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DLN: 93493125017614

Department of the Treasury

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

Open to Public

ntemal f	Revenue :	Service	► The organization may have t	to use a copy of this return to satisfy	state repoi	rting requirem	ents	Inspection
A Fo	rthe 2	2012 ca		, 10-01-2012 , 2012, and ending 09	-30-2013			
B Che	ck if ap	plicable	C Name of organization AMERICAN INSTITUTE FOR CANCER	RESEARCH		D Emplo	yer iden	tification number
Add	ress cha	ange				52-12	38026	
Nan	ne chan	nge	Doing Business As					
– _{Initi}	al retur	'n	Number and street (or P O box if m	ail is not delivered to street address) Room,	'suite	E Telepho	no numb	or.
– Ten	mınated	i	1759 R STREET NW Suite	,		·		
– Ame	ended r	eturn	City or town, state or country, and Z	<u>I</u> IP + 4		(202)	328-7	744
_		pending	WASHINGTON, DC 200092552			6 6		22 624 006
, ,,,,,	cation	penang	F Name and address of prin	cipal officer	1 > -			23,621,906
			KELLY B BROWNING	cipal officer	I	s this a group ffiliates?	return	for ┌ Yes
			1759 R STREET NW	2552				, , , , , , , , , ,
			WASHINGTON, DC 200092	2552				led?
Tax	-exemi	pt status		nsert no)	I	f "No," attach	a list (see instructions)
				1321(10) 4347(4)(1) 61 327	⊢ _{H(c)} ⟨	Group exempt	ion num	ber ►
W	ebsite	: :► W\	NW AICR ORG					
S Form	n of org	janizatioi	n 🔽 Corporation 🗌 Trust 🦳 Association	n	L Year	of formation 19	81 M :	State of legal domicile D
Pai	rt I	Sun	nmary					
ACUMUES & GOVERNANCE	<u>-</u>	1 A N A G	SEMENT TO CANCER, INTERPRI	THE RELATIONSHIP OF NUTRITIONS THE SCIENTIFIC DATA AND F	UNDS RES	EARCH		
5	3 N	Jumber	of voting members of the govern	ng body (Part VI, line 1a)			з	é
2				of the governing body (Part VI, line 1			4	
				calendar year 2012 (Part V, line 2a)	•		5	6
{			· ·	ecessary)			6	300,00
				art VIII, column (C), line 12			7a	·
	Ь٨	let unr	elated business taxable income fi	om Form 990-T, line 34			7b	
						Prior Year		Current Year
	8 Contributions and grants (Part VIII, lin			ne 1 h)		22,368,0	002	19,870,413
nie Lie	9	Progr	am service revenue (Part VIII, li	ne 2g)		1,430,6	594	1,049,930
Heyenue	10	Inves	tment income (Part VIII, column	(A), lines 3, 4, and 7d)		171,7	716	294,634
-	11		, , , , , , , , , , , , , , , , , , , ,	lines 5, 6d, 8c, 9c, 10c, and 11e)		519,3	398	525,795
	12		-	(must equal Part VIII, column (A), I	ine	24,489,8	310	21,740,772
	13		s and similar amounts paid (Part	IX, column (A), lines 1-3)	_	1,689,8		2,119,986
	14			X, column (A), line 4)		1,000,0	0	2,113,300
	15			e benefits (Part IX, column (A), line:			_	
Expenses		5-10		, , , , , , , , , , , , , , , , , , , ,		4,625,226		4,645,974
<u>#</u>	16a	Profe	ssional fundraising fees (Part IX,	column (A), line 11e)		1,303,2	273	957,96
ਤੌ	b	Total f	undraising expenses (Part IX, column (D)	, line 25) 🕨 4,382,026				
	17	Other	expenses (Part IX, column (A), l	ınes 11a-11d, 11f-24e)		17,486,6		14,083,429
	18			st equal Part IX, column (A), line 25		25,105,0		21,807,354
	19	Reve	nue less expenses Subtract line	18 from line 12		-615,2		-66,582
(ရှို့)					Begir	nning of Curre Year	nt	End of Year
, eë	20	Total	assets (Part X, line 16)		. —	15,101,7	710	15,320,718
Fund Balances	21		liabilities (Part X, line 26)		· .	6,584,4		6,264,708
E	22			line 21 from line 20	. –	8,517,2		9,056,010
Par	t II		nature Block			. ,-	<u> </u>	. , = -
iy kr repa S ign	nowled rer has	ge and s any k	belief, it is true, correct, and com nowledge *** lature of officer	nmined this return, including accomp iplete Declaration of preparer (other				
lere	•		LY B BROWNING EXECUTIVE VICE PRESIDE or print name and title	DENT				
			Print/Type preparer's name	Preparer's signature	Date	Check I If	PTIN	
aic		L	7 - 7F - Erakarar a name			self-employed		
			Firm's name 🕨 KPMG LLP			Firm's EIN 🕨		
	pare		Firm's address ► 1676 International Drive	a		Phone no (703) 286-8n	00
JSE	Onl	y I				I (, 35	, 5	

McLean, VA 22102

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

✓ Yes No

Part IV	Checklist of	Rec	uired	Sche	dules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes,"</i> complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
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	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	Yes	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If</i> " <i>Yes," complete Schedule F, Parts III and IV</i>	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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

Par	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V		Yes	 No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 149		103	110
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		ĺ
	gaming (gambling) winnings to prize winners?	1c	Yes	
	Tax Statements, filed for the calendar year ending with or within the year covered by this return		8 1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ▶UK, HK, NL, FR, BE			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		1
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 a	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		No
	services provided to the payor?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year	1		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	ٿ		
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
LO	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	-		
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.]		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand	ļ		ļ
1 4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h	l	1

Form 990 (2012) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax 1a 6 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O **b** Enter the number of voting members included in line 1a, above, who are 6 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 Νo Did the organization delegate control over management duties customarily performed by or under the direct 3 Nο supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was 4 Nο Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 Nο 6 Νo 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or 7a Nο Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, Νo Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? . Yes Each committee with authority to act on behalf of the governing body? Yes Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a 10a Did the organization have local chapters, branches, or affiliates? . . .

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

Section C. Disclosure

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

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

organization's exempt status with respect to such arrangements?

- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►KELLY B BROWNING 1759 R STREET NW WASHINGTON, DC (202)328-7744

<u>Part VIII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- ◆ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations	
(1) MELVIN HUTSON	2 0	,									
CHAIRMAN	0 0	Х									
(2) LAWRENCE PRATT	2 0										
VICE CHAIRMAN	0 0	Х									
(3) SUSAN PEPPER	2 0										
•		х		Х							
SECRETARY/TREASURER (4) PETER MCCARTY	0 0										
		Х									
BOARD MEMBER	0 0										
(5) JEFFREY BUNN	2 0	X									
BOARD MEMBER	0 0										
(6) G ALLEN DALE	2 0	l x									
BOARD MEMBER	0 0										
(7) MARILYN GENTRY	3 0								220,400	11.020	
PRESIDENT, WCRF INTL	15 0			X					328,400	11,030	
(8) KELLY B BROWNING	40 0										
CHIEF EXECUTIVE OFFICER	0 0			X				293,965	18,290	25,504	
(9) KATHRYN L WARD	40 0										
SENIOR VICE PRESIDENT					Х			202,111		10,342	
(10) STEPHENIE L LOWE	0 0										
						х		144,276		26,861	
SENIOR VICE PRESIDENT (11) DEIRDRE MCGINLEY GIESER	0 0 40 0										
						х		144,310		26,771	
SENIOR VICE PRESIDENT	0 0										
(12) PATRICIA M BODENSTEDT	40 0					x		108,362		9,342	
CONTROLLER	0 0				<u> </u>					·	
(13) GLEN WELDON	40 0					×		107,230		8,392	
DIRECTOR OF COMMUNICATIONS	0 0					<u> </u>		107,230			
(14) MICHAEL MCCARN	40 0					x		110,144		23,261	
DIRECTOR OF IT	0 0					L^_		110,144		25,201	
					L						
			<u> </u>							Form 990 (2012)	

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

	(A) Name and Title	(B) A verage hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)		(F) Estima mount o compens from t rganizati	ted fother ation he
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)		relate organiza	ed
1b	Sub-Total		٠	•	•			-					
C	Total from continuation sheet				•	•		F					
d	Total (add lines 1b and 1c) .						•	-	1,110,398	·	90		141,503
2	Total number of individuals (in \$100,000 of reportable comp						d abov	'e) w	ho received more th	aan			
												Yes	No
3	Did the organization list any f o on line 1a? <i>If</i> "Yes," complete S					key •	emplo	yee.	, or highest compen	sated employee	3		No
4	For any individual listed on lin organization and related organ individual										4	Yes	
5	Did any person listed on line 1									or individual for			
	services rendered to the organ	nization? <i>If</i> " <i>Yes</i>	," compi	lete S	ched	lule 3	1 for su	ch p	erson		5		Νo
Se	ection B. Independent Co	ntractors											
1	Complete this table for your fi		ensate	d ındı	epen	iden	t contr	acto	rs that received mo	re than \$100,000	of		

compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A)	(B)	(c)
Name and business address	Description of services	Compensation
INFOCISION MANAGEMENT CORPORATION , 325 SPRINGSIDE DRIVE AKRON OH 44333	TM CONSULTANT	4,599,695
SOUTHWEST PUBLISHING , 2600 NW TOPEKA BLVD TOPEKA KS 66617	MH CONSULTANT	519,087
DIRECT RESPONSE CONSULTING , 6849 OLD DOMINON DRIVE MCLEAN VA 22101	FR CONSULTANT	548,390
THE DATA CENTER , 11200 WAPLES MILL RD FAIRFAX VA 22030	DP CONSULTANT	567,208
RRDONNELLY , PO POX 93514 CHICAGO IL 60673	MH CONSULTANT	1,252,080

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization -9

Part V		Statement of Revenue Check if Schedule O contains a res	sponse to any question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or
nts nts	1a	Federated campaigns	1a				514
io Ocu	b	Membership dues	1b				
A G	С	Fundraising events	1c				
≝≝∣	d	Related organizations	1d				
اقتر	е	Government grants (contributions)	1e				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants, and similar amounts not included above	1f 19,870,413				
를 풍	g	Noncash contributions included in lines 1a-1f \$	27,518				
and	h	Total. Add lines 1a-1f		19,870,413			
<u>9</u>			Business Code				
Men	2a	SERVICE FEES	900099	977,424	977,424		
22	b	BOOK SALES	900099	343	343		
956	С	BROCHURE SALES	900099	70,305	70,305		
Sec.	d	EXPERT REPORT SALES	900099	1,858	1,858		
Program Serwoe Revenue	e f	All other program service revenue					
<u>*</u>	g	Total. Add lines 2a-2f		1,049,930			
	3	Investment income (including divi	dends, interest,				440.04
		and other similar amounts)		119,814			119,814
	4	Income from investment of tax-exempt b	· · · · · · · · · · · · · · · · · · ·	3,244			2 24/
	5	Royalties		3,244			3,244
	6a	(1) Real	(II) Personal				
	b	Less rental					
	_	expenses Rental income					
	С	or (loss)					
	d	Net rental income or (loss) (i) Securities	▶ (II) Other	0			
	7a	Gross amount from sales of assets other					
	b	than inventory Less cost or other basis and 1,881,134	<u> </u>				
	С	sales expenses Gain or (loss) 174,820)				
	d			174,820			174,820
enne	8a	Gross income from fundraising events (not including \$ of contributions reported on line 10	5)				
Other Kevenue		See Part IV, line 18	a				
į		Less direct expenses	b	_			
-	C Qa	Net income or (loss) from fundrais		0			
	9a	Gross income from gaming activities See Part IV, line 19	es a				
	b	Less direct expenses	ь				
	c	Net income or (loss) from gaming	activities	0			
	10a	Gross sales of inventory, less returns and allowances					
	b	Less cost of goods sold	a b				
		Net income or (loss) from sales of		o			
}		Miscellaneous Revenue	Business Code				
-	11a	MAIL LIST RENTAL	900099	476,680			476,680
	b	DISCOUNT EARNED	900099	15,666			15,666
	С	SUBLEASE REVENUE	900099	29,085			29,085
	d	All other revenue		1,120			1,120
	e	Total. Add lines 11a-11d					
	12	Total revenue. See Instructions	-	522,551			
1			· · · · [7]	21,740,772	1,049,930		820,429

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)							
	Check if Schedule O contains a response to any question in this Pa	rt IX			<u> </u>		
	ot include amounts reported on lines 6b, b, 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	1,789,850	1,789,850				
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0					
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	330,136	330,136				
4	Benefits paid to or for members	0					
5	Compensation of current officers, directors, trustees, and key employees	511,357	334,595	102,043	74,719		
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0					
7	Other salaries and wages	3,181,911	1,636,195	1,065,521	480,195		
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	151,739	85,143	44,420	22,176		
9	Other employee benefits	534,320	303,917	171,814	58,589		
10	Payroll taxes	266,647	141,323	85,327	39,997		
11	Fees for services (non-employees)						
а	Management	0					
b	Legal	75,860	32,631	31,277	11,952		
C	Accounting	106,783	12,705	91,626	2,452		
d	Lobbying	0					
е	Professional fundraising services See Part IV, line 17	957,965			957,965		
f	Investment management fees	42,773	24,381	13,687	4,705		
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,107,496	1,975,051	132,445			
12	Advertising and promotion	163,391	139,796	20,091	3,504		
13	Office expenses	295,454	168,343	83,290	43,821		
14	Information technology	310,107	221,754	39,892	48,461		
15	Royalties	0	221,731	33,032	10,101		
16	Occupancy	675,700	385,149	216,224	74,327		
17	Travel	85,926	69,293	6,161	10,472		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	03/233	3,101	10,172		
19	Conferences, conventions, and meetings	58,033	55,271	1,244	1,518		
20	Interest	92,204	<u> </u>	92,204	,		
21	Payments to affiliates	77,320	77,320				
22	Depreciation, depletion, and amortization	66,759	38,053	21,363	7,343		
23	Insurance	28,011	15,966	8,964	3,081		
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)						
а	MAILHOUSE FEES	1,358,588	899,087	69,803	389,698		
b	LIST COSTS	612,976	404,038	24,738	184,200		
c	POSTAGE & DELIVERY	4,406,568	2,944,940	248,912	1,212,716		
d	PRINTING & PUBLICATION	2,353,062	1,667,845	160,734	524,483		
e	All other expenses	1,166,418	655,635	285,131	225,652		
25	Total functional expenses. Add lines 1 through 24e	21,807,354	14,408,417	3,016,911	4,382,026		
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ✓ if following SOP 98-2 (ASC 958-720)	10,499,838	6,721,090	457,307	3,321,441		
					rm 990 (2012		

Part X Balance Sheet

Par	t X	Balance Sheet Check if Schedule O contains a response to any question in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	107,230	1	102,939
	2	Savings and temporary cash investments	2,532,826	2	4,391,271
	3	Pledges and grants receivable, net	1,892,488	3	1,609,984
	4	Accounts receivable, net	390,080	4	581,152
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			 -
	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	0	5	0
\$			О	6	0
Assets	7	Notes and loans receivable, net	0	7	0
	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	842,230	9	615,714
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 335,570		_	
	ь	Less accumulated depreciation 10b 179,578	202,544	10c	155,992
	11	Investments—publicly traded securities	2,156,250	11	1,577,515
	12	Investments—other securities See Part IV, line 11	0	12	0
	13	Investments—program-related See Part IV, line 11	5,905,763	13	5,458,730
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	1,072,299	15	827,421
	16	Total assets. Add lines 1 through 15 (must equal line 34)	15,101,710	16	15,320,718
	17	Accounts payable and accrued expenses	1,679,959	17	1,103,443
	18	Grants payable	2,176,528	18	2,684,139
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
Ø	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
<u> </u>		persons Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule	2,727,960	25	2,477,126
	26	D	6,584,447	26	6,264,708
	26	Organizations that follow SFAS 117 (ASC 958), check here ▶ 🄀 and complete	0,304,447	26	0,204,700
ģ (27	lines 27 through 29, and lines 33 and 34. Unrestricted net assets	3,832,749	27	4,509,726
<u>ଟ</u>	28	Temporarily restricted net assets	3,874,720	28	3,709,948
<u>a</u>	29	Permanently restricted net assets	809,794	29	836,336
Assets or Fund Balance	23	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ┌ and	300,704	23	
ō	30	complete lines 30 through 34. Capital stock or trust principal, or current funds		30	
ets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
15.5	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ą.	33	Total net assets or fund balances	8,517,263	33	9,056,010
Net	34		15,101,710	-	
	34	Total liabilities and net assets/fund balances	15, 101,710	34	15,320,718

Par	t XI Reconcilliation of Net Assets				-9
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		21,7	40,772
2	Total expenses (must equal Part IX, column (A), line 25)	2		21,8	307,354
3	Revenue less expenses Subtract line 2 from line 1	3			-66,582
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		8,5	517,263
5	Net unrealized gains (losses) on investments	5		2	04,515
6	Donated services and use of facilities	6			
7	Investment expenses	7			16,720
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		3	84,094
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		9,0	56,010
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				<u>. ୮</u>
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	F 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 oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

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As Filed Data -

DLN: 93493125017614

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

AMERICAN INSTITUTE FOR CANCER RESEARCH

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.

Open to Public Inspection

									52-12380					
	rt I			blic Charity Sta		•				nstruction	is.			
	rganı		•	te foundation becaus	•		- ,	•	•					
1	<u>_</u>		-	on of churches, or a				ection 170((b)(1)(A)(i).					
2		A scho	ol described	in section 170(b)(1	l)(A)(ii). (At	tach Sched	ule E)							
3	Γ	A hosp	ıtal or a coo	perative hospital se	rvice organiz	ation descr	ibed in sectio	n 170(b)(1	.)(A)(iii).					
4	Γ	A medi	cal researcl	h organization opera	ted ın conjun	ction with a	hospital des	cribed in s e	ection 170(b)(1)(A)(iii).	. Enter the			
_	_			ty, and state										
5	ı		•	erated for the benefi	-	or universi	ty owned or o	perated by	a government	tal unit de:	scribed in			
	_		tion 170(b)(1)(A)(iv). (Complete Part II)											
6		A feder	al, state, or	local government o	government	al unit desc	rıbed ın secti	ion 170(b)(1)(A)(v).					
7	<u>~</u>			at normally receives			support from	a governm	ental unit or f	rom the ge	neral public			
8	Г			n 170(b)(1)(A)(vi). described in sectio r			mplete Part II	[)						
9	Г		-	at normally receives			•	-	butions, mem	bership fe	es, and gross			
	·	_		ities related to its e			* *		•		· =			
		•			· ·	=								
		its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)												
10	Г	•	,	ganized and operated	•			•	•					
11	Ė	_		ganized and operated						o carry ou	t the purposes of			
	•	one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check												
				bes the type of supp										
		a l	Type I	b Type II c	Type II	I - Function	ially integrate	ed d	Type III - No	on-functio	nally integrated			
e	Γ	,	_	ox, I certify that the	_				, ,		•			
		other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)												
f				received a written de	etermination	from the IR	Sthatitisa	Tyne I Tyi	ne II or Tyne	III sunno	rtıng organizatıon			
•			this box	received a written a	ccciiiiiacioii	monn the riv	S that it is a	1 ypc 1, 1 y	5c 11, 01 1 ypc	III Suppo				
g		Since A	ugust 17, 2	2006, has the organ	ızatıon accep	ted any gift	or contributi	on from any	of the		•			
			ng persons?											
				rectly or indirectly o	•		-	persons de	escribed in (ii)		Yes No			
				governing body of th		_	n?				lg(i)			
				er of a person descr							.g(ii)			
		• •		lled entity of a perso						11	g(iii)			
h		Provide	the followi	ng information about	the supporte	ed organizat	:ion(s)							
(i) Nan	ne of	(ii) EIN	(iii) Type of	(iv) Is t	the	(v) Did you	ı notıfy	(vi) Is	the	(vii) A mount of			
•	uppoi		(,	organization	organizati		the organi	•	organizat		monetary			
OI	ganiz	ation		(described on	col (i) list		ın col (i) d	•	col (i) org		support			
				lines 1 - 9 above	your gove	-	suppor	t?	ın the U	S ?				
				or IRC section (see	docume	nt/								
				instructions))		1				_				
					Yes	No	Yes	No	Yes	No				

Schedule A (Form 990 or 990-EZ) 2012 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do 31,300,129 30,811,266 21,205,301 22,368,002 19,870,413 125,555,111 not include any "unusual grants ") Tax revenues levied for the organization's benefit and either 0 0 paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 31,300,129 30,811,266 21,205,301 22,368,002 19,870,413 125,555,111 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 0 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 125,555,111 from line 4 Section B. Total Support Calendar year (or fiscal year **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (a) 2008 (f) Total beginning in) 🟲 31,300,129 22,368,002 Amounts from line 4 30,811,266 21,205,301 19,870,413 125,555,111 Gross income from interest, dividends, payments received on securities loans, rents, royalties 984,333 898,115 803,265 649,431 599,738 3,934,882 and income from similar sources 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 21,729 16,496 20,214 15,795 45,871 120,105 capital assets (Explain in Part IV) 11 Total support (Add lines 7 129,610,098 through 10) 12 Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 96 867 % Public support percentage for 2011 Schedule A, Part II, line 14 15 96 450 % 16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ►V and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

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

supported organization

instructions

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

	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
	business under section 513			-			
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
/a	and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and 3						
_	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	Unrelated business taxable income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
11	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493125017614

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

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

Supplemental Financial Statements

Open to Public Inspection

Name of the organization AMERICAN INSTITUTE FOR CANCER RESEARCH	·	Employer identification number
AMERICAN INSTITUTE FOR CANCER RESEARCH		52-1238026
Part I Organizations Maintaining Donor A	dvised Funds or Other Similar F	unds or Accounts. Complete if the
organization answered "Yes" to Form 99	(a) Donor advised funds	(b) Funds and other accounts
L Total number at end of year	(a) Donor advised funds	(b) I unus and other accounts
2 Aggregate contributions to (during year)		+
Aggregate grants from (during year)		
Aggregate value at end of year		
Did the organization inform all donors and donor adv funds are the organization's property, subject to the		nor advised Yes No
Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ber conferring impermissible private benefit?	donor advisors in writing that grant funds	s can be
Part II Conservation Easements. Complete	if the organization answered "Yes"	to Form 990. Part IV. line 7.
Purpose(s) of conservation easements held by the o Preservation of land for public use (e g , recreation of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held	rganization (check all that apply) on or education)	n historically important land area certified historic structure
easement on the last day of the tax year		
		Held at the End of the Year
a Total number of conservation easements		2a
b Total acreage restricted by conservation easements		2b
c Number of conservation easements on a certified his	• •	2c
d Number of conservation easements included in (c) a historic structure listed in the National Register		2d
Number of conservation easements modified, transfe	erred, released, extinguished, or terminat	ed by the organization during
the tax year -		
Number of states where property subject to conserv	ation easement is located ►	<u></u>
Does the organization have a written policy regarding enforcement of the conservation easements it holds		dling of violations, and Yes No
Staff and volunteer hours devoted to monitoring, insp	pecting, and enforcing conservation ease	ments during the year
 A mount of expenses incurred in monitoring, inspecti 	ng, and enforcing conservation easement	s during the year
▶ \$		
Does each conservation easement reported on line 2 and section $170(h)(4)(B)(II)^{2}$	2(d) above satisfy the requirements of se	ction 170(h)(4)(B)(i)
In Part XIII, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation easer	the footnote to the organization's financia	
Art III Organizations Maintaining Collection Complete if the organization answered		or Other Similar Assets.
If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar as service, provide, in Part XIII, the text of the footnote	5 116 (ASC 958), not to report in its reve sets held for public exhibition, education,	or research in furtherance of public
b If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar as service, provide the following amounts relating to the	sets held for public exhibition, education,	
(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
(ii) Assets included in Form 990, Part X		► \$
If the organization received or held works of art, hist following amounts required to be reported under SFA		
a Revenues included in Form 990, Part VIII, line 1		► \$

b Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art	, Histo	rical Tr	reasui	res, or O	the	r Similar As	sets (co	ntınued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, chec	k any of t	the follo	wing that a	re a	sıgnıfıcant use	ofits	
а	Public exhibition		dΓ	Loan	or exch	ange progr	ams			
b	Scholarly research		е Г	Othei	r					
c	Preservation for future generations									
4	Provide a description of the organization's c Part XIII	ollections and expla	ın how th	ney furthe	er the o	rganızatıon	's ex	empt purpose	ın	
5	During the year, did the organization solicit							ılar	_	_
	assets to be sold to raise funds rather than								Yes	l No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an ar					answere	a "Yo	es" to Form S	990,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?					r other ass	ets r		┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI $$	II and complete the	following	g table		_				
								An	nount	
С	Beginning balance						1c			
d	Additions during the year					_	1d			
е	Distributions during the year					-	1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	e 21?						┌ Yes	∏ No
b	If "Yes," explain the arrangement in Part XI	I Check here if the	explana	tion has	been pr	ovided in P	art X	III		
Pai	rt V Endowment Funds. Complete									
1-	Dagungung of ware balance	(a)Current year 1,326,269	(b) Prio	r year 1,838,340		o years back 2,018,703		hree years back 1,655,054	(e) Four y	1,725,829
1a L	Beginning of year balance	16,164		15,712		16,610		393,875		25,348
b	Contributions	10,104		13,712		10,010		333,073		23,340
С	Net investment earnings, gams, and losses	160,204		333,470		-16,764	_	163,325		-16,004
d	Grants or scholarships	122,601		861,253		180,209		193,551		80,119
e	Other expenditures for facilities and programs									
f	Administrative expenses									
g	End of year balance	1,380,036		1,326,269		1,838,340		2,018,703		1,655,054
2	Provide the estimated percentage of the cur	•	ce (line 1	.g, colum	ın (a)) h	eld as				
а	Board designated or quasi-endowment 🕨	1 200 %								
b	Permanent endowment ► 32 620 %									
C	Temporarily restricted endowment ► 66	180 %								
	•									
	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%								
За	The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse	•	atıon tha	t are held	d and a	dministered	for	the	Voc	No.
За	The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by	ssion of the organiz	ation tha	t are held	dandao	dmınıstered	d for		Yes	No No
3 a	The percentages in lines 2a, 2b, and 2c shows Are there endowment funds not in the possed organization by (i) unrelated organizations	ssion of the organiz	ation tha	t are held	d and a	dministered	l for	the 3a((i)	No No
	The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by	ssion of the organiz				dministered	d for	3a	(i) ii)	No
	The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by (i) unrelated organizations	ssion of the organize 	 d on Sch dowment	 edule R? t funds		dministered	d for	3a((i) ii)	No
b 4	The percentages in lines 2a, 2b, and 2c shows Are there endowment funds not in the possed organization by (i) unrelated organizations	ssion of the organize 	 d on Sch dowment	edule R? t funds X, line				3a((i) ii) b	No No
b 4	The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by (i) unrelated organizations	ssion of the organize 	d on Sch	 edule R? t funds		dministered	other	3a((i) ii) b	No
b 4 Par	The percentages in lines 2a, 2b, and 2c shows Are there endowment funds not in the possed organization by (i) unrelated organizations	ssion of the organize 	d on Sch	edule R? t funds X, line :		(b)Cost or (other	3a(3l	(i) ii) b	No No
b 4 Par	The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by (i) unrelated organizations	ssion of the organize 	d on Sch	edule R? t funds X, line :	10. or other stment)	(b)Cost or (other	3a(3l	(i) ii) b	No No Dook value
b 4 Par	The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by (i) unrelated organizations (ii) related organizations	ssion of the organize 	d on Sch	edule R? t funds X, line :	10. or other stment)	(b)Cost or obasis (oth	other	3a(3l	(i)	No No Dok value
b 4 Par la l b 6 c l	The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of t t VI Land, Buildings, and Equipment Description of property Land Buildings	ssion of the organize 	d on Sch	edule R? t funds X, line :	10. or other stment) 5,900	(b)Cost or obasis (oth	other er)	3a(3l (c) Accumulate depreciation	(i)	No No Dook value
1a b 6 c l d 6 e 0	The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by (i) unrelated organizations (ii) related organizations	ssion of the organize	d on Sch dowment 00, Part	edule R? t funds X, line : (a) Cost o basis (inve	10. or other stment) 5,900 0 0	(b)Cost or obasis (oth	other er)	(c) Accumulate depreciation	(i)	No No No Pook value 5,900

Part VII Investments—Other Securities. Se	ee Form 990, Part X, line 1	2.
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	F	
Part VIII Investments—Program Related. S		13.
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
(1) CHARITABLE GIFT ANNUITIES	1,895,768	F
(2) CHARITABLE REMAINDER UNITRUSTS	2,130,752	F
(3) CANCER RESEARCH FUND	1,432,210	F
-	► 5.458.730	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	0,100,100	
Part IX Other Assets. See Form 990, Part X, (a) Desc		(b) Book value
	. inperon	
(1) DUE FROM AFFILIATES		441,283
(2) BENEFICIAL INT PERPETUAL TRUST		386,138
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15.)	827,421
Part X Other Liabilities. See Form 990, Par	t X, line 25.	
1 (a) Description of liability	(b) Book value	
Federal income taxes	0	
DUE TO AFFILIATES	30,277	
LIABILITY CHARITABLE GIFT ANNUITIES		
	879,081	
LIABILITY CHARITABLE REMAINDER	1,066,329	
ACCRUED BENEFIT COST	501,439	
	+	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	2,477,126	
2 Fig 48 (ASC 740) Footpote In Part XIII provide the		nization's financial statements that we set the

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue	er B	eturn
1	Total revenue, gains, and other support per audited financial statements	1	22,312,621
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		22,312,021
a	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	571,849
3	Subtract line 2e from line 1	3	21,740,772
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	21,740,772
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
1	Total expenses and losses per audited financial statements	1	21,773,874
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	21,773,874
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 16,720		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	33,480
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	21,807,354

Part XIII Supplemental Information

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

Identifier	Return Reference	Explanation
PART XI, LINE 2D		CHANGE IN VALUE OF SPLIT INTEREST AGREEMENT LIABILITY 119,647 PENSION RELATED CHANGES OTHER THAN NET PERIODIC BENEFIT COSTS 247,687
C		TOTAL 367,334
PART V, LINE 4		The intended uses of the organization's endowment funds Endowment funds are established to further the mission of the A merican Institute for Cancer Research The person establishing the fund designated the purpose of their fund, (i e, cancer research, education or general operating)
SCHEDULE D, PART X		FIN 48 MANAGEMENT ANNUALLY REVIEWS ITS TAX POSITIONS AND HAS DETERMINED THAT THERE ARE NO UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS
Part XII, Line 4b		Refund of prior year grants \$16,760

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

As Filed Data -

DLN: 93493125017614

SCHEDULE F (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

Statement of Activities Outside the United States

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Schedule F (Form 990) 2012

Employer identification number

4 M E	RICAN INSTITUTE FOR CANCE	RRESEARCH			52-1238026	
Pa	General Information "Yes" to Form 990, Par			ne United States. Co		ation answered
1	For grantmakers. Does the cassistance, the grantees' eligible the grants or assistance?	gibility for the g	grants or assis	tance, and the selection	on criteria used to awa	ard
2	For grantmakers. Describe in the United States.	n Part V the or	ganızatıon's pı	rocedures for monitorii	ng the use of grant fu	nds outside
3	Activites per Region (The follow	ice is needed)				
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	for and investments in region
	Europe (Including Iceland and Greenland)		1	Grantmakıng		330,13
32	Sub-total		1			330,13
	Total from continuation sheets to Part I					330,13
c	Totals (add lines 3a and 3b)		1			330 13

Cat No 50082W

Schedule F (Form 990) 2012

Pa				nizations or Entitie eived more than \$5,0					' to Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other
			Europe (Including Iceland and Greenland)	EDUCATION GRANT	330,136	WIRE			
2				ted above that are re e or counsel has pro					1
3	Enter total nun	nher of other	organizations or en	tities			▶		

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

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

Part IV Foreign Forms

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

Schedule F (Form 990) 2012

Part V Supplemental Information

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

I dentifier	ReturnReference	Explanation
AICR PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS OUTSIDE THE U S	SCHEDULE F, PART I, LINE 2	PROGRESS REPORT AT THE END OF THE FIRST YEAR OF ANY TWO-YEAR GRANT, THE PRINCIPAL INVESTIGATOR MUST SUBMIT A PROGRESS REPORT, INCLUDING ABSTRACTS AND PUBLICATIONS OF RESEARCH SUPPORTED IN WHOLE OR IN PART BY AICR AT THE DISCRETION OF AICR, FUNDS FOR THE SECOND YEAR OF THE GRANT MAY BE WITHHELD BASED ON THE PROGRESS REPORT OR IF PROGRESS REPORTS ARE NOT SUBMITTED FINAL SCIENTIFIC REPORT WITHIN THREE MONTHS OF THE COMPLETION OF THE GRANT PERIOD, AICR REQUIRES A FINAL COMPREHENSIVE REPORT TO OUTLINE THE PROJECT'S ACCOMPLISHMENTS FAILURE TO SUBMIT A FINAL REPORT WILL RESULT IN AUTOMATIC DISQUALIFICATION FROM SUBMITTING A GRANT APPLICATION TO AICR FOR TWO YEARS FINAL FINANCIAL REPORT A FINAL REPORT OF EXPENDITURES MUST BE SUBMITTED WITHIN THREE MONTHS OF THE TERMINATION OF THE GRANT, TOGETHER WITH THE REFUND OF ANY UNSPENT FUNDS UNSPENT FUNDS FROM AN EXISTING GRANT MAY ONLY BE CARRIED FORWARD AS A NO-COST EXTENSION TO THE GRANT TERM WITH THE WRITTEN PERMISSION OF AICR BEFORE GRANT RECOMMENDATIONS ARE PRESENTED TO THE BOARD OF DIRECTORS FOR APPROVAL, ALL APPLICANTS ARE CHECKED AND CLEARED AGAINST THE FOLLOWING TERRORIST WATCH LISTS SPECIALLY DESIGNATED NATIONALS (SDN), STATE DEPARTMENT TERRORIST EXCLUSIONS LIST, UNITED NATIONS CONSOLIDATED LIST WITH RESPECT TO AL-QAIDA, THE TALIBAN, AND OSAMA
COUEDING E DART LANG 2		BIN LADEN, AND THE EUROPEAN UNION TERRORIST LIST
SCHEDULE F, PART I, LINE 3, COLUMN (F)		GRANTMAKING EXPENDITURES ARE RECORDED ON THE ACCRUAL BASIS
		+
	<u> </u>	Schodula E (Forms 000) 2012

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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information Regarding

Fundraising or Gaming Activities

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

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

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Employer identification number

ΔМ	ERICAN INSTITUTE FOR C	ANCER RESEARCH				52-123802	6
Pá	art I Fundraising Ac	tivities. Complete	e if the oi	rganızatı	ion answered "Yes" to	Form 990, Part I	V, line 17.
	Indicate whether the organ Mail solicitations Internet and email sol Phone solicitations In-person solicitations Did the organization have or key employees listed in If "Yes," list the ten highest to be compensated at lease	government grants ernment grants events s, directors, trustees ndraising services?	▽ Yes ► N o undraiser is				
	(i) Name and address of ındıvıdual or entity (fundraiser)	(ii) Activity	fundrais custo cont contrib	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(or retained by)
	INFOCISION	PHONE	Yes	No			
	MANAGEMENT CORP			No	5,300,678	2,315,20	2,985,477
	DIRECT RESPONSE CONSULTING	MAIL		No	7,552,555	488,46	7,064,090
Γot	al			<u> </u>	12,853,233	2,803,66	6 10,049,567
3	List all states in which the licensing AK, AZ, AR, CA, CO, CT, DI	E, DC, FL, GA, HI, IC), IL, IN, I	censed to	I o solicit funds or has bee o', LA, ME, MD, MA, MI, N	n notified it is exemp	t from registration or

Pa	rt II	Fundraising Events. Com more than \$15,000 of fundra events with gross receipts g	aising event contribu	cion answered "Yes" to tions and gross income	Form 990, Part IV, li e on Form 990-EZ, lin	ne 18, or reported es 1 and 6b. List
		<u> </u>	(a) Event #1	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))
_			(event type)	(event type)	(total number)	(3)
Revenue	1	Gross receipts				
9. 9.	2	Less Contributions				
<u>~</u>	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
Expenses	5	Noncash prizes				
	6	Rent/facility costs				
ğ	7	Food and beverages .				
Direct	8	Entertainment				
ā	9	Other direct expenses .				
	10	Direct expense summary Add lin	es 4 through 9 ın colum	n (d)		()
	11	Net income summary Combine Ii	ne 3, column (d), and Iır	e 10		
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted more than
<u>—</u>		\$13,000 OH TOTHI 330 EZ, III	(a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming (add
Revenue				bingo/progressive bingo		col (a) through col (c))
<u>R</u>	1	Gross revenue				
ses	2	Cash prizes				
Expenses	3	Non-cash prizes				
	4	Rent/facility costs				
Direct	5	Other direct expenses				
			☐ Yes	┌ Yes	┌ Yes	
	6	Volunteer labor	□ No	│ No	┌ No	
	7	Direct expense summary Add lines	s 2 through 5 ın column	(d)		
	8	Net gaming income summary Com	bine lines 1 and 7 in co	lumn (d)	🛌	
9	Ent	er the state(s) in which the organiza	ation operates gaming a	ctivities		
а		the organization licensed to operate				. 「Yes 「No
b	If"	No," explain				
10a b		re any of the organization's gaming Yes," explain	icenses revoked, suspe	ended or terminated during	the tax year?	

oes	the organization operate gaming activities with nonmembers?
L 2	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?
.3	Indicate the percentage of gaming activity operated in
а	The organization's facility
b	An outside facility
4	Enter the name and address of the person who prepares the organization's gaming/special events books and records
	Name ▶
	Address ►
.5a	Does the organization have a contract with a third party from whom the organization receives gaming
	revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization 🟲 \$ and the
	amount of gaming revenue retained by the third party 🕨 \$
c	If "Yes," enter name and address of the third party
	Name ▶
	Address ►
6	Gaming manager information
	Name ▶
	Gaming manager compensation 🟲 \$
	Description of services provided -
	Director/officer Employee Independent contractor
7	Mandatory distributions
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license?
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent
	in the organization's own exempt activities during the tax year 🕨 💲

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

Identifier	Return Reference	Explanation
FUNDRAISERS	PART IV	Payments to Infocision Management Corporation include fees for professional fundraising services plus fundraising expenses - list development, data processing, printing and mailhouse fees Invoices clearly distinguish fundraising fees from fundraising expenses Additional costs, such as caging, bank charges, other data processing and postage associated with phone solicitations are paid directly to the vendor and therefore not included in schedule G, column (v) amounts Payments to Direct Response Consulting Services are for professional fundraising services only All other fundraising expenses associated with direct mail fundraising are paid directly to the vendor providing the service and therefore not included in schedule G, column (v) amounts PART I, LINE 3 THIS LIST INCLUDES STATES THAT REQUIRE REGISTRATION FOR SOLICITATION AND OTHER STATES THAT REQUIRE AUTHORIZATION TO TRANSACT BUSINESS IT DOES NOT INCLUDE STATES THAT DO NOT REQUIRE REGISTRATION
	<u>'</u>	•

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Schedule I

Part I General Information on Grants and Assistance

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

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

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

OMB No 1545-0047

DLN: 93493125017614

Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

Name of the organization AMERICAN INSTITUTE FOR CANCER RESEARCH Employer identification number

52-1238026

rt II Grants and Othe Form 990, Part IV,		y recipient that receiv					d "Yes" to
a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
) Texas A&M Agrı Lıfe search onsored Research rvices 78 TMU illege Station,TX 77843	74-6000541	501(c)(3)	165,000				RESEARCH GRANT
University of Colorado nver schutz Medical Campus 001 East 11th Place nver, CO 80011	84-6000555	501(c)(3)	163,000				RESEARCH GRANT
) Marshall University search Corporation 11 11th St Suite 1400 intington, WV 25701	55-0683361	501(c)(3)	165,000				RESEARCH GRANT
) Thomas Jefferson Iversity 20 Walnut St RM 528 Iladelphia, PA 19107	23-1352651	501(c)(3)	165,000				RESEARCH GRANT
Providence Portland dical Center 35 NE 47th Ave rtland, OR 97213	93-0386906	501(c)(3)	165,000				RESEARCH GRAN ⁻
Michigan State University ice of Sponsored Programs 1 Administration Bldg st Lansing, MI 48824	38-6005984	501(c)(3)	164,998				RESEARCH GRAN
Sloan-Kettering Institute Cancer Research ice of Research Project min 75 New York Ave w York, NY 10065	13-1924236	501(c)(3)	165,000				RESEARCH GRAN
University of Connecticut alth Center ice of Research Finance 3 Farmington Ave MC- 35 mington, CT 06030	52-1725543	501(c)(3)	311,352				MATCHING RESEARCH GRAN
University of Minnesota gents Office V 5957 PO BOX 1450 nneapolis,MN 55485	41-6007513	501(c)(3)	247,500				MATCHING RESEARCH GRAN
)) University of North rolina at Chapel Hill	56-6001393	501(c)(3)	50,000				FELLOWSHIP
.) Women in Government undation Inc 13 Healthcare Summit 19 F Street NW Suite 710 shington,DC 20004	54-1527192	501(c)(3)	8,000				EDUCATION GRA
2) Careers Through Iinary Arts Program ucation Scholarship 0 West 57th Street Suite 15 WYORK, NY 10107	13-3662917	501(c)(3)	20,000				EDUCATION GRA

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

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d) A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
		İ	Ī	Ī	1
Part IV Supplemental Inform	ation	1		I	I.

Part IV Supplemental Information.

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

Identifier	Return Reference	Explanation
AICR PROCEDURES FOR	SCHEDULE I, PART I, LINE 2	PROGRESS REPORT AT THE END OF THE FIRST YEAR OF ANY TWO-YEAR GRANT, THE PRINCIPAL INVESTIGATOR
MONITORING THE USE		MUST SUBMIT A PROGRESS REPORT, INCLUDING ABSTRACTS AND PUBLICATIONS OF RESEARCH SUPPORTED IN
OF GRANT FUNDS IN		WHOLE OR IN PART BY AICR AT THE DISCRETION OF AICR, FUNDS FOR THE SECOND YEAR OF THE GRANT MAY BE
THE U S		WITHHELD BASED UPON THE PROGRESS REPORT OR IF PROGRESS REPORTS ARE NOT SUBMITTED FINAL
		SCIENTIFIC REPORT WITHIN THREE MONTHS OF THE COMPLETION OF THE GRANT PERIOD, AICR REQUIRES A
		FINAL COMPREHENSIVE REPORT TO OUTLINE THE PROJECT'S ACCOMPLISHMENTS FAILURE TO SUBMIT A FINAL
		REPORT WILL RESULT IN AUTOMATIC DISQUALIFICATION FROM SUBMITTING A GRANT APPLICATION TO AICR
		FOR TWO YEARS FINAL FINANCIAL REPORT A FINAL REPORT OF EXPENDITURES MUST BE SUBMITTED WITHIN
		THREE MONTHS OF THE TERMINATION OF THE GRANT, TOGETHER WITH THE REFUND OF ANY UNSPENT FUNDS
		UNSPENT FUNDS FROM AN EXISTING GRANT MAY ONLY BE CARRIED FORWARD AS A NO-COST EXTENSION OF THE
		GRANT TERM WITH THE WRITTEN PERMISSION OF AICR BEFORE GRANT RECOMMENDATIONS ARE PRESENTED TO
		THE BOARD OF DIRECTORS FOR APPROVAL, ALL APPLICANTS ARE CHECKED AND CLEARED AGAINST THE
		FOLLOWING TERRORIST WATCH LISTS SPECIALLY DESIGNATED NATIONALS (SDN), STATE DEPARTMENT
		TERRORIST EXCLUSIONS LIST, UNITED NATIONS CONSOLIDATED LIST WITH RESPECT TO AL-QAIDA, THE
		TALIBAN AND OSAMA BIN LADEN, AND THE EUROPEAN UNION TERRORIST LIST

Software ID:

Software Version:

EIN: 52-1238026

Name: AMERICAN INSTITUTE FOR CANCER RESEARCH

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Texas A&M Agrı Lıfe ResearchSponsored Research Services 3578 TMU College Station,TX 77843	74-6000541	501(c)(3)	165,000				RESEARCH GRANT
University of Colorado DenverAnschutz Medical Campus 13001 East 11th Place Denver,CO 80011	84-6000555	501(c)(3)	163,000				RESEARCH GRANT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Marshall University Research Corporation4011 11th St Suite 1400 Huntington, WV 25701	55-0683361	501(c)(3)	165,000				RESEARCH GRANT
Thomas Jefferson University 1020 Walnut St RM 528 Philadelphia, PA 19107	23-1352651	501(c)(3)	165,000				RESEARCH GRANT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Providence Portland Medical Center1235 NE 47th Ave Portland, OR 97213	93-0386906	501(c)(3)	165,000				RESEARCH GRANT
Michigan State University Office of Sponsored Programs 301 Administration Bldg East Lansing, MI 48824	38-6005984	501(c)(3)	164,998				RESEARCH GRANT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Sloan-Kettering Institute for Cancer ResearchOffice of Research Project Admin 1275 New York Ave New York, NY 10065	13-1924236	501(c)(3)	165,000				RESEARCH GRANT
University of Connecticut Health CenterOffice of Research Finance 263 Farmington Ave MC- 5335 Farmington, CT 06030	52-1725543	501(c)(3)	311,352				MATCHING RESEARCH GRANT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Minnesota Regents Office NW 5957 PO BOX 1450 Minneapolis, MN 55485	41-6007513	501(c)(3)	247,500				MATCHING RESEARCH GRANT
University of North Carolina at Chapel Hill	56-6001393	501(c)(3)	50,000				FELLO WSHIP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Women in Government Foundation Inc2013 Healthcare Summit 1319 F Street NW Suite 710 Washington, DC 20004	54-1527192	501(c)(3)	8,000				EDUCATION GRANT
Careers Through Culinary Arts ProgramEducation Scholarship 250 West 57th Street Suite 2015 NEW YORK, NY 10107	13-3662917	501(c)(3)	20,000				EDUCATION GRANT

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OMB No 1545-0047

Inspection

Open to Public

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

AMERICAN INSTITUTE FOR CANCER RESEARCH

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

Compensation Information

Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Employer identification number

52-1238026

Pa	rt I Questions Regarding Compensation	on				
					Yes	No
1a	Check the appropriate box(es) if the organization p 990, Part VII, Section A, line 1a Complete Part I		ny of the following to or for a person listed in Form ide any relevant information regarding these items			
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the reimbursement or provision of all of the expenses			1b		
2	Did the organization require substantiation prior to directors, trustees, and the CEO/Executive Direct			2		
3	Indicate which, if any, of the following the filing orgonganization's CEO/Executive Director Check all used by a related organization to establish compe	that apply				
	Compensation committee	Г	Written employment contract			
	☐ Independent compensation consultant	<u> </u>	Compensation survey or study			
	Form 990 of other organizations	굣	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990 or a related organization	, Part VII	, Section A , line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-contro	ol paymen	t?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?					
c						
	If "Yes" to any of lines 4a-c, list the persons and					
	Only 501(c)(3) and 501(c)(4) organizations only r	nust comp	olete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section compensation contingent on the revenues of	A, line 1a	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		No
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section compensation contingent on the net earnings of	A, line 1a	, did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		No
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section payments not described in lines 5 and 6? If "Yes,"			7		No
8			ccured pursuant to a contract that was tions section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III			8		No
9	If "Yes" to line 8, did the organization also follow t section 53 4958-6(c)?	the rebutta	able presumption procedure described in Regulations	9		

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

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

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & ıncentıve compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)MARILYN GENTRY PRESIDENT, WCRF INTL	(i)			328,400		11,030	339,430	
(2)KELLY B BROWNING CHIEF EXECUTIVE OFFICER	(i) (ii)	293,965		18,290		25,504	319,469 18,290	
(3)KATHRYN L WARD SENIOR VICE PRESIDENT	(i) (ii)	202,111				10,342	212,453	
(4)STEPHENIE L LOWE SENIOR VICE PRESIDENT	(i) (ii)	144,276				26,861	171,137	
(5)DEIRDRE MCGINLEY GIESER SENIOR VICE PRESIDENT	(i) (ii)	144,310				26,771	171,081	

Schedule J (Form 990) 2012

Part III Supplemental Information

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

A 130 complete this part for any addition	Also complete this part for any additional information						
Identifier	Return Reference	Explanation					
SUPPLEMENTAL RETIREMENT PLAN	PART I, LINE 4(B)	EFFECTIVE JANUARY 1, 2001, AICR'S BOARD OF DIRECTORS ADOPTED A SUPPLEMENTAL RETIREMENT BENEFIT ARRANGEMENT FOR THE INSTITUTE'S PRESIDENT AND CHIEF EXECUTIVE OFFICER IN RECOGNITION OF THEIR LONG TERM SERVICE AND CONTINUING COMMITMENT TO THE CHARITABLE ACTIVITIES OF AICR THE SUPPLEMENTAL RETIREMENT BENEFIT IS EQUAL TO THE LUMP SUM PRESENT VALUE OF THE SINGLE LIFE ANNUITY IN THE AMOUNT OF 1% OF AVERAGE COMPENSATION FOR EACH YEAR OF SERVICE WITH AICR AND VESTED OVER A FIVE- YEAR PERIOD BOTH EXECUTIVES ARE FULLY VESTED SUPPLEMENTAL RETIREMENT BENEFIT FOR 2012 KELLY B BROWNING (CHIEF EXECUTIVE OFFICER) NONE IN 2012, MS GENTRY NO LONGER PARTICIPATED IN THIS PLAN					
PART II, SECTION (B)(III), LINE (II)		OFFICERS, DIRECTORS, TRUSTEES, KEY EMPLOYEES, AND HIGHEST COMPENSATED EMPLOYEES FOR MARILYN GENTRY (PRESIDENT, WCRF INTERNATIONAL) 328,400 MS GENTRY'S COMPENSATION PACKAGE IS PAID BY WCRF INTERNATIONAL AICR IS REQUIRED TO REPORT ALL COMPENSATION PAID TO MS GENTRY BY ALL OF AICR'S AFFILIATES AICR DOES NOT PAY MS GENTRY AS AN EMPLOYEE OF AICR KELLY B BROWNING (CHIEF EXECUTIVE OFFICER) 18,290 MR BROWNING RECEIVES THE ABOVE COMPENSATION FROM WCRF INTERNATIONAL AICR IS REQUIRED TO REPORT ALL COMPENSATION PAID TO MR BROWNING BY ALL OF AICR'S AFFILIATES AICR DOES NOT PAY FOR THIS COMPENSATION					

Schedule J (Form 990) 2012

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DLN: 93493125017614

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

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

Noncash Contributions

Open to Public Inspection

Name of the organization **Employer identification number** AMERICAN INSTITUTE FOR CANCER RESEARCH 52-1238026 Part I Types of Property (d) (a) (b) (c) Check Number of contributions Noncash contribution Method of determining ıf or items contributed amounts reported on noncash contribution amounts applicable Form 990, Part VIII, line 1 g 1 Art-Works of art 2 Art—Historical treasures Art—Fractional interests 4 Books and publications Clothing and household goods Cars and other vehicles . . **7** Boats and planes . . . Intellectual property . . . 27,518 FMV Securities—Publicly traded . Χ 6 10 Securities—Closely held stock 11 Securities—Partnership, LLC, or trust interests 12 Securities-Miscellaneous . . 13 Qualified conservation contribution—Historic structures 14 Oualified conservation contribution—Other . . . Real estate—Residential . 16 Real estate—Commercial . 17 Real estate—Other . . . **18** Collectibles 19 Food inventory . . . 20 Drugs and medical supplies . **21** Taxidermy Historical artifacts 23 Scientific specimens . . Archeological artifacts . 24 25 Other►(__ 26 Other ▶(___ **27** Other ▶(___ 28 Other ► (_ Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement . Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30a No **b** If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash

b If "Yes," describe in Part II

describe in Part II

31

32a

Yes

Νo

Page 2

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

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

Identifier Return Reference Explanation

Schedule M (Form 990) (2012)

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As Filed Data -

DLN: 93493125017614

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047
2012
Open to Public

Inspection

Name of the organization AMERICAN INSTITUTE FOR CANCER RESEARCH	Employer ident if i	cation number
	52-1238026	

ldentifier	Return Reference	Explanation
FORM 990, PART XI, LINE 9	RECONCILIATION OF NET ASSETS	PENSION RELATED CHANGES OTHER THAN NET 247,687 PERIODIC BENEFIT COSTS CHANGE IN VALUE OF SPLIT-INTEREST 119,647 AGREEMENT LIABILITY Grant Refunds from Prior Year 16,760 TOTAL 384,094

Identifier	Return Reference	Explanation
FORM 990, Part VI Governance		Line 11 b - The 990 form is prepared and reviewed in detail by keystaff in the AICR accounting department. The 990 form is then reviewed by AICR executive management, KPMG and the law firm Steptoe & Johnson KPMG and Steptoe & Johnson both conduct detailed reviews of the 990 form. Once the 990 form and accompanying schedules are in final draft form, the AICR Board of directors are asked to review and provide feedback prior to the filing. Line 12c - The Institute's Board of Directors has a conflict of interest policy in effect. A copy of the policy is provided to each director, officer and staff member of AICR who is presently serving in a capacity where a conflict of interest could arise. The policy is reviewed annually. If the Board determines that changes do not need to be made, the policy is reaffirmed. New directors, officers, and staff members are advised of the policy in effect upon taking office or upon the start of employment, as the case may be. Since fiscal year 2010, Directors, Officers, executives, and senior level management staff have been required to sign a "Declaration of Lack of Conflict of Interest." The policy provides that in the event of a conflict of interest relevant to a matter requiring action by the Board, the person shall not vote on the matter. The person having a conflict of meterst shall provide the Board (or committee of the Board, as the case may be), with any and all relevant information, and shall retire from the room in which the Board (or committee of the Board, as the case may be) is meeting concerning such matter, and shall not participate in the final deliberation or decision regarding the matter under consideration. The mnutes of the meeting of the Board (or committee of the Board, as the case may be) shall reflect that the conflict of interest was disclosed and that the interested person was not present during the final discussion of such matter ovote and did not vote on such matter. When there is a doubt as to whether a conflict of interest exists, the matter shall be re

Identifier	Return Reference	Explanation
Part III, Line 4b - Research		RESEARCH PROGRAMS Scientific study of the relationship of diet, physical activity, and weight management to cancer risk and survivorship continues to be one of the most promising a reas of cancer research. A substantial body of evidence shows that food, nutrition, and physical activity play important roles in cancer prevention, treatment, and survivorship. Re search shows that about one-third of the cases of some of the most common cancers could be prevented by appropriate food, nutrition, weight management, and physical activity. The A merican institute for Cancer Research (AICR) pioneered the funding of research examining diet and cancer in total through PY13 the institute has committed over \$100 million for hundreds of individual research projects at universities, hospitals and research centers throughout the United States and the world. AICR Annual Research Conference Starting in 1990, AICR has hosted an annual research conference to encourage and facilitate the exchange of ideas and information and to provide a forum for constructive debate on timely diet and cancer research topics. The conference provides a venue for researchers, scientists, medical and health professionals, and others to present and discuss their work. Planning for the November 2012 conference took place throughout the year. The conference was to include scientific sessions on food processing and the cancer process, transgenerational effects of diet, untrition, exercise and bone health in cancer a survivorship, epigenetic regulation – morRNAs and cancer prevention, the food environ ment and food policy and implications for cancer risk, and obesity and cancer risk. The scientific program for the conference was planned by the AICR Conference Program Committee, made up of the following individuals, all of whom agreed to serve on the conference program committee, made up of the following individuals, all of whom agreed to serve on the conference program committee for the next year's conference. John W Erdman, Jr., PhD (Chair) University of I

ldentifier	Return Reference	Explanation
Part III, Line 4b - Research		h grant applications undergo a peer review process modeled after the grant review process developed by the National Institutes of Health AICR's grant review process is one of only a few in the nation that meet the standards of the National Cancer Institute The AICR Gr ant Panels review applications for their scientific ment, the qualifications, experience and productivity of the investigators, the facilities available, and the promise for elucil dating the roles of food, nutrition, physical activity and weight management in cancer pre vention, treatment, and survivorship. The review process is strictly controlled, including procedures to avoid potential conflicts of interest. Peer reviewers are selected for their research expertise and their ability to bring a wide scope of scientific experience to the review process. Recommendations of the Grant Review Panels are forwarded to the AICR Bo and of Directors, which makes the final decisions on grant awards. AICR RESEARCH GRANTS FO R FISCAL YEAR 2013 During fiscal year 2013 the American Institute for Cancer Research committed \$1,789,850 for 12 peer-reviewed cancer research and education projects (8 investigat or initiated grants, 2 matching grants and 2 education grants). Investigator Initiated Grants. Interactive chemoprotective effects of dietary fat and fiber on adult intestinal stem cells Robert S. Chapkin, PhD Texas A&M Research Foundation College Station, Texas Anti-me tastatic activity of capsaicin in human small cell lung cancer Pyali Dasgupta, PhD Marsha II University Research Corporation Huntington, West Virginia Linking dietary folate, tissu e fitness and cancer James V. DeGregori, PhD University of Colorado Denver Aurora, Colorad o Detary zinc deficiency and modulation of gene expression in oral preneoplasia in p53-de ficient mice Louise Fong, PhD Thomas Jefferson University Philadelphia, Pennsylvania Vitam in E analog-induced tumor autophagy to enhance tumor immunity William Redmond, PhD Provide nce Portland Medical Center Portland, Oregon Plot study o

Identifier	Return Reference	Explanation
Part III, Line 4a - Education		EDUCATION PROGRAMS The American institute for Cancer Research (AICR) funds innovative rese arch on the roles of food, nutrition, physical activity and weight in cancer risk and surv worship. AICR also continuously interprets the global scientific literature and educates the public about the empowering message that emerges from the research. We can all take small, everyday steps that have been shown to help prevent, and survive, cancer. Research. The Work We Fund AICR was the first organization to devote itself to studying the role of diet and other lifestyle factors in lowering cancer risk. The research we have funded has helped transform a once-radical notion into a universally accepted medical fact Research is the basis of all programs at AICR Interpretation. Reports and Continuous Updates in 1997. AICR and its international affiliate the World Cancer Research Engle published the Expert Report "Food, Nutrition and the Prevention of Cancer a Global Perspective," which compre hensively assessed the mounting global evidence on nutrition and cancer risk. The reports conclusions were adopted by researchers, health professionals and policy makers, and set a new agenda for cancer research and education in the US and around the world. The field of diet-cancer research continued to grow. In 2007 AICR and its international affiliates published the second Expert Report, "Food, Nutrition, Physical Activity and the Prevention of Cancer a Global Perspective" it lad out a transparent methodology for evaluating the scientific literature which is now being adopted by researchers studying diet and cancer around the globe. Based on a review of data drawn from approximately 7,000 studies, the expert panel issued 10 Recommendations for Cancer Prevention. I Be as lean as possible with hout becoming underweight 2 Be physically active for at least 30 minutes every day. 3 A void sugary drinks Limit consumption of salt processed foods high in sugar or low in fiber, or high in fat). 4 Eat more of a variety of vegetables, if uits, whole

ldentifier	Return Reference	Explanation
Part III, Line 4a - Education		percent of respondents said the AICR New sletter had helped motivate them to make healthie in choices. Brochures and Fact Sheets Developed to place the latest cancer research finding is in a clear, easy-to-understand format, AICR brochures, leaflets and fact sheets reach se veral different audiences with our empowering message. In FY13, we offered seven brochure series. Healthy Living for Cancer Prevention (AICR's Recommendations and Guidelines). The New American Pate (A visual approach to meal-making for lower cancer risk). Facts on Preventing Cancer. (Answers to common questions). Stopping Cancer. (Information on preventing specific cancers). Cancer Survivor. Series (Evidence-based advice for patients, survivors and car egivers). Healthy Eating Anytime. (Tips to prevent obesity, a major cancer cause). Simple Ste ps for Physical Activity. (Practical advice for moving more). Also Materiales en Espanol. (B rochures for Spanish speakers). Individuals order single free copies or download them from the AICR website, health professionals make bulk purchases at significant discounts. AICR also distributes brochures at conferences, events and health fairs. In FY13, AICR distributed nearly 170,000 brochures. Health Aids. AICR avails itself of various health aids - including recipe cards, charts, tearsheets, magnets and more - to turn lowering cancer risk in to a "hands-on" experience. Individuals order single free copies, health professionals make e bulk purchases at significant discounts. AICR also distributes health aids at conference s, events and health fairs. In FY13, AICR distributed over 47,000 health aids. Science Now. New sletter For supporters and health fairs. In FY13, AICR distributed over 47,000 health aids. Science Now. New sletter For supporters and health professionals looking for deeper understanding of AICR's cancer research, the quarterly Science Now new sletter examines the study of diet, phy sical activity and weight in cancer prevention, treatment and survivorship. In FY13, over 100,000 people rec

Identifier	Return Reference	Explanation
Free E-publications		Free E publications AICR has developed a library of e-publications that deliver the latest information on lowering cancer risk straight to subscriber's inboxes. Our e-publications are reviewed by cancer researchers, clinicans, detettians, and AICR staff eNews is a monthly e-new sletter emphasizing the "take-home" message. How can I start living for lower can neer risk today? As of September 2013, over 371,000 people were subscribed to eNews. Healt he-Recipe is for those looking for ways to bring the research home with quick, easy and of elicious cancer. Protective meals All weekly recipes come from AICRs Test Kitchen with quick, easy and of elicious cancer. Protective meals All weekly recipes come from AICRs. Test Kitchen with quick easy and of elicious cancer. 2013, Health-e-Recipe had nearly 53,000 subscribers. Those looking to dig deeper into the research can do so by subscribing to Cancer Research. Update. This bit weekly digest of breaking news and current research in the fight against cancer reaches over 16,000 readers interested in the science of cancer risk, as well as he alth professionals looking to stay current, a 32% surge over the previous year. Health at Work is a quarterly e-publication that adapts. AICRs cancer prevention message to the work place By the close of FY13 over 8,000 human resource managers and wellness professionals received AICRs Health at Work, more than doubling FY12 totals. AICR Multimedia The AICR blog to Mew ancribing org), speaks to supporters, cancer patients of totals. AICR Multimedia The AICR blog to Mew ancribing org), speaks to supporters, cancer patients in a cancer patients of the AICR Bidgin research in the first professionals, the media and the general public Filled with tips, researcher profiles, recipes from the AICR Bidgin reased by 95% over FY12, to more than 75,000, total page views increased by 87%, to 136,000. On Facebook and Twitter (@aicreased by 87%, to 136,000. On Facebook and Twitter (@aicreased by 87%, to 136,000. On Facebook and Twitter (@aicreased by 8

ldentifier	Return Reference	Explanation
Free E- publications		st a free CancerResource toolkit for cancer patients, get advice from a registered dietiti an (via AlCR's "Nutrition Hotline") and much more Professional Publications AlCR reaches out to the medical, scientific and health policy communities with our expert reports, policy report and other media. In FY13, nearly 1,000 individuals at non-profit, private and public health organizations, government agencies and Boards of Health, hospitals and research centers ordered our professional publications. The New American Plate Cookbook To place AlCR's message about lowering cancer risk in a comprehensive and handsomely produced format, AlCR's New American Plate Cookbook (published by the University of California Press) is available in bookstores. Over 60,000 copies have been sold, and all royalties support AlC R cancer research.

ldentifier	Return Reference	Explanation
THE AICR/C- CAP Recipe Contest		In FY13 AICR partnered with C-CAP, a program that teaches culinary skills to underserved youth and helps them launch careers in hospitality and the culinary arts. Over 2000 students participated in a recipe contest to create and prepare delicious, healthy offerings according to AICR cancer prevention guidelines and win scholarships totaling \$10,000. By instilling messages about cancer prevention in a new generation of culinary professionals today, AICR is working to make dining out healthier tomorrow. Seminars, Exhibits and Conferences in FY13, AICR Education staff attended, presented, networked and distributed materials at various conferences and annual meetings, including. Academy of Nutrition and Dietetics Association of Community Cancer Centers American Association of Diabetes Educators American College of Sports Medicine Oncology Nursing Society Regional Survivorship Group American Society on Aging Women in Government Healthcare Summit Media Programs Press Releases in FY13, AICR distributed 20 press releases, statements, features and advisories distributed to its media contacts on a host of topics ranging from newly published research to practical, hands-on tips for moving more, staying lean and eating smart. As a result, US media outlets carried AICR news items over 7,970 times during FY13, a 30% increase over FY12. Over 104 million Americans read about AICR's message in their new spapers, another 156 million read about AICR in magazines, and wieb outlets that carried AICR messages reached a combined audience of 1 6 billion. The total number of impressions AICR's message made on the American population through the media in FY13 was 1.7 billion. AICR Health Features Program Every month, AICR provides ready-to-use content to small (<20,000 circulation) media outlets as new spaper columns featuring AICR's cancer-prevention message. Columns include. AICR Healthtalk (a question-and-answer column) and two recipe columns (From the AICR Test Kitchen.) In FY13, over 600 media outlets were subscribed.

DLN: 93493125017614

2012

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization
AMERICAN INSTITUTE FOR CANCER RESEARCH

52-1238036

52-1238026 Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) (b) Legal domicile (state Name, address, and EIN (if applicable) of disregarded entity Primary activity Total income End-of-year assets Direct controlling or foreign country) entity Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) (c) (e) (g) Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling Section 512(b) or foreign country) (if section 501(c)(3)) entity (13) controlled entity? Yes (1) WORLD CANCER RESEARCH FND UNITED KINGDOM AFFLD CHARITY UK AICR Yes 22 BEDFORD SQUARE LONDON WC1B 3HH (2) WORLD CANCER RESEARCH FUND HONG KONG AFFLD CHARITY AICR HK Yes 145 HENNESSY ROAD ROOM 1302 WANCHAI (3) WORLD CANCER RESEARCH FUND FRANCE AFFLD CHARITY FR UK ALLee DE LARCHE 9-11 **COURBEVOIE** (4) WORLD CANCER RESEARCH FUND INTERNATIONAL AFFILIATE BE AICR Yes 22 BEDFORD SQUARE LONDON WC1B 3HH

Part III Identification of Related Control because it had one or more re	Organizations Taxable elated organizations trea	as a Partn ted as a par	ership tnership	(Comp	lete if I the ta	the organiax year.)	zation ans	wered "Y	es" to	Form	1 990, Part	IV, lı	ine 3	4	
(a) Name, address, and EIN related organization	(a) Name, address, and EIN of		(c) Legal domicile (state or foreign country)	(d) Directontroll entity	t ling in	(e) Predominant icome(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?			
						514)			Yes	No		Yes	No		
Part IV Identification of Related Colors and Inc. 34 because it had one or	more related organizatio	ns treated a	s a corp		n or tri	ust during	the tax ye	ar.)	swere				Part		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Lega doma (state or count	al cile foreign		(d Direct co ent	introlling Typ	(e) e of entity orp, S corp, or trust)	(f) Share of tota Income	((g) are of en of-year assets	d- Percer owner	itage		(i) Section 512 (b)(13) controlled entity?	
(1) WCRF (TRADING) LIMITED	LIST RENTAL	UK		l	JK	c co	RP							Yes No	
BROADGATE TOWER PRIMROSE ST LONDON EC2A 2RS UK															
(2) CHARITABLE REMAINDER TRUST (5)	UNITRUST				AV	TRUS	ST								
1759 R STREET NW WASHINGTON, DC 20009	DEDDETHAL TOLL				NA AV	TDU	`T						_		
(3) PERPETUAL TRUST (1) 1759 R STREET NW WASHINGTON, DC 20009	PERPETUAL TRU				VA	TRUS	51								
,															

(4) WORLD CANCER RESEARCH FUND INTERNATIONAL

(5) WORLD CANCER RESEARCH FUND INTERNATIONAL

Part V	Transactions With Related Organizations (Complete if the organization and	swered "Yes" to Forn	n 990, Part IV, lın	e 34, 35b, or 36.)						
Not	e. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No			
1 During	the tax year, did the orgranization engage in any of the following transactions with one or more	related organizations li	sted in Parts II-IV?							
a Re	eipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No			
b Gift, grant, or capital contribution to related organization(s)										
c Gift, grant, or capital contribution from related organization(s)										
d Loa	ns or loan guarantees to or for related organization(s)				1d		No			
e Loa	ns or loan guarantees by related organization(s)				1e		No			
f Div	idends from related organization(s)				1f					
g Sal	e of assets to related organization(s)				1g		No			
h Pui	chase of assets from related organization(s)				1h		No			
i Exc	hange of assets with related organization(s)				1i		No			
j Lea	se of facilities, equipment, or other assets to related organization(s)				1j		No			
k Lea	se of facilities, equipment, or other assets from related organization(s)				1k		No			
l Performance of services or membership or fundraising solicitations for related organization(s)										
m Per	ormance of services or membership or fundraising solicitations by related organization(s)				1m		No			
n Sha	ring of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No			
o Sha	iring of paid employees with related organization(s)				10	Yes				
p Rei	mbursement paid to related organization(s) for expenses				1p	Yes				
q Rei	mbursement paid by related organization(s) for expenses				1 q	Yes				
r Oth	er transfer of cash or property to related organization(s)				1r		No			
s Oth	er transfer of cash or property from related organization(s)				1s	Yes				
2 Iftl	ne answer to any of the above is "Yes," see the instructions for information on who must comple	te this line, including co	overed relationships	and transaction thresholds						
	(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining am	ount ı	nvolved				
1) WORLD	CANCER RESEARCH FUND INTERNATIONAL	Q	148,474	CASH						
2) WORLD	CANCER RESEARCH FUND INTERNATIONAL	L	977,424	CASH						
3) WORLD	CANCER RESEARCH FUND INTERNATIONAL	В	330,136	CASH						

77,320 CASH

1,025,390 CASH

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross)

revenue) that was not a related organization See instructions re	garding exclu	sion for ce		nent	partnerships				•	,		Ī	
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	org	(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	,	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	_	(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

Additional Data Return to Form

Software ID:

Software Version:

EIN: 52-1238026

Name: AMERICAN INSTITUTE FOR CANCER RESEARCH

Schedule R (Form 990) 2012

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Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)									
Identifier	Return Reference	Explanation							
•									