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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2012

Open to Public Inspection

A For the 2012 calendar year, or tax year beginning 07-01-2012 , 2012, and ending 06-30-2013

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

C Name of organization
American Lung Association

Doing Business As

Number and street (or P O box if mail is not delivered to street address) Room/suite
55 W Wacker Drive
Suite 1150

City or town, state or country, and ZIP + 4
chicago, IL 60601

D Employer identification number
13-1632524

E Telephone number
(217) 787-5864

G Gross receipts $ 54,024,430

F Name and address of principal officer
harold wimmer
55 w wacker drive
chicago, IL 60601

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

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

H(c) Group exemption number ▶

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

J Website: ▶ www lung org

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

L Year of formation 1918

M State of legal domicile ME

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
The mission of the American Lung Association is to save lives by improving lung health and preventing lung disease

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

3	Number of voting members of the governing body (Part VI, line 1a)	3	32
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	32
5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	130
6	Total number of volunteers (estimate if necessary)	6	230,197
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	10,546,204	8,618,848
	9	Program service revenue (Part VIII, line 2g)	36,852,621	32,040,360
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	541,690	1,077,406
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,716,269	1,071,621
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	49,656,784	42,808,235
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	6,439,114	8,046,311
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	9,444,069	8,433,387
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶1,729,878		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	33,960,346	28,649,992
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	49,843,529	45,129,690
	19	Revenue less expenses Subtract line 18 from line 12	-186,745	-2,321,455
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	31,049,040	27,830,675
	21	Total liabilities (Part X, line 26)	20,712,298	19,392,037
	22	Net assets or fund balances Subtract line 21 from line 20	10,336,742	8,438,638

Part II Signature Block

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

Sign Here

****** 2014-05-07
Signature of officer Date

Laura Scott Chief Executive Officer
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name Laura Kielczewski	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Firm's name ▶ GRANT THORNTON LLP			Firm's EIN ▶	
Firm's address ▶ 666 THIRD AVENUE NEW YORK, NY 100174057			Phone no (212) 599-0100	

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

The American Lung Association's mission is to save lives by improving lung health and preventing lung disease, with the ultimate vision of a world free of lung disease The National Headquarters of the American Lung Association fights lung disease through its own activities and by servicing, supporting, and leading its local Lung Associations Among its varied responsibilities, the National Headquarters - Funds research into the causes, prevention, and cures of lung disease - Advocates for policies that protect lung health, including fighting for healthy air - Provides a broad array of health educational programs and services to support smoking cessation, help prevent lung disease and to assist people with lung disease in better managing their condition - Supports local Lung Associations' implementation of health educational programs and dissemination of educational material - Provides an array of learning opportunities and tools to develop nationwide volunteer and staff leaders

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

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

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

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 12,924,791 including grants of $ 33,333) (Revenue $ 15,588,843)

Health Education Every year, the American Lung Association helps people manage their lung disease, overcome their nicotine addiction, and live healthier lives The two key components of the National Headquarters' work are supporting our network of local Lung Associations and developing lung health education materials for the public Local Lung Associations rely on us to develop health programs and provide expert training, guidance and materials to support their mission outreach We are also a trusted resource where the public can find information on myriad lung diseases, make treatment decisions, and get support and tools to manage their conditions or care for a loved one This past year we provided a wide array of services to help prevent and treat lung disease In 2012-2013 we substantially advanced this mission, touching lives from coast to coast Lung Disease For Over 40 Years, the Choice of People with Chronic Lung Disease - In the U S alone, over 33 million adults have a chronic lung disease, such as COPD and asthma Because these chronic conditions do not have a cure, people need to learn how to manage living with their lung disease In 2012 - 2013 we certified 322 individuals as facilitators for our Better Breathers Clubs American Lung Association Better Breathers Clubs help by providing patient-focused, community-based educational opportunities and support Together, members learn the skills that help them manage their condition and improve their quality of life Hundreds of clubs are serving many thousands of people across the U S living with chronic lung disease Connecting Patient and Families with Expert Advice - In all of our programs and health education materials, people with questions about lung health are referred to the American Lung Association's Lung HelpLine at 1-800-LUNG-USA In fiscal year 2012-2013, the nurses and respiratory therapists who staff the Lung HelpLine answered more than 165,000 calls on topics ranging from clean air to helping a family member quit smoking New Support Tools for People Facing Lung Disease In 2012-2013 we continued to develop exciting new online tools to give new hope to patients with lung cancer, asthma, Chronic Obstructive Pulmonary Disease (COPD) and other lung diseases Our Facing Lung Cancer Support from Day One website (www mylungcancersupport org) is a comprehensive support and educational website focused exclusively on patients and caregivers Our free online support community, The Lung Connection, allows people facing lung disease to get advice and support from their peers These new resources will help patients and caregivers understand their disease, connect with the support they need and better manage their conditions Tobacco Helping Thousands of Smokers to Quit - The American Lung Association's Freedom From Smoking and Not-On-Tobacco (N-O-T) have helped hundreds of thousands of teen and adult smokers quit These community-based programs guide the smokers through the quitting process, helping them to determine their smoking pattern, create an individualized quit plan and navigate the first few weeks as a nonsmoker Because not everyone quits smoking the same way, the Lung Association also offers Freedom From Smoking Online and one-on-one cessation counseling through the Lung HelpLine Through our workplace wellness initiative, we worked with dozens of major employers, helping their employees quit smoking In fiscal year 2012-13, these programs helped tens of thousands of smokers end their addiction to nicotine and transition to a new, smokefree lifestyle Expanding Smokefree Communities - The American Lung Association's Community Transformation Grant-funded initiative Expanding Smokefree Communities supported six projects around the country to address tobacco-related health disparities These projects ranged from making sure multi-unit housing residents were protected from secondhand smoke at home to helping schools in transition to tobacco-free school grounds and events As a result of this initiative, over 7 million more people have access to smokefree and tobacco-free environments Lung Health Disparities Highlighting Disparities in Lung Health - In 2012-2013 we continued to spotlight the ways in which some groups are disproportionately affected by lung disease in our society in the ongoing Disparities in Lung Health Series Our report "Cutting Tobacco's Rural Roots Tobacco Use in Rural Communities," takes a look at the complex factors that contribute to the increased rates of tobacco use and exposure to secondhand smoke in America's rural population Our second report of the year, "Taking Her Breath Away The Rise of COPD in Women " This report examined the burden of chronic obstructive pulmonary disease (COPD), also known as emphysema and chronic bronchitis, among women

4b (Code) (Expenses $ 8,396,083 including grants of $ 7,118) (Revenue $ 7,020,108)

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

4c (Code) (Expenses $ 6,828,195 including grants of $ 5,889,677) (Revenue $ 2,600,000)

RESEARCH Funding research has been a cornerstone of the Lung Association's fight against lung disease for more than a century In 2012-13, our donors again made it possible to fund close to $9 million on high quality researchers seeking treatments and cures for an array of lung diseases from asthma to lung cancer The American Lung Association nationwide research program consists of two programs the Awards and Grants Program and the Asthma Clinical Research Centers The Awards and Grants Program fosters laboratory and patient-centered and social behavior research to prevent, treat and hopefully find a cure for all lung diseases The Asthma Clinical Research Centers is a clinical network of 18 sites and a data coordinating center at Johns Hopkins dedicated to improving patient care for asthma Previous medical advances made possible by the Lung Association's research contributions have shed new light on a multitude of devastating lung diseases In 2012-13, our programs funded close to 90 scientists working on projects such as examining the impact of soy isoflavones in asthma control and whether treatment of sinonasal disease with nasal steroids improves asthma control Additional support in funding this year's research program came from partnerships with AAAAI, the American Asthma Foundation, the CHEST Foundation, GlaxoSmith Kline and the National Institutes of Health The ACRC Network completed two major studies, and the results are to be published sometime soon

(Code) (Expenses $ 4,053,673 including grants of $ 501,750) (Revenue $ 2,433,077)

advocacy and environment

(Code) (Expenses $ 2,746,902 including grants of $ 1,556,350) (Revenue $ 1,205,446)

tobacco control

(Code) (Expenses $ 4,004,619 including grants of $ 3,083) (Revenue $ 3,187,849)

field program development

(Code) (Expenses $ 443,972 including grants of $ 55,000) (Revenue $ 5,037)

asthma

4d Other program services (Describe in Schedule O)

(Expenses $ 11,249,166 including grants of $ 2,116,183) (Revenue $ 6,831,409)

4e **Total program service expenses** ▶ 39,398,235

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*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21 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	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	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	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	Yes	
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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, 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		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Parts II and IV*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the 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		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
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? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		No
23	Did the organization answer "Yes" to Part VII, Section A, 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? *If "Yes," complete Schedule L, Part I*	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, 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)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, 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? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . .	1a	59			
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	130			
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	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year? . . .			3a		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		No
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .			5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . .			6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .			7f		No
g	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.**					
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12 . . .	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			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	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .			14b		

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

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 32			
	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 independent	1b 32			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		No
6	Did the organization have members or stockholders?		6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a	Yes	
b	Each committee with authority to act on behalf of the governing body?		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*		9		No

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

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

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

☑ Own website ☐ Another's website ☑ Upon request ☐ 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 ▶LAURA SCOTT 3000 KELLY LANE Springfield, IL (217) 787-5684

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, 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) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
See Additional Data Table										

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 for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations

		(D)	(E)	(F)
1b	**Sub-Total** . . . . ▶			
c	**Total from continuation sheets to Part VII, Section A** . . . . ▶			
d	**Total (add lines 1b and 1c)** . . . . ▶	1,609,348	0	567,661

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶18

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ALANIZ Metrogroup , 425 N IRIS STREET MT PLEASANT IA 52641	PRINTING	4,959,878
BRICKMILL MARKETING SERVICES , 24 MILL BROOK ROAD WILTON NJ 03086	MARKETING	2,761,383
RR DONNELLY , 1333 SCHEURING ROAD DE PERE WI 54115	PRINTING	2,115,704
MOORE WALLACE LLP , 375 PARK AVENUE NEW YORK NY 10152	PRINTING/STAMPS	2,107,583
INFOCISION MANAGEMENT CORP , 325 SPRINGSIDE DRIVE AKRON OH 44333	TELEMARKETING	1,605,148

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 ▶28

Part VIII **Statement of Revenue**

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . .	1a				
	b	Membership dues	1b 30,602				
	c	Fundraising events	1c				
	d	Related organizations . . .	1d				
	e	Government grants (contributions)	1e 1,420,957				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 7,167,289				
	g	Noncash contributions included in lines 1a-1f $					
	h	**Total.** Add lines 1a-1f . . . . ▶		8,618,848			
Program Service Revenue			Business Code				
	2a	CHARTERED ASSOCIATION ASSESSMENTS	900099	4,819,918	4,819,918		
	b	PROGRAM REIMBURSEMENTS CHARTERED ASSOC	900099	23,387,124	23,387,124		
	c	PROGRAM SERVICE CONTRACTS	900099	3,833,318	3,833,318		
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f . . . . ▶		32,040,360			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . ▶		398,196			398,196
	4	Income from investment of tax-exempt bond proceeds . . ▶		0			
	5	Royalties . . . . ▶		554,195			554,195
			(i) Real / (ii) Personal				
	6a	Gross rents	(i) 9,000 / (ii)				
	b	Less rental expenses	(i) / (ii)				
	c	Rental income or (loss)	(i) 9,000 / (ii) 0				
	d	Net rental income or (loss) . . . . ▶		9,000			9,000
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	(i) 11,895,405 / (ii)				
	b	Less cost or other basis and sales expenses	(i) 11,213,859 / (ii) 2,336				
	c	Gain or (loss)	(i) 681,546 / (ii) -2,336				
	d	Net gain or (loss) . . . . ▶		679,210			679,210
	8a	Gross income from fundraising events (not including $ ______ of contributions reported on line 1c) See Part IV, line 18 . .	a				
	b	Less direct expenses . . .	b				
	c	Net income or (loss) from fundraising events . . ▶		0			
	9a	Gross income from gaming activities See Part IV, line 19 . . .	a				
	b	Less direct expenses . . .	b				
	c	Net income or (loss) from gaming activities . . . ▶		0			
	10a	Gross sales of inventory, less returns and allowances .	a				
	b	Less cost of goods sold . .	b				
	c	Net income or (loss) from sales of inventory . . ▶		0			
		Miscellaneous Revenue	Business Code				
	11a	SERVICE FEES	900099	344,890			344,890
	b	TRUST INCOME	900099	88,617			88,617
	c	VDP PROGRAM	900099	28,840			28,840
	d	All other revenue		46,079			46,079
	e	**Total.** Add lines 11a–11d . . . . . . ▶		508,426			
	12	**Total revenue.** See Instructions . . . . . ▶		42,808,235	32,040,360		2,149,027

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21	8,046,311	8,046,311		
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	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	1,927,295	1,091,702	637,944	197,649
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			
7 Other salaries and wages	4,699,573	3,982,912	68,487	648,174
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	546,743	418,696	58,283	69,764
9 Other employee benefits	801,737	609,152	106,612	85,973
10 Payroll taxes	458,039	350,766	48,827	58,446
11 Fees for services (non-employees)				
a Management	0			
b Legal	418,880	243,134	118,607	57,139
c Accounting	210,853		210,853	
d Lobbying	264,429	264,429		
e Professional fundraising services See Part IV, line 17	0			
f Investment management fees	57,642		57,642	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	3,820,200	3,346,246	116,548	357,406
12 Advertising and promotion	109,381	109,381		
13 Office expenses	385,452	278,055	79,000	28,397
14 Information technology	1,253,911	1,012,052	177,750	64,109
15 Royalties . .	0			
16 Occupancy	1,105,698	702,989	307,007	95,702
17 Travel	477,774	383,040	64,493	30,241
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	385,980	338,995	34,530	12,455
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	219,614	157,321	49,098	13,195
23 Insurance	107,093	62,312	34,139	10,642
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)				
a PUBLIC AWARENESS CAMPAIGN	19,109,972	17,965,940	1,144,032	
b BAD DEBT EXPENSE	608,222		608,222	
c SERVICE CHARGES	5,745	3,364	1,815	566
d MISCELLANEOUS	109,146	31,438	77,688	20
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	45,129,690	39,398,235	4,001,577	1,729,878
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)	1,611,693	962,016	96,485	553,192

Part 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
Assets	1	Cash—non-interest-bearing	467	1	467
	2	Savings and temporary cash investments	6,924,978	2	4,888,014
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	5,718,016	4	3,499,811
	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	5	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	0	6	0
	7	Notes and loans receivable, net	0	7	0
	8	Inventories for sale or use	62,566	8	0
	9	Prepaid expenses and deferred charges	463,313	9	374,472
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D — 10a: 3,098,212			
	b	Less accumulated depreciation — 10b: 2,839,721	477,843	10c	258,491
	11	Investments—publicly traded securities	14,162,982	11	15,329,333
	12	Investments—other securities See Part IV, line 11	0	12	0
	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	3,238,875	15	3,480,087
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	31,049,040	16	27,830,675
Liabilities	17	Accounts payable and accrued expenses	2,513,801	17	1,868,506
	18	Grants payable	3,236,853	18	3,889,180
	19	Deferred revenue	4,043,224	19	5,439,115
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	2,086,108	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	8,832,312	25	8,195,236
	26	**Total liabilities.** Add lines 17 through 25	20,712,298	26	19,392,037
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	5,864,453	27	3,631,338
	28	Temporarily restricted net assets	832,488	28	1,004,215
	29	Permanently restricted net assets	3,639,801	29	3,803,085
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	10,336,742	33	8,438,638
	34	Total liabilities and net assets/fund balances	31,049,040	34	27,830,675

Part XI **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	42,808,235
2	Total expenses (must equal Part IX, column (A), line 25)	2	45,129,690
3	Revenue less expenses Subtract line 2 from line 1	3	-2,321,455
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	10,336,742
5	Net unrealized gains (losses) on investments	5	-110,474
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	533,825
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	8,438,638

Part XII **Financial Statements and Reporting**

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

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

Additional Data

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
DON AWERKAMP PHD JD BOARD MEMBER	2 0	X						0	0	0
SUSAN s GRIFFIN RPA CPM CCIM BOARD MEMBER	2 0	X						0		0
Michael V Carstens BOARD MEMBER	2 0	X						0		0
TIMOTHY D BYRUM MSN CRNP BOARD MEMBER	2 0	X						0		0
ARTHUR CERULLO JD BOARD MEMBER	2 0	X						0		0
CAROLYN H CLIFT LLM BOARD MEMBER	2 0	X						0		0
JOHN F EMANUEL JD secretary/treasurer	2 0	X		X				0		0
KATHRYN A FORBES CPA vice chair	2 0	X		X				0		0
ERNEST V FREEMAN BOARD MEMBER	2 0	X						0		0
Mario Castro BOARD MEMBER	2 0	X						0		0
Kelly A Hamilton BOARD MEMBER	2 0	X						0		0
DARIUS A JOSEPH BOARD MEMBER	2 0	X						0		0
Stephen J Nolan BOARD member	2 0	X						0		0
PAULINE GRANT MS MBA FACHE BOARD MEMBER	2 0	X						0		0
VIRGINIA L HALL BOARD MEMBER	2 0	X						0		0
ELIZABETH BAKER KEFFER BOARD MEMBER	2 0	X						0		0
ROSS P LANZAFAME BOARD chair	2 0	X		X				0		0
VENKATARMA r KOPPAKAMD PHD BOARD MEMBER	2 0	X						0		0
Stephen R O'Kane BOARD MEMBER	2 0	X						0		0
AUSTIN k PUGH BOARD MEMBER	2 0	X						0		0
GERI REINARDY MPA BOARD MEMBER	2 0	X						0		0
ALBERT A RIZZO MD BOARD CHAIR	2 0	X		X				0		0
Harry Perlstadt BOARD MEMBER	2 0	X						0		0
ROBERT G TWEEL JD BOARD MEMBER	2 0	X						0		0
Audrene Lojovich BOARD MEMBER	2 0	X						0		0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
Jane Z Reardon board member	2 0	X						0		0
Angela V Mastrofrancesco board member	2 0	X						0		0
Marcia D Williams board member	2 0	X						0		0
Jonathon K Rosen board member	2 0	X						0		0
Penny J Siewert board member	2 0	X						0		0
Jeffrey T Stein board member	2 0	X						0		0
Honorable walter R Stone Board member	2 0	X						0		
CHARLES D CONNOR thru jan 2013 PRESIDENT & CEO	40 0			X				226,704		73,863
ADRIENNE GIASGOW CHIEF FINANCIAL OFFICER	40 0			X				263,951		80,038
Harold Wimmer as of Feb 2013 president and ceo				X				0		0
SUSAN J RAPPAPORT VP RESEARCH AND PROGRAM	40 0				X			166,178		79,300
PAUL BILLINGS VP NATIONAL POLICY & ADVOCACY	40 0				X			172,050		58,280
B SUSAN DAVIS CHIEF DEVELOPMENT OFFICER	40 0					X		212,390		69,750
JANET WIDMER VP FIELD SUPPORT	40 0					X		162,448		57,869
peter iwanowicz avp, healthy air	40 0					X		132,036		38,839
RUSSELL BURWELL VP GOVERNANCE	40 0					X		143,539		58,965
craig finstad avp, direct response operation	40 0					X		130,052		50,757

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
American Lung Association

Employer identification number
13-1632524

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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 membership fees received (Do not include any "unusual grants ")	14,100,696	18,165,400	11,915,758	10,546,204	8,618,848	63,346,906
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 **Total.** Add lines 1 through 3	14,100,696	18,165,400	11,915,758	10,546,204	8,618,848	63,346,906
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)						0
6 **Public support.** Subtract line 5 from line 4						63,346,906

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	14,100,696	18,165,400	11,915,758	10,546,204	8,618,848	63,346,906
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	584,295	985,737	1,419,418	1,592,243	952,391	5,534,084
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	101,141	165,047	1,024,657	556,293	517,426	2,364,564
11 **Total support** (Add lines 7 through 10)						71,245,554

12 Gross receipts from related activities, etc (see instructions) | 12 | 225,452,538

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) | 14 | 88 914 %

15 Public support percentage for 2011 Schedule A, Part II, line 14 | 15 | 89 567 %

16a **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 ▶☑

b **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 ▶☐

17a **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 **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 ▶☐

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

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 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 ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support.** (Add lines 9, 10c, 11, and 12)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2012** (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from **2011** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2012.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support tests—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 ▶☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶☐

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

Facts And Circumstances Test

Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493129000154

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.

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2012

Open to Public Inspection

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

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-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
American Lung Association	13-1632524

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

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

2 Political expenditures ▶ $ ________

3 Volunteer hours ________

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

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

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

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

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	**(a)** 2009	**(b)** 2010	**(c)** 2011	**(d)** 2012	**(e)** Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a) Yes	(a) No	(b) Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?	Yes		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?	Yes		35,202
d	Mailings to members, legislators, or the public?	Yes		16,198
e	Publications, or published or broadcast statements?	Yes		19,660
f	Grants to other organizations for lobbying purposes?	Yes		3,500
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		167,515
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	Yes		3,834
i	Other activities?	Yes		18,520
j	Total Add lines 1c through 1i			264,429
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

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

Part IV **Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Identifier	Return Reference	Explanation
Schedule C, Part II-B, Line 1(i)		THE AMERICAN LUNG ASSOCIATION VOLUNTEERS AND STAFF ENGAGE IN A WIDE RANGE OF ADVOCACY ACTIVITIES TO FURTHER OUR MISSION TO SAVE LIVES BY IMPROVING LUNG HEALTH AND PREVENTING LUNG DISEASE OUR WORK INCLUDES EFFORTS TO EDUCATE MEMBERS OF CONGRESS, THEIR STAFF AND THE PUBLIC ON LUNG HEALTH ISSUES AND ACCESS TO HEALTHCARE WE ADVOCATE FOR CLEAN, HEALTHY AIR TO REDUCE THE HEALTH IMPACTS OF AIR POLLUTION WE FOCUS ON SUPPORTING THE IMPLEMENTATION AND STRENGTHENING OF THE NATION'S CLEAN AIR LAWS WE STRONGLY SUPPORT THE PUBLIC HEALTH INFRASTRUCTURE AND LUNG HEALTH RESEARCH FUNDING INCLUDING FUNDING FOR LUNG CANCER, CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD), ASTHMA, TUBERCULOSIS AND OTHER LUNG DISEASES FURTHERMORE, THE AMERICAN LUNG ASSOCIATION VOLUNTEERS AND STAFF ACTIVELY ADVOCATE IN WASHINGTON, D C AND IN THE STATES FOR TOBACCO CONTROL LAWS, INCLUDING EFFORTS TO REGULATE TOBACCO PRODUCTS, PROMOTE TOBACCO CESSATION AND ELIMINATE EXPOSURE TO SECOND HAND SMOKE

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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Name of the organization
American Lung Association

Employer identification number
13-1632524

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

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

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

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

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or education)
☐ Preservation of an historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

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

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

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

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

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

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

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

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

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

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

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

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

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

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

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

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

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

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

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

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

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

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

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

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

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . ☐

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

		(a) Current year	(b) Prior year	b (c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	1,030,809	1,099,684	980,525	950,135	636,664
b	Contributions					
c	Net investment earnings, gains, and losses	259,407	-23,972	201,713	97,595	387,717
d	Grants or scholarships	77,218	34,318	72,000	56,728	65,612
e	Other expenditures for facilities and programs					
f	Administrative expenses	11,739	10,585	10,554	10,477	8,634
g	End of year balance	1,201,259	1,030,809	1,099,684	980,525	950,135

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ▶

b Permanent endowment ▶ 41 620 %

c Temporarily restricted endowment ▶ 58 380 %

The percentages in lines 2a, 2b, and 2c should equal 100%

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

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

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		211,648	157,223	54,425
d Equipment		1,942,086	1,781,933	160,153
e Other		944,478	900,565	43,913
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				258,491

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

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

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

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

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

(a) Description	(b) Book value
(1) IN PERPETUAL TRUSTS	3,480,087
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	3,480,087

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

1 (a) Description of liability	(b) Book value
Federal income taxes	0
PENSION AND LIFE INSURANCE BEN	3,978,040
DUE TO CHARTERED ASSOC	1,619,448
AMOUNTS HELD ON BEHALF OF OTHERS	1,940,809
OTHER LIABILITIES	656,939
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	8,195,236

2. Fin 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☑

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

1	Total revenue, gains, and other support per audited financial statements			1	65,826,546
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	-110,474		
b	Donated services and use of facilities	2b	22,594,960		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d	533,825		
e	Add lines **2a** through **2d**			2e	23,018,311
3	Subtract line **2e** from line **1**			3	42,808,235
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
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	42,808,235

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

1	Total expenses and losses per audited financial statements			1	67,724,650
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a	22,594,960		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	22,594,960
3	Subtract line **2e** from line **1**			3	45,129,690
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
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	45,129,690

Part XIII Supplemental Information

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

Identifier	Return Reference	Explanation
Schedule D, Part V, LIne 4	Use of endowment funds	PERMANENTLY RESTRICTED NET ASSETS ARE PRIMARILY DEDICATED TO SUPPORTING RESEARCH SCHOLARS IN INTERSTITIAL RELATED LUNG DISEASES DALSEMER ENDOWMENT IN 1983, LEONARD DALSEMER THE JOHN A HARTFORD FOUNDATION AND THE WHEELABRATOR FOUNDATION ENDOWED THE NATIONAL OFFICE WITH $500,000 (THE CORPUS) TO FUND RESEARCH TO FIND A CURE FOR INTERSTITIAL LUNG DISEASE THE EARNINGS FROM THE CORPUS ARE TO FUND AN ANNUAL RESEARCH AWARD IN A MINIMAL AMOUNT OF $30,000 THE TERM OF EACH AWARD IS THREE YEARS ANNUAL EXPENDITURES ARE LIMITED TO 6% OF THE FAIR MARKET VALUE OF THE ENDOWMENT THE AMERICAN LUNG ASSOCIATION IS TO STRIVE TO GROW THE ENDOWMENT BY SOLICITING ADDITIONAL DONOR CONTRIBUTIONS THE AWARD IS ONLY TO BE CONFERRED WHEN THE REVIEW COMMITTEE DEEMS THE PROPOSED RESEARCH MERITORIOUS MARY FULLER RUSSELL RESEARCH FUND IN A SETTLEMENT ENTERED BY AMERICAN LUNG ASSOCIATION OF NEW HAMPSHIRE ("ALANH") AND NATIONAL OFFICE ("ALA") ON JULY 9, 2003, ALANH AGREED TO SET ASIDE, AS A SEGREGATED FUND, WITHIN ITS ENDOWMENT FUND, THE SUM OF $1,297,643 REPRESENTING ALA'S 10% SHARE, AND TO MAINTAIN SUCH SEGREGATED FUND INTACT FOR THE PURPOSE OF PAYING TO AND ALLOWING ALA TO USE ALL THE INCOME AND THE ANNUAL NET APPRECIATION, IF ANY, IN THE FAIR VALUE OF THE SEGREGATED FUND FOR RESEARCH PURPOSES DETERMINED BY ALA UNDER THE SETTLEMENT, SUCH SEGREGATED FUND IS TO BE HELD FOR ALA'S BENEFIT IN PERPETUITY ALANH AND ALA AGREED THAT DISTRIBUTIONS FROM THE MARY FULLER RUSSELL RESEARCH FUND SHALL BE USED TO SUPPORT RESEARCH INTO LUNG HEALTH ISSUES, AND THAT RESEARCH GRANTS TO RECIPIENTS SHALL BE MADE UNDER THE NAME MARY FULLER RUSSELL RESEARCH FUND
Schedule D, pART x, lINE 2	FIN48 FOOTNOTE	GUIDANCE IN THE AREA OF "ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES" UNDER THE FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ACCOUNTING STANDARDS CODIFICATION CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN, INCLUDING ISSUES RELATING TO FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT THIS STANDARD PROVIDES THAT THE TAX EFFECTS FROM AN UNCERTAIN TAX POSITION CAN BE RECOGNIZED IN THE FINANCIAL STATEMENTS ONLY IF THE POSITION IS "MORE-LIKELY-THAN-NOT" TO BE SUSTAINED IF THE POSITION WERE TO BE CHALLENGED BY A TAXING AUTHORITY THE STANDARD ALSO PROVIDES GUIDANCE ON MEASUREMENT, CLASSIFICATION, INTEREST AND PENALTIES, AND DISCLOSURE THE FISCAL YEARS ENDED 2010, 2011, 2012, AND 2013 ARE STILL OPEN TO AUDIT FOR BOTH FEDERAL AND STATE PURPOSES NATIONAL HEADQUARTERS HAS PROCESSES PRESENTLY IN PLACE TO ENSURE THE MAINTENANCE OF ITS TAX-EXEMPT STATUS, TO IDENTIFY AND REPORT UNRELATED INCOME, TO DETERMINE ITS FILING AND TAX OBLIGATIONS IN JURISDICTIONS FOR WHICH IT HAS NEXUS, AND, TO IDENTIFY AND EVALUATE OTHER MATTERS THAT MAY BE CONSIDERED TAX POSITIONS
SCHEDULE D, Part XII, Line 2D	Audit Committee	The Audit Committee of the Board has the fiduciary responsibility for hiring of the audit firm, the review of the risk issues for the association and the final audit review and package that is accepted by the Board The Committee meets with the audit firm independently from staff during the audit review process and recommends to the Board the acceptance of the Audit and its findings Schedule D, Part XI, Line 2d Reconciliation of Revenue Change in fair value of beneficial interests in trusts $334,299 Change in value of split-interest agreements 56,188 pension and life insurance benefit plan activities 143,338 -------- Total $533,825 ========

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
American Lung Association

Employer identification number
13-1632524

Part I General Information on Grants and Assistance

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

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

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

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

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . ▶ 72

3 Enter total number of other organizations listed in the line 1 table . . . . ▶

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV **Supplemental Information.**

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

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

Additional Data

Return to Form

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

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ALA of California424 Pendleton Way Oakland,CA 94621	94-0362650	501(c)(3)	48,000		FMV		fed & prog grants
ALA of Mid-Atlantic3001 Old Gettyburg Road Camp Hill,PA 17011	25-1825116	501(c)(3)	76,337		FMV		fed & prog grants

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ALA of Midland States1950 Arlingate Lane Columbus,OH 43228	31-4379531	501(c)(3)	295,500		FMV		fed & prog grants
ALA of Mountain Pacific 7420 SW Bridgeport Road Suite 200 Tigard,OR 97224	93-0386887	501(c)(3)	56,947		FMV		fed & prog grants

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ALA of the Northeast21 West 38th Street New York, NY 10018	93-0386887	501(c)(3)	664,289		FMV		fed & prog grants
ALA of the Plains Gulf Region 2325 Severn Avenue suite 8 Metairie, LA 70001	63-0320189	501(c)(3)	141,214		FMV		fed & prog grants

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ALA of the Southeast6852 Belfort Oaks Place Jacksonville,FL 32216	59-0662271	501(c)(3)	68,000		FMV		fed & prog grants
ALA of the Southwest5600 Greenwood Plaza Blvd suite 10 Greenwood Village,CO 80111	86-0111676	501(c)(3)	349,379		FMV		fed & prog grants

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ALA of the Upper Midwest 3000 Kelly Lane Springfield, IL 62707	20-4392201	501(c)(3)	416,767		FMV		fed & prog grants
Albany Medical College47 New Scotland Avenue Albany Albany, NY 12208	14-1338310	501(c)(3)	32,500		FMV		Research

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Baylor College of Medicine One Baylor Plaza Houston,TX 770303411	74-1613878	501(c)(3)	108,750		FMV		Research
Biomedical Research Institute of New Mexico1501 San Pedro Drive Building 14 Albuquerque,NM 87108	85-0374063	501(c)(3)	40,000		FMV		Research

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Brigham & Women's Hospital 75 Francis Street Boston, MA 02115	04-2312909	501(c)(3)	100,000		FMV		Research
Children's Hospital Boston PO 414413 Boston, MA 02241	04-2774441	501(c)(3)	107,500		FMV		Research

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Children's Hospital Medical Center-Cincinnati3333 Burnet Ave Cincinnati, OH 45229	31-0833936	501(c)(3)	40,000		FMV		Research
Clean Air Watch1250 Connecticut Avenue Washington, DC 20036	34-2025788	501(c)(3)	30,000		FMV		asthma

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Columbia University116th St and Broadway New York, NY 10027	15-5598093	501(c)(3)	46,875		FMV		Research
Duke UniversityBox 104132 Durham, NC 27708	56-0532129	501(c)(3)	139,850		FMV		Research

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Farmingdale State University 35 State Street Albany, NY 12207	23-7046497	501(c)(3)	33,380		FMV		Research
H Lee Moffitt Cancer Center and Research Institut12902 Magnolia Drive Tampa, FL 33612	59-2451713	501(c)(3)	100,000		FMV		Research

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Johns Hopkins University 1101 E33rd Street Baltimore, MD 21218	52-0595110	501(c)(3)	807,500		FMV		Research
Louisiana State University Health Sciences Center433 Bolivar Street New Orleans, LA 70112	72-6087770	government	84,150		FMV		Research

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Massachusetts General Hospital55 Fruit Street Boston,MA 02114	04-1564655	501(c)(3)	72,195		FMV		Research
McLean Hospital115 Mill Street 228 Belmont,MA 02478	04-3362620	501(c)(3)	39,932		FMV		Research

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
National Jewish Medical and Research Center1400 Jackson Street Denver, CO 80206	74-2044647	501(c)(3)	145,050		FMV		Research
New York Medical College Women's and Children Cent 40 Sunshine Cottage Rd Valhalla, NY 10595	13-1099420	501(c)(3)	119,850		FMV		Research

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Newmours Children Clinic 807 Childrens Way jacksonville,FL 32207	59-0634433	501(c)(3)	118,750		FMV		
North Shore Long Island Jewish300 Community Drive Manhasset,NY 11030	11-1562701	501(c)(3)	97,750		FMV		Research

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Northwestern University619 Clark Street Evanston,IL 60208	36-2167817	501(c)(3)	164,971		FMV		Research
NYU School of Medicine545 First Avenue New York,NY 10016	13-5562308	501(c)(3)	55,025		FMV		Research

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Oregon Health & Science University3181 SW Sam Jackson Park Road Portland,OR 97239	93-1176109	government	32,500		FMV		Research
Regents of the Univ of CA San Diego9500 Gilman Drive La Jolla,CA 92093	95-6006144	501(c)(3)	190,450		FMV		Research

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Regents of the University of California Irvine1400 Biological Sciences III Irvine,CA 92697	95-2226406	501(c)(3)	100,000		FMV		Research
Regents of the University of California SF3333 California St Suite 315 BO 09 San Francisco,CA 94118	94-6036493	501(c)(3)	172,500		FMV		Research

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Regents of Univ of Michigan 3003 S State Street Ann Arbor, MI 48109	38-6006309	501(c)(3)	72,500		FMV		Research
Rhode Island Hospital593 Eddy Street Providence, RI 02903	05-0258954	501(c)(3)	38,723		FMV		Research

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Rutgers University School of Public Health7 College Avenue Winant Hall New Brunswick, NJ 08901	22-6001086	government	40,000		FMV		Research
Sanford-Burnham Medical Research Institute10901 North Torrey Pines Road La Jolla, CA 92037	51-0197108	501(c)(3)	32,500		FMV		Research

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Seattle Biomedical Research Institute307 Westlake Ave N Suite 500 Seattle, WA 98109	91-0961784	501(c)(3)	32,500		FMV		Research
St Joseph's Hospital and Medical Center700 Rosedale Avenue st Louis, MO 63112	95-1643359	501(c)(3)	39,829		FMV		Research

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
St Vincent of IndianaSt ViNcent Indianapolis,IN 46260	35-0869066	501(c)(3)	18,800		FMV		
Stanford University3145 Porter Drive Palo Alto,CA 94304	94-1156365	501(c)(3)	112,500		FMV		Research

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
State University of NY - Stony BrookPO 9 Albany, NY 12201	13-1099420	501(c)(3)	40,000		FMV		Research
The Children's Hospital of SeattlePO 50020 Seattle, WA 98145	23-1352166	501(c)(3)	32,500		FMV		Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Ohio State University Research Foundation1960 Kenny Road Columbus, OH 43210	31-6401599	501(c)(3)	97,750		FMV		Research
The Trustees of the University of Pennsylvania BRBII/III 438 421 Curie Blvd Philadelphia, PA 19104	23-1352685	501(c)(3)	80,000		FMV		Research

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
The University of North Carolina at Chapel Hill104 Airport Drive Suite 2200 Camp Chapel Hill, NC 27599	59-1711424	501(c)(3)	38,869		FMV		Research
The University of Texas MD Anderson Cancer Cente1515 Holcombe Blvd Houston, TX 77030	74-6001118	government	140,000		FMV		Research

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
The University of Wisconsin 600 Highland Ave Madison, WI 53792	39-0743975	501(c)(3)	80,000		FMV		Research
Trustees of Boston University B U Medical Campus72 East Concord St Boston, MA 02118	04-2103547	501(c)(3)	165,000		FMV		Research

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Uniformed Services University of the Health Scienc6720-A Rockledge Drive Bethesda,MD 20817	52-1317896	government	20,930		FMV		Research
University Medical of South Florida - Miamipo box 025405 miami,FL 33102	59-0624458	501(c)(3)	47,925		FMV		Research

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
University Medical of South Florida - Tampa3802 Spectrum Blcd tampa, FL 33612	59-2959590	501(c)(3)	47,025		FMV		Research
University of Alabama at BirminghamUniversity Station Birmingham, AL 35294	63-6005396	501(c)(3)	65,000		FMV		Research

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
University of ArizonaPO Box 3308 Tucson,AZ 85722	74-2652689	501(c)(3)	133,800		FMV		Research
University of Chicago5801 South Ellis Avenue Chicago,IL 60637	36-2177139	501(c)(3)	40,000		FMV		Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Illinois at Urbana-Champaign601 S Mathews Avenue Urbana,IL 61801	37-6000511	government	180,000		FMV		Research
University of IowaB5 Jessup Hall Iowa City,IA 52242	42-6004603	government	93,673		FMV		Research

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
University of Lousiville Research Foundation Stevenson Hall 520 Louisville, KY 40290	61-1029626	501(c)(3)	40,000		FMV		Research
University of Missouri - Kansas City5100 Rockhill Road Kansas City, MO 641102499	43-6003859	government	102,750		FMV		Research

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
University of Montana32 Campus Drive Missoula, MT 59812	42-6004813	government	40,000		FMV		Research
University of New Mexico1 University Drive Albuquerque, NM 87131	85-0275408	government	40,000		FMV		Research

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
University of Pittsburgh4200 Fifth Ave Pittsburgh, PA 15260	25-0965591	501(c)(3)	240,000		FMV		Research
University of Rochester910 Genesee Street 200 Rochester, NY 14611	16-0743209	501(c)(3)	40,000		FMV		Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Tampa401 West Kennedy Blvd Box M Tampa, FL 33606	59-0624459	501(c)(3)	33,590		FMV		Research
University of Vermont85 South Prospect Street Burlington, VT 05405	03-0179440	501(c)(3)	102,750		FMV		Research

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
University of VirginiaPO Box 400202 Charlottesville,VA 22904	54-6001796	501(c)(3)	147,250		FMV		Research
UT Southwestern Medical Center5323 Harry Hines Blvd Dallas,TX 75390	75-2556007	501(c)(3)	40,000		FMV		Research

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Wake Forest University of Health StudiesMedical Center Blvd Winston Salem, NC 27157	22-3849199	501(c)(3)	32,500		FMV		Research
Washington University School of Medicine902 Yalem Box 8052 660 S Euclid A St Louis, MO 63110	43-0653611	501(c)(3)	265,500		FMV		Research

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Wayne State University5057 Woodward Avenue 13th Fl Detriot, MI 48202	38-3555142	501(c)(3)	40,000		FMV		Research
Yale University2 Whitney Avenue 6th Fl New Haven, CT 06511	06-0646973	501(c)(3)	32,500		FMV		Research

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
American Lung Association

Employer identification number
13-1632524

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	**2**		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ☑ Compensation committee ☐ Written employment contract ☑ Independent compensation consultant ☑ Compensation survey or study ☑ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	**4c**		No
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	**5b**		No
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization? If "Yes," to line 6a or 6b, describe in Part III	**6b**		No
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

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

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

Note. The sum of columns (B)(i)-(iii) 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 W-2 and/or 1099-MISC compensation			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation reported as deferred in prior Form 990
		(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
(1)CHARLES D CONNOR thru jan 2013 PRESIDENT & CEO	**(i)**	223,704		3,000	64,109	9,754	300,567	
	(ii)							
(2)ADRIENNE GlASGOW CHIEF FINANCIAL OFFICER	**(i)**	263,951			70,444	9,594	343,989	
	(ii)							
(3)B SUSAN DAVIS CHIEF DEVELOPMENT OFFICER	**(i)**	212,390			60,366	9,384	282,140	
	(ii)							
(4)SUSAN J RAPPAPORT VP RESEARCH AND PROGRAM	**(i)**	166,178			60,340	18,960	245,478	
	(ii)							
(5)JANET WIDMER VP FIELD SUPPORT	**(i)**	162,448			57,031	838	220,317	
	(ii)							
(6)PAUL BILLINGS VP NATIONAL POLICY & ADVOCACY	**(i)**	172,050			57,444	836	230,330	
	(ii)							
(7)peter iwanowicz avp, healthy air	**(i)**	132,036			38,028	811	170,875	
	(ii)							
(8)RUSSELL BURWELL VP GOVERNANCE	**(i)**	143,539			49,786	9,179	202,504	
	(ii)							
(9)craig finstad avp, direct response operation	**(i)**	130,052			41,626	9,131	180,809	
	(ii)							

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

Identifier	Return Reference	Explanation
Schedule J, Part II, LINE 1		EMPLOYER SUBSIDIZED PARKING OF $3,000 WAS PROVIDED TO THE PRESIDENT AND WAS INCLUDED IN HIS W-2 AS TAXABLE INCOME Schedule J, Part II, LINE 2 ALA MAINTAINS A 457(B) DEFERRED COMPENSATION PLAN FOR EXECUTIVE LEVEL EMPLOYEES THE CFO MADE CONTRIBUTIONS OF $30,000 DURING THE YEAR TO THE PLAN

Additional Data

Return to Form

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation (i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
CHARLES D CONNOR thru jan 2013	(i) (ii)	223,704		3,000	64,109	9,754	300,567	
ADRIENNE GIASGOW	(i) (ii)	263,951			70,444	9,594	343,989	
B SUSAN DAVIS	(i) (ii)	212,390			60,366	9,384	282,140	
SUSAN J RAPPAPORT	(i) (ii)	166,178			60,340	18,960	245,478	
JANET WIDMER	(i) (ii)	162,448			57,031	838	220,317	
PAUL BILLINGS	(i) (ii)	172,050			57,444	836	230,330	
peter iwanowicz	(i) (ii)	132,036			38,028	811	170,875	
RUSSELL BURWELL	(i) (ii)	143,539			49,786	9,179	202,504	
craig finstad	(i) (ii)	130,052			41,626	9,131	180,809	

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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

2012

Open to Public Inspection

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

Identifier	Return Reference	Explanation
Form 990, Part III, Line 4d	other program service accomplishments	ADVOCACY Every year, the American Lung Association fights to defend your right to breathe healthy air, free of pollution or tobacco smoke and to support government programs that be nefit lung health In 2012-2013, our advocacy efforts again yielded significant victories LUNG DISEASE The Lung Association w as once again instrumental in leading the fight keep f ederal resources focused on lung disease In April, thanks to the extraordinary efforts of our volunteers across the nations, the U S Food and Drug Administration's (FDA) made the decision to include lung cancer and interstitial lung disease in its Patient Focused Drug Development (PFDD) program The PFDD program is important because it looks at disease tre atment from the patient's perspective - its impact on patients' daily lives, the types of treatment benefits that matter most to patients, and patients' perspectives on the adequac y of available therapies HEALTHY AIR Our Healthy Air Campaign continued in its fight to p rotect the Clean Air Act from attempts to w eaken the law, and to push the Environmental Pr otection Agency (EPA) to implement its lifesaving protections This year, w e celebrated se veral major milestones in cleaning up the air w e all share The Lung Association successfu lly pushed the EPA to strengthen the limits on year-round particle pollution (soot) for th e first time since 1997 Scientists have found that these w idespread microscopic particles cause premature death at levels w ell below w hat had been considered safe The Lung Associ ation took action because stronger standards drive the cleanup of pollution The Lung Asso ciation also successfully pushed EPA to propose new cleaner gasoline and vehicle standards If adopted, these standards w ill help areas across the nation have much healthier air as soon as the gasoline is in use In April, our in-depth report "A Penny for Prevention Th e Case for Cleaner Gasoline and Vehicle Standards" shed light on the major health benefits of cleaner gasoline and vehicle standards For the first time, the EPA proposed carbon po llution standards for new pow er plants, and the Lung Association marshalled volunteers to speak out to EPA about the dangerous health effects climate change w ould have on people w i th lung disease like asthma and COPD We issued our 14th annual "State of the Air" report (w w w stateoftheair org), w hich show s that the air quality in many places has improved, but that more than 131 million people-42 percent of the nation-still suffer pollution levels t hat are often too dangerous to breathe TOBACCO CONTROL The 2009 Family Smoking Prevention and Tobacco Control Act is under threat from the cigar industry and the makers of the bur geoning, but little understood and entirely unregulated electronic cigarettes The Lung As sociation is fighting to make sure the FDA regulates all tobacco products, including e-cig arettes, candy-flavored cigars and other cigars Our signature report, "State of Tobacco C ontrol 2013" (w w w stateoftobaccocontrol org) report closely follow ed Big Tobacco's money t rail, revealing a high-spending, deep-pocketed tobacco industry determined to maintain its market share at the expense of the health of our kids and current smokers Meanw hile, fed eral w atchdogs largely abandoned the role they must play in stopping this rogue industry Our fifth annual report "Helping Smokers Quit Tobacco Cessation Coverage 2012," The Unite d States is at a tipping point w hen it comes to policies that help smokers quit, and that the federal and state governments still need to do more to help smokers quit, despite the reality that helping smokers quit saves both lives and money SUPPORT OF AMERICAN LUNG ASS OCIATION CHARTERED ASSOCIATIONS field Program Development The American Lung Association na tional headquarters supports its 9 chartered associations through coaching, training, cons ultation and technical assistance American Lung Association staff and volunteers througho ut the country are provided skill-building and other learning opportunities to help them s uccessfully deliver the American Lung Association's mission Through implementation of the se staff learning and volunteer development offerings, chartered associations are kept cur rent on best practices in lung health programs and delivery, advocacy, financial managemen t, fundraising, leadership development and volunteer management One-on-one coaching and c onsultation by national headquarters staff is offered as needed or requested Individual d iscipline groups (e g chief executive officers, chief financial officers, chief developme nt officers, program managers, etc) meet regularly w ith national headquarters peers to sh are ideas, problem-solve, and netw ork. The American Lung Association conducts a nationw ide volunteer and staff recognition program Volunteers and staff are recognized on an ongoin g basis for outstanding performance An annual recognition ceremony is held at a meeting o f the American Lung Association Board of Directors

Identifier	Return Reference	Explanation
Form 990, Part III, Line 4d	other program service accomplishments	and Nationwide Assembly where awards for highest achievement are given in specific categories The American Lung Association Board of Directors provides strategic direction for the national headquarters and its chartered associations Coordination and monitoring of national and chartered association strategic alignment is provided through a Board-approved metric-based performance management system The American Lung Association Board of Directors is responsible for oversight of chartered association compliance to policies and performance standards Assistance is provided by the national headquarters to those chartered associations that do not meet requirements and/or standards Asthma Supporting Asthma Management and Asthma-Friendly Learning Environments - The Lung Association works with schools nationwide to create healthy learning environments to keep students healthy, in school and ready to learn In 2012-2013, we recognized four schools nationwide for their efforts in creating asthma-friendly schools Three elementary schools were awarded AFSI Champion Gold Awards for meeting all 20 components of the Asthma-Friendly Schools Initiative, and one elementary schools was awarded an AFSI Champion Silver award for meeting almost all of the components In the 2012 - 2013 school year, over 9,227 students in 28 states were reached through the Open Airways For Schools program, a health education program that builds self-management skills for students with asthma We certified 546 individuals as OAS Certified Facilitators in FY13 In addition, we disseminate numerous tools and resources to help children and adults living with asthma better understand and manage their disease, including the Lungtropolis online asthma game, Asthma Basics, and how-to videos We also performed an extensive revision of existing asthma education content on the American Lung Association website, www lung org so we can continue to provide the best support and most up-to-date support for people with asthma

Identifier	Return Reference	Explanation
Form 990, Part VI, Section b		Line 11 Review process of Form 990 The American Lung Association prepares its Form 990 and submits it to an outside accounting firm for review ALA has established the following review process to ensure that the information reported is complete and accurate once the Form 990 is prepared, reviewed by management and the accounting firm, and ready to be filed with the Internal Revenue Service, it is submitted electronically to members of the organization's delegated responsible body, the Audit Committee, for approval After approval by the audit committee, the members of the governing body have 10 days to review the form, they then meet by conference call to review any comments by the group and agree to any changes that may need to be made to the form prior to its submission to the Internal Revenue Service All comments are documented, addressed and finalized in the 990 before the submission Line 12 Conflict of Interest Policy ALA currently has in place a conflict of interest policy which it monitors and enforces annually and has a standing Governance Committee that oversees its execution The Organization currently mandates that all members of the governing body, committee members and all staff annually sign a conflict of interest policy and disclose any potential or actual conflicts that may exist The signed conflict of interest policy statements are submitted to the Governance Committee These statements are reviewed for potential or actual conflicts If a potential or actual conflict of interest exists, the Governance committee will notify members of management and/or the governing body about such conflict and investigate the conflict and its possible effect If the Governance Committee determines that an actual or apparent conflict exists, it will inform the governing body and/or management of its decision The conflicted individual will not be allowed to vote or be a part of any decisions about any such transactions that have to do with the conflict until such time as the Governance Committee determines there is no longer a conflict Line 15 Compensation Review pROCESS The American Lung Association has established a compensation policy for ITS leadership committee to follow in establishing the compensation for ITS CEO, top management official, other officers or key employees The policy mandates that executive compensation be periodically reviewed by the committee and that the committee should be free of conflicts of interest In addition, the approving committee needs to review appropriate and adequate data to determine the reasonableness of the compensation being considered The committee may use a variety of information and studies that are available to determine that the appropriate level of compensation is being paid to its executives The committee's decision on the amount of compensation paid is documented in a contemporaneously written format AND documentS the date of the decision, the members present during the meeting and those who voted on it, the details of the transaction that was approved and the comparabABILITY datA used and relied upon to make the decision ALA did a compensation review for the CEO when he was hired in January 2013 the most recent compensation review process for All other officers and key employees was last done in December 2010

Identifier	Return Reference	Explanation
Form 990, part vi, section c		Line 17 States with which a copy of the Form 990 is filed AL, AK, AZ, AR, GA, IL, KS, KY, ME, MD, MA, MN, MS, NH, NM, NC, ND, OH, OK, OR, RI, SC, TN, VA, WA, WV, WI, PA, NY, NJ, MI, FL, CT, CA, CO, DC, HI Line 19 Forms available to public The three most recent years of Form 990 and Annual Reports are available on American Lung Association's website www lung org Governing documents and conflict of interest policy are available to the public upon request Our website also provides the names of our Board of Directors and our Ethics Policy

Identifier	Return Reference	Explanation
Form 990, Part XI, Line 9	Other Changes in net assets or fund balances	Change in value of beneficial interestS in trustS $334,299 Change in FAIR value of split-interest agreements 56,188 pension and LIFE INSURANCE BENEFIT PLAN ACTIVITIES 143,338 -------- Total $533,825 ======== FORM 990, Part XII, Line 2c Financial Statements and Reporting The joint Finance/Audit Committee of the Board has the fiduciary responsibility for hiring of the audit firm, the review of the risk issues for the association and the final audit review and package that is accepted by the Board The Committee meets with the Audit firm independently from staff during the audit review process and recommends to the Board the acceptance of the Audit and its findings