eastern Michigan University 324 Blackwell St Ypsilanti, MI 48197	38-6005986	501c3	134,552	0			Education

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EO Lawrence Berkeley National Laboratory204 Hover Building Berkeley,CA 94701	94-2951741	501c3	15,087	0			Research
Facing Our Risk of Cancer Empowered16057 Tampa Palms Blvd Tampa,FL 33647	65-0927702	501c3	100,000	0			Education

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Foundation of the NIH9650 Rockville Pike Bethesda, MD 20814	52-1986675	501c3	40,000	0			Research
Fox Chase Cancer Center 333 Cottman Ave Philadelphia, PA 19111	23-2003072	501c3	272,218	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Fred Hutchinson Cancer Research CenterPO Box 19024 Seattle, WA 981091024	56-3744111	501c3	465,000	0			Education, Research
Fred Hutchinson Cancer Resrch1100 Fairview Ave Seattle, WA 981091024	23-7156071	501c3	199,907	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Friends of Cancer Research 2231 Crystal Drive Arlington, VA 22202	52-1983273	501c3	40,000	0			Education
George Mason University 4400 University Dr Fairfax,VA 22030	54-1603842	501c3	222,310	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
George Washington University2300 Eye Street Washington, DC 200520011	53-0196584	501c3	750,000	0			Education, Screening, Treatment
Georgetown UniversityLCC LL Level Room S155 Washington,DC 20007	53-0196603	501c3	581,671	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Greater Baden Medical Services Inc7450 Albert Rd Brandywine, MD 20316	52-0961414	501c3	399,800	0			Screening, Treatment
Harvard Medical School25 Shattuck Street Boston, MA 02115	04-2103580	501c3	452,182	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Henry Ford Health System One Ford Place 5E Detroit, MI 48202	38-1357020	501c3	198,037	0			Research
Holy Cross Hospital1500 Forest Glen Rd Silver Spring, MD 20910	59-7910280	501c3	250,000	0			Education

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Howard University Cancer Center2041 Georgia Ave Washington, DC 200600001	53-0204707	501c3	536,472	0			Education, Screening, Treatment
I Am Too Young For This Cancer Fdn40 Worth Street 808 New York, NY 10013	20-2027782	501c3	30,000	0			Education

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Indiana University School of MedicinePO Box 66057 Indianapolis,IN 462666057	35-6001673	501c3	1,203,299	0			Research
International Breast Cancer 660 John Nolan Drive Madison, WI 53711	39-1766858	501c3	117,115	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
International Scholarship & Tuition Serv1321 Murfreesboro Road Nashville,TN 37217	62-1247492	501c3	65,000	0			Education
Johns Hopkins University 1101 East 33rd St Baltimore, MD 21218	52-5951100	501c3	919,281	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Karmanos Cancer Institute 4100 John R VE01FS Detroit, MI 48201	38-1613280	501c3	166,241	0			Research
Korean Community Svc Ctr of Greater WA7700 Lt River Turnpike Annandale, VA 22003	52-1128174	501c3	45,000	0			Education

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Lankenau Institute for Medical Research100 Lancaster Avenue Wynnewood, PA 19096	23-2175659	501c3	199,628	0			Research
Lawrence Berkeley National LaboratoryPO Box 528 Berkeley,CA 94701	94-2951741	501c3	11,947	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Leland Stanford Jr University 3145 Porter Drive Palo Alto, CA 94304	94-1156365	501c3	503,536	0			Research
Living Beyond Breast Cancer 354 W Lancaster Ave Haverford, PA 19041	23-2734689	501c3	175,000	0			Education

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Loyola University820 N Michigan Ave Chicago,IL 60611	36-1408475	501c3	39,888	0			Research
Maasai Wildernes Conservation FundPO Box 1413 Santa Barbara, CA 93102	66-0627488	501c3	50,000	0			Education

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Mary's Ctr for Maternal&Child Care Inc2333 Ontario Road NW Washington, DC 20009	52-1594116	501c3	50,000	0			Education
Massachusetts General Hospital101 Huntington Ave Boston, MA 02199	04-2697983	501c3	453,601	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Mayo Clinic and Foundation 4500 San Pablo Rd Jacksonville,FL 32224	41-6011702	501c3	659,850	0			Research
Mayo Clinic Rochester200 First St Rochester, MN 55905	41-6011702	501c3	114,044	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Memorial Sloan-Kettering Cancer Ctr633 3rd Ave New York, NY 10017	13-1924236	501c3	589,108	0	1		Research
Mercy Medical Ctr301 St Paul Place Baltimore, MD 21202	52-1495113	501c3	349,875	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Methodist Hospital Research InstitutePO Box 4805 Houston,TX 772104805	87-0721923	501c3	118,863	0			Research
Metropolitan Chicago Breast Cancer1645 W Jackson Blvd Chicago, IL 60612	26-2264895	501c3	633,333	0			Screening

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Mount Sinai School of Medicine633 Third Avenue New York, NY 10017	13-6171197	501c3	409,991	0			Research
Muslim Community Center Medical Clinic15200 Newhampshire Silver Spring, MD 20905	52-1072792	501c3	24,990	0			Screening

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
National Academy of Sciences730 15th Street NW Washington, DC 20005	53-0196932	501c3	111,901	0			Research
National Cancer Institute 6130 Executive Blvd Rockville, MD 20852	52-1986675	501c3	225,000	0			Education

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
New York University School of MedicineOne Park Ave New York, NY 10016	13-5562308	501c3	308,000	0			Research
Northwestern Univ - Evanston633 Clark St Evanston, IL 60208	36-2167817	501c3	35,563	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Northwestern University633 Clark Street Evanston,IL 60208	36-2167817	501c3	413,902	0			Research
Nueva Vida Inc2000 P Street NW Washington, DC 20036	54-1943145	501c3	50,000	0			Education

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Oncology Nursing Society 125 Enterprise Dr Pittsburgh,PA 15275	25-1410081	501c3	35,000	0			Research
Oregon Health & Science University0690 SW Bancroft St Portland,OR 97239	23-7083114	501c3	1,975,590	0			Screening, Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Patient Advocate Foundation 421 Butler Farm Road Hampton, VA 23666	54-1806317	501c3	1,375,000	0			Education, Treatment
Penfold-Patterson Research Institute1700 El Camino Real Menlo Park,CA 94025	27-0578063	501c3	50,000	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Pennsylvania State Univ Coll of MedicineMCG230 PO Box 850 Hershey,PA 17033	24-6000376	501c3	892,256	0			Research
Prevent Cancer Foundation 1600 Duke Street Alexandria, VA 22209	52-1429544	501c3	49,975	0			Education

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Primary Care Coalition- MontgomeryCty Inc8757 Georgia Ave Silver Spring,MD 20910	52-1847976	501c3	588,264	0			Screening, Treatment
Prince George's County Health Dept1701 McCormick Drive Largo,MD 20774	52-2046026	501c3	153,076	0			Education

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Princeton University701 Carnegie Center Princeton,NJ 08540	21-6345010	501c3	256,250	0			Research
Program for AppropriatePO Box 900922 Seattle, WA 98109	91-1157127	501c3	100,000	0			Education

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Project Concern International 121 E 31st Street National City, CA 91950	95-2248462	501c3	25,000	0			Education
Proteogenomics Research Institute11107 Roselle Street San Diego, CA 92121	80-0418281	501c3	160,000	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Providence Health Foundation1150 Varnum Street NE Washington,DC 20017	52-1275583	501c3	125,000	0			Screening
Providence Portland Medical Center4805 NE Glisan St Portland, OR 97213	93-0386906	501c3	311,963	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Research Advocacy Network 6505 West Park Boulevard Plano,TX 75093	35-2209499	501c3	59,608	0			Research
Research Foundation of SUNY35 State Street Albany,NY 12207	14-1368361	501c3	11,963	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Riverside Research Institute 156 William St New York, NY 10038	13-2593244	501c3	39,741	0	,		Research
Roswell Park Alliance FoundationElm Carlton Streets Buffalo,NY 14263	16-1391608	501c3	232,274	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Rush University1700 West Van Buren Chicago,IL 60612	36-2174823	501c3	150,000	0			Research
Scripps Research Institute 10550 N Torrey Pines Rd La Jolla, CA 92037	33-0435954	501c3	48,000	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Smith Farm Center for Healing & the Arts1632 U Street NW Washington, DC 20009	52-1977976	501c3	25,000	0			Education
Society for Surgical Oncology85 W Algonquin Rd Arlington Hts,IL 60005	13-6161070	501c3	77,500	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Southern Illinois University PO Box 19616 Springfield, IL 627949616	37-6005961	501c3	107,000	0			Research
Stanford UniversityPO Box 44253 San Francisco, CA 941444253	94-1156365	501c3	240,000	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SUNY at Stony BrookW5510 Melville Library Stony Brk,NY 11794	14-1368361	501c3	73,998	0			Research
The ASCO Cancer Foundation2318 Mill Road Alexandria, VA 22314	31-1667995	501c3	1,275,000	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Caring FoundationPO Box 2266 Cheyenne, WY 82003	83-0292601	501c3	433,783	0			Screening
The Center For Mind - Body Medicine5225 Connecticut Av Washington, DC 20015	52-1755744	501c3	10,000	0			Education

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The General Hospital Corp50 Staniford St Boston, MA 02114	04-1564655	501c3	140,439	0			Research
The Hope Foundation24 Frank Lloyd Dr Ann Arbor, MI 48106	74-2655302	501c3	85,400	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Mautner Project1300 19th Street NW Washington, DC 20036	52-1703915	501c3	50,000	0			Education
The Salk Institute10010 N Torrey Pines Rd La Jolla,CA 92037	95-6136024	501c3	50,000	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The University of Chicago 970 East 58th St Chicago, IL 60637	36-2177139	501c3	575,000	0			Research
The Wistar Institute3601 Spruce Street Philadelphia, PA 19104	23-6434390	501c3	191,416	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Thomas Jefferson University 1020 Walnut St Philadelphia, PA 19107	23-2829095	501c3	1,559,998	C			Research
Trustees of Columbia Univ 615 West 131st St New York, NY 10027	13-3957095	501c3	29,693	C			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Tufts University136 Harrison Avenue Boston, MA 02111	04-3532914	501c3	170,366	0			Research
UMDNJ Robert Wood Johnson MC335 George St New Brunswick,NJ 08901	23-7313160	501c3	44,978	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Univ of Arkansas for Medical Sci4301 W Markham Little Rock, AR 722057199	71-6056774	501c3	49,972	0			Education
Univ of Colo Denver Health Sciences CtrPO Box 910238 Denver, CO 802910238	85-6000555	501c3	180,000	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Univ of Colorado Health Sciences CenterFitzsimons Bldg Denver, CO 80291	84-6000555	501c3	309,323	0			Research
Univ of Kentucky Research FDN201 Kinkead Hall Lexington, KY 405060005	61-6033693	501c3	32,361	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Univ of North Carolina at Chapel Hill104 Airport Dr Chapel Hill, NC 27599	56-6001393	501c3	824,617	0			Research
Univ of North Carolina at Charlotte9201 University Blvd Charlotte, NC 28223	56-6001393	501c3	48,000	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Univ of Texas MD Anderson Cancer CenterPO Box 4390 Houston,TX 772104390	74-6001118	501c3	382,831	0			Research
Univ of TX MD Anderson Cancer Center1515 Holcombe Blvd Houston, TX 77030	74-6001118	501c3	179,999	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University Miami School of Medicine1400 NW 10th Avenue Miami,FL 33136	59-0624458	501c3	438,179	0			Research
University of Alabama at Birmingham1720 2nd Avenue South Birmingham, AL 35294	63-6005396	501c3	200,000	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of ArizonaPO Box 3520 Tucson, AZ 85722	74-2652689	501c3	40,225	0			Research
University of CA at San Diego9500 Gilman Dr La Jolla,CA 92093	95-6006144	501c3	529,845	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of California at San Francisco3333 California St San Francisco, CA 94118	94-6036493	501c3	1,070,159	0			Research
University of California at Santa Cruz1156 High Street Santa Cruz, CA 95064	94-1539563	501c3	60,000	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of California- Berkeley2195 Hearst Avenue Berkeley,CA 94720	94-6090626	501c3	60,000	0			Research
University of California- Davis1 Shields Ave Davis,CA 95616	94-6036494	501c3	223,485	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of California- IrvineBiological Science 3 Irvine,CA 92697	95-2226406	501c3	248,000	0			Research
University of California-Los Angeles10920 Wilshire Blvd Los Angeles,CA 90024	95-6006143	501c3	440,000	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Central Florida 12424 Research Pkwy Orlando,FL 32828	59-3086453	501c3	171,994	0			Research
University of Cincinnati51 Goodman Dr Cincinnati, OH 452210222	31-6000989	501c3	40,000	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Florida219 Grinter Hall Gainesville, FL 32611	59-6002052	501c3	39,974	0			Research
University of Hawaii2530 Dole St Honolulu, HI 96822	99-6000354	501c3	11,441	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Houston4800 Calhoun Rd Houston,TX 77204	74-6001399	501c3	95,660	0			Education
University of Illinois1901 S First St Champaign, IL 618207406	37-6006007	501c3	38,549	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Illinois at Chicago809 S Marshfield Ave Chicago, IL 60608	37-6000511	501c3	351,007	0			Research
University of Iowa at Carver College ofB5 Jessup Hall Iowa City,IA 52242	42-6004813	501c3	12,000	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Kansas Medical Center3901 Rainbow Blvd Kansas City, KS 66160	48-1108830	501c3	187,965	O			Research
University of Louisville521 Stevenson Hall Louisville,KY 40292	61-1029626	501c3	74,134	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Maryland660 W Redwood St Baltimore, MD 21201	52-2238893	501c3	70,000	0			Research
University of Maryland- BaltimorePO Box 41428 Baltimore,MD 202036428	31-1678679	501c3	208,000	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Michigan3086 Wolverine Tower Ann Arbor, MI 48109	38-6006309	501c3	400,000	0			Research
University of Minnesota 200 Oak Street SE Minneapolis, MN 55455	41-6007513	501c3	693,428	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Mississippi Medical Center2500 North State Street Jackson, MS 39216	64-6008520	501c3	94,213	0			Research
University of Nebraska 985100 Nebraska Medical Ctr Omaha,NE 68198	04-7049123	501c3	60,000	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Nebraska Medical Center985100 Nebraska Med Ctr Omaha,NE 68198	06-3682242	501c3	52,000	0			Research
University of North Carolina 104 Airport Drive Chapel Hill, NC 27599	56-6001393	501c3	31,409	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Oklahoma Health Sciences1100 N Lindsay Oklahoma City, OK 73104	73-6017987	501c3	231,705	0			Research
University of Pennsylvania 3451 Walnut St Philadelphia, PA 191046205	23-1352685	501c3	732,481	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of PittsburghPO Box 371220 Pittsburgh,PA 152517220	25-0966691	501c3	69,503	0			Research
University of South Dakota 2301 East 60th St N Sioux Falls, SD 57104	46-6003541	501c3	160,122	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of TennesseeUT GSM 1924 Alcoa Hwy Knoxville,TN 37920	31-1626179	501c3	147,616	0			Research
University of Texas at Health Science ctrPO Box 20036 Houston,TX 77030	74-1587488	501c3	210,825	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Texas Health Science Ctr7703 Floyd Curl Dr San Antonio, TX 78229	74-1586031	501c3	200,000	0			Research
University of Utah201 S Presidents Salt Lake City, UT 84112	87-6000525	501c3	197,999	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Vermont85 S Prospect St Burlington, VT 05405	03-1794400	501c3	21,766	0			Research
University of VirginiaPO Box 400195 Charlottesville, VA 22904	54-1682176	501c3	455,436	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Washington 3917 University Way NE Seattle, WA 98105	91-6001537	501c3	230,000	0			Research
University of Washington at Seattle1100 NE 45 St Suite 300 Seattle, WA 98105	91-6001537	501c3	40,000	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Wisconsin - Madison21 North Park St Madison,WI 53715	39-6006492	501c3	363,847	0			Research
UNT Health Science Center Att LeAnn Forsberg Fort Worth,TX 76107	75-6064033	501c3	48,000	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USCD School of Medicine 9500 Gilman Dr La Jolla,CA 92093	95-6006144	501c3	12,000	O			Research
UT Health Center at Tyler 11937 US Highway 271 Tyler,TX 75708	75-6001354	501c3	132,923	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UT Health Science Center at San Antonio7703 Floyd Curl Drive San Antonio,TX 78229	74-1586031	501c3	298,000	0			Research
UT Southwestern Medical Center at Dallas5323 Harry Hines Blvd Dallas,TX 75390	75-6002868	501c3	98,000	0			Research, Education

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UTMD Anderson Cancer Ctr 1515 Holcombe Blvd Houston,TX 77030	74-6001118	501c3	532,710	0			Research
Vanderbilt University Medical Center2200 Pierce Avenue Nashville,TN 37232	62-0476822	501c3	800,562	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Vietnamese Resettlement Association Inc7297 Lee Highway Falls Church, VA 22042	54-1512549	501c3	50,000	0			Education
Virginia Commonwealth UniversityPO Box 843039 Richmond, VA 232843038	54-6001758	501c3	344,815	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Wake Forest University Health SciencesMedical Ctr Blvd WinstonSalem, NC 27157	22-3849199	501c3	210,973	0			Research
Washington Cancer Institute 110 Irving St NW Washington, DC 20010	52-1791670	501c3	50,000	0			Education

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Washington University in St Louis700 Rosedale Ave Saint Louis,MO 63112	43-0653611	501c3	2,478,026	0			Research
Wayne State University5057 Woodward Ave Detroit, MI 48202	38-3555142	501c3	539,979	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
Weill Medical College of Cornell Univ575 Lexington Av New York, NY 10022	15-0532082	501c3	12,000	0			Research	
West Virginia University886 Chestnut Ridge Rd Morgantown, WV 26506	55-0665758	501c3	270,000	0			Research	

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Whitehead Inst for Biomedical Research9 Cambridge Ctr Cambridge, MA 02142	06-1043412	501c3	224,000	0			Research
Widener UniversityOne University Place Chester,PA 19013	23-1386178	501c3	231,771	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Wyoming Foundation for Cancer CareLLC6501 E 2nd Street Casper, WY 82609	20-4190331	501c3	166,217	0			Screening
Yale University School of Medicine47 College St Ste 216 New Haven, CT 06510	06-0646973	501c3	217,750	0			Research

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YWCA of San Antonio314 N Hackberry San Antonio,TX 78202	74-1143135	501c3	49,715	0			Education

DLN: 93493012002114

OMB No 1545-0047

Schedule J (Form 990)

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.

Compensation Information

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization **Employer identification number** SUSAN G KOMEN BREAST CANCER FOUNDATION INC

75-1835298

Pai	rt I Questions Regarding Compensation	n				
					Yes	No
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III		· · · · · · · · · · · · · · · · · · ·			
	First-class or charter travel	Г	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement or provision of all of the expenses de			1b	Yes	
2	Did the organization require substantiation prior to r directors, trustees, and the CEO/Executive Directo			2	Yes	
		.,, rogaro			res	
3	Indicate which, if any, of the following the filing orga organization's CEO/Executive Director Check all th used by a related organization to establish compens	hat apply				
	Compensation committee	Γ	Written employment contract			
	✓ Independent compensation consultant	굣	Compensation survey or study			
	Form 990 of other organizations	ᅜ	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymen	t?	4a	Yes	
b	Participate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	rovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mu	ust comp	olete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A compensation contingent on the revenues of	, line 1a	, did the organization pay or accrue any			
а	The organization?			5a		No
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A compensation contingent on the net earnings of	, line 1a	, did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes," of			7		No
8	Were any amounts reported in Form 990, Part VII, p	paid or a	ccured pursuant to a contract that was			
	subject to the initial contract exception described in					
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow the section 53 4958-6(c)?	e rebutta	able presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	(B) Breakdown of	f W-2 and/or 1099-MI:	SC compensation	(C) Retirement and	(D) Nontaxable benefits	(E) Total of	(F) Compensation	
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation		columns (B)(ı)-(D)	reported as deferred in prior Form 990	
See Additional Data Table								

Schedule J (Form 990) 2012

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

The complete the part for any additional micrimation								
Identifier	Return Reference	Explanation						
Form 990, Schedule J, Part I, Line 1a	Information	First class and business class fares for domestic travel, Canada, the Caribbean, Central America, and Mexico are not reimbursable. However, personal frequent flier mileage and/or coupons may be used for no-cost upgrades. Only the CEO/Founder is approved for first class travel. Business Class was approved for one individual on an occasional basis due to medical necessity surrounding flights of greater than 4 hours. Whenever possible, discounted first class and upgrades are used to minimize cost. Schedule J., Part I., line 4a During calendar year 2012 the following severance payments were made. Elizabeth Thompson - \$266,900 Nancy MacGregor - \$82,793 Larry Lundy - \$21,486 Samuel Cheng - \$18,739						

Schedule J (Form 990) 2012

Software ID: Software Version:

EIN: 75-1835298

Name: SUSAN G KOMEN BREAST CANCER FOUNDATION INC

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Form 990, Schedule 3, Part 11 - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees								
(A) Name		(B) Breakdown o	of W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form
		(i) Base Compensation	compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
Lesley Lurie	(I)) 0	o o	2,233 0	10,267 0	16,384 0	207,856	, ,
Elizabeth Thompson	(I) (II)		0	269,622	10,560 0	15,492 0	632,513	0
David Dawson	(1) (11)		0	2,379	9,347 0	20,638 0	238,660	0
Chandini Portteus	(1) (11)		0 0	1,965	11,993 0	20,540 0	230,286	0
Dorothy Jones	(1) (11)		0	1,492	0 0	9,572 0	176,748	0
Carol Corcoran	(I) (II)		0	5,357 0	5,387 0	10,925 0	259,065	0 0
Nancy MacGregor	(1) (11)) 89,431) 0	0	84,529 0	5,512 0	8,279 0	187,751	0
Margo Lucero	(1) (11)) 170,381) 0	0	1,894	10,630	21,194 0	204,099	0
British Robinson	(I) (II)		0 0	4,909	0 0	8,948 0	211,541	0
Lynn Erdman	(I) (II)		0 0	3,918 0	0 0	20,541 0	208,610	0
Larry Lundy	(I) (II)		0	24,022	8,497 0	7,807 0	181,820	0
Samuel Cheng	(I) (II)		0	23,747	8,134 0	6,821 0	. 173,461	0
Nora Davis	(1) (11)		0	1,320	7,308 0	8,822 0	173,022	0
Kay Rohlman	(I) (II)		0 0	3,400	10,563 0	19,777 0	204,124	0 0
Mark Nadolny	(I) (II)		0	4,712		17,921 0	339,128	0 0
Nancy G Brinker	(I) (II)) 549,380) 0	0	11,516		8,761 0	. 584,635 0	0 0

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DLN: 93493012002114

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

Noncash Contributions

Name of the organization SUSAN G KOMEN BREAST CANCER FOUNDATION INC

Employer identification number

	-				75-1835298			
Part 1	Types of Property			T	Τ			
		(a) Check ıf applıcable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	Method of a noncash contri			ts
A rt	—Works of art							
A rt	—Historical treasures .							
A rt	—Fractional interests							
Вос	oks and publications							
	thing and household	Х		99,578	Cost or sale price			
Car	rs and other vehicles							
Boa	ats and planes							
Inte	ellectual property							
Sec	curities—Publicly traded .							
Sec	curities—Closely held stock .							
	curities—Partnership, LLC, trust interests							
Sec	curities—Miscellaneous							
cor	alified conservation htribution—Historic uctures							
Qua	alified conservation							
Rea	al estate—Residential .							
Rea	al estate—Commercial							
Rea	al estate—O ther							
Col	lectibles							
Foo	od inventory	Х	2	2,308	Cost or sale price			
Dru	igs and medical supplies .							
Tax	kidermy							
Hıs	torical artifacts							
Sci	entific specimens							
A rc	heological artifacts							
0 th	ner▶()							
	ner▶()							
	ner ▶()							
0 th	ner⊫ ()							
	mber of Forms 8283 received which the organization comple		=		29			
							Yes	N
	ırıng the year, dıd the organıza							
	ust hold for at least three year rexempt purposes for the entil				d to be used	30a		N
	"Yes," describe the arrangeme							
	es the organization have a gif			review of any non-standard	contributions?	31	Yes	
	es the organization hire or usentributions?	e third parti	es or related organizations	to solicit, process, or sell	noncash • • •	32a		N
If'	"Yes," describe in Part II							
Ift	the organization did not report	an amount	ın column (c) for a type of	property for which column (a) is checked,			

Page 2

Schedule M	(Form 990) (201:
Part II	Supplem

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) (2012)

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As Filed Data -

DLN: 93493012002114

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.

OMB No 1545-0047

Open to Public Inspection

Name of the organization SUSAN G KOMEN BREAST CANCER FOUNDATION INC	Employer identifi	cation number
	75-1835298	

ldentifier	Return Reference	Explanation
VOLUNTEERS	Form 990, Part I, Question 6	Volunteers serve in a variety of ways but the greatest numbers of volunteers assist with the Susan G. Komen 3 Day series. Program Service Accomplishments Form 990, Part III, Lines Nancy G. Brinker promised her dying sister, Suzy, she would do everything in her power to end breast cancer. Susan G. Komen (Nomen) works to end breast cancer in the U.S. and throughout the world by investing in breast cancer research and community outreach programs, and working globally in more than 30 count or thes. A - Research and Training Komen has contributed to major advances in breast cancer research over the past 30 years. Komen's Research and Training Grant Programs a designed to advance the translation of research discoveries into new ways to diagnose, treat, and p revent breast cancer, leading to a reduction of breast cancer incidence and mortality with in the next decade. To ensure maximum impact for its research dollars, Komen is guided by a Soientific Advisory Board, a group of internationally recognized doctors, scientists and advocates, and consults with the Komen Scholars, a group comprised of 70 scientists and a dvocates. Komen awards grants to individual scientists, research teams, and organizations around the world through competitive review processes that ensure maximum impact for our research loaliars in fiscal year 2013, Komen awarded 124 grants through its Research and Tri aning Grants Program to support research and training in the United States and other count tres, including Australia, Belgium Canada, England, France, tally, Spain, and Switzelland The following Request-for-Applications-driven grant opportunities were offered by Komen during fiscal year 2013 Challenge Grants Breast Cancer and the Environment Grants to ad dress key research needs in the field of environmental contributions to breast cancer, explore evidence-based actions that might reduce the risk of breast cancer, and recomment research, of which the following three have been chosen by Specific Populations. The contribution of Carlotter in P

Identifier Return Reference	Explanation			
VOLUNTEERS Form 990, Part I, Question 6	tunity Grants committed in fiscal year 2013 include *The Susan G Komen for the Cure Tiss ue Bank at the IU Simon Cancer Center ("Komen Tissue Bank," "Tissue Bank" or "KTB"), a bio repository of whole blood, DNA, serum, plasma, frozen human breast, formalin-fixed, paraff in-embedded breast tissue, and cell lines derived from the breast tissue, and the first and only biorepository of normal breast tissue in the world. The mission of the Komen Tissue Bank is to facilitate progress in breast cancer research by providing researchers across the globe with richly annotated biospecimens of the highest quality and the experimental data derived from these specimens. The Komen Tissue Bank, a model for biorepositories, represents a major change in research of breast biology and will hopefully have a huge impact in our community and the world. It has the potential to help identify people at risk for b reast cancer as well as those not at risk for the development of the disease. *The linternational Program on Male Breast Cancer (International Registration and Biologic Characteriza tion Program) organized by the European Organization for Research and Treatment of Cancer (EORTC), the Breast International Group (BIG), and the North American Breast Cancer Groups (NABCG, former TBCI) aims to better characterize the clinical features, biology, and outcomes for men diagnosed with breast cancer. Examples of Sponsored Programs and Partnership Grants committed in fiscal year 2013 include *Support for the Accelerating Anti-Cancer Dr. ug Development Workshop, which is designed for scientists and consumer advocates with clinical trial experience who have an interest in new approaches to developing or enhancing agents or combinations of agents for the diagnosis, treatment or prevention of cancer. This groundbreaking Workshop is designed to bring together leaders in clinical and translational cancer research from academia, industry, NCI and FDA to assist investigators in understa anding and improving the process of cancer drug development.			

Identifier	Return Reference	Explanation
B - Education		Komen is a trusted source of breast cancer information for people all over the world and is instrumental in connecting people with the resources they need in their fight against breast cancer. Our award-winning website, www komen org, provides safe, accurate, comprehens we, and unbiased information about breast cancer based upon scientific evidence, as well as information about our research programs, community programs, volunteer opportunities, and events. The "Understanding Breast Cancer" section of the website, co-developed with Har vard Medical School faculty and Dana-Farber/Engham and Women's Cancer Center staff, received over 3 million edu cational materials in fiscal year 2013. Simples of Komen educational materials in fiscal year 2013. Stamples of Komen educational materials in fiscal year 2013. Stamples of Komen educational materials in fiscal year stages and for 22 specific audiences. Breast cancer awareness and breast cancer specific brochures and fact sheets. Booklets with support information for survivors and co-survivors Komen's trained and caring breast or are helpline staff (1-87 GO KOMEN, 1-877-465-6636) provide answers to questions, local re sources, and moral support. Last fiscal year, the Komen breast cancer helpline responded to over 1,213,000 calls and 1,000,100 emails. While older African American women are less I kiely to be diagnosed with breast cancer than Caucasian women, they are more likely to die fromthe disease at every age. Komen's Circle of Promse program engages African American women, and black women around the world, in the fight against breast cancer As of the end of fiscal year 2013, a total of 100,000 ambassadors had been recruited to do the following. • Mobilize the community to ensure that women everywhere have access to the care they need. • Empower women to make a promise to reclaim their lives, their health, and to be strong advocates in their corrulations. A properties of the Cure curriculation showed the sease at cancer advocates in the Komen Race for the Cure care.

ldentifier	Return Reference	Explanation
B - Education		k above national averages. The new Komen grants bring to 18 the number of Komen-funded pro grams in the D.C area that strive to improve access and services to women facing breast clancer, representing a total in active grant funding of \$7.3 million. All seven new grants in the Washington, D.C. Metro area focus on addressing barriers to care caused by the region's fragmented heath care system and lack of care coordination among vulnerable patients. All new grantees were required to form partnerships among providers in the region that est abilish a framework to ensure that patients can be easily and efficiently referred and "na vigated" from screening all the way through to survivorship-with particular emphasis on removing obstacles to transportation and work obligations, wait times, and financial assistance. In addition, several of the programs focus on patient education, including targeted b reast health awareness outreach in a culturally sensitive manner that develops a better un derstanding of the importance of screening, the effectiveness of modern treatments and sur vivorship. Through Komen's National Vulnerable Populations Grants Program, Komen funds lar ge-scale community grants that seek to improve quality of care, care coordination, and add ress unique barriers to breast care for disparate populations. Since the initiation of the se grants in 2008, Komen has invested over \$9 million in programs that aim to eliminate disparities in breast cancer mortality. Projects funded in fiscal year 2013 through Komen's National Vulnerable Population Grants Program are focused on quality and systems improvement. Grantees will develop more effective and efficient processes for screening, referral, diagnosis, treatment, follow-up and survivorship by developing and implementing systems and process change to reduce breast cancer disparities among vulnerable populations. The Vul nerable Populations Grant Program supports projects that "Implement quality improvement and process improvement strategies to eliminate dispariti

Identifier	Return Reference	Explanation
D- Treatment		Many people do not get the breast cancer treatment they need, and as a result, they are less likely to survive. For this reason, Komen supports two treatment assistance programs managed by CancerCare and the Patient Advocate Foundation which aim to connect people with local resources, psychosocial support, and provide critical financial assistance. Both programs, collectively, provide supplementary direct financial help to over 10,000 breast cancer patients for medical co-payments, oral chemotherapy, and other vital care that is related to treatment. In 2013, Komen awarded a \$500,000 grant to CancerCare to support the Linking A.R.M.S. (TM) (Assistance & Resources Made Simple) program Linking A.R.M.S. (TM) is a program dedicated to providing financial assistance, education and support services to low-income, under- or uninsured breast cancer survivors. Funding for Linking A.R.M.S. (TM) provides direct financial assistance to more than 2,100 breast cancer survivors. Funding for Linking A.R.M.S. (TM) provides direct financial assistance to more than 2,100 breast cancer survivors for treatment-related expenses including pain and anti-nausea medication, lymphedema care, oral chemotherapy, durable medical equipment, childcare, and transportation to and from treatment. CancerCare also provides counseling and other support services that enable breast cancer patients to make informed treatment decisions, cope with the emotional effects of the disease, and experience an improved quality of life. In 2012 Komen awarded a \$1,500,000, two-year grant to the Patient Advocate Foundation (PAF), a national non-profit organization that assists patients needing help with health-related financial issues. Komen supports PAF's Co-Pay Relief (CPR) program. The CPR program provides direct financial assistance for pharmaceutical co-payments to insured patients with breast cancer, lung cancer and prostate cancer. Komen's funding, along with other key partners, touched more than 10,000 breast cancer patients served through the program over

ldentifier	Return Reference	Explanation		
Significant Change to governing documents	Form 990, Part VI, Question 4	At a meeting of the Board of Directors on May 31, 2012, the Board approved an amendment to the Amended and Restated Bylaws (of June 4, 2010) adding a second, Class III director, increasing the total number of members of the Board of Directors to 10. On November 7, 2012, the Board of Directors approved an amendment to the Bylaws adding a new Board Officer position of Vice Chair. Describe the Process used by Management & Governing Body to Review 990 Form 990, Part VI, Question 11b Management prepares the materials for the Form 990, with the assistance and review by external accountants. Senior levels of management review and comment on the final draft of the Form 990 for presentation to the audit committee of the board of directors. The audit committee of the Board of Directors reviews and approves the Form 990 prior to being filed. Thereafter, each member of the Board of Directors reviews and approves the Form 990 via email prior to the form being filed. Description of Process to Monitor Transactions for Conflicts of Interest Form 990, Part VI, Question 12c Komen produces an annual survey requiring all employees, board members, committee members, and advisory boards to inform on conflicts. Any conflicts are then reviewed by management and the audit committee and appropriate measures are taken in addition, those same people have the obligation to update the conflict of interest statements during the year Offices & Positions for Which Process was Used, & Year Process was Begun Form 990, Part VI, Questions 15a and 15b The Compensation Committee of the Board of Directors assists the Board of Komen in overseeing compensation policies and practices. Responsibilities include oversight of the compensation of the Presidentif Chief Executive Officer, the range of compensation evels for the organization after officers, disqualified persons, and other employees, granting the CEO authority to determine actual compensation levels within an approved range, and incentive/bonus compensation programs. The current policy was adopt		

		Grassroots Expenditures	Direct Lobbying Expenditures	Total Lobbying Expenditures	Other Exempt Expenditures	Total Exempt Purpose Expenditures
	Susan G. Komen Breast Cancer Foundation. Address for parent and all affiliates is 5005 LB1 Freeway. Suite 250. Dallas. Texas. 75244					
1	Acadiana Affiliate of the Susan G Komen Breast Cancer Foundation Inc EIN #72-1436764	-	-	-	860 297	860 297
2	The Arkansas Chapter of the Susan G-Komen Breast Cancer Foundation. Inc EIN# 71-0724439	-	-	-	2 152 161	2 152 161
3	The Aspen Chapter of the Susan G. Komen Breast Cancer Foundation EIN# 84-1160739	-	-	-	453 102	453 102
4	Austin Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN # 75-2854966	-	-	-	1 846 203	1 846 203
5	Baton Rouge Affiliate of the Susan G–Komen Breast Cancer Foundation Inc EIN $\#$ 75-2854972	-	-	-	698 601	698 601
6	Bavou Region Affiliate of the Susan G-Komen Breast Cancer Foundation. Inc EIN $\#$ 75-2854976	-	-	-	229 943	229 943
7	Boise Idaho Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN # 75-2854965	-	-	-	726 407	726 407
8	Central Florida Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN # 75-2854957	7 441	1 106	8 547	805 594	814 141
9	Central Georgia Affiliate of the Susan G Komen Breast Cancer Foundation EIN # 75-2881536	1 051	-	1 051	327 871	328 922
10	Central Mississippi Steel Magnolias Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN # 75-2875174	1 674	-	1 674	378 310	379 984
11	Central New Mexico Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN $^{\#}$ 85-0462625	-	-	-	475 284	475 284
12	Central New York Affiliate of the Susan G Komen Breast Cancer Foundation EIN# 16-1389666	-	-	-	894 004	894 004
13	Central Oklahoma Chapter of the Komen Foundation Inc EIN# 73-1372249	-	-	-	910 385	910 385
14	Central and South Tersev Affiliate of the Susan G Komen Breast Cancer Foundation Inc EIN# 43-2052349	-	-	-	2 206 673	2 206 673
15	Central Texas Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN# 74-2906528	661	-	661	224 430	225 091
16	Central Valley Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN # 75-2854970	127	-	127	373 273	373 400

		Grassroots Expenditures	Direct Lobbying Expenditures	Total Lobbying Expenditures	Other Exempt Expenditures	Total Exempt Purpose Expenditures
17	Central Wisconsin Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN # $56-2613151$	-	-	-	243 021	243 021
18	Charlotte Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN # 75-2854959	-	231	231	3 458 914	3 459 145
19	Chattanooga Affiliate of the Susan G-Komen Breast Cancer Foundation Inc EIN # 75-2875175	-	-	-	630 642	630 642
20	The Chicagoland Area Chapter of the Susan G-Komen Breast Cancer Foundation. In EIN# $36\text{-}4111723$	1 317	-	1 317	2 866 388	2 867 705
21	Colorado Springs Affiliate of the Susan G-Komen Breast Cancer Foundation. Inc EIN# $75-2844654$	-	-	-	640 853	640 853
22	Columbus Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc $EIN\#75-2844651$	2 320	2 500	4 820	2 849 988	2 854 808
23	Connecticut Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc $EIN\#75-2844629$	-	-	-	2 483 998	2 483 998
24	Dallas County Affiliate of the Susan G Komen Bieast Cancer Foundation Inc EIN# 75-2444724	-	-	-	3 350 526	3 350 526
25	The Denvei Metropolitan Affiliate of the Susan G-Komen Breast Cancer Foundation EIN** 84-1199858	85	884	969	4 463 894	4 464 863
26	The Des Moines Chapter of the Susan G. Komen Breast Cancer Foundation. Inc EIN $\#$ 42-1438018	-	-	-	1 079 206	1 079 206
27	Eastern Washington Affiliate of the Susan G. Komen Foundation. Inc EIN# 81-0578449	-	-	-	605 730	605 730
28	Elmira Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc $EIN\#75-2844630$	-	-	-	254 968	254 968
29	El Paso Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN# 74-2723408	-	-	-	551 788	551 788
30	Florida Suncoast Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN \pm 75-2870702	5 392	-	5 392	1 297 407	1 302 799
31	The Greater Atlanta Affiliate of the Susan G-Komen Breast Cancer Foundation. In EIN# $58-1959763$	-	-	-	3 042 800	3 042 800
32	Grand Rapids Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN# 75-2844631	669	5	674	580 328	581 002
33	Greater Amanllo Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN # $72-1562627$	-	-	-	434 731	434 731

		Grassroots Expenditures	Direct Lobbying Expenditures	Total Lobbying Expenditures	Other Exempt Expenditures	Total Exempt Purpose Expenditures
34	Greater Cincinnati Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN # 75-2855038	-	-	-	1 635 127	1 635 127
35	Greater Evansville Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN # 75 -2844632	-	-	-	923 021	923 021
36	Greater Kansas Citx Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN # 75-2844634	42	4 087	4 129	1 955 951	1 960 080
37	Greater Lansing Affiliate of the Susan G-Komen Breast Cancer Foundation. Inc EIN# $75-2915870$	-	-	-	675 601	675 601
38	The Greater Nashville Chapter of the Susan G-Komen Breast Cancer Foundation. In EIN# $62\text{-}1671774$	-	-	-	1 225 090	1 225 090
39	Greater New York City. Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN $\#$ 91-2049420	4 988	-	4 988	4 797 421	4 802 409
40	Greater Richmond Virginia Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN# 75-2844659	-	-	-	1 011 857	1 011 857
41	Greater Roanoke Vallev Area Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN# $56-2619425$	-	-	-	622 036	622 036
42	Hawaii Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN # 75-2844635	-	-	-	632 840	632 840
43	Houston Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN $\#$ 76-0360372	-	73	73	5 087 496	5 087 569
44	Indianapolis Affiliate of the Susan G-Komen Breast Cancer Foundation. Inc EIN# $75-2941627$	-	-	-	2 387 717	2 387 717
45	Inland Empire Affiliate of the Susan G–Komen Breast Cancer Foundation Inc EIN# $33-0802964$	-	-	-	1 218 642	1 218 642
46	Knoxville Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN # 75-2854955	-	-	-	989 448	989 448
47	The Las Vegas Chapter of the Susan G-Komen Breast Cancer Foundation EIN# $88\text{-}0372386$	-	-	-	1 156 850	1 156 850
48	Lexington Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN # 75-2854969	-	-	-	668 575	668 575
4 9	The Los Angeles County Chapter of the Susan G. Komen Breast Cancer Foundation. In EIN# 95-4582064	5 270	4 436	9 706	1 313 086	1 322 792
50	Louisville Kentucky Affiliate of the Susan G Komen Breast Cancer Foundation Inc EIN # 75-2855046	-	-	-	1 019 765	1 019 765

		Grassroots Expenditures	Direct Lobbying Expenditures	Total Lobbying Expenditures	Other Exempt Expenditures	Total Exempt Purpose Expenditures
51	Lowcountry Affiliate of the Susan G Komen Breast Cancer Foundation Inc EIN# 75-2844655	-	-	-	1 069 410	1 069 410
52	Lubbock Area Affiliate of the Susan G Komen Breast Cancer Foundation Inc EIN# 75-2509762	-	-	-	547 041	547 041
53	Madison Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN # 75-2855043	-	-	-	1 003 491	1 003 491
54	Maine Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN #75-2844637	-	89	89	523 282	523 371
55	Maryland Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN# 52-2053491	-	-	-	2 694 823	2 694 823
56	Massachusetts Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN# 75-2854961	6 296	25	6 321	1 253 025	1 259 346
57	Memphis-Midsouth Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN $\#$ 75-2942859	-	-	-	1 159 235	1 159 235
58	Miami Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN # 75-2844638	4 806	25	4 831	1 956 955	1 961 786
59	Mid-Kansas Chapter of the Susan G. Komen Breast Cancer Foundation. Inc EIN# 48-1120492	-	-	-	747 919	747 919
60	Mid-Missouri Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN# 56-2583638	-	-	-	277 629	277 629
61	Milwaukee Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN# 75-2844639	-	-	-	2 220 830	2 220 830
62	Minnesota Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN# 41-1924790	-	-	-	2 568 722	2 568 722
63	Montana Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN# 75-2845067	-	-	-	253 831	253 831
64	Nebraska Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN# 26-0056671	-	-	-	1 289 497	1 289 497
65	New Orleans Chapter of the Susan G. Komen Breast Cancer Foundation. Inc EIN# 72-1222127	-	28	28	957 955	957 983
66	North Carolina Foothulls Affiliate of the Susan G. Komen Breast Cancer Foundation. In EIN # 75-2875177	-	-	-	278 707	278 707
67	North Carolina Triad Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN \sharp 75-2891104	-	-	-	1 082 415	1 082 415

		Grassroots Expenditures	Direct Lobbying Expenditures	Total Lobbying Expenditures	Other Exempt Expenditures	Total Exempt Purpose Expenditures
68	NC Triangle Affiliate of the Susan G Komen Breast Cancer Foundation Inc EIN# 75-2845066	2 444	-	2 444	2 174 004	2 176 448
69	North Central Alabama Affiliate of the Susan G-Komen Breast Cancer Foundation. Inc EIN** 75-2844656	-	-	-	1 198 144	1 198 144
70	Northeastern New York Affiliate of the Susan G-Komen Breast Cancer Foundation. Inc EIN# $75-2854968$	13	-	13	402 136	402 149
71	The Northeastern Pennsylvania Chapter of the Susan G-Komen Breast Cancer Foundation EIN# $23\text{-}2657570$	-	-	-	534 757	534 757
72	The Northeast Louisiana Chapter of the Susan G. Komen Breast Cancer Foundation. Inc EIN# 93-1225877	2 382	-	2 382	341 313	343 695
73	The Northeast Ohio Chapter of the Susan G. Komen Breast Cancer Foundation. Inc EIN# $34\text{-}1793460$	114	3	117	1 838 247	1 838 364
74	Northern Indiana Affiliate of the Susan G Komen Breast Cancer Foundation EIN # 56-2583682	-	-	-	364 004	364 004
75	Northern Nevada Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN # 75 -2855035	-	287	287	483 603	483 890
76	North Dakota Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN** $26\text{-}4810260$	-	-	-	168 158	168 158
77	North Florida Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN# 75-2844636	-	18 851	18 851	528 472	547 323
78	The North Iersev Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN# $22-3528454$	-	-	-	1 716 274	1 716 274
79	North Mississippi Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN** $75-2844621$	-	-	-	292 060	292 060
80	North Texas Affiliate of the Susan G Komen Breast Cancer Foundation Inc EIN# 75-2356437	-	-	-	1 440 854	1 440 854
81	Northwest Ohio Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN# 75-2845063	7 701	4 243	11 944	1 428 670	1 440 614
82	The Orange County Affiliate of the Susan G-Komen Breast Cancer Foundation. Inc EIN# $33-0487943$	896	3 632	4 528	3 602 392	3 606 920
83	The Oregon and Southwest Washington Affiliate of the Susan G-Komen Breast Cancer Foundation 1 $EIN\#93-1068897$	ft 250	1 919	2 169	2 932 048	2 934 217
84	Ozaik Affiliate of the Susan G Komen Breast Cancer Foundation Inc EIN# 75-2845062	-	-	-	1 284 018	1 284 018

		Grassroots Expenditures	Direct Lobbying Expenditures	Total Lobbying Expenditures	Other Exempt Expenditures	Total Exempt Purpose Expenditures
85	Philadelphia Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN# 75-2949264	-	-	-	4 506 790	4 506 790
86	Phoenix Affiliate of the Susan G Komen Breast Cancer Foundation Inc EIN# 75-2845061	375	-	375	2 661 504	2 661 879
87	Pittsburgh Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN# 81-0665396	-	1 817	1 817	2 263 838	2 265 655
88	The Peona Memorial Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN \pm 37-1286285	-	-	-	1 596 135	1 596 135
89	The Puget Sound Chapter of the Susan G-Komen Foundation Inc $EIN\#911624040$	-	-	-	3 624 474	3 624 474
90	Quad Cities Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN# 75-2844660	-	-	-	495 597	495 597
91	Sacramento Vallev Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN $\#$ 94-3169358	16 854	7 023	23 877	1 621 882	1 645 759
92	Siouxland Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN# 86-1102587	-	-	-	244 962	244 962
93	St Louis Affiliate of the Susan G Komen Breast Cancer Foundation Inc EIN# 75-2844650	-	-	-	3 535 966	3 535 966
94	The San Francisco Bav Area Affiliate of the Susan G. Komen Breast Cancer Foundation. In EIN# $94\text{-}3047626$	2 282	1 523	3 805	1 017 299	1 021 104
95	Salt Lake City Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN # 75-2855032	-	-	-	911 431	911 431
96	The San Antonio Chapter of the Susan G. Komen Breast Cancer Foundation. Inc $EIN\#74-2856696$	-	-	-	1 481 872	1 481 872
97	The San Diego Chapter of the Susan G. Komen Breast Cancer Foundation. Inc EIN $^{\#}$ 33-0638911	4 565	1 062	5 627	2 089 558	2 095 185
98	Shreveport Affiliate of the Susan G-Komen Breast Cancer Foundation Inc $EIN\#75-2844653$	-	-	-	467 624	467 624
99	Southeast Georgia Affiliate of the Susan G-Komen Breast Cancer Foundation. Inc EIN $\#$ 56-2583644	-	-	-	567 258	567 258
100	Southeast Iowa Affiliate of the Susan G Komen Breast Cancer Foundation Inc EIN # 75-2854980	-	-	-	204 808	204 808
101	Southern Anzona Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN** $75-2844652$	-	-	-	727 740	727 740

		Grassroots Expenditures	Direct Lobbying Expenditures	Total Lobbying Expenditures	Other Exempt Expenditures	Total Exempt Purpose Expenditures
102	South Dakota Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN $^{\mu}$ 33-1114233	-	-	-	436 696	436 696
103	The South Florida Chapter of the Susan G. Komen Breast Cancer Foundation. Inc EIN \pm 65-0254225	-	256	256	1 691 060	1 691 316
104	Southwest Florida Affiliate of the Susan G-Komen Bieast Cancer Foundation. Inc EIN# $68\text{-}0523074$	1 452	-	1 452	1 152 212	1 153 664
105	The Southwest Michigan Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN# $38\text{-}3437505$	-	504	504	397 281	397 785
106	Tarrant County Affiliate of the Susan G Komen Breast Cancer Foundation Inc EIN# 75-2445070	41	-	41	1 835 919	1 835 960
107	Tevarkana Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN# 75-2844649	-	-	-	542 871	542 871
108	Tidewater Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN # 75-2875178	2 332	2 332	4 664	1 152 320	1 156 984
109	Tri-Cities Affiliate of the Susan G. Komen Breast Cancer Foundation EIN # 84-1689067	-	-	-	564 055	564 055
110	Tulsa Affiliate of the Susan G Komen Breast Cancer Foundation Inc EIN# 75-2854974	-	-	-	901 833	901 833
111	Tyler Chapter of the Susan G Komen Breast Cancer Foundation Inc EIN# 74-2764235	-	-	-	416 834	416 834
112	Upper Cumberland Affiliate of the Susan G Komen Breast Cancer Foundation EIN# 20-5956855	-	-	-	241 294	241 294
113	Upstate South Carolina Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN $\#$ 75-2854973	-	-	-	665 931	665 931
114	Vermont-New Hampshire Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN# 75-2844657	-	-	-	686 659	686 659
115	Wabash Valley Affiliate of the Susan G Komen Breast Cancer Foundation. Inc EIN# 75-2844615	-	-	-	240 314	240 314
116	The Western New York Affiliate of the Susan G-Komen Breast Cancer Foundation. In EIN $\#$ 75-2875179	-	-	-	628 412	628 412
117	West Virginia Affiliate of the Susan G. Komen Breast Cancer Foundation. Inc EIN $\#$ 75-2885304	-	-	-	498 669	498 669
118	Wichita Falls Affiliate of the Susan G. Komen Breast Cancer Foundation. In EIN# 75-2844658	-	-	-	206 080	206 080

			Grassroots Expenditures	Direct Lobbying Expenditures	Total Lobbying Expenditures	Other Exempt Expenditures	Total Exempt Purpose Expenditures
	oming Chapter of the Susan G Komen Breast Cancer Foundation Inc # 84-1387410		-	-	-	567 581	567 581
		Totals - Affiliates	83 839	56 942	140 781	151 176 923	151 317 704
	Susan G Komen Breast Cancer Foundation Inc (Parent) EIN# 75-1835298 Totals for Parent and Affiliate		-	4 053	4 053	151 155 333	151 159 386
DI. V.		Parent and Affiliates	83 839	60 995	144 834	302 332 256	302 477 090