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232001 12-10-12

Department of the Treasury Internal Revenue Service

A For the 2012 calendar year, or tax year beginning

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)

OMB No 1545-0047

▶ The organization may have to use a copy of this return to satisfy state reporting requirements 2012

and ending JUN 30,

JUL 1,

Open to Public Inspection

В	Check if applicable	C Name of organization			D Employer identifi	cation number			
_	Addres		. T. T. MIN/OD DEGES	D 411					
┝	change Name		AIN TUMOR RESEA	RCH		245002			
F	change lnitial			D = = = /=		345903			
늗	Iretum Termin	Number and street (or P.O. box if mail is not deli	•	Room/suite	1 — ,				
┝	lated Amend	07 E. WELDON		307	(480) 419-4516 214,699.			
F	iretum Applica	City, town, or post office, state, and ZIP code PHOENIX, AZ 85012	•		G Gross receipts \$				
L.	tion pendin	PHOENIX, AZ 85012 F Name and address of principal officer:WENI	OV KYAE W D		H(a) is this a group re	Yes X No			
			ISDALE, AZ 852.	50					
$\overline{}$	Tayloyo		◀ (insert no.) 4947(a)(1)		1	luded?YesNo			
		e: www.SSBTR.org organization: X Corporation Trust Ass	sociation Other	I Vear	of formation: 2003	State of legal domicile: AZ			
		Summary	- Caron p	L TOU	oriormation. 2005 i	otate of legal dofficile. 2121			
	4 .	Briefly describe the organization's mission or most	significant activities: RATS	E MONF	Y FOR RESEA	RCH FOR THE			
& Governance		PREVENTION AND TREATMENT			i i dit itabar	1011 1011 1111			
T Ta	2	Check this box if the organization discor			than 25% of its net as	ssets.			
Ve	3 1	Number of voting members of the governing body (3	15			
Ğ	4 1	Number of independent voting members of the gov	•	•	4	14			
Š	5 7	Total number of individuals employed in calendar y			5	0			
ΞĚ	6 7	otal number of volunteers (estimate if necessary)			6	0			
Activities	7a 7	otal unrelated business revenue from Part VIII, col	lumn (C), line 12		7a	1.			
_		Net unrelated business taxable income from Form 9	990-T, line 34		7b	0.			
					Prior Year	Current Year			
<u>Φ</u>	. 8	Contributions and grants (Part VIII, line 1h)			231,302.	214,698.			
Revenue	9 F	Program service revenue (Part VIII, line 2g)			0.	0.			
ě	10 I	nvestment income (Part VIII, column (A), lines 3, 4,	and 7d) .		1.	1.			
٠,	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c,	9c, 10c, and 11e)		<34,014.				
_	12	otal revenue - add lines 8 through 11 (must equal	Part VIII, column (A), line 12)		197,289.	202,880.			
	13 (Grants and similar amounts paid (Part IX, column (A	A), lines 1-3)		187,000.	175,500.			
	14 E	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
S	15 9	Salaries, other compensation, employee benefits (F			0.	0.			
Expenses	16a F	Professional fundraising fees (Part IX, column (A), Ir		_ ·	0.	0.			
Š	- b	otal fundraising expenses (Partix edicitin liv), in		<u>00.</u>					
ш	117	Other expenses (Part IX, colu mn (A), lines 11a-11d,			11,086.	15,316.			
	18	Fotal expenses. Add lines 38 17 (must equal Part)	(gcolumn (A), line 25)		<u> 198,086.</u>	190,816.			
	19 H	Revenue less expenses \$ 200 act line 18 from line	12 [0]		<797.				
ts or		CODENIA		Be	ginning of Current Year	End of Year			
SSe	20	Total assets (Part X, line 16) OGDEN, U	<u> </u>	_	9,371.	21,435.			
Net Assets	21	otal liabilities (Part X, line 26)		· ·	0.	0.			
급	⊒ 22 ≀ art II	Net assets or fund balances. Subtract line 21 from Signature Block	line 20		9,371.	21,435.			
_			unaludina accompanyina cohodula	o and statem	ents and to the heat of m	v knowledge and helief it is			
		ties of perjury, I declare that I have examined this return, , and complete. Declaration of preparer (other than office				y knowledge and belief, it is			
	5, 6011661	(100 - 60)	1) is based on an information of wi	ilicii preparei	ilas any knowledge.	13			
Sig		Signature of officer	W W		Date	<u> </u>			
		WENDY KAYE, M.D., PRES	TDENT						
WENDY KAYE, M.D., PRESIDENT Type or print name and title									
_		Print/Type preparer's name	Preparer's signature		Date Check	PTIN			
Pai			DAVID M. AMSTER		. 0 / 29 / 13 self-employ				
		Firm's name Amster & Willis,	C.P.A.'s, P.C.		Firm's EIN	86-0441438			
	e Only	Firm's address 67 East Weldon,			141110 CH4				
		Phoenix, AZ 8501			Phone no. (602) 279-0734			
Ma	y the IR	S discuss this return with the preparer shown abo				X Yes No			

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

Form **990** (2012)

	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 None
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No If "Yes," describe these changes on Schedule O.
\$ 	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 \$ including grants of \$ 175,500.) (Revenue \$
	TO FIVE ORGANIZATIONS INVOLVED IN THE PREVENTION AND TREATMENT OF BRAIN TUMORS
b	(Code) (Expenses \$ including grants of \$) (Revenue \$
	PROMOTE EDUCATION AND LEADERSHIP RULES FOR HIGH SCHOOL STUDENTS. 7 CURRENT HIGH SCHOOL STUDENTS ARE SERVING ON THE BOARD OF DIRECTORS.
łc	(Code) (Expenses \$
	ACT AS AN OUTREACH TO SUPPORT AFFECTED INDIVIDUALS AND THEIR FAMILIES.
	Other program services (Describe in Schedule O.)
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$) Total program service expenses > 175,500.

			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_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			.
4	public office? If "Yes," complete Schedule C, Part I	_3_		X
-	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		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4		
J	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			- 22
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
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		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		x
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		X
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		<u>x</u>
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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	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	44.		
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	11c		<u> </u>
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		x
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
þ	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		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			,,
40	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	40		• •
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		X
17	and the second of the second o	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17		
	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	13	43	
	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990	(2012)

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 71 if "Yes," complete Schedule, Parts and if. 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 71 if "Yes," complete Schedule, Parts and if. 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 inglete compensated employees? if "Yes," complete Schedule Schedule Schedule IX. If "Yes," 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 inglete compensation of the organization in the list day of the year, that was issued after December 31, 2002? If "Yes," answer lines 240 through 24d and complete Schedule K, If "No", go to line 25 24a Did the organization maintain an escrow account other than a refunding secrow at any time during the year? 24b Did the organization maintain an escrow account other than a refunding secrow at any time during the year? 24c Did the organization and a sain or in ehalf off issuer for bonds outstanding at any time during the year? 25c Section 50 (ICS) and 50 (ICI) organizations. Did the organization engage in an excess benefit transaction with a disqualified person and a disqualified person and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part II 25c Schedule L, Part I 26c Value as I 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 season of the season of the part of the area of the part of the organization's part of the assistance to an efficient organization prov	•			Yes	No
22 Det the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), the 27 if Yes, "complete Schedule I, Parts I and III." 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 II." 24 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 II." If It is a subject to the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24 Det the organization maintain an escrow account other than a refunding escrow at any time during the year? 25 Section 5016(x)3 and 5016(x)4) and 5016(x)4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I. Part II and that the transaction has not or year, and that the transaction has not or year activated by the organization and year the region of the organization specified person during the year? If "Yes," complete Schedule I. Part II and that the transaction has not or year organization and year the region of the organization specified person during the year? If year, complete Schedule I. Part II and that the transaction has not or year organization and year the organization provide a grant or other assistance to an officer, director, trustee, key employee, highest compensated employee, or disqualfied person during the part II and the organization provide a grant or other assistance to an officer, director, trustee, key employee? If Yes, complete Schedule I. Part IV any organization apart to a business transaction with one of the following parties (see Schedule II. Pa	21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
column (A), line 27 ii "Yes," complete Schedule i, Parts I and iii 22 X 23 Dd the organization aware "Yes 1 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 I, "No", go to line 125. 24 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 I, "No", go to line 125. 25 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 26 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 27 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 28 Did the organization and so the standard of "issuer for bonds outstanding at any time during the year? 29 Did the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? 29 Did 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 is prior Forms 990 or 990 E27 if "Yes," complete Schedule L, Part II 29 Did the organization ayare 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 is prior Forms 990 or 990 E27 if "Yes," complete Schedule L, Part III 29 Did the organization part of the end of the organization's tax year? If "Yes," complete Schedule L, Part III 29 Did the organization reported a grant a selection committee member, or to a 35% controlled entity or family member of a current of former officer, director, trustee, or key employee (or a farmly member thereof) was an officer, director, trustee		United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	_X	
23 Dt 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, frustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. 24 Du the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10,000 as of the list 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 25 Did the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any tax-evempt bonds? 26 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 27 Death the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 28 Section SO1(x)3 and SO1(x)4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person timing the year? If "Yes," complete Schedule L, Part I "Ess to 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 with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person outstanding as of the end of the organization from \$90 or 990-EZ? If If Its, ormplete Schedule L, Part I I "Ess to omplete Schedule L, Part I I "Ess to omplete Schedule L, Part I I "Ess to omplete Schedule L, Part I II I I I I I I I I I I I I I I I I	22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule L and to 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 24 through 24d and complete Schedule K, If "No", go to fine 25 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b		column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
Schedule J 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 5 Did the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds? 6 Did the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds? 7 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year of defease any tax-exempt bonds? 8 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 9 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 9 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 9 Did the organization act as an "on behalf of" issuer for bonds outstanding as of the organization with a disqualified person unit a prior year. 9 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 9 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 9 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 9 Did the organization on the year? If "Yes," complete Schedule L, Part III and that the transaction was not been reported on any of the organization and only of the organization on the end of the organization provide a grant or other assistance to an officer, director, trustee, key employee, highest compensed on provide a grant or other assistance to an officer, director, trustee, key employee, highest compensed of any of the sepanization part or the organization of the organization receive any payment of the organization and part IV as ano	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
24a Did the organization have a tax-exempt bond issue with an outstanding pmopal 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 b Did the organization nivest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization nivest any proceeds of tax-exempt bonds beyond a temporary period exception? 24c Did the organization nivest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d Did the organization nivest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d Did the organization nivest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d Did the organization and so the solid process of the organization of the organization and that the transaction during the year? 25d Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage 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 cf. 27 if Yes," complete Schedule L, Part I 25b X 27d Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, highest compensated employee, or disqualified person on unitational part of the end of the organization's prior If Yes, complete Schedule L, Part III 27d Did the organization party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable fining thresholds; conditions, and exceptions) 28d A current or former officer, director, trustee, or key employee (if Yes, complete Schedule L, Part IV instructions for applicable fining thresholds; conditions, and exceptions) 28d A current or former officer, director, trustee, or key employee (if Yes, complete Schedule L, Part IV instructions for applicable fining thresholds; conditions, and contributions of If		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
alsat 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 b Did the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds? d Did the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization aware that it engaged in an excess benefit transaction with a disqualified person on one that the transaction has not been reported on any of the organization for Forms 990 or 990-E2? If "Yes," complete Schedule L, Part II 25a		Schedule J	23		<u>X</u>
Schedule K. If "No.", go to line 25 D do the organization invest any proceeds of tax exempt bonds beyond a temporary penod exception? D dithe organization martian an escrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds? 26 D dith de organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 26 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 II 25 Section 501(c)(3) and 501(c)(4) organizations. Did the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's proof Forms 990 or 990-E2? If "Yes," complete Schedule L, Part II 25 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 III 26 Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified 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 IV 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28 A current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee? If "Yes," complete Schedule II, Part IV 29 D dit the organization receive contributions of art, histonical treasures, or other similar assets, or qualified conservation contributions? If	24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 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? d Did the organization act as an 'on behalf of 'issuer for bonds outstanding at any time during the year? 24d 25S Section 501((3)) and 501((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 X b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If 'Yes,' complete Schedule L, Part II 25b 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 26b Was a loan to or by a current or other assistance to an officer, director, trustee, key employee, bighest compensated employee, or disqualified person outstanding as of the end of the organization is provided a grant or other assistance to an officer, director, trustee, key employee, bighest compensated employee, or disqualified person outstanding as of the end of the organization is provided a grant or other assistance to an officer, director, trustee, key employee, and the provided and the provided person in a provided person in a provided provided person in a provided person in a provided person with a disqualified person in a provided person and that the transaction with one of the following parties (see Schedule L, Part IV 27 27 28 Was the organization receive thereof is a single provided person in a provi		last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
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? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d		Schedule K. If "No", go to line 25	24a		X
any tax exempt bonds? d Dd the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 601(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 X b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E72" If "Yes," complete Schedule L, Part I 25b X 27	b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 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 25b X 25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person unit 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 II 25b X 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 III 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 IV 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable fling thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28 A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28 A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 29 Did the organization and the secure more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule I, Part IV 30 Did the organization receive contributions of art, histonical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule I, Part II, II 31 Did the organization one of the secure and particles of	С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
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 256		any tax-exempt bonds?	24c		
disqualified person during the year? If "Yes," complete Schedule L, Part I b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a pnor year, and that the transaction has not been reported on any of the organization's pnor Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part II 25b X 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 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 IV 27 As members of any of these persons? If "Yes," complete Schedule L, Part IV 28b A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b A family director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b A family director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b A family director, trustee, or director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b A family director, trustee, or director, trustee, or key	d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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 pione Forms 990 or 990-E2? If "Yes," complete Schedule L, Part II 256 X 258 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 ros tax year? If "Yes," complete Schedule L, Part II 26 X 259 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 X 280 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 28b X b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X 29 Did the organization receive more than 255,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 31 X 32 Did the organization will office 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 II, III, o	25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
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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 X 26		that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		Schedule L, Part I	25b		X
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 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 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 director, trustee, or director organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 If "Yes," complete Schedule M 29 If "Yes," complete Schedule N, Part I 20 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 30 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-3 If "Yes," complete Schedule R, Part I 31 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 32 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)? 33 If "Yes," to line 35a, did the organization. Did the organization make any transfers to an exempt non-chantable related organization? 34 If "Yes," complete Schedule R, Part V, line 2 35 Section 501(c/3) organizations. Did the organization make any transfers to an exempt non-chantable related org	26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			
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of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filling thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 29 If "Yes," complete Schedule N, Part I 30 Did the organization iliquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 31 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 II, III, or IV, and Part V, Iine 1 33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 35 Did the organization of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, Iine 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organiza	27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
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contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 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 X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 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, Inne 1 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35 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 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 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 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 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 X	29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		_X_
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Note. All Form 990 filers are required to complete Schedule O		and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
	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	X	

Form **990** (2012)

Form 990 (2012) STUDENTS SUPPORTING BRAIN TUMOR RESEARCH 20-0345903 Page 5
Part V Statements Regarding Other IRS Filings and Tax Compliance

Senter the number reported in Box 3 of Form 1096 Enter O if not applicable 10 0 10 10 0 10 10 0		Check if Schedule O contains a response to any question in this Part V			
1s Enter the number reported in 8xx 3 of From 1096 Enter 0-1 not applicable 1b 0 0 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) with marking withholding rules for reportable payments to vendors and reportable gaming (gambling) with marking with beautiful the properties of the properties of the organization for the properties of the properties				Yes	No
c Dd the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) university to the complication of the c	1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0			
c Dd the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) university to the complication of the c	b	· · · · · · · · · · · · · · · · · · ·			ł
2a Enter the number of employees reported on Form W.3, Transmittation Wage and Tax Statements, 18ed for the calendary year ending with or within the year covered by this institution. 18 Percentage of the calendary sear ending with or within the year covered by this institution. 18 Percentage of the calendary sear ending with or within the year covered by this institution. 18 Percentage of the calendary sear and 2s is greater than 250, you may be required to e-file (see instructions). 2b If Yes, "has it filed a Form 990 T for this year? If You's, "novide an explanation in Schedule O. 3b. 3b. 3b. 4 Asiny time duming the calendary 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?) 4s. X in If Yes, "there the name of the foreign country (such as a bank account, securities account, or other financial account?) 5s. Was the organization have a sheller transaction at any time duming the tax year? 5s. Was the organization have a sheller transaction at any time duming the tax year? 5s. Was the organization have a sheller transaction? 5s. Was the organization have annual gross receipts that at work or is a party to a prohibited tax shelter transaction? 5s. X 11 Yes, "to line Sac 25s. did 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 chantiable contributions and party for goods and services provided to the payor? 7s. If Yes, "indicate the number of tax deductible contributions under section 170(c). 8b. If Yes, "indicate the number of Forms 8282 fleed duming the year 7s. Yes, "If Yes, "indicate the number of Forms 8282 fleed duming the year 1st. Yes, "indicate the number of Forms 8282 fleed duming the year 1st. Yes, "indicate the number of Forms 8282 fleed duming the year 1st. Yes, "indicate the number of Forms 8282 fleed duming the year 1st. Yes, "indic	С				
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b If a 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 -file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b If "Yes," has if filed a Form 990-7 for this year? If "No," provide an explanation in Schedule 0 3b A At any time during the calendary 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 At any time the name of the foreign country: ▶ 5a en instructions for filing requirements for Form TD F 90221, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax sheller transaction at any time during the tax year? 5a Does the organization have narual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that twere not tax deductible as charitable contributions? 5b If "Yes," did the organization inclide with every solicitation an express statement that such contributions or gifts were not tax deductible? 7a Organization steam any receive deductible contributions under section 170(c). 3b If the organization receive a poyment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 7b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7c X If If yes, "did the organization notify the donor of the value of the goods or services provided? 7c X If If yes, "did the organization notify the donor of the value of the goods or services provided? 7b Did the organization selection applies the provided to the payor? 7b If the organization received a contribution of qualified intellectual property, of the organization in the payor? 7c X If the organization means are substitut	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
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a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter. a Initiation fees and capital contributions included on Part VIII, line 12 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 b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 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. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b	9		Ŭ		
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amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	а	Gross income from members or shareholders			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	b	Gross income from other sources (Do not net amounts due or paid to other sources against			
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year		amounts due or received from them.)			
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. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X 15 If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
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. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b		· · · · · · · · · · · · · · · · · · ·	L		
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	а		13a		ļ
organization is licensed to issue qualified health plans		·			
c Enter the amount of reserves on hand	b				
14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b					
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b					
		· · · · · · · · · · · · · · · · · · ·			X
	b	IT "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		000	10010

Form 990 (2012) STUDENTS SUPPORTING BRAIN TUMOR RESEARCH 20-0345903 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response to any question in this Part VI		· · ·	<u></u>		\mathbf{X}
Sec	tion 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	15			
	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.					
ь	Enter the number of voting members included in line 1a, above, who are independent	1b	14			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with		1		
	officer, director, trustee, or key employee?		•	2	X	
3	Did the organization delegate control over management duties customanly performed by or under the	e direc	t supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 wa	s filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?		5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point	one or			
	more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	tockh	olders, or			
	persons other than the governing body?			7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ır by th	e following:			
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ched	at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenu	Code)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a	_X_	
þ	If "Yes," did the organization have written policies and procedures governing the activities of such ch	napter	s, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	_X_	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	y befo	re filing the form?	11a	X	
þ	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	<u> </u>	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	_X_	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "You	es," d	escribe			
	ın Schedule O how this was done			12c	<u>X</u> _	
13	Did the organization have a written whistleblower policy?			13	<u> </u>	
14	Did the organization have a written document retention and destruction policy?			14		_X_
15	Did the process for determining compensation of the following persons include a review and approva	al by ir	dependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					₹.
а	The organization's CEO, Executive Director, or top management official			15a		X
b	Other officers or key employees of the organization			15b		X
46	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
ioa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	nent v	nun a	ا ۱	-	ų.
L	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate			16a		X
D			•			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organexempt status with respect to such arrangements?	iizati0	113	16-		
Sec	tion C. Disclosure			16b		
17	List the states with which a copy of this Form 990 is required to be filed ►AZ					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(Sect	on 501(c)(3)s only)	availah	 le	
.0	for public inspection. Indicate how you made these available. Check all that apply.	,000	00 . (0)(0)3 Omy) (.5	
	Own website Another's website X Upon request Other (explain	ın Sci	nedule (O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co		•	d finan	icial	
	statements available to the public during the tax year.				JIG	
20	State the name, physical address, and telephone number of the person who possesses the books ar	nd rec	ords of the organiza	tion:	•	
	AMSTER & WILLIS, C.P.A.'S, P.C (602) 279-0734		· · · · · - · - · - · - · · · · · ·			
	67 E. WELDON, #307, PHOENIX, AZ 85012					
23200 12-10-				Form	990	(2012)

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.

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

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours per week	box,	(C) Position (do not check more than obox, unless person is both officer and a director/trust			than is bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) HOPE DOLCETTI TREASURER	10.00							ο.	0.	0.
(2) STEVE GLASSMAN	10.00							0.	0.	0.
(3) CARRIE TREADWELL SECRETARY	10.00	•						0.	0.	0.
(4) WENDY KAYE, M.D. PRESIDENT	10.00							0.	0.	0.
(5) RON HIRSCH VICE-PRESIDENT	10.00							0.	0.	0.
(6) DEBORAH MALEDON	10.00							0.	0.	0.
(7) ADRIENNE C. SCHECK, PHD	10.00							0.	0.	0.
(8) JESSE HIGGINS	10.00							0.	0.	0.
(9) MARTIN S. KAYE, M.D.	10.00							0.	0.	0.
(10) MATTHEW BARATZ	0.00							0.	0.	0.
(11) CHRIS KENNEDY	0.00							0.	0.	0.
(12) VICTORIA KNOBLACH	0.00							0.	0.	0.
(13) LIORA FIKSEL	0.00							0.	0.	0.
(14) ALEXANDER MICHUNOVICH	0.00							0.	0.	0.
(15) CATHERINE DAVID	0.00							0.	0.	0.

232007 12-10-12

STUDENTS SUPPORTING BRAIN TUMOR RESEARCH

Form 990 (2012)

20-0345903

Page 8

Form 990 (2012) STUDENTS SUPPORTING BRAIN TUMOR RESEARCH 20-0345903 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII (D)
Revenue excluded from tax under sections 512, 513, or 514 (C) Related or Unrelated Total revenue business exempt function revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues 1b 50,000. c Fundraising events 1¢ d Related organizations 1d e Government grants (contributions) f All other contributions, gifts, grants, and 164,698 similar amounts not included above 10,600. g Noncash contributions included in lines 1a-1f \$ 214,698 Total. Add lines 1a-1f **Business Code** Program Service Revenue f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 3 1 1. other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (II) Personal 6 a Gross rents **b** Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) . 8 a Gross income from fundraising events (not Other Revenue including \$ 50,000. of contributions reported on line 1c). See Part IV, line 18 0 **b** Less: direct expenses . . 11,819 <11,819. <11,819.> c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less. cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code

> <11,819.> Form **990** (2012)

202,880.

d All other revenue e Total. Add lines 11a-11d

Total revenue. See instructions.

11 a

232009 12-10-12

Part IX Statement of Functional Expenses

0001	Check if Schedule O contains a response			пірісте совині (гу.	
	not include amounts reported on lines 6b, 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	175,500.	175,500.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				-
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	İ			
7	Other salanes and wages				
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				·
10	Deurallianus				,
11	Fees for services (non-employees)				
''а	Management				
b	Legal				
	Accounting				
d	· · · · · · · · · · · · · · · · ·				
u	Professional fundraising services. See Part IV, line 17				
- 4	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	3,000.			3,000.
13	Office evenence	586.		586.	3,000.
14	Information technology	300.		300.	
15	ъ "				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
10	,				
19	for any federal, state, or local public officials Conferences, conventions, and meetings				
20					
21	Payments to affiliates				
22	Depreciation, depletion, and amortization		•		
23	Insurance	335.		335.	
24	Other expenses. Itemize expenses not covered	333.			
24	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.)				
а	BANK AND COLLECTION FEE	5,142.		5,142.	-
h	ACCOUNTING	2,500.		2,500.	
-	WEB SITE	2,063.		2,063.	
ات .		1,690.		1,690.	·
. d	·	1,030.		1,030.	
	All other expenses	190,816.	175,500.	12,316.	3,000.
<u>25</u>	· · · · · · · · · · · · · · · · · · ·	130,010.	1/3,300.	14,310.	3,000.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined	i			
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)	1			
	(ASC 938-720)	L.			

Form 990 (2012) Part X | Balance Sheet Check if Schedule O contains a response to any question in this Part X (A) (B) Beginning of year End of year 9,351 21,415. 2 2 Savings and temporary cash investments Pledges and grants receivable, net 20. 20. 4 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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 instr). Complete Part II of Sch L Notes and loans receivable, net 7 Inventories for sale or use . . . 8 8 Prepaid expenses and deferred charges ... 10a Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D 10a **b** Less: accumulated depreciation 10b 11 Investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 9,371. 21,435. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 17 17 Accounts payable and accrued expenses 18 Grants payable 18 19 19 Deferred revenue Tax-exempt bond liabilities . . 20 20 21 Escrow or custodial account liability Complete Part IV of Schedule D Liabilities 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 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 0. 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 Unrestricted net assets 27 28 28 Temporarily restricted net assets Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ 🗶 and complete lines 30 through 34. 9,371. 21,435. 30 Capital stock or trust principal, or current funds

Form 990 (2012)

21,435.

31

32

0.

9*.*371.

371

31

32

33

Paid-in or capital surplus, or land, building, or equipment fund

Total net assets or fund balances

Total liabilities and net assets/fund balances

Retained earnings, endowment, accumulated income, or other funds

		=		
		<u>345903</u>	Pa	_{je} 12
Pa	t XI Reconciliation of Net Assets			
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>	<u>. </u>	<u> </u>
		0.0		
1	Total revenue (must equal Part VIII, column (A), line 12)		2,8	
2	Total expenses (must equal Part IX, column (A), line 25)		0,8	
3	Revenue less expenses. Subtract line 2 from line 1		2,0	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4		9,3	<u>71.</u>
5	Net unrealized gains (losses) on investments			
6	Donated services and use of facilities			
7	Investment expenses			
8	Pnor period adjustments			
9	Other changes in net assets or fund balances (explain in Schedule O) 9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B))	2	1,4	<u>35.</u>
Pa	rt XIII Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII	<u> </u>		
			Yes	No
1	Accounting method used to prepare the Form 990: X 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		X
	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		X
	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,			
Ū	review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
32	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
- Cu	Act and OMB Circular A-133?	3a		x
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit	30		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3h	1	

Form **990** (2012)

SCHEDULE A (Form 990 or 990-EZ)

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

Open to Public Inspection

Name of the organization

Employer identification number

		STUDENT	S SUPPORTING	BRAI	N TUM	OR RE	SEARC	:H	2	0-03 4 5	<u>90:</u>	3
Part I	Reason	for Public Char	ity Status (All organiz	ations mus	st complet	e this par	t.) See inst	tructions				
The organ	ization is not a	a private foundation	because it is: (For lines	1 through 1	11, check o	only one b	ox.)					
1 🔲	A church, co	nvention of churches	s, or association of chur	ches desci	nbed in se	ction 170	(b)(1)(A)(i)).				
2 🔲	A school des	cribed in section 17	0(b)(1)(A)(ii). (Attach Sc	hedule E.)								
з 🔲			tal service organization		n section	170(b)(1)	(A)(iii).					
4 🔲			operated in conjunction					(b)(1)(A)(ii	i). Enter t	he hospital'	s nai	me,
	city, and stat			,	•				•	•		
5 🗀	An organizati	on operated for the	benefit of a college or un	niversity ov	vned or op	erated by	a governi	mental und	t describe	ed in		
		(b)(1)(A)(iv). (Comple	-	•	•	•	J					
6			ent or governmental unr	t described	in sectio	n 170(h)(1)(A)(v).					
7 X			eives a substantial part					or from the	general	oublic desci	nbed	ın
	_	b)(1)(A)(vi). (Comple	•			9			3			
8 🗔	_		ection 170(b)(1)(A)(vi).	(Complete	Part II.)							
9 🗔	-		eives: (1) more than 33		-	om contr	butions n	nembershii	n fees ar	nd aross rea	eints	s from
	_	•	nctions - subject to certa		• •					•	•	
		•	axable income (less sec	•		•				•		
		509(a)(2). (Complete	•		,, ,, o,,,,			,, o.g			o, .o	0.
10			perated exclusively to te	st for publi	c safety S	ee sectio	n 509(a)(a	4).				
11	•	•	perated exclusively for the	•	•		(-)(,	vout the	nurnoses o	f one	or
—	•		itions described in secti		•			•	•	• •		
	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · ·	organization and compl		•		.,		-,(-,, -,,,			
	a Type			ype III · Fur	Ū		c	typ	e III - Nor	-functionall	v inte	earated
е 🗀			t the organization is not	• •	•	•		• •			•	•
	-		nan one or more publicly		-	-	•		•			
f			ten determination from		-				(-)(-)		(,(,	
	-	rganization, check th				, ,,,	,, - ,,					
g		-	rganization accepted ar	nv aift or co	ontribution	from anv	of the follo	owing pers	sons?		•	
J			rectly controls, either al			-		• •			Yes	No
		•	upported organization?	.				() (.	,,	11g(i)		110
	_		described in (i) above?	•	••		• •			11g(ii)		
		•	person described in (i)	•	· •?		• •	••• •		11g(iii)		
h			about the supported or			••	• •	•		1.3()		1
		J		J	1-7-							
(i) Name	of supported	(ii) EIN	(iii) Type of organization	(iv) Is the o	rganization	(v) Did vo	u notify the	(vi) ls	the	(vii) Amount	of m	nnetany
	anization	(11) = 114	(described on lines 1-9	in col. (i) lis	sted in your		ion in col.	organization (i) organization		Supp		Oricial y
			above or IRC section	governing	document?	(i) of you	r support?	Ü.S.	.?	****		
			(see instructions))	Yes	No	Yes	No	Yes	No			
BARRO												
NEURO	LOGICAL	<u>86-0174371</u>	501(C)3		X		X	X	'	4	7,0	000.
NATIO	NAL			}								
BRAIN	TUMOR	04-3068130	501(C)3		X		X	X		5	3,0	000.
TRANS	LATIONA											-
L GEN	OMICS R	75-3065445	501(C)3		X		X	x		2	6,0	000.
PHOEN												
CHILD	RENS' H	74-2421549	501(C)3		х		X	X		4	7,0	000.
STEEL			-									
CHILD	REN'S R	86-6050388	501(C)3		Х		X	x			2,!	500.
Total	5						L			17	<u>5</u> ,!	500.
I UA Eas E	Paperwork Re	duction Act Notice	, see the Instructions f	or				Schedul	e A (Forr	n 990 or 99		

232021 12-04-12

Form 990 or 990-EZ.

Schedule A (Form 990 or 990 EZ) 2012 STUDENTS SUPPORTING BRAIN TUMOR RESEARCH 20 - 0345903 Page 2

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

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

Sec	ction A. Public Support			<u> </u>			
Cale	ndar 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 ")	208,194.	249,589.	275,903.	231,302.	181,600.	1146588.
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	208,194.	249,589.	275,903.	231,302.	181,600.	<u>1146588.</u>
5	The portion of total contributions	İ					
	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)						72,151.
	Public support. Subtract line 5 from line 4						1074437.
	ction B. Total Support	<u> </u>					
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 4	208,194.	249,589.	275,903.	231,302.	181,600.	1146588.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties	400	4.00	•			
	and income from similar sources	492.	133.	3.	1.	1.	630.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						4445040
	Total support. Add lines 7 through 10						1147218.
	Gross receipts from related activities,					12	
13	First five years. If the Form 990 is for	-	first, second, thir	d, fourth, or fifth ta	ix year as a section	n 501(c)(3)	
Sec	organization, check this box and stop ction C. Computation of Publ	ic Support Pe	rcentage		· ··		
14	Public support percentage for 2012 (line 6, column (f) di	vided by line 11, c	olumn (f))		14	93.66 %
	Public support percentage from 2011		•			15	98.48 %
	33 1/3% support test - 2012. If the					nore, check this bo	
	stop here. The organization qualifies						$\triangleright \mathbf{X}$
b	33 1/3% support test - 2011. If the o	organization did no	t check a box on I				•
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			ightharpoons
17a	10% -facts-and-circumstances tes	t - 2012. If the org	anization did not d				or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	ns box and stop h	ere. Explain in Pai	rt IV how the organ	ization
	meets the "facts-and-circumstances"					=	
b	10% -facts-and-circumstances tes						10% or
	more, and if the organization meets ti						
	organization meets the "facts-and-circ				•		
18	Private foundation. If the organization		•	•			<u>s</u> ▶
					Sche	dule A (Form 990	or 990-EZ) 2012

232022 12-04-12

Schedule A (Form 990 or 990-EZ) 2012 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 t	the organization failed to qualify i	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						
ınclude any "unusual grants.")	<u> </u>					
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the						
organization's tax-exempt purpose	·			<u> </u>		
3 Gross receipts from activities that are not an unrelated trade or bus-			į.			
iness under section 513						
4 Tax revenues levied for the organ-					 	
ization'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					1	
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 carned 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)		<u> </u>		<u></u>		
14 First five years. If the Form 990 is for the	he organization	's first, second, the	rd, fourth, or fifth t	ax year as a sect	ion 501(c)(3) organiz	zation,
check this box and stop here			<u></u>			▶□
Section C. Computation of Public	Support Pe	ercentage				
15 Public support percentage for 2012 (lin	e 8, column (f) o	divided by line 13,	column (f))		15	
16 Public support percentage from 2011 S			<u> </u>		16	
Section D. Computation of Invest	ment Incom	ne Percentage	<u> </u>			
17 Investment income percentage for 201	2 (line 10c, colu	mn (f) dıvided by lı	ne 13, column (f))		17	
18 Investment income percentage from 20	11 Schedule A	, Part III, line 17			18	
19a 33 1/3% support tests - 2012. If the o	rganızatıon did	not check the box	on line 14, and lin	e 15 is more than	33 1/3%, and line	17 is not
more than 33 1/3%, check this box and	stop here. Th	e organizatıon qua	lifies as a publicly	supported organi	zation	▶□
b 33 1/3% support tests - 2011. If the o						
line 18 is not more than 33 1/3%, check		-				···· [
20 Private foundation. If the organization	aid flot crieck a	LOOK OIT HITE 14, 18	a, or 130, check t		chedule A (Form 99	<u> </u>

SCHEDULE G

Department of the Treasury

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047

Open To Public Inspection

Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► See separate instructions Name of the organization **Employer identification number** STUDENTS SUPPORTING BRAIN TUMOR RESEARCH 20-0345903 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Solicitation of non-government grants ь Internet and email solicitations Solicitation of government grants C Phone solicitations Special fundraising events d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser (v) Amount paid (vi) Amount paid (iv) Gross receipts (i) Name and address of individual to (or retained by) (ii) Activity to (or retained by) have custody or entity (fundraiser) fundraiser from activity or control of contributions? organization listed in col. (i) Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration

LHA Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990 or 990-EZ) 2012

Schedule'G (Form 990 or 990-EZ) 2012 STUDENTS SUPPORTING BRAIN TUMOR RESEARCH 20-0345903 Page 2 Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (b) Event #2 (c) Other events (a) Event #1 (d) Total events CONDUCT A None (add col. (a) through WALK-A-THON col. (c)) (event type) (event type) (total number) 50,000 50,000. 1 Gross receipts 50,000 50,000. 2 Less: Contributions Gross income (line 1 minus line 2) Cash prizes ... 625 625. Noncash prizes Rent/facility costs Direct 10,828 10,828. Food and beverages Entertainment 366. 366. Other direct expenses 11,819; 10 Direct expense summary. Add lines 4 through 9 in column (d) <11,819.> Net income summary. Combine line 3, column (d), and line 10 Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) Gross revenue 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Volunteer labor No Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Combine line 1, column d, and line 7 Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states? ... **b** If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 」Yes b if "Yes," explain.

Schedule G (Form 990 or 990-EZ) 2012

232082 01-07-13

Sch	edule'G (Form 990 or 990-EZ) 2012 STUDENTS SUPPORTING BRAIN TUMOR RESEARCH 20 -	<u>)3</u> 459	903	Page 3
11			res	☐ No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed			
	to administer charitable gaming?	_ 🗀 y	fes	☐ No
13	Indicate the percentage of gaming activity operated in:	1 1		
	The organization's facility	13a		%
	An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's garning/special events books and records:			
	Name ▶			
	Address >			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		⁄es	□ No
b	o If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount			
	of gaming revenue retained by the third party >\$			
c	If "Yes," enter name and address of the third party:			
	Name			
	Address >			
16	Gaming manager information:			
	33			
	Name			
	Gaming manager compensation > \$			
	Description of services provided			
				
	Director/officer Employee Independent contractor			
	Director/officer			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	וווו	r es	└─ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
Pa	organization's own exempt activities during the tax year \$\int IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii)) and (v)	and	Part III
	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information.			•
		<u> </u>		
23208	83 01-07-13 Schedule G (For	m 990 o	r 990	-EZ) 2012

SCHEDULE 1 (Form 990) Department of the Treasury Internal Revenue Service

Name of the organization

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

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

OMB No 1545-0047 Open to Public 2012

Employer identification number

Inspection

▶ Attach to Form 990.

4. % ⊠ 20-0345903 (h) Purpose of grant or assistance GENERAL RESEARCH GENERAL RESEARCH SENERAL RESEARCH GENERAL RESEARCH Yes SENERAL RESEARCH 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 OPERATIONS OPERATIONS PERATIONS OPERATIONS **DPERATIONS** 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 (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) o o. o. (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. STUDENTS SUPPORTING BRAIN TUMOR RESEARCH recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (d) Amount of cash grant ċ Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable 501(C)3 501(C)3 501(C)3 501(C)3 Enter total number of other organizations listed in the line 1 table 86-0174371 04-3068130 75-3065445 74-2421549 General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization TRANSLATIONAL GENOMICS RESEARCH STREET -BARROW NEUROLOGICAL FOUNDATION NATIONAL BRAIN TUMOR SOCIETY PHOENIX CHILDREN'S HOSPITAL 124 WATERTOWN ST. , STE 3 or government INSTITUTE - 445 N. 5TH 1919 EAST THOMAS ROAD 350 WEST THOMAS ROAD WATERTOWN, MA 02472 PHOENIX, AZ 85013 PHOENIX AZ 85016 PHOENIX, AZ 85004 Part Part II

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

Schedule I (Form 990) (2012)

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Schedule I (Form 990) (2012)

Page 2

20-0345903

(Form 990) (2012) STUDENTS SUPPORTING BRAIN TUMOR RESEARCH 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

Part III

(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. (book, FMV, appraisal, other) (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance

Schedule I (Form 990) (2012)

232102 12-18-12

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

STUDENTS SUPPORTING BRAIN TUMOR RESEARCH 20-0345903
Form 990, Part VI, Section A, line 2: THE ORGANIZATION'S PRESIDENT IS THE
DAUGHTER OF THE ORGANIZATION'S TREASURER
Form 990, Part VI, Section A, line 8b: THERE ARE NO COMMITTEES WITH
AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY
Form 990, Part VI, Section B, line 11: THE ORGANIZATION REVIEWS THE EMAIL
AT ITS NOVEMBER MEETING. UNDER NORMAL CIRCUMSTANCES THE TAX RETURN HAS
BEEN FILED PRIOR TO THAT MEETING.
Form 990, Part VI, Section B, Line 12c: DURING BOARD DELIBERATIONS
REGARDING AWARDING GRANTS TO DONEES, BOARD MEMBERS WITH POSSIBLE CONFLICTS
ARE REQUESTED TO ABSENT THEMSELVES FROM THE MEETING
ARE REGORDIED TO ADDENT THEMSELVES FROM THE MEETING
Form 990, Part VI, Section C, Line 19: THE ORGANIZATION MAKES ITS
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS
AVAILABLE TO THE PUBLIC UPON REQUEST. THIS IS USUALLY DONE BY E-MAIL OR US
MAIL