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Form 990



Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

Information about Form 990 and its instructions is at www.irs.gov/form990

OMB No 1545-0047

2013

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning 04-01-2013, 2013, and ending 03-31-2014

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Terminated

☐ Amended return

☐ Application pending

C Name of organization

SUSAN G KOMEN BREAST CANCER FOUNDATION INC

Doing Business As

Susan G Komen

Number and street (or P O box if mail is not delivered to street address)

5005 LBJ Freeway Suite 250

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

Dallas, TX 752446125

F Name and address of principal officer

Dr Judith Salerno

5005 LBJ Freeway

Dallas, TX 752446125

H(a) Is this a group return for subordinates?

☐ Yes ☒ No

H(b) Are all subordinates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number

7164

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) () ☐ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website:

www.komen.org

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation

1982

M State of legal domicile

TX

Part I		Summary	
Activities & Governance	1	Briefly describe the organization's mission or most significant activities AT SUSAN G KOMEN, WE ARE COMMITTED TO ENDING BREAST CANCER FOREVER BY EMPOWERING PEOPLE, ENERGIZING SCIENCE TO FIND THE CURES AND ENSURING QUALITY CARE FOR ALL PEOPLE, EVERYWHERE	
	2	Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets	
	3	Number of voting members of the governing body (Part VI, line 1a)	10
	4	Number of independent voting members of the governing body (Part VI, line 1b)	9
	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	280
	6	Total number of volunteers (estimate if necessary)	7,792
Revenue	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0
	b	Net unrelated business taxable income from Form 990-T, line 34	
	8	Contributions and grants (Part VIII, line 1h)	118,656,952
	9	Program service revenue (Part VIII, line 2g)	26,281,480
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	7,368,340
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-5,984,835
Expenses	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	146,321,937
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	49,882,918
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	25,941,318
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	1,598,294
	b	Total fundraising expenses (Part IX, column (D), line 25) ☐ 13,956,943	
Net Assets or Fund Balances	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	82,440,666
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	159,863,196
	19	Revenue less expenses Subtract line 18 from line 12	-13,541,259
	20	Total assets (Part X, line 16)	294,589,250
	21	Total liabilities (Part X, line 26)	175,912,920
	22	Net assets or fund balances Subtract line 21 from line 20	118,676,330

Part II

Signature Block

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

Sign Here

Signature of officer

2014-12-23

Date

JUDITH SALERNO CEO

Type or print name and title

Print/Type preparer's name

KATHY PITTS

Preparer's signature

Date

Check ☐ if self-employed

PTIN P00292940

Firm's name

ERNST & YOUNG US LLP

Firm's EIN

Firm's address

1901 SIXTH AVENUE NORTH SUITE 1200

BIRMINGHAM, AL 35203

Phone no

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

☐ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2013)

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1

Briefly describe the organization's mission

At Susan G KOMEN, we are committed to ending breast cancer forever by empowering people, energizing science to find the cures and ensuring quality care for all people, everywhere

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes

No

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

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes

No

If "Yes," describe these changes on Schedule O

4

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

4a

(Code) (Expenses \$ 45,608,289 including grants of \$ 35,112,217) (Revenue \$ 23,368,295)

Grants to other non-profit organizations to support breast cancer research, as well as research resources and conferences that further the breast cancer research agenda See Schedule O for additional details

4b

(Code) (Expenses \$ 50,963,999 including grants of \$ 2,329,301) (Revenue \$ 128,569)

Public health education programs to increase the public's awareness of breast cancer including, among other things, early detection and treatment See Schedule O for additional details

4c

(Code) (Expenses \$ 3,285,777 including grants of \$ 884,234) (Revenue \$ 0)

Breast Cancer screening, diagnosis and treatment programs and grants See schedule O for additional details

4d

Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses

99,858,065

Form 990 (2013)

Part IV

Checklist of Required Schedules

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

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	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? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If so, complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	187	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	280	
2b 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).		Yes	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?			No
3b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.			
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)?			No
4b If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			No
5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
5c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
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?			No
6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			
7 Organizations that may receive deductible contributions under section 170(c).			
7a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		Yes	
7b If "Yes," did the organization notify the donor of the value of the goods or services provided?		Yes	
7c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			No
7d If "Yes," indicate the number of Forms 8282 filed during the year.			
7e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			No
7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			No
7g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			
7h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			
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?			
9 Sponsoring organizations maintaining donor advised funds.			
9a Did the organization make any taxable distributions under section 4966?			
9b Did the organization make a distribution to a donor, donor advisor, or related person?			
10 Section 501(c)(7) organizations. Enter			
10a Initiation fees and capital contributions included on Part VIII, line 12.			
10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.			
11 Section 501(c)(12) organizations. Enter			
11a Gross income from members or shareholders.			
11b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			
12b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
13a 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.			
13b 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.			
13c Enter the amount of reserves on hand.			
14a Did the organization receive any payments for indoor tanning services during the tax year?			No
14b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.			

Part VI

Governance, Management, and Disclosure

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

Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	10	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
1b	Enter the number of voting members included in line 1a, above, who are independent	9	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	8a	Yes
8b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
11b	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
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
12c	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?		
15a	The organization's CEO, Executive Director, or top management official	15a	Yes
15b	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
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, HI, IL, IN, KS, KY, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	DR JUDITH SALERNO 5005 LBJ Freeway Suite 250 Dallas, TX 752446125 (972) 855-1600

Part VII

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

List all of the organization's **current** key employees, if any See instructions for definition of "key employee "

List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Linda Custard CHAIR OF THE BOARD (BEG 4/13)	30 0 0 0	X		X				0	0	0
(2) Jane Abraham BOD Member	1 0 0 0	X						0	0	0
(3) Connie O'Neill BOD Member & Treasurer	1 0 0 0	X		X				0	0	0
(4) John D Raffaelli BOD Member	1 0 0 0	X						0	0	0
(5) Tricia Ory BOD Member	1 0 0 0	X						0	0	0
(6) Alan D Feld BOD Member	1 0 0 0	X						0	0	0
(7) Dr Olofunmlayo Olopade BOD Member	1 0 0 0	X						0	0	0
(8) Nancy G Brinker Founder & CHAIR GLOBAL STRTGY	55 0 0 0	X		X				480,784	0	25,702
(9) Linda Wilkins BOD Member (Begin 4/13)	1 0 0 0	X						0	0	0
(10) Susie Knopf BOD Member (Begin 4/13)	1 0 0 0	X						0	0	0
(11) Mark Nadolny Chief Financial Officer	55 0 0 0			X				319,324	0	33,820
(12) Dr Judith Salerno CEO (Begin 9/13)	55 0 0 0			X				209,120	0	3,399
(13) Ellen Willmott Gen Counsel & Secy	55 0 0 0			X				257,129	0	16,634
(14) Lesley Lurie Assistant Secretary	55 0 0 0			X				193,989	0	27,029
(15) Lynn Erdman VP Community Health (End 5/13)	55 0 0 0				X			154,306	0	17,159
(16) Kay Merrell VP, Human Resources	55 0 0 0				X			211,345	0	29,318
(17) David Dawson VP, Information Technology	55 0 0 0				X			215,589	0	33,841

Part VII

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (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) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) Chandini Porteus CHIEF MISSION OFFCR (BEG 6/13)	55 0 0 0				X			245,129	0	25,953
(19) Dorothy Jones VP, Marketing (End 12/13)	55 0 0 0				X			291,286	0	25,213
(20) Carol Corcoran SVP Global Networks (End 8/13)	55 0 0 0				X			161,298	0	16,651
(21) Miguel Perez VP Affiliate Ntwrk (BEG 9/14)	55 0 0 0					X		146,771	0	8,392
(22) Wendy Carter Director, Global Outreach	55 0 0 0					X		169,046	0	7,569
(23) Andrea Rader Managing Director, Comm	55 0 0 0					X		158,075	0	21,587
(24) Victoria Wolodzko Mng Director, Grants & PrOG AD	55 0 0 0					X		154,807	0	16,874
(25) Adine Zornow Director, Development	55 0 0 0					X		144,175	0	12,785
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								3,512,173	0	321,926

2

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization▶44

3

Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*

3

No

4

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? *If "Yes," complete Schedule J for such individual*

4

Yes

5

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*

5

No

Section B. Independent Contractors

1

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

(A) Name and business address	(B) Description of services	(C) Compensation
Event 360 Inc, 205 N Michigan Avenue Chicago IL 606015927	Event Management	7,608,194
Merkle Response Services Inc, PO Box 64897 Baltimore MD 21264	Donation processing	2,470,128
Convio Inc, PO Box 671445 Dallas TX 752671445	Donation processing	1,683,144
Radarworks, 6100 Wilshire Blvd LOS ANGELES CA 90048	MARKETING	1,479,909
Pangea Global AIDS Foundation, 436 14th Street Suite 920 OAKLAND CA 94612	Screening program	664,000

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 ▶25

Part VIII

Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a1,192,505			
	b	Membership dues	1b			
	c	Fundraising events	1c41,977,575			
	d	Related organizations	1d			
	e	Government grants (contributions)	1e			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f48,436,492			
	g	Noncash contributions included in lines 1a-1f \$	28,566			
	h	Total. Add lines 1a-1f	91,606,572			
Program Service Revenue	Business Code					
	2a	Affiliate Payments	90009923,368,295	23,368,295	0	0
	b					
	c					
	d					
	e					
	f	All other program service revenue				
	g	Total. Add lines 2a-2f	23,368,295			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	3,881,425			3,881,425
	4	Income from investment of tax-exempt bond proceeds	0			
	5	Royalties	183,321			183,321
	(i) Real		(ii) Personal			
	6a	Gross rents				
	b	Less rental expenses				
	c	Rental income or (loss)	0	0		
	d	Net rental income or (loss)	0			
	(i) Securities		(ii) Other			
	7a	Gross amount from sales of assets other than inventory	63,346,545	0		
	b	Less cost or other basis and sales expenses	54,445,976	0		
	c	Gain or (loss)	8,900,569	0		
	d	Net gain or (loss)	8,900,569			8,900,569
	8a	Gross income from fundraising events (not including \$ 41,977,575 of contributions reported on line 1c) See Part IV, line 18				
	a		2,695,217			
	b	Less direct expenses	b8,160,822			
	c	Net income or (loss) from fundraising events	-5,465,605			-5,465,605
	9a	Gross income from gaming activities See Part IV, line 19				
	a					
	b	Less direct expenses	b			
	c	Net income or (loss) from gaming activities	0			
	10a	Gross sales of inventory, less returns and allowances				
	a		502,751			
	b	Less cost of goods sold	b539,182			
	c	Net income or (loss) from sales of inventory	-36,431	-36,431		
	Business Code					
	11a	Support Services	900099165,000	165,000	0	0
	b	Other income	900099436,740	0	0	436,740
	c					
	d	All other revenue				
	e	Total. Add lines 11a-11d	601,740			
	12	Total revenue. See Instructions	123,039,886	23,496,864	0	7,936,450

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	34,882,044	34,882,044		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0	0		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	3,443,708	3,443,708		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	2,739,298	2,175,144	260,139	304,015
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	17,493,473	11,721,557	4,601,424	1,170,492
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	696,331	474,176	173,086	49,069
9	Other employee benefits	1,881,105	1,237,572	506,866	136,667
10	Payroll taxes	1,191,719	799,125	310,276	82,318
11	Fees for services (non-employees)				
a	Management	0	0	0	0
b	Legal	257,305	146,119	93,916	17,270
c	Accounting	599,029	388,820	150,556	59,653
d	Lobbying	0	0	0	0
e	Professional fundraising services See Part IV, line 17	1,906,359			1,906,359
f	Investment management fees	157,062	0	157,062	0
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	0	0	0	0
12	Advertising and promotion	13,074,095	8,880,374	1,703,522	2,490,199
13	Office expenses	9,566,002	5,572,207	173,799	3,819,996
14	Information technology	2,567,558	2,038,773	243,830	284,955
15	Royalties	0	0	0	0
16	Occupancy	1,437,475	974,525	373,694	89,256
17	Travel	1,803,432	1,271,667	341,435	190,330
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	1,604,198	1,118,842	358,721	126,635
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	1,212,043	827,576	269,674	114,793
23	Insurance	258,743	202,405	39,241	17,097
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	CONSULTING & PROF SVCS	15,061,253	12,848,166	932,987	1,280,100
b	EVENT PRODUCTION	3,914,197	3,100,657	377,431	436,109
c	BANK FEES	2,056,177	1,400,600	97,575	558,002
d	EQUIP RENTAL & MAINT	1,031,952	248,368	381,465	402,119
e	All other expenses	6,923,116	6,105,640	395,967	421,509
25	Total functional expenses. Add lines 1 through 24e	125,757,674	99,858,065	11,942,666	13,956,943
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)	42,314,252	25,979,076	1,375,717	14,959,459

Part X

Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			0	1	0
	2	Savings and temporary cash investments			28,421,714	2	12,278,347
	3	Pledges and grants receivable, net			41,066,118	3	30,072,080
	4	Accounts receivable, net			729,495	4	446,048
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L			0	6	0
	7	Notes and loans receivable, net			4,170,597	7	0
	8	Inventories for sale or use			399,594	8	259,648
	9	Prepaid expenses and deferred charges			1,812,789	9	1,185,467
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	10,956,310	1,516,020	10c	943,355
	b	Less: accumulated depreciation	10b	10,012,955			
	11	Investments—publicly traded securities			205,933,377	11	217,483,471
	12	Investments—other securities. See Part IV, line 11			10,539,546	12	20,021,804
	13	Investments—program-related. See Part IV, line 11			0	13	0
	14	Intangible assets			0	14	0
	15	Other assets. See Part IV, line 11			0	15	25,800
16	Total assets. Add lines 1 through 15 (must equal line 34)			294,589,250	16	282,716,020	
Liabilities	17	Accounts payable and accrued expenses			17,873,404	17	12,764,711
	18	Grants payable			156,557,964	18	142,210,195
	19	Deferred revenue			1,481,552	19	745,442
	20	Tax-exempt bond liabilities			0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			0	21	0
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			0	22	0
	23	Secured mortgages and notes payable to unrelated third parties			0	23	0
	24	Unsecured notes and loans payable to unrelated third parties			0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			0	25	0
	26	Total liabilities. Add lines 17 through 25			175,912,920	26	155,720,348
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			81,533,610	27	94,533,979
	28	Temporarily restricted net assets			36,817,720	28	32,136,693
	29	Permanently restricted net assets			325,000	29	325,000
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			118,676,330	33	126,995,672
34	Total liabilities and net assets/fund balances			294,589,250	34	282,716,020	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	123,039,886
2	Total expenses (must equal Part IX, column (A), line 25)	2	125,757,674
3	Revenue less expenses Subtract line 2 from line 1	3	-2,717,788
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	118,676,330
5	Net unrealized gains (losses) on investments	5	8,203,586
6	Donated services and use of facilities	6	-283,448
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	3,116,992
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	126,995,672

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

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

SCHEDULE A

(Form 990 or 990EZ)

Department of the
Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

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

Part I

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

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

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33¹/₃% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33¹/₃% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11

☐

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

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Non-functionally integrated

e

☐

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

f

☐

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

g

☐

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

(i)

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

(ii)

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

(iii)

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

h

☐

Provide the following information about the supported organization(s)

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

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

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	134,999,587	174,658,160	159,779,664	118,656,952	91,606,572	679,700,935
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0		0
3 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0		0
4 Total. Add lines 1 through 3	134,999,587	174,658,160	159,779,664	118,656,952	91,606,572	679,700,935
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						4,030,049
6 Public support. Subtract line 5 from line 4						675,670,886

Section B. Total Support							
Calendar year (or fiscal year beginning in) ▶		(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	134,999,587	174,658,160	159,779,664	118,656,952	91,606,572	679,700,935
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,548,746	3,812,083	4,528,150	4,810,808	4,064,746	20,764,533
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0		0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	2,589,864	84,038	378,313	351,342	436,740	3,840,297
11	Total support (Add lines 7 through 10)						704,305,765
12	Gross receipts from related activities, etc. (see instructions)					12	175,779,379
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here 						

Section C. Computation of Public Support Percentage			
14	Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	95.934 %
15	Public support percentage for 2012 Schedule A, Part II, line 14	15	96.293 %
16a	33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ☒		
b	33 1/3% support test—2012. 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—2013. 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—2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ☐		
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐		

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶		

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

Facts And Circumstances Test

Return Reference	Explanation	
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SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **See separate instructions.** ▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.**

OMB No 1545-0047

2013

Open to Public Inspection

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

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

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

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

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

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

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

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

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV	
2	Political expenditures	▶ \$
3	Volunteer hours	

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

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	☐ Yes ☐ No
4a	Was a correction made?	☐ Yes ☐ No
b	If "Yes," describe in Part IV	

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

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶ \$
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$
4	Did the filing organization file Form 1120-POL for this year?	☐ Yes ☐ No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	

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

Part II-A

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

- A Check ☒ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		0	68,694												
b Total lobbying expenditures to influence a legislative body (direct lobbying)		0	29,561												
c Total lobbying expenditures (add lines 1a and 1b)		0	98,255												
d Other exempt purpose expenditures		113,815,008	240,872,562												
e Total exempt purpose expenditures (add lines 1c and 1d)		113,815,008	240,970,817												
f Lobbying nontaxable amount Enter the amount from the following table in both columns		1,000,000	1,000,000												
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% of line 1f)		250,000	250,000												
h Subtract line 1g from line 1a If zero or less, enter -0-															
i Subtract line 1f from line 1c If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		☐ Yes ☐ No													

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	552,301	656,218	144,834	98,255	1,451,608
d Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures	439,745	519,831	83,839	68,694	1,112,109

Part II-B

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

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

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

Part III-A

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

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

Part III-B

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

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

Part IV

Supplemental Information

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

Return Reference	Explanation
Lobbying Expenses	Schedule C, Part II-A Public policy initiatives have the potential to impact people touched by BREAST CANCER. RECOGNIZING THE POWER OF ADVOCACY TO ACCOMPLISH ITS MISSION, KOMEN SUPPORTS LIMITED LOBBYING ACTIVITIES TO ACHIEVE EVIDENCE-BASED POLICY AND LEGISLATIVE SOLUTIONS DESIGNED TO ELIMINATE BREAST CANCER AS A MAJOR HEALTH PROBLEM.

Part IV

[illegible]

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b**
▶ **Attach to Form 990.** ▶ **See separate instructions.** ▶ **Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.**

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
SUSAN G KOMEN BREAST CANCER FOUNDATION INC

Employer identification number
75-1835298

Part I

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

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No	

Part II

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

1

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

☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2

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

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

3

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

4

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

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

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

7

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

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

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

Part III

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

1a

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

b

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

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

▶ \$ _____

(ii) Assets included in Form 990, Part X

▶ \$ _____

2

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

a

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b

Assets included in Form 990, Part X

▶ \$ _____

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

Cat No 52283D

Schedule D (Form 990) 2013

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

- 3

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

☐ Public exhibition

d

☐ Loan or exchange programs

b

☐ Scholarly research

e

☐ Other

c

☐ Preservation for future generations
- 4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

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

- 1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No
- b

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

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	
- 2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No
- b

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

☐

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

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	1,325,000	1,325,000	1,225,000	1,225,000	1,225,000
b Contributions	0	0	100,000		4,284
c Net investment earnings, gains, and losses	23,736	21	33	608	-4,284
d Grants or scholarships		0	0	0	0
e Other expenditures for facilities and programs	2,469	21	33	608	0
f Administrative expenses					
g End of year balance	1,346,267	1,325,000	1,325,000	1,225,000	1,225,000

- 2

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

Board designated or quasi-endowment

75 000 %

b

Permanent endowment

25 000 %

c

Temporarily restricted endowment

The percentages in lines 2a, 2b, and 2c should equal 100%
- 3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- (i) unrelated organizations

3a(i)

☐ Yes

☐ No

(ii) related organizations

3a(ii)

☐ Yes

☐ No
- b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

☐ Yes

☐ No
- 4

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

Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0			
b Buildings				
c Leasehold improvements		795,974	795,974	
d Equipment		2,486,433	2,237,077	249,356
e Other		7,673,903	6,979,904	693,999
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				943,355

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	

Part XIII Supplemental Information

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.

Return Reference	Explanation
Intended use of endowment funds	Schedule D, Part V, Line 4 KOMEN HAS THREE PERMANENT ENDOWMENTS GOODMAN-BRINKER, FIRNBERG, AND A GENERAL ENDOWMENT. THE GOODMAN-BRINKER ENDOWMENT IS FOR BREAST CANCER RESEARCH FELLOWSHIPS, THE FIRNBERG ENDOWMENT IS FOR BREAST CANCER EDUCATIONAL PROGRAMS AND RESEARCH AWARDS, AND THE GENERAL ENDOWMENT'S EARNINGS ARE RESTRICTED FOR ORGANIZATIONAL MISSION ACTIVITIES. FIN 48 (ASC 740) Financial Statement Disclosure Schedule D, Part X, Line 2 The Organization is subject to a recognition threshold and measurement attribute for financial statement recognition and measurement of a tax position taken or expected to be taken in a tax return. There were no uncertain tax positions recorded in the consolidated financial statements at March 31, 2014 or March 31, 2013.

[illegible]

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.
► Attach to Form 990. ► See separate instructions.
► Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization
SUSAN G KOMEN BREAST CANCER FOUNDATION INC

Employer identification number
75-1835298

Part I

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

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	0	31			3,736,878
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	0	31			3,736,878

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)	See Add'l Data								
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶

35

3

Enter total number of other organizations or entities ▶

Part III

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*

☐

Yes

☒

No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, 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)*

☐

Yes

☒

No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)*

☐

Yes

☒

No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*

☐

Yes

☒

No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)*

☐

Yes

☒

No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).*

☐

Yes

☒

No

Part V

Supplemental Information

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).

990 Schedule F, Supplemental Information

Return Reference	Explanation
Procedures for Monitoring Use of grant funds outside of the UNITED STATES	Schedule F, Part I, Line 2 All research, education, screening, and treatment grantees are required to submit, at a minimum, annual financial and progress reports and any change requests they may have for their projects All progress reports and requests are reviewed by qualified staff See Schedule I, Part IV for more details

Additional Data

Software ID:
Software Version:
EIN: 75-1835298
Name: SUSAN G KOMEN BREAST CANCER FOUNDATION INC

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Central America and the Caribbean	0	0	Grantmaking	EDUCATION GRANTS	256,511
East Asia and the Pacific	0	0	Grantmaking	RESEARCH GRANTS	184,502
Europe (Including Iceland and Greenland)	0	0	Grantmaking	RESEARCH GRANTS	1,342,910

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Middle East and North Africa	0	0	Grantmaking	EDUCATION GRANTS	37,500
North America	0	0	Grantmaking	RESEARCH GRANTS	936,814
South America	0	0	Grantmaking	EDUCATION GRANTS	278,472

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Sub-Saharan Africa	0	0	Grantmaking	EDUCATION GRANTS	25,000
Central America and the Caribbean	0	0	Grantmaking	RESEARCH GRANTS	14,500
Europe (Including Iceland and Greenland)	0	0	Grantmaking	EDUCATION GRANTS	110,000

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
North America	0	0	Grantmaking	EDUCATION GRANTS	257,500
Central America and the Caribbean	0	4	Program Services	EDUC & EVENT SUPPORT	35,597
Europe (Including Iceland and Greenland)	0	6	Program Services	EDUC & EVENT SUPPORT	56,247

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Middle East and North Africa	0	4	Program Services	EDUC & EVENT SUPPORT	35,757
North America	0	12	Program Services	EDUC & EVENT SUPPORT	104,733
South America	0	5	Program Services	EDUC & EVENT SUPPORT	60,835

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	Education	25,000	WIRE TRANSFR			
		Europe (Including Iceland and Greenland)	Research	180,000	WIRE TRANSFR			
		Europe (Including Iceland and Greenland)	Research	152,372	WIRE TRANSFR			
		Central America and the Caribbean	EDUCATION	25,000	WIRE TRANSFR			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	Research	10,000	WIRE TRANSFR			
		Europe (Including Iceland and Greenland)	Research	33,500	WIRE TRANSFR			
		Europe (Including Iceland and Greenland)	Research	40,000	WIRE TRANSFR			
		Europe (Including Iceland and Greenland)	Research	218,000	WIRE TRANSFR			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	Research	150,000	WIRE TRANSFR			
		Europe (Including Iceland and Greenland)	Research	150,000	WIRE TRANSFR			
		Central America and the Caribbean	Research	14,500	WIRE TRANSFR			
		Central America and the Caribbean	EDUCATION	125,000	WIRE TRANSFR			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		North America	EDUCATION	62,500	WIRE TRANSFR			
		South America	EDUCATION	23,345	WIRE TRANSFR			
		South America	EDUCATION	7,500	WIRE TRANSFR			
		South America	EDUCATION	48,768	WIRE TRANSFR			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	EDUCATION	100,000	WIRE TRANSFR			
		North America	Research	117,140	WIRE TRANSFR			
		Europe (Including Iceland and Greenland)	Research	35,000	WIRE TRANSFR			
		Europe (Including Iceland and Greenland)	Research	199,038	WIRE TRANSFR			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	EDUCATION	10,000	WIRE TRANSFR			
		Middle East and North Africa	EDUCATION	32,500	WIRE TRANSFR			
		North America	Research	304,994	WIRE TRANSFR			
		North America	EDUCATION	30,000	WIRE TRANSFR			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	EDUCATION	37,400	WIRE TRANSFR			
		North America	Education	125,000	WIRE TRANSFR			
		North America	Research	224,500	WIRE TRANSFR			
		Central America and the Caribbean	EDUCATION	19,111	WIRE TRANSFR			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		North America		40,000	WIRE TRANSFR			
		Europe (Including Iceland and Greenland)	Research	175,000	WIRE TRANSFR			
		Central America and the Caribbean	EDUCATION	50,000	WIRE TRANSFR			
		South America	Education	198,860	WIRE TRANSFR			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	Research	184,502	WIRE TRANSFR			
		North America	EDUCATION	40,000	WIRE TRANSFR			
		North America	Research	250,180	WIRE TRANSFR			

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public
Inspection

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

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

- 1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a

☒ Mail solicitations

b

☒ Internet and email solicitations

c

☐ Phone solicitations

d

☒ In-person solicitations

e

☒ Solicitation of non-government grants

f

☐ Solicitation of government grants

g

☒ Special fundraising events
- 2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes ☐ No
- b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 Merkle Inc	Direct Marketing		No	15,100,931	1,906,359	13,194,572
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total ▶				15,100,931	1,906,359	13,194,572

- 3

List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.
- AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, PR, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY
-
-

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
			<u>GBL RACE FR CUR</u>	<u>BRST CANCR 3DY</u>	<u>2</u>	(add col (a) through	
			(event type)	(event type)	(total number)	col (c))	
	1	Gross receipts	2,469,681	38,510,913	3,692,198	44,672,792	
	2	Less Contributions . . .	1,722,372	37,000,135	3,255,068	41,977,575	
3	Gross income (line 1 minus line 2)	747,309	1,510,778	437,130	2,695,217		
Direct Expenses	4	Cash prizes					
	5	Noncash prizes . . .	34,605	14,058	779	49,442	
	6	Rent/facility costs . . .	23,066	1,833,727		1,856,793	
	7	Food and beverages .	35,581	1,604,083	241,787	1,881,451	
	8	Entertainment					
	9	Other direct expenses .	116,834	4,187,284	69,018	4,373,136	
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶					(8,160,822)
	11	Net income summary Subtract line 10 from line 3, column (d) ▶					-5,465,605

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1	Gross revenue			
Direct Expenses	2	Cash prizes			
	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses . . .			
	6	Volunteer labor	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶			
	8	Net gaming income summary Subtract line 7 from line 1, column (d) ▶			

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain _____

Does the organization operate gaming activities with nonmembers? ☐ **Yes** ☐ **No**

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ **Yes** ☐ **No**

13 Indicate the percentage of gaming activity operated in

a The organization's facility

13a

%

b An outside facility

13b

%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name 

Address 

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ **Yes** ☐ **No**

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 

16 Gaming manager information

Name 

Gaming manager compensation  \$

Description of services provided 

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ **Yes** ☐ **No**

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.** 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).

Return Reference	Explanation
Schedule G Part II	Net Income Summary GROSS RECEIPTS ARE REDUCED BY THE AMOUNT OF CONTRIBUTIONS, PER IRS INSTRUCTIONS THE CONTRIBUTIONS FOR FISCAL YEAR 2014 WERE \$42 MILLION

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization
SUSAN G KOMEN BREAST CANCER FOUNDATION INC

Employer identification number
75-1835298

Part I

General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2

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

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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

2

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

146

3

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

Part III

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

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

Part IV

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
Procedures for Monitoring the Use of Grants	Schedule I, Part I, Line 2 SUSAN G KOMEN'S (KOMEN) POLICIES FOR MANAGING RESEARCH, EDUCATION, SCREENING, AND TREATMENT GRANTS FROM THE TIME OF INITIAL AWARD THROUGH COMPLETION SEEK TO MAXIMIZE FLEXIBILITY WHILE MAINTAINING THE HIGHEST STANDARD OF ACCOUNTABILITY AND PRESERVING THE INTEGRITY OF THE REVIEW AND FUNDING PROCESS FOR RESEARCH GRANTS, SCIENTIFIC PROGRESS IS MONITORED THROUGHOUT THE GRANT TERM BY A PH D -LEVEL SCIENTIFIC GRANTS MANAGER THE GRANTEE IS REQUIRED TO SUBMIT SCIENTIFIC PROGRESS REPORTS ON EACH ANNIVERSARY OF THE GRANT START DATE FOR THE DURATION OF THE PROJECT, EXCEPT FOR THE FINAL YEAR OF THE GRANT WHEN A FINAL REPORT IS DUE NO LATER THAN 30 DAYS AFTER THE END DATE OF THE GRANT TERM A SCIENTIFIC PROGRESS REPORT ALSO IS DUE IF THE GRANTEE IS REQUESTING AN EXTENSION TO THE END OF THE GRANT TERM OR ACCELERATION OF THE GRANT TERM THE GRANTEE MUST SUBMIT REQUESTS FOR ANY CHANGES TO THE DESIGN OF THE FUNDED RESEARCH PROJECT, OR CHANGES TO PERSONNEL AND THEIR LEVEL OF EFFORT FOR KOMEN'S APPROVAL PRIOR TO IMPLEMENTING SAID CHANGES ALL GRANT FUNDS MUST BE EXPENDED IN ACCORDANCE WITH THE PROJECT'S APPROVED BUDGET, AND ARE DISBURSED IN ACCORDANCE WITH THE SCHEDULE DOCUMENTED WITHIN THE GRANT AGREEMENT ANNUAL FINANCIAL REPORTS ARE DUE NO LATER THAN 30 DAYS AFTER EACH ANNIVERSARY OF THE GRANT START DATE FOR THE DURATION OF THE GRANT TERM, WITH THE EXCEPTION OF THE FINAL FINANCIAL REPORT, WHICH IS DUE NO LATER THAN 60 DAYS AFTER THE END DATE OF THE GRANT TERM ALL EXPENDITURES MUST BE REPORTED IN UNITED STATES DOLLARS (\$USD) THE GRANTEE MUST SUBMIT A REQUEST FOR A BUDGET CHANGE IN THE EVENT THE GRANTEE WISHES TO MOVE FUNDS ACROSS BUDGET CATEGORIES IN EXCESS OF THE ALLOWABLE LIMITS AS STATED WITHIN THE POLICIES AND PROCEDURES UNEXPENDED FUNDS MUST BE REMITTED WITH THE FINAL FINANCIAL REPORT TO KOMEN, UNLESS OTHERWISE SPECIFIED WITH REASONABLE PRIOR NOTICE TO THE GRANTEE, KOMEN MAY REQUIRE ADDITIONAL PROGRESS AND/OR FINANCIAL REPORTING FROM THE GRANTEE AND ALSO MAY REQUIRE THE GRANTEE TO PARTICIPATE IN SITE VISITS, TELEPHONE CONFERENCES, PRESENTATIONS OR OTHER SPEAKING ENGAGEMENTS AS PART OF ITS OVERSIGHT OF RESEARCH PROGRESS, KOMEN MAY ADJUST THE PROJECT REPORTING PERIOD AND ASSOCIATED DISBURSEMENT OF GRANT FUNDS AT ANY TIME DURING THE GRANT TERM WITH PRIOR WRITTEN NOTICE TO THE GRANTEE KOMEN WILL NOT BE RESPONSIBLE FOR A) ANY EXPENDITURE MADE PRIOR TO THE EFFECTIVE DATE OR AFTER THE TERMINATION OF THE GRANT, B) COMMITMENTS MADE DURING THE GRANT TERM BUT NOT PAID WITHIN SIXTY (60) DAYS FOLLOWING THE EXPIRATION OF THE GRANT AGREEMENT, C) EXPENDITURES THAT ARE NOT PERMITTED AS DESCRIBED WITHIN THE RFA, OR D) ANY EXPENDITURE THAT IS INCONSISTENT WITH THE APPROVED RESEARCH PLAN AND BUDGET OR THAT EXCEEDS THE TOTAL AMOUNT OF THE GRANT KOMEN, OR ITS DESIGNATED REPRESENTATIVES, SHALL HAVE THE RIGHT TO REQUEST AND RECEIVE FROM A GRANTEE, OR ANY OF ITS SUBCONTRACTORS, COPIES OF ANY AND ALL DOCUMENTS AND OTHER INFORMATION RELATED TO THE GRANT AT ANY TIME DURING OR AFTER THE TERM OF THE GRANT THIS RIGHT INCLUDES, BUT IS NOT LIMITED TO, THE RIGHT TO REVIEW ALL FINANCIAL BOOKS AND RECORDS RELATED TO THE GRANT AND TO PERFORM AN AUDIT OF ALL EXPENSES RELATED DIRECTLY OR INDIRECTLY TO THE GRANT KOMEN'S POLICIES FOR MANAGING EDUCATION, SCREENING, AND TREATMENT GRANTS REQUIRE THAT ALL GRANTEES SIGN A GRANT AGREEMENT, WHICH SETS FORTH THE TERMS OF THE GRANT, INCLUDING THE PURPOSE OF THE GRANT, AMOUNT, BUDGETARY RESTRICTIONS, DURATION, PAYMENT SCHEDULE, REPORTING REQUIREMENTS, AND AUDIT AND EARLY TERMINATION RIGHTS FOR KOMEN PROGRESS IS MONITORED THROUGHOUT THE GRANT TERM BY A COMMUNITY HEALTH GRANTS MANAGER THE GRANTEE IS REQUIRED TO SUBMIT PROGRESS REPORTS (TYPICALLY EVERY SIX MONTHS) THAT DETAIL PROGRESS TOWARD MEETING EACH OF THE OBJECTIVES AND ANY CHALLENGES ENCOUNTERED THE REPORT MUST ALSO INCLUDE A FULL ACCOUNTING OF GRANT FUNDS EXPENDED (ACTUAL VERSUS BUDGETED EXPENSES) THE GRANTS MANAGER MAY CONDUCT SITE VISITS WITH THE GRANTEE, WHEN APPROPRIATE, TO BUILD A STRONGER RELATIONSHIP WITH THE GRANTEE, TO GAIN A BETTER UNDERSTANDING OF ITS WORK, AND TO ADDRESS ANY CHALLENGES OR PROBLEMS THE GRANTEE IS FACING ANY CHANGES TO THE PROJECT MUST BE APPROVED BY KOMEN'S GRANTS MANAGER IN WRITING IN ADVANCE OF THE CHANGE A FINAL REPORT MUST BE PROVIDED AT THE COMPLETION OR EARLY TERMINATION OF THE GRANT AND MUST INCLUDE, AMONG OTHER THINGS, A FINANCIAL REPORT AND AN EVALUATION OF THE PROGRAM'S ACCOMPLISHMENTS AND IMPACT IN THE COMMUNITY ANY UNEXPENDED FUNDS MUST BE REMITTED WITH THE FINAL REPORT TO KOMEN UNLESS OTHERWISE DIRECTED

Additional Data

Software ID:
Software Version:
EIN: 75-1835298
Name: SUSAN G KOMEN BREAST CANCER FOUNDATION INC

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Adventist Healthcare Inc 1801 Research Blvd Suite 300 Rockville,MD 20850	52-1532556	501(C)(3)	114,625				Screening

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Alaska Native Tribal Health Consortium 4000 Ambassador Drive Anchorage,AL 99508	92-0162721	501(C)(3)	62,500				Screening

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Albert Einstein College of Med Yeshiva U 1300 Morris Park Avenue Belfer 110 Bronx, NY 104611975	13-1624225	501(C)(3)	150,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Alexandria Neighborhood Health Services 2445 Army Navy Dr Arlington, VA 22206	54-1849891	501(C)(3)	241,437				Education, Screening, and Treatment

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
American Association for Cancer Research 615 Chestnut Street 17th Fl Philadelphia, PA 191064404	23-6251649	501(C)(3)	684,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
American Association on Health & Disabil 110 N Washington Street Suite 328 Rockville,MD 20850	52-1884887	501(C)(3)	124,999				Education

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
American Cancer Society 250 Williams Street Atlanta, GA 30303	58-0659875	501(C)(3)	9,500				Education

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
American Jewish Joint 711 Third Avenue New York, NY 100174014	13-1656634	501(C)(3)	224,719				Education

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
American Society of Clinical Oncology 2318 Mill Road Suite 800 Alexandria, VA 22314	13-6180880	501(C)(3)	400,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Arlington Free Clinic 2921 11th Street South Arlington, VA 22204	54-1671883	501(C)(3)	354,300				Education, Screening, and Treatment

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Baylor College Medicine One Baylor Plaza BCM 206 Houston, TX 770303411	74-1613878	501(C)(3)	989,608				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Beth Israel Deaconess Medical Center 330 Brookline Avenue Boston, MA 02215	04-2103881	501(C)(3)	466,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Boat People SOS 6066 Leesburg Pike 100 Falls Church, VA 220412220	54-1563619	501(C)(3)	150,000				Education, Screening, and Treatment

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Boston University 580 Harrison Avenue 3-W Boston, MA 02118	04-2103547	501(C)(3)	47,242				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Brigham and Womens Hospital PO Box 3149 Boston, MA 022413149	04-2312909	501(C)(3)	581,780				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Burnham Institute for Medical Research 10901 North Torrey Pines Road La Jolla, CA 92037	51-0197108	501(C)(3)	120,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Cancer Care 275 Seventh Avenue New York, NY 10001	13-1825919	501(C)(3)	250,000				Treatment

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Capitol City Area Health Education Cente 1700 East Capitol Street NE Ste E Washington, DC 20003	26-3301051	501(C)(3)	300,000				Education, Screening, and Treatment

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CASA of Maryland Inc 8151 15th Avenue Hyattsville, MD 20783	52-1372972	501(C)(3)	70,764				Education

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Childrens Hospital Boston PO Box 414413 Boston, MA 022414413	04-2774441	501(C)(3)	23,981				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Cincinnati Childrens Hospital Medical Center 3333 Burnet Avenue ML 7030 Cincinnati, OH 45229	31-0833936	501(C)(3)	150,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Cleveland Clinic Foundation 9500 Euclid Avenue P84 Cleveland, OH 44195	34-0714585	501(C)(3)	37,229				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Cold Spring Harbor Laboratory 1 Bungtown Road Cold Spring Harbor, NY 11724	11-2013303	501(C)(3)	276,825				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Columbia University Medical Center 615 W 131st Street Studebaker 3rd New York, NY 10027	13-5598093	501(C)(3)	381,590				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Cornell University 341 Pine Tree Road Ithaca, NY 14850	15-0532082	501(C)(3)	48,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Dana Farber Cancer Institute 44 Binney Street Mail Stop 439C Boston, MA 02115	04-2263040	501(C)(3)	1,494,366				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Dartmouth College 63 South Main Street Hanover, NH 03755	02-0222111	501(C)(3)	63,738				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Duke University Medical Center 2200 W Main Street Suite 300 Durham, NC 27705	56-0532129	501(C)(3)	2,682,761				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ECOG Research and Education Foundation 1818 Market Street Philadelphia, PA 19109	39-1723095	501(C)(3)	100,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Emory University Winship Cancer Inst PO Box 935084 Atlanta, GA 311935084	58-0566256	501(C)(3)	238,845				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Ethiopian Community Development Council 901 S Highland Street Arlington, VA 22204	52-1308986	501(C)(3)	151,471				Education, Treatment

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

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Facing Our Risk of Cancer Empowered 16057 Tampa Palms Blvd W 373 Tampa,FL 33647	65-0927702	501(C)(3)	40,000				Education

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Fox Chase Cancer Center 333 Cottman Avenue Philadelphia, PA 19111	23-2003072	501(C)(3)	150,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Fred Hutchinson Cancer Research Center PO Box 19024 Mailstop J6-330 Seattle, WA 981091024	56-3744111	501(C)(3)	248,120				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Fred Hutchinson Cancer Research 1100 Fairview Ave N J6-500 Seattle,WA 981091024	23-7156071	501(C)(3)	199,907				Research

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

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Friends of Cancer Research 1800 M St NW Washington, DC 20036	52-1983273	501(C)(3)	32,000				Research

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

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George Washington University 45155 Research Place Ashburn, VA 20147	53-0196584	501(C)(3)	273,333				Education, Research, Screening and Treatment

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

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Georgetown University LCC LL Level Room S155 Washington, DC 20007	53-0196603	501(C)(3)	856,579				Research

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

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Greater Baden Medical Services Inc 7450 Albert Road 3-321 Brandywine, MD 20316	52-0961414	501(C)(3)	199,900				Screening and Treatment

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

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Harvard Medical School 1350 Massachusetts Ave Cambridge, MA 02138	04-2103580	501(C)(3)	342,500				Education, Research

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

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Henry Ford Health System One Ford Place 5E Detroit, MI 48202	38-1357020	501(C)(3)	161,758				Research

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

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Hudson-Alpha Institute for Biotechnology 601 Genome Way Huntsville, AL 35801	43-2059317	501(C)(3)	435,444				Research

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

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Indiana University School of Medicine Financial Mgmt Svcs PO Box 66057 Indianapolis, IN 462666057	35-6001673	501(C)(3)	2,050,387				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
International Breast Cancer 660 John Nolan Drive Madison, WI 53711	39-1766858	501(C)(3)	29,279				Research

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

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International Scholarship & Tuition Serv 1321 Murfreesboro Road Nashville, TN 37217	62-1247492	501(C)(3)	15,000				Education

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

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Johns Hopkins University 1101 East 33rd Street Eastern C220 Baltimore, MD 21218	52-0595110	501(C)(3)	708,709				Research

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

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Korean Community Svc Ctr of Greater WA 7700 Little River Turnpike 406 Annandale,VA 22003	52-1128174	501(C)(3)	54,600				Screening

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Lankenau Institute for Medical Research 100 Lancaster Avenue Wynnewood, PA 19096	23-2175659	501(C)(3)	8,686				Research

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

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Lawrence Berkeley National Laboratory PO Box 528 Berkeley, CA 94701	94-2951741	501(C)(3)	60,279				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Leland Stanford Jr University PO Box 44253 San Francisco, CA 941444253	94-1156365	501(C)(3)	60,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Living Beyond Breast Cancer 354 West Lancaster Avenue Haverford, PA 19041	23-2734689	501(C)(3)	120,000				Education

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

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Lutheran Hospital Association of 106 Blanca Avenue Alamosa, CO 81101	84-0255530	501(C)(3)	61,692				Screening

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

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Maasai Wilderness Conservation Fund PO Box 1413 Santa Barbara, CA 93102	66-0627488	501(C)(3)	50,000				Education

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Maryland Dept of Health & Mental Hygien 201 West Preston Street Room 542 Baltimore,MD 212012398	52-6002033	501(C)(3)	62,425				Screening

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

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Massachusetts General Hospital 101 Huntington Ave Suite 3 Boston, MA 02199	04-2697983	501(C)(3)	298,220				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Mayo Clinic and Foundation 4500 San Pablo Rd Jacksonville,FL 322241865	41-6011702	501(C)(3)	407,542				Research

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

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Mayo Clinic Rochester 200 First Street SW PO Box 4008 Rochester, MN 559034008	41-6011702	501(C)(3)	413,465				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Memorial Sloan-Kettering Cancer Ctr 633 3rd Avenue 28th Floor New York, NY 10017	13-1924236	501(C)(3)	277,088				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Mercy Medical Ctr 301 St Paul Place Baltimore, MD 21202	52-1495113	501(C)(3)	279,850				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Metastatic Breast Cancer Network 211 E 18th Street New York City, NY 10003	20-5545238	501(C)(3)	16,500				Education

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Methodist Hospital Research Institute PO Box 4805 Houston, TX 772104805	87-0721923	501(C)(3)	47,958				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Metropolitan Chicago Breast Cancer 1645 W Jackson Blvd Ste 450 Chicago, IL 606123244	26-2264895	501(C)(3)	125,001				Screening

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Michigan State University 301 Administration Building East Lansing, MI 48824	38-6005984	501(C)(3)	150,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Mount Sinai School of Medicine 633 Third Avenue New York, NY 10017	13-6171197	501(C)(3)	210,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Muslim Community Center Medical Clinic 15200 Newhampshire Avenue Silver Spring, MD 209055631	52-1072792	501(C)(3)	281,912				Education, Screening, and Treatment

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
National Academy of Sciences 730 15th Street NW Washington, DC 20005	53-0196932	501(C)(3)	70,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Natl Inst of Environmental Health Scienc Mail Drop B2-03 PO Box 12233 Research Triangle Park, NC 27709	52-0852115	501(C)(3)	53,222				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
New York University School of Med One Park Avenue 11th Floor New York, NY 10016	13-5562308	501(C)(3)	110,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Northwestern University 633 Clark Evanston, IL 60208	36-2167817	501(C)(3)	109,104				Research and Screening

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Nueva Vida Inc 2000 P Street NW Suite 300 Washington, DC 20036	54-1943145	501(C)(3)	415,569				Education, Screening, and Treatment

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Oncology Nursing Society 125 Enterprise Drive Pittsburgh, PA 152751214	25-1410081	501(C)(3)	49,845				Education

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Oregon Health & Science University 0690 SW Bancroft Street Portland,OR 97239	23-7083114	501(C)(3)	1,908,872				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Partners for Cancer Care and Prevention 10 East Lee Street Unit 1901 Baltimore, MD 21202	45-1605551	501(C)(3)	26,310				Education

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Patient Advocate Foundation 421 Butler Farm Road Hampton, VA 23666	54-1806317	501(C)(3)	1,375,000				Treatment

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Pennsylvania State Univ College of Medi MCG230 PO Box 850 Hershey, PA 17033	24-6000376	501(C)(3)	856,502				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Polytechnic Institute 6 Metrotech Center New York, NY 11201	11-1630820	501(C)(3)	29,006				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Prevent Cancer Foundation 1600 Duke Street Alexandria, VA 22209	52-1429544	501(C)(3)	271,176				Education and Screening

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Princeton University 701 Carnegie Center Princeton, NJ 08540	21-0634501	501(C)(3)	20,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Program for Appropriate PO Box 900922 Seattle,WA 98109	91-1157127	501(C)(3)	558,550				Education

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Project Concern International 121 E 31st Street National City, CA 91950	95-2248462	501(C)(3)	25,000				Education

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Proteogenomics Research Institute 11107 Roselle Street San Diego, CA 92121	80-0418281	501(C)(3)	40,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Providence Health Foundation 1150 Varnum Street NE Washington, DC 20017	52-1275583	501(C)(3)	125,000				Screening

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Providence Portland Medical Center 4805 NE Glisan St 5F40 Portland, OR 97213	93-0386906	501(C)(3)	269,970				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Research Advocacy Network 6505 West Park Boulevard Plano, TX 75093	35-2209499	501(C)(3)	58,800				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Roswell Park Alliance Foundation Elm Carlton Sts RSC 234 Buffalo, NY 14263	16-1391608	501(C)(3)	150,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Rush University 1700 West Van Buren Chicago, IL 60612	36-2174823	501(C)(3)	120,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Sanford Research 2301 East 60th Street North Sioux Falls, SD 57104	46-0450378	501(C)(3)	30,000				Research

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

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Scripps Research Institute 10550 North Torrey Pines Road TCP- La Jolla, CA 92037	33-0435954	501(C)(3)	12,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Society for Surgical Oncology 85 W Algonquin Road Arlington Heights, IL 60005	13-6161070	501(C)(3)	238,500				Research

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

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Society for Womens Health Research 1025 Connecticut Avenue NW Washington, DC 20036	52-1694732	501(C)(3)	247,699				Research

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

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South East Alaska 3245 Hospital Drive Juneau, AK 99801	92-0056274	501(C)(3)	21,250				Screening

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

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Stanford University PO Box 44253 San Francisco, CA 941444253	94-1156365	501(C)(3)	172,192				Research

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

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SUNY at Buffalo 402 Crofts Hall Buffalo, NY 14260	14-1368361	501(C)(3)	28,722				Research

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

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SUNY at Stony Brook W5510 Melville Library Stony Brook, NY 11794	14-1368361	501(C)(3)	29,846				Research

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

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Texas Tech Univ Health Sciences Ctr 3601 4th Street Lubbock, TX 794306274	75-2668014	501(C)(3)	18,086				Research

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

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The Alliance of Pennsylvania Councils 3461 Market Street Camp Hill, PA 17011	25-1888581	501(C)(3)	53,408				Screening

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The ASCO Cancer Foundation 2318 Mill Road Alexandria, VA 22314	13-6180380	501(C)(3)	450,000				Research

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

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The Caring Foundation PO Box 2266 Cheyenne, WY 82003	83-0292601	501(C)(3)	308,383				Screening

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

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The General Hospital Corp 50 Staniford Street Suite 1001 Boston, MA 02114	04-1564655	501(C)(3)	167,865				Research

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

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The James Ewing Foundation 520 Green Bay Road Winnetka,IL 60093	11-2498503	501(C)(3)	57,500				Research

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

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The Salk Institute 10010 North Torrey Pines Road La Jolla, CA 920371002	95-6136024	501(C)(3)	225,000				Research

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

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The University of Chicago 5801 South Ellis Avenue Chicago, IL 60637	36-2177139	501(C)(3)	60,000				Research

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

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The Wistar Institute 3601 Spruce Street Philadelphia, PA 191044265	23-6434390	501(C)(3)	137,566				Research

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

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Thomas Jefferson University 1020 Walnut Street Philadelphia, PA 191075587	23-2829095	501(C)(3)	1,396,196				Research

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

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Trustees of Columbia Univ 615 West 131st Street New York, NY 10027	13-5598093	501(C)(3)	191,616				Research

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

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Tufts University 136 Harrison Avenue Boston, MA 02111	04-3532914	501(C)(3)	51,523				Research

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

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Univ of Colorado Denver Health Sciences Ctr PO Box 910238 Denver,CO 802910238	84-6000555	501(C)(3)	268,084				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Univ of Kentucky Research Foundation 102 Kinkead Hall Lexington, KY 40506	74-6000949	501(C)(3)	199,909				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Univ of North Carolina at Chapel Hill 104 Airport Drive Suite 2200 CB Chapel Hill,NC 275991350	56-6001393	501(C)(3)	910,922				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Univ of North Carolina at Charlotte 9201 University City Boulevard Charlotte, NC 282230001	56-6001393	501(C)(3)	11,691				Research

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

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Univ of TX MD Anderson Cancer Center 1515 Holcombe Blvd Houston, TX 77030	74-6001118	501(C)(3)	939,713				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University Miami School of Medicine 1400 NW 10th Avenue Miami, FL 33136	59-0624458	501(C)(3)	254,467				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Alabama at Birmingham 1720 2nd Avenue South Birmingham, AL 35294	63-6005396	501(C)(3)	823,386				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of California at San Diego 9500 Gilman Drive MC 0009 La Jolla, CA 92093	95-6006144	501(C)(3)	204,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of California at San Francisco 3333 California St Suite 315 San Francisco, CA 94118	94-6036493	501(C)(3)	452,610				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of California-Berkeley 2195 Hearst Avenue Room 130 Berkeley, CA 947201103	94-6090626	501(C)(3)	48,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of California-Davis Cashiers Office PO Box 989062 West Sacramento, CA 957989062	94-6036494	501(C)(3)	40,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of California-Irvine Biological Science 3 Suite 1400 Irvine,CA 926971050	95-2226406	501(C)(3)	172,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of California-Los Angeles 10920 Wilshire Boulevard Suite 107 Los Angeles, CA 900959000	95-6006143	501(C)(3)	195,432				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of California-San Francisco 1855 Folsom Street MCB 425 Box 08 San Francisco, CA 941430897	94-6036493	501(C)(3)	939,987				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Delaware 30 Lovett Avenue Newark, DE 19716	51-6000279	501(C)(3)	93,384				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Illinois at Chicago PO Box 20787 Springfield, IL 627080787	37-6000511	501(C)(3)	60,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Kansas Medical Center 3901 Rainbow Boulevard MSN 1039 Kansas City, KS 66160	48-1108830	501(C)(3)	398,657				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Louisville 521 Stevenson Hall Louisville, KY 40292	61-1029626	501(C)(3)	80,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Maryland-Baltimore 1000 Hilltop Circle Baltimore, MD 21250	31-1678679	501(C)(3)	331,999				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Michigan Health Systems 3003 S State St Rm 1054 3086 Wolv Ann Arbor, MI 481091274	38-6006309	501(C)(3)	941,872				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Minnesota 200 Oak Street SE Campus Code 2003 Minneapolis, MN 55455	41-6007513	501(C)(3)	149,867				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Nebraska 985100 Nebraska Medical Center Omaha, NE 681985100	47-0049123	501(C)(3)	48,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of NoCarolina at Chapel Hill 104 Airport Drive Suite 2200 CB Chapel Hill, NC 275991350	56-6001393	501(C)(3)	100,000				Education

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Oklahoma Health Sciences C 1100 N Lindsay SCB 228 Oklahoma City, OK 73104	73-6017987	501(C)(3)	153,707				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Pennsylvania 3451 Walnut Street P-211 Franklin Philadelphia, PA 191046205	23-1352685	501(C)(3)	950,659				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Pittsburgh 139 University Place Pittsburgh, PA 15260	25-0966691	501(C)(3)	96,225				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Southern California 1540 Alcazar St CHP-100 Los Angeles, CA 90033	95-1642394	501(C)(3)	548,467				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Texas at Health Science Ce 7000 Fannin Street Houston,TX 77030	74-1587488	501(C)(3)	8,985				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Utah 201 South Presidents Circle Room Salt Lake City, UT 841129020	87-6000525	501(C)(3)	132,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Vermont 85 South Prospect Street Burlington, VT 05405	03-0179440	501(C)(3)	150,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Virginia PO Box 400195 Charlottesville, VA 22904	54-1682176	501(C)(3)	130,138				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Washington 3917 University Way NE Seattle, WA 98105	91-6001537	501(C)(3)	519,137				Education and Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Wisconsin 21 North Park St Suite 6401 Madison, WI 537151218	39-6006492	501(C)(3)	138,525				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNT Health Science Center 3500 Camp Bowie Blvd Fort Worth, TX 761072699	75-6064033	501(C)(3)	10,861				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UT Health Science Center at San Antonio 7703 Floyd Curl Drive San Antonio, TX 78229	74-1586031	501(C)(3)	295,412				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UT Southwestern Medical Center at Dallas 5323 Harry Hines Blvd MC8585 Dallas, TX 75390	75-6002868	501(C)(3)	132,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UTMD Anderson Cancer Ctr 1515 Holcombe Boulevard Unit 1644 Houston, TX 770304009	74-6001118	501(C)(3)	6,127,868				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Vaccine & Gene Therapy Institute of Fla 9801 SW Discovery Way Port St Lucie, FL 34987	36-4631835	501(C)(3)	11,857				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Van Andel Research Institute 333 Bostwick Avenue NE Grand Rapids, MI 49503	52-2000823	501(C)(3)	150,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Vanderbilt University Medical Center 3319 West End Avenue Ste 800 Nashville, TN 372038480	62-0476822	501(C)(3)	379,554				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Virginia Commonwealth University PO Box 843039 Richmond, VA 232843038	54-6001758	501(C)(3)	29,954				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Washington University at St Louis 700 Rosedale Avenue Campus Box 103 Saint Louis,MO 63112	43-0653611	501(C)(3)	615,995				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Wayne State University 5057 Woodward Avenue 13th Floor Detroit, MI 48202	38-3555142	501(C)(3)	12,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
West Virginia University 886 Chestnut Ridge Road Morgantown, WV 265066845	55-0665758	501(C)(3)	149,984				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Whitehead Institute 9 Cambridge Center Cambridge, MA 021421479	06-1043412	501(C)(3)	200,000				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Winchester Medical Center Foundation 220 Campus Boulevard Winchester, VA 22601	54-2013319	501(C)(3)	34,284				Screening

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Yale University 47 College Street Ste 216 New Haven, CT 065103209	06-0646973	501(C)(3)	85,124				Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Young Survival Coalition 61 Broadway Suite 2235 New York, NY 10006	13-4057685	501(C)(3)	50,000				Research

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.
▶ Attach to Form 990. ▶ See separate instructions.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
SUSAN G KOMEN BREAST CANCER FOUNDATION INC

Employer identification number
75-1835298

Part I

Questions Regarding Compensation

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

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII
Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

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

Part III Supplemental Information

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

Return Reference	Explanation
FORM 990, SCHEDULE J, PART I, LINE 1A	SUPPLEMENTAL COMPENSATION INFORMATION FIRST CLASS AND BUSINESS CLASS FARES FOR DOMESTIC TRAVEL, CANADA, THE CARIBBEAN, CENTRAL AMERICA, AND MEXICO ARE NOT REIMBURSABLE HOWEVER, PERSONAL FREQUENT FLIER MILEAGE AND/OR COUPONS MAY BE USED FOR NO-COST UPGRADES FIRST CLASS TRAVEL WAS APPROVED FOR ONE INDIVIDUAL ON AN OCCASIONAL BASIS DUE TO MEDICAL NECESSITY WHENEVER POSSIBLE, DISCOUNTED FIRST CLASS AND UPGRADES ARE USED TO MINIMIZE COST Schedule J, Part I, line 4a During calendar year 2013 the following severance payments were made Dorothy Jones \$46,096 Lynn Erdman \$42,587

Additional Data

Software ID:
Software Version:
EIN: 75-1835298
Name: SUSAN G KOMEN BREAST CANCER FOUNDATION INC

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
Lynn Erdman VP Community Health (End 5/13)	(i) (ii)	109,504 0	0 0	44,802 0	5,808 0	11,351 0	171,465 0	0 0
Kay Merrell VP, Human Resources	(i) (ii)	187,755 0	20,000 0	3,590 0	10,661 0	18,657 0	240,663 0	0 0
Mark Nadolny Chief Financial Officer	(i) (ii)	314,891 0	0 0	4,433 0	14,025 0	19,795 0	353,144 0	0 0
Nancy G Brinker Founder & CHAIR GLOBAL STRTGY	(i) (ii)	469,282 0	0 0	11,502 0	15,221 0	10,481 0	506,486 0	0 0
Dr Judith Salerno CEO (Begin 9/13)	(i) (ii)	140,857 0	66,000 0	2,263 0	0 0	3,399 0	212,519 0	0 0
Miguel Perez VP Affiliate Ntwrk (BEG 9/14)	(i) (ii)	144,044 0	0 0	2,727 0	0 0	8,392 0	155,163 0	0 0
Wendy Carter Director, Global Outreach	(i) (ii)	167,150 0	0 0	1,896 0	0 0	7,569 0	176,615 0	0 0
Andrea Rader Managing Director, Comm	(i) (ii)	154,853 0	0 0	3,222 0	6,358 0	15,229 0	179,662 0	0 0
Victoria Wolodzko Mng Director, Grants & PrOG AD	(i) (ii)	152,233 0	0 0	2,574 0	9,147 0	7,727 0	171,681 0	0 0
Adine Zornow Director, Development	(i) (ii)	142,342 0	0 0	1,833 0	0 0	12,785 0	156,960 0	0 0
Ellen Willmott Gen Counsel & Secy	(i) (ii)	254,229 0	0 0	2,900 0	7,634 0	9,000 0	273,763 0	0 0
Lesley Lurie Assistant Secretary	(i) (ii)	191,723 0	0 0	2,266 0	10,546 0	16,483 0	221,018 0	0 0
David Dawson VP, Information Technology	(i) (ii)	213,470 0	0 0	2,119 0	9,575 0	24,266 0	249,430 0	0 0
Chandini Portteus CHIEF MISSION OFFCR (BEG 6/13)	(i) (ii)	243,034 0	0 0	2,095 0	14,926 0	11,027 0	271,082 0	0 0
Dorothy Jones VP, Marketing (End 12/13)	(i) (ii)	243,015 0	0 0	48,271 0	9,960 0	15,253 0	316,499 0	0 0
Carol Corcoran SVP Global Networks (End 8/13)	(i) (ii)	157,749 0	0 0	3,549 0	9,572 0	7,079 0	177,949 0	0 0

SCHEDULE M
(Form 990)

Noncash Contributions

OMB No 1545-0047

2013

Open to Public Inspection

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

►Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization
SUSAN G KOMEN BREAST CANCER FOUNDATION INC

Employer identification number
75-1835298

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		25,800	cost or sales price
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory	X	2	2,766	cost or sales price
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► ()				
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 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

Yes

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?

31

Yes

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

32a

No

b If "Yes," describe in Part II

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

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

Cat No 51227J

Schedule M (Form 990) (2013)

Part III

Supplemental Information. 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.

Return Reference	Explanation
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2013

Open to Public
Inspection

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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at
www.irs.gov/form990.

Name of the organization

SUSAN G KOMEN BREAST CANCER FOUNDATION INC

Employer identification number

75-1835298

Return Reference	Explanation	
	VOLUNTEERS	FORM 990, PART I, QUESTION 6 VOLUNTEERS SERVE IN A VARIETY OF WAYS, BUT THE GREATEST NUMBERS OF VOLUNTEERS ASSIST WITH THE SUSAN G KOMEN 3 DAY SERIES FORM 990, PART III - PROGRAM SERVICE ACCOMPLISHMENTS SUSAN G KOMEN IS THE WORLD'S LARGEST BREAST CANCER ORGANIZATION, FUNDING MORE BREAST CANCER RESEARCH THAN ANY OTHER NONPROFIT WHILE PROVIDING REAL-TIME HELP TO THOSE FACING THE DISEASE SINCE ITS FOUNDING IN 1982, KOMEN HAS FUNDED MORE THAN \$84 0 MILLION IN RESEARCH AND PROVIDED \$1 8 BILLION IN FUNDING TO SCREENING, EDUCATION, TREATMENT AND PSYCHOSOCIAL SUPPORT PROGRAMS SERVING MILLIONS OF PEOPLE IN MORE THAN 30 COUNTRIES WORLDWIDE KOMEN WAS FOUNDED BY NANCY G BRINKER, WHO PROMISED HER SISTER, SUSAN G KOMEN , THAT SHE WOULD END THE DISEASE THAT CLAIMED SUZY'S LIFE A - RESEARCH KOMEN HAS CONTRIBUTED TO MAJOR ADVANCES IN BREAST CANCER RESEARCH SINCE ITS FOUNDING IN 1982 KOMEN'S RESEARCH PROGRAMS ARE DESIGNED TO ADVANCE THE TRANSLATION OF RESEARCH DISCOVERIES INTO NEW WAYS TO DETECT, DIAGNOSE, TREAT, AND PREVENT BREAST CANCER, IN ORDER TO REDUCE BREAST CANCER INCIDENCE AND MORTALITY WITHIN THE NEXT DECADE TO ENSURE MAXIMUM IMPACT FOR ITS RESEARCH DOLLARS, KOMEN IS GUIDED BY A SCIENTIFIC ADVISORY BOARD, A GROUP OF INTERNATIONALLY RECOGNIZED DOCTORS, SCIENTISTS AND ADVOCATES, AND CONSULTS WITH THE KOMEN SCHOLARS, A GROUP COMPOSED OF 60 DOCTORS, SCIENTISTS AND ADVOCATES KOMEN AWARDS GRANTS TO INDIVIDUAL SCIENTISTS, RESEARCH TEAMS, AND ORGANIZATIONS AROUND THE WORLD THROUGH A TRANSPARENT AND RIGOROUS REVIEW PROCESS THAT ENSURES MAXIMUM IMPACT FOR OUR RESEARCH DOLLARS IN FISCAL YEAR 2014, KOMEN AWARDED 116 GRANTS THROUGH ITS RESEARCH PROGRAMS TO SUPPORT SCIENTIFIC RESEARCH, COLLABORATIONS, AND TRAINING IN THE UNITED STATES AND OTHER COUNTRIES, INCLUDING AUSTRALIA, BELGIUM, CANADA, ENGLAND, ISRAEL, ITALY, SPAIN, AND SWITZERLAND THE FOLLOWING REQUEST-FOR-APPLICATIONS (RFA) GRANT OPPORTUNITIES WERE OFFERED BY KOMEN DURING FISCAL YEAR 2014 POSTDOCTORAL FELLOWSHIPS (PDF) GRANTS SEEK TO ATTRACT AND SUPPORT PROMISING SCIENTISTS EMBARKING ON CAREERS DEDICATED TO BREAST CANCER RESEARCH WHO HAVE NO MORE THAN 3 YEARS POST-COMPLETION OF THEIR MOST RECENT CLINICAL FELLOWSHIP, 5 YEARS POST-COMPLETION OF THEIR MOST RECENT RESIDENCY (FOR PHYSICIANS), OR 5 YEARS POST-COMPLETION OF THEIR MOST RECENT PHD BY PROVIDING FUNDING TO OUTSTANDING POSTDOCTORAL/POSTGRADUATE FELLOWS UNDER THE GUIDANCE OF A MENTOR, KOMEN SEEKS TO ENSURE THAT A DIVERSE POOL OF HIGHLY TRAINED SCIENTISTS WILL EMERGE AS THE NEXT GENERATION OF LEADERS IN THE FIELD OF BREAST CANCER RESEARCH PDF GRANTS PROVIDE SUPPORT FOR RESEARCH PROJECTS THAT HAVE SIGNIFICANT POTENTIAL TO ADVANCE OUR UNDERSTANDING OF BREAST CANCER, LEAD TO REDUCTIONS IN BREAST CANCER INCIDENCE AND/OR MORTALITY, AND MOVE US TOWARD OUR GOAL OF A WORLD WITHOUT BREAST CANCER GRADUATE TRAINING IN DISPARITIES RESEARCH (GTDR) GTDR GRANTS (FORMERLY POST-BACCALAUREATE TRAINING IN DISPARITIES RESEARCH GRANTS) ARE INTENDED TO ESTABLISH AND/OR TO SUSTAIN A TRAINING PROGRAM FOR A MINIMUM OF THREE GRADUATE STUDENTS WHO ARE SEEKING CAREERS DEDICATED TO UNDERSTANDING AND ELIMINATING DISPARITIES IN BREAST CANCER OUTCOMES ACROSS POPULATION GROUPS CAREER CATALYST RESEARCH (CCR) CCR GRANTS PROVIDE UNIQUE OPPORTUNITIES FOR SCIENTISTS WHO HAVE HELD FACULTY POSITIONS FOR NO MORE THAN SIX YEARS AT THE TIME OF FULL APPLICATION TO ACHIEVE RESEARCH INDEPENDENCE CCR GRANTS PROVIDE SUPPORT FOR HYPOTHESIS-DRIVEN RESEARCH PROJECTS THAT HAVE SIGNIFICANT POTENTIAL TO ADVANCE OUR UNDERSTANDING OF BREAST CANCER, LEAD TO REDUCTIONS IN BREAST CANCER INCIDENCE AND/OR MORTALITY, AND MOVE US TOWARD OUR GOAL OF A WORLD WITHOUT BREAST CANCER KOMEN'S RESEARCH INVESTMENT THROUGH THE ABOVE GRANT MECHANISMS WILL SUPPORT PROJECTS INCLUDING, BUT NOT LIMITED TO, THE FOLLOWING GOALS -DEVELOPING TARGETED THERAPIES FOR TRIPLE-NEGATIVE BREAST CANCER -UNDERSTANDING BREAST CANCER PROGRESSION AND METASTASIS -VACCINE DEVELOPMENT FOR BREAST CANCER TREATMENT -PREDICTING RISK USING IMAGING -IMPROVING TOXICITY PREDICTION FOR OLDER WOMEN -IMPROVING TREATMENT RESPONSE -DEVELOPING NEW IMAGING TECHNIQUES TO IMPROVE DIAGNOSIS -OVERCOMING BREAST CANCER DISPARITIES IN LOW-INCOME WOMEN OPPORTUNITY GRANTS / SPONSORED PROGRAMS AND PARTNERSHIP GRANTS THESE GRANTS SUPPORT SPECIAL RESEARCH PROJECTS, PROGRAMS, AND COLLABORATIONS THAT LEVERAGE RESEARCH AND COMMUNITY RESOURCES TO FACILITATE THE DEVELOPMENT OF THE INFRASTRUCTURE, TOOLS, AND OTHER MEANS TO ACCELERATE THE TRANSLATION OF SCIENTIFIC DISCOVERIES FROM BENCH TO BEDSIDE TO CURBSIDE EXAMPLES OF OPPORTUNITY GRANTS/SPONSORED PROGRAMS & PARTNERSHIP GRANTS COMMITTED IN FISCAL YEAR 2014 INCLUDE -SUPPORT FOR THE ACCELERATING ANTI-CANCER DRUG DEVELOPMENT WORKSHOP, WHICH IS DESIGNED FOR SCIENTISTS AND CONSUMER ADVOCATES WITH CLINICAL TRIAL EXPERIENCE WHO HAVE AN INTEREST IN NEW APPROACHES TO DEVELOPING OR ENHANCING AGENTS OR COMBINATIONS OF AGENTS FOR THE DIAGNOSIS, TREATMENT OR PREVENTION OF CANCER T

Return Reference	Explanation	
	VOLUNTEERS	HIS GROUNDBREAKING WORKSHOP IS DESIGNED TO BRING TOGETHER LEADERS IN CLINICAL AND TRANSLATIONAL CANCER RESEARCH FROM ACADEMIA, INDUSTRY, NCI AND FDA TO ASSIST INVESTIGATORS IN UNDERSTANDING AND IMPROVING THE PROCESS OF CANCER DRUG DEVELOPMENT. THE GOAL IS TO EXPEDITE THE DEVELOPMENT AND VALIDATION PROCESSES FOR NEW ANTICANCER AND CANCER PREVENTION AGENTS, SO THEY CAN BE MADE AVAILABLE TO PATIENTS AT AN ACCELERATED RATE. -SUPPORT TO THE AMERICAN ASSOCIATION FOR CANCER RESEARCH (AACR) FOR AACR SCIENTIFIC CONFERENCES THAT -HIGHLIGHT THE BEST AND LATEST FINDINGS IN MAJOR AREAS OF CANCER RESEARCH, INCLUDING PREVENTION AND HEALTH DISPARITIES, -PROVIDE INVESTIGATORS WITH NETWORKING OPPORTUNITIES THAT HELP ADVANCE SCIENTIFIC PROGRESS, -PROMOTE TRAINING PROGRAMS THAT PROVIDE ADVOCATES WITH A SOLID BACKGROUND IN CANCER RESEARCH AND STIMULATE COLLABORATIVE INTERDISCIPLINARY INTERACTIONS AND PARTNERSHIPS AMONG THE LEADERS OF THE SCIENTIFIC AND CANCER SURVIVOR AND PATIENT ADVOCACY COMMUNITIES WORLDWIDE, AND -PROVIDE SCIENTIFIC AWARDS WHICH RECOGNIZE INVESTIGATORS FOR SIGNIFICANT CONTRIBUTIONS TO THE FIELD. B - EDUCATION Komen is a trusted source of breast cancer information for people all over the world and is instrumental in connecting people with the resources they need in the fight against breast cancer. Our website, www.komen.org, provides safe, accurate, comprehensive, and unbiased information about breast cancer based upon scientific evidence, as well as information about our research programs, community programs, volunteer opportunities and events. The "UNDERSTANDING BREAST CANCER" section of the website, co-developed with Harvard Medical School faculty and Dana-Farber/Brigham and Women's Cancer Center staff, received more than five million page views during fiscal year 2014. Komen also produces evidence-based, easy-to-read educational materials. Komen and its affiliates distributed more than three million educational materials in fiscal year 2014. Examples of Komen educational materials include the following: -BREAST SELF-AWARENESS MESSAGES CARDS IN 27 LANGUAGES AND FOR 28 SPECIFIC AUDIENCES -BREAST CANCER AWARENESS AND BREAST CANCER SPECIFIC BROCHURES AND FACT SHEETS -BOOKLETS WITH SUPPORT INFORMATION FOR SURVIVORS AND CO-SURVIVORS THE SUSAN G KOMEN "1-877 GO KOMEN" BREAST CARE HELPLINE OFFERS BREAST CANCER EDUCATION, PSYCHOSOCIAL SUPPORT AND INFORMATION ABOUT RESOURCES AVAILABLE FOR PATIENTS, FAMILIES AND FRIENDS. THE HELPLINE OPERATES FROM 9 A.M. - 10 P.M. ET DURING FISCAL YEAR 2014, THE KOMEN BREAST CANCER HELPLINE RESPONDED TO MORE THAN 14,000 CALLS AND MORE THAN 700 EMAILS. WHILE OLDER AFRICAN AMERICAN WOMEN ARE LESS LIKELY TO BE DIAGNOSED WITH BREAST CANCER THAN CAUCASIAN WOMEN, AFRICAN AMERICAN WOMEN ARE MORE LIKELY TO DIE FROM THE DISEASE AT EVERY AGE. KOMEN'S CIRCLE OF PROMISE PROGRAM ENGAGES AFRICAN AMERICAN WOMEN, AND BLACK WOMEN AROUND THE WORLD, IN THE FIGHT AGAINST BREAST CANCER. ACTIVITIES ARE AIMED TO -MOBILIZE THE COMMUNITY TO ENSURE THAT WOMEN EVERYWHERE HAVE ACCESS TO THE CARE THEY NEED, -EMPOWER WOMEN TO MAKE A PROMISE TO RECLAIM THEIR LIVES, THEIR HEALTH AND TO BE STRONG ADVOCATES IN THEIR COMMUNITIES, AND -DISPEL MYTHS IN THESE COMMUNITIES THAT PREVENT WOMEN FROM GETTING TREATMENT FOR BREAST CANCER. IN ADDITION, KOMEN PARTNERS WITH NON-PROFIT ADVOCACY ORGANIZATIONS TO PROVIDE OVER 475 TRAVEL SCHOLARSHIPS TO SEVERAL EDUCATIONAL CONFERENCES DEDICATED TO THE CRITICAL ISSUES FACING BREAST CANCER PATIENTS AND THEIR FAMILIES. IN FY 14, THESE CONFERENCES INCLUDED -THE CONFERENCE FOR YOUNG WOMEN AFFECTED BY BREAST CANCER HOSTED BY LIVING BEYOND BREAST CANCER (LBBC) -THE YOUNG SURVIVAL COALITION, LBBC'S ANNUAL CONFERENCE FOR WOMEN LIVING WITH METASTATIC BREAST CANCER -FACING OUR RISK EMPOWERED (FORCE) 2014 ANNUAL CONFERENCE FOR PEOPLE AND FAMILIES AFFECTED BY HEREDITARY CANCER OR A BRCA MUTATION. CANCER KILLS MORE PEOPLE, WORLDWIDE, THAN TB, HIV/AIDS AND MALARIA COMBINED AND CANCER IS GROWING EXPONENTIALLY IN LOW-T

Return Reference	Explanation
Describe the Process used by Management &/or Governing Body to Review 990	Form 990, Part VI, Question 11b MANAGEMENT PREPARES THE MATERIALS FOR THE FORM 990, WITH THE ASSISTANCE OF AND REVIEW BY EXTERNAL ACCOUNTANTS SENIOR LEVELS OF MANAGEMENT REVIEW AND COMMENT ON THE FINAL DRAFT OF THE FORM 990 FOR PRESENTATION TO THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS REVIEWS AND MAKES AN APPROVAL RECOMMENDATION REGARDING THE FORM 990 TO THE BOARD OF DIRECTORS THEREAFTER, THE BOARD OF DIRECTORS APPROVES THE FORM 990 PRIOR TO THE FORM BEING FILED

Return Reference	Explanation
Description of Process to Monitor Transactions for Conflicts of Interest	Form 990, Part VI, Question 12c KOMEN PRODUCES AN ANNUAL SURVEY REQUIRING ALL EMPLOYEES, BOARD MEMBERS, COMMITTEE MEMBERS, AND ADVISORY BOARDS TO DISCLOSE ANY POTENTIAL OR ACTUAL CONFLICTS OF INTEREST THEY MAY HAVE. ANY CONFLICTS ARE THEN REVIEWED BY MANAGEMENT AND THE AUDIT COMMITTEE AND APPROPRIATE MEASURES ARE TAKEN. ALL EMPLOYEES, BOARD MEMBERS, COMMITTEE MEMBERS AND ADVISORY BOARDS ARE REQUIRED TO UPDATE THEIR CONFLICT OF INTEREST DISCLOSURES DURING THE YEAR.

Return Reference	Explanation
Offices & Positions for Which Process was Used, & Year Process was Begun	Form 990, Part VI, Questions 15a and 15b THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS ASSISTS THE BOARD IN OVERSEEING COMPENSATION POLICIES AND PRACTICES RESPONSIBILITIES INCLUDE OVERSIGHT OF THE COMPENSATION OF THE PRESIDENT/CHIEF EXECUTIVE OFFICER, THE RANGE OF COMPENSATION LEVELS FOR THE ORGANIZATION'S OTHER OFFICERS, DISQUALIFIED PERSONS, AND OTHER EMPLOYEES, GRANTING THE CEO AUTHORITY TO DETERMINE ACTUAL COMPENSATION LEVELS WITHIN AN APPROVED RANGE, AND INCENTIVE/BONUS COMPENSATION PROGRAMS, IF APPROVED THE CURRENT POLICY WAS ADOPTED IN 2010 A FORMAL COMPENSATION POLICY GOVERNS PAY PRACTICES PERIODICALLY, ALL POSITIONS IN THE ORGANIZATION ARE REVIEWED AGAINST EXTERNAL MARKET DATA BY ENGAGING INDEPENDENT EXPERTS OR ACQUIRING UPDATED MARKET DATA TO CONDUCT THE BENCHMARKING PROCESS COMPENSATION IS THEN BASED UPON COMPARABLE MARKET RATES OF PAY WITH CONSIDERATION FOR INTERNAL EQUITY AND THE FINANCIAL POSITION OF THE ORGANIZATION FOR THE POSITIONS OF PRESIDENT/CEO AND FOUNDER/CHAIR OF GLOBAL STRATEGY, EXTERNAL BENCHMARKING WAS CONDUCTED TO ENSURE MARKET ALIGNMENT KOMEN PROVIDES SALARY INCREASES, PROMOTIONS AND OTHER FORMS OF COMPENSATION WITHOUT REGARD TO RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, DISABILITY, VETERAN STATUS OR SEXUAL ORIENTATION

Return Reference	Explanation
Avail of Gov Docs, Conflict of Interest Policy, & Fin Stmt's to Gen Public	Form 990, Part VI, Question 19 Komen's financial statements, conflict of interest policy and the Form 990 are publicly available on our website The Certificate of Formation is available from the Texas Secretary of State, and other governing documents are made available as required by state law Form 1023 is not online but is available to the public upon request Additional detail on event production expenses included on other exp line Form 990, Part IX, LINE 24 Komen purchases all T-Shirts for the 138 Susan G Komen Race for the Cure events conducted by the Komen Affiliates during the year OTHER CHANGES IN NET ASSETS OR FUND BALANCES FORM 990, PART XI, LINE 9 RESCINDED GRANTS - \$3,116,992

Form 990 Schedule C Part II-A - Lobbying Expenditures by Electing Public Charities

	Grassroots Expenditures	Direct Lobbying Expenditures	Total Lobbying Expenditures	Other Exempt Expenditures	Total Exempt Purpose Expenditures
Susan G. Komen Breast Cancer Foundation. Address for parent and all affiliates is 5005 LBJ Freeway, Suite 250, Dallas, Texas 75244					
1. Acadiana Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 72-1436764	-	-	-	626,200	626,200
2. The Arkansas Affiliate of the Susan G. Komen Breast Cancer Foundation EIN # 71-0724439	-	-	-	1,949,031	1,949,031
3. Austin Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2854966	-	-	-	1,736,019	1,736,019
4. Baton Rouge Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2854972	2,276	-	2,276	550,851	553,127
5. Bayou Region Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2854976	-	-	-	205,482	205,482
6. Boise, Idaho Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2854965	-	-	-	747,719	747,719
7. Central Florida Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2854957	-	5,461	5,461	648,119	653,580
8. Central Georgia Affiliate of the Susan G. Komen Breast Cancer Foundation EIN # 75-2881536	-	-	-	253,457	253,457
9. Central Mississippi Steel Magnolias Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2875174	-	-	-	391,912	391,912
10. Central New Mexico Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 85-0462625	-	-	-	301,667	301,667
11. Central New York Affiliate of the Susan G. Komen Breast Cancer Foundation EIN # 16-1389666	-	-	-	872,328	872,328
12. Central Oklahoma Chapter of the Komen Foundation, Inc. EIN # 73-1372249	5,938	-	5,938	949,701	955,639
13. Central and South Jersey Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 43-2052349	-	-	-	1,956,320	1,956,320
14. Central Texas Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 74-2906528	490	-	490	193,284	193,774
15. Central Valley Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2854970	566	-	566	333,470	334,036
16. Central Wisconsin Affiliate of the Susan G. Komen Breast Cancer Foundation EIN # 56-2613151	-	-	-	215,402	215,402

Form 990 Schedule C Part II-A - Lobbying Expenditures by Electing Public Charities

	Grassroots Expenditures	Direct Lobbying Expenditures	Total Lobbying Expenditures	Other Exempt Expenditures	Total Exempt Purpose Expenditures
17 Charlotte Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2854959	-	197	197	1,887,543	1,887,740
18 Chattanooga Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2875175	-	-	-	426,979	426,979
19 The Chicagoland Area Chapter of the Susan G. Komen Breast Cancer Foundation EIN# 36-4111723	-	-	-	2,612,770	2,612,770
20 Colorado Springs Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2844654	-	-	-	511,992	511,992
21 Columbus Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2844651	3,683	1,147	4,830	2,807,616	2,812,446
22 Connecticut Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2844629	546	-	546	1,549,332	1,549,878
23 Dallas County Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2444724	-	-	-	2,363,759	2,363,759
24 The Denver Metropolitan Affiliate of the Susan G. Komen Breast Cancer Foundation EIN# 84-1199858	160	892	1,052	4,312,536	4,313,588
25 The Des Moines Chapter of the Susan G. Komen Breast Cancer Foundation EIN # 42-1438018	-	-	-	846,361	846,361
26 Eastern Washington Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 81-0578449	-	-	-	551,906	551,906
27 Elmira Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2844630	-	-	-	236,870	236,870
28 El Paso Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 74-2723408	683	683	1,366	496,687	498,053
29 Florida Suncoast Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2870702	707	-	707	853,733	854,440
30 The Greater Atlanta Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 58-1959763	-	-	-	2,558,242	2,558,242
31 Grand Rapids Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2844631	175	-	175	552,263	552,438
32 Greater Amarillo Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 72-1562627	-	-	-	376,531	376,531
33 Greater Cincinnati Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2855038	3,222	405	3,627	1,065,097	1,068,724

Form 990 Schedule C Part II-A - Lobbying Expenditures by Electing Public Charities

	Grassroots Expenditures	Direct Lobbying Expenditures	Total Lobbying Expenditures	Other Exempt Expenditures	Total Exempt Purpose Expenditures
34 Greater Evansville Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2844632	275	-	275	726,390	726,665
35 Greater Kansas City Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2844634	4,956	469	5,425	1,599,048	1,604,473
36 Greater Lansing Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2915870	5,298	888	6,186	583,474	589,660
37 The Greater Nashville Chapter of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 62-1671774	452	-	452	1,062,836	1,063,288
38 Greater New York City Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 91-2049420	6,750	-	6,750	4,772,424	4,779,174
39 Greater Richmond, Virginia Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2844659	-	-	-	784,649	784,649
40 Greater Roanoke Valley Area Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 56-2619425	-	291	291	524,393	524,684
41 Hawaii Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2844635	-	-	-	563,789	563,789
42 Houston Affiliate of the Susan G. Komen Breast Cancer Foundation EIN# 76-0360372	-	157	157	3,966,926	3,967,083
43 Indianapolis Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2941627	-	-	-	1,870,961	1,870,961
44 Inland Empire Affiliate of the Susan G. Komen Breast Cancer Foundation EIN# 33-0802964	-	379	379	954,399	954,778
45 Knoxville Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2854955	-	-	-	921,730	921,730
46 The Las Vegas Chapter of the Susan G. Komen Breast Cancer Foundation EIN# 88-0372386	793	-	793	987,402	988,195
47 Lexington Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2854969	-	-	-	559,442	559,442
48 The Los Angeles County Chapter of the Susan G. Komen Breast Cancer Foundation EIN# 95-4582064	-	454	454	1,433,870	1,434,324
49 Louisville, Kentucky Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2855046	-	-	-	680,686	680,686
50 Lowcountry Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2844655	-	-	-	822,209	822,209

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	Grassroots Expenditures	Direct Lobbying Expenditures	Total Lobbying Expenditures	Other Exempt Expenditures	Total Exempt Purpose Expenditures
51 Lubbock Area Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2509762	-	145	145	457,534	457,679
52 Madison Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2855043	-	-	-	907,241	907,241
53 Maine Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN #75-2844637	-	-	-	420,357	420,357
54 Maryland Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 52-2053491	-	-	-	2,580,412	2,580,412
55 Massachusetts Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2854961	-	-	-	746,284	746,284
56 Memphis-MidSouth Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2942859	-	-	-	995,570	995,570
57 Miami Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2844638	-	-	-	1,625,793	1,625,793
58 Mid-Kansas Chapter of the Susan G. Komen Foundation EIN# 48-1120492	1,599	-	1,599	694,625	696,224
59 Mid-Missouri Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 56-2583638	-	-	-	211,359	211,359
60 Milwaukee Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2844639	-	-	-	2,240,170	2,240,170
61 Minnesota Affiliate of the Susan G. Komen Breast Cancer Foundation EIN# 41-1924790	-	-	-	2,016,774	2,016,774
62 Montana Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2845067	-	-	-	234,006	234,006
63 Nebraska Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 26-0056671	-	-	-	1,119,680	1,119,680
64 The Susan G. Komen Breast Cancer Foundation - New Orleans Chapter EIN# 72-1222127	-	-	-	1,228,709	1,228,709
65 North Carolina Foothills Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2875177	-	-	-	165,816	165,816
66 North Carolina Triad Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2891104	245	-	245	967,584	967,829
67 NC Triangle Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2845066	7,323	1,206	8,529	1,762,561	1,771,090

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68 North Central Alabama Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2844656	1,102	799	1,902	925,407	927,309
69 Northeastern New York Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2854968	-	-	-	305,012	305,012
70 The Northeastern Pennsylvania Chapter of the Susan G. Komen Breast Cancer Foundation EIN# 23-2657570	-	-	-	316,816	316,816
71 The Northeast Louisiana Chapter of the Susan G. Komen Breast Cancer Foundation EIN# 93-1225877	270	-	270	424,150	424,420
72 The Northeast Ohio Chapter of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 34-1793460	336	34	370	1,626,408	1,626,778
73 Northern Indiana Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 56-2583632	662	-	662	319,515	320,177
74 Northern Nevada Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2855035	3,298	-	3,298	358,105	361,403
75 North Florida Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2844636	2,463	1,198	3,661	386,938	390,599
76 The North Jersey Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 22-3528454	-	-	-	1,280,474	1,280,474
77 North Mississippi Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2844621	-	-	-	254,566	254,566
78 North Texas Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2356437	1,327	-	1,327	1,194,592	1,195,919
79 Northwest Ohio Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2845063	4,902	2,393	7,295	1,287,433	1,294,728
80 The Orange County Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 33-0487943	659	3,358	4,017	3,206,414	3,210,431
81 The Oregon and Southwest Washington Affiliate of the Susan G. Komen Breast Cancer Foundation EIN# 93-1068897	-	-	-	2,841,747	2,841,747
82 Ozark Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2845062	-	-	-	1,214,433	1,214,433
83 Philadelphia Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2949264	-	-	-	3,468,029	3,468,029
84 Phoenix Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2845061	-	-	-	2,206,596	2,206,596

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	Grassroots Expenditures	Direct Lobbying Expenditures	Total Lobbying Expenditures	Other Exempt Expenditures	Total Exempt Purpose Expenditures
85 Pittsburgh Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 81-0665396	144	1,335	1,479	2,391,836	2,393,315
86 The Peoria Memorial Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 37-1286285	-	-	-	1,569,331	1,569,331
87 The Puget Sound Chapter of the Susan G. Komen Foundation EIN# 91-1624040	-	-	-	2,674,144	2,674,144
88 Quad Cities Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2844660	-	-	-	323,865	323,865
89 Sacramento Valley Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 94-3169358	3,531	1,544	5,075	1,293,562	1,298,637
90 Siouxland Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 86-1102587	-	-	-	194,778	194,778
91 St. Louis Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2844650	-	-	-	2,614,678	2,614,678
92 The San Francisco Bay Area Affiliate of the Susan G. Komen Breast Cancer Foundation EIN# 94-3047626	1	1,262	1,263	890,900	892,163
93 Salt Lake City Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2855032	-	-	-	812,243	812,243
94 The San Antonio Chapter of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 74-2856696	-	-	-	1,434,411	1,434,411
95 The San Diego Chapter of the Susan G. Komen Breast Cancer Foundation EIN# 33-0638911	2,909	-	2,909	2,084,918	2,087,827
96 Shreveport Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2844653	122	-	122	511,786	511,908
97 Southeast Georgia Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 56-2583644	-	-	-	597,785	597,785
98 Southeast Iowa Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2854980	-	-	-	26,498	26,498
99 Southern Arizona Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2844652	96	-	96	668,860	668,956
100 South Dakota Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 33-1114233	-	-	-	286,714	286,714
101 The South Florida Chapter of the Komen Foundation, Inc. EIN# 65-0254225	-	659	659	1,436,314	1,436,973

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	Grassroots Expenditures	Direct Lobbying Expenditures	Total Lobbying Expenditures	Other Exempt Expenditures	Total Exempt Purpose Expenditures
102 Southwest Florida Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 68-0523074	-	1,500	1,500	1,113,067	1,114,567
103 The Southwest Michigan Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 38-3437505	-	-	-	270,398	270,398
104 The Susan G. Komen Breast Cancer Foundation, Tarrant County Affiliate EIN# 75-2445070	-	-	-	1,362,456	1,362,456
105 Texarkana Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2844649	-	-	-	470,951	470,951
106 Tidewater Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2875178	81	2,707	2,787	772,997	775,784
107 Tri-Cities Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 84-1689067	-	-	-	431,371	431,371
108 Tulsa Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2854974	-	-	-	920,467	920,467
109 Tyler Chapter of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 74-2764235	-	-	-	281,661	281,661
110 Upper Cumberland Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 20-5956855	-	-	-	205,434	205,434
111 Upstate South Carolina Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2854973	650	-	650	436,324	436,974
112 Vermont-New Hampshire Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2844657	-	-	-	529,506	529,506
113 Wabash Valley Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2844615	-	-	-	174,045	174,045
114 The Western New York Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2875179	-	-	-	578,952	578,952
115 West Virginia Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2885304	-	-	-	430,185	430,185
116 Wichita Falls Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 75-2844658	-	-	-	133,157	133,157
117 Wyoming Chapter of the Susan G. Komen Breast Cancer Foundation, Inc. EIN# 84-1387410	-	-	-	387,045	387,045
Totals - Affiliates	68,694	29,561	98,255	127,057,554	127,155,809

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	Grassroots Expenditures	Direct Lobbying Expenditures	Total Lobbying Expenditures	Other Exempt Expenditures	Total Exempt Purpose Expenditures
Susan G. Komen Breast Cancer Foundation, Inc. (Parent) EIN# 75-1835298	-	-	-	113,815,008	113,815,008
Totals for Parent and Affiliates	<u>68,694</u>	<u>29,561</u>	<u>98,255</u>	<u>240,872,562</u>	<u>240,970,817</u>