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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

		777 1 2010	MAD 21 0012	1
A I	For the	2012 calendar year, or tax year beginning $APR\ 1$, 2012 and ending	MAR 31, 2013	
В	Check if applicable:	C Name of organization	D Employer identif	ication number
	Address change Name	CANCER RESEARCH FOUNDATION		2385213
_]change	Doing Business As		
\vdash	Initial return Termin~ ated	Number and street (or P.O. box if mail is not delivered to street address) Room/s 3354 N. PAULINA ST 208		er -630-0055
一	Amende		G Gross receipts \$	3,210,272.
	return Applica tion pending	CHICAGO, IL 60657	H(a) Is this a group i	return
	pending	F Name and address of principal officer MERLE GOLDBLATT COREN	for affiliates?	Yes X No
		3354 N. PAULINA ST., CHICAGO, IL 60657	H(b) Are all affiliates in	cluded? Yes No
T	Tax-exe	mpt status: X 501(c)(3)	527 If "No," attach a	a list. (see instructions)
		HTTP://WWW.CANCERRESEARCHFDN.ORG	H(c) Group exemption	on number 🕨
		organization: Corporation Trust Association X Other ▶ 501 (CL)	ear of formation: 1954	M State of legal domicile: IL
,		Summary		
		Briefly describe the organization's mission or most significant activities: FUNDING	CANCER RESEAR	CH TO FIND
Governance		A CURE	CHICER REDEAT	COI TO TIME
rna	2 0	Check this box 🕨 🔲 if the organization discontinued its operations or disposed of r	nore than 25% of its net a	ssets.
)Ve		lumber of voting members of the governing body (Part VI, line 1a)		11
ŏ		lumber of independent voting members of the governing body (Part VI, line 1b)	1	11
න්	1 .	otal number of individuals employed in calendar year 2012 (Part V, line 2a)		2
ţį				
Activities &		otal number of volunteers (estimate if necessary)		
Ac		otal unrelated business revenue from Part VIII, column (C), line 12		<u> </u>
	1 0 1	let unrelated business taxable income from Form 990-T, line 34		
			Prior Year	Current Year
Revenue	8 (Contributions and grants (Part VIII, line 1h)	1,046,631	
	9 F	Program service revenue (Part VIII, line 2g)	. 0.	. 0.
	10 h	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	227,682.	350,749.
œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
	1	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,274,313.	1,664,189.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	475,000.	665,000.
	1	Benefits paid to or for members (Part IX, column (A), line 4)	0.	
70	15 0	Coloring ather componentian employee benefits (Part IV, column (A) lines 5-10)	128,256.	135,144.
Expenses	160 0	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25)	0.	0.
Sen	100 1	otal fundraising expenses (Part IX, column (D), line 25) 50, 325.		
ᄍ	1		75,134.	
	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	678,390.	
	1	fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	595,923.	
_ 07		Revenue less expenses. Subtract line 18 from line 12	Beginning of Current Year	-
ts o			7,080,702.	
Assets or Balances	20 7	otal assets (Part X, line 16)	159.544	
Net A Fund	21 7	otal liabilities (Part X, line 26)		
골	22 1	let assets or fund balances. Subtract line 21 from line 20	6,921,158.	7,913,191.
		Signature Block		
		ties of perjury, I declare that I have examined this return, including accompanying schedules and st		ny knowledge and belief, it is
true	, correct	, and complete, Declaration of preparer (other than officer) is based on all information of which prep	oarer has any knowledge.	
	ł	Alaword Syld beal	10	7/13
Sig	n	Signature of officer	Date	••
Her	re	STANFORD J GOLDBLATT, CHAIRMAN		
	i	Type or print name and title		
		Print/Type preparer's name Preparer's signature	Dates / Check	PTIN
Pai		GOETTSCHE TRANEN WINTER &	8/22/13 II self-empto	P00632828
	-	Firm's name GOETTSCHE TRANEN WINTER AND RUSSO	Firm's EIN	36-3476090
	· -	Firm's address 7383 N LINCOLN AVENUE	77777	
	, J.1.1y	LINCOLNWOOD, IL 60712	Dhona no S	347-679-8500
			Lettone no.	
Ma	y the IR	S discuss this return with the preparer shown above? (see instructions)		Yes No

Pai	Statement of Program Service Accomplishments
_	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	THE CANCER RESEARCH FOUNDATION MISSION IS TO RAISE FUNDS TO FUND BOTH
	EARLY-CAREER CANCER SCIENTISTS AND NEW DIRECTIONS IN CANCER SCIENCE
	RESEARCH WITH THE GOAL OF CONTRIBUTING TO TRANSFORMATIONAL EVENTS IN
	THE PREVENTION, TREATMENT AND CURE FOR CANCER.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
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 \$ 665,000 • including grants of \$ 665,000 •) (Revenue \$ 1,396,356 •)
	GRANTS TO SCIENTISTS AT UNIVERSITY MEDICAL CENTERS FOR CLINICAL AND
	LABORATORY RESEARCH ON VARIOUS PROJECTS
4b	(Code:) (Expenses \$ 7,215 • including grants of \$) (Revenue \$)
	PRINTED NEWSLETTERS AND INTERNET DEVELOPMENT DETAILING RESEARCH FUNDED
	BY THE FOUNDATION, BREAKTHROUGHS IN RESEARCH BY FOUNDATION FUNDED
	SCIENTISTS AS WELL AS CURRENT CANCER INFORMATION. THIS INFORMATION IS
	ALSO AVAILABLE ON THE FOUNDATION WEBSITE.
4c	(Code:) (Expenses \$ 89,804 • including grants of \$) (Revenue \$)
-10	RELATED EXPENSES INCURRED LISTED IN III 4A ADJUSTED FOR NEWSLETTER
	EXPENSE LISTED SEPARATELY
	EVERUSE DISIED SELEVATEDI
4 :	
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 762,019.

232002 12-10-12

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)?		х	
_	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Λ	
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		Х
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		Х
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	_		Х
•		5		-25
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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
Ū	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	9		Х
10	If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	9		
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Х	
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		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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			7.7
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			37
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	.za		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	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		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
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	17		Х
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		Х
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		х
20a		20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25	24a		х
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	х	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Section Sect		Check if Schedule O contains a response to any question in this Part V					
b Enter the number of Forms W2G included in line 1s. Enter o'. If not applicable in the common programment of the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) wrinings to prize winners? 2 Enter the number of employees reported on Form W3., Transmittal of Wage and Tax Stataments, filed for the calendar year ending with or within the year covered by this return. 2 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 3 b If the organization have unrelated business gross income of \$1,000 or more during the year? 3 b If the organization have unrelated business gross income of \$1,000 or more during the year? 3 b If Yes, 1 and 1 filed a form 950 of 10 to this year? W/o, "provide an explanation in Schedule O 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account or for this year? W/o, "provide an explanation in Schedule O 5 b If Yes, a fine the name of the foreign country, lew as a bank account, securities account, or other financial account? 4 c If Yes, a fine the name of the foreign country, lew as a bank account, securities account, or other financial account? 5 c If Yes, a fine the name of the foreign country, lew as a bank account, securities account, or other financial account? 5 d Was the organization aprily to a prohibited tax shelter transaction? 5 d Was the organization aprily to a prohibited tax shelter transaction? 5 d Was the organization aprily to a prohibited tax shelter transaction? 5 d Was the organization and provide the organization and accounts of the property of the flavor or organization and provide the organization selects a premium to a schedule the analysis of the property organization selects and premium to account of the mass or is a partly to a prohibited tax shelter transaction? 5 d If Yes, "did the organization necessal size and partly as contributions and p						Yes	No
b Enter the number of Forms W2G included in line 1a. Enter o I find applicable OI bit the organization comply with backup withholding rules for reportable payment to vendors and reportable gaming (gambling) winnings to prize winners? 2 Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. 2 I if all least one is reported on line 2a, did the organization file all required federal employment tax returns? 3 Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 Did I if Yea, I sent tifed a Form 990 of Tor this year? If Yea, Provide an explanation in Schedule O 4 A At any time during the calendar year, did the organization have an interest it, 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?) 4 Different the name of the foreign country. I was not a provided the organization of the Ambient financial organization that was or is a party to a prohibited tax shelter transaction at any time during the tax year? 5 Did any taxonization apranty to a prohibited tax shelter transaction at any time during the tax year? 5 Did I was the organization and party to a prohibited tax was or is a party to a prohibited tax shelter transaction? 5 Did Nove, I was the organization and party to a prohibited tax was or is a party to a prohibited tax and party to a prohibited tax was or is a party to a prohibited tax shelter transaction? 5 Did I was not tax deductible and the organization file Form 8888 T2 6 Did the organization have ment tax deductible as charitable contributions? 6 Did the organization shelt was promettin excess of Sr made party as contributions or a party organization shelt tax payment in excess of Sr made party as contributions or payment the organization	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	0			
a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return filed for the calendar year ending with or within the year covered by this return Note. If the sum of lines 1 and 2 is greater than 250, you may be required to e-file (see instructions) 30 bit the organization have unrelated business gross income of \$1,000 or more during the year? 31 bit 1 "Yes," has 1 filed a Form 900-71 for this year II "No," provide an explanation in Schedule O 32 bit 1 "Yes," and a filed a Form 900-71 for this year II "No," provide an explanation in Schedule O 33 bit 1 "Yes," and 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)? 34 a Yes, and the the name of the foreign country. Pesse instructions for filing requirements for Form 15 69-221, Report of Foreign Bank and Financial Accounts. 35 a Was the organization apprix to a prohibited tax shelter transaction at any time during the tax year? 36 bit 1 "Yes," in the sacro 50, did the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year? 36 bit 1 "Yes," of the organization have annual gross neceipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles a charitable contributions? 37 bit 1 "Yes," did the organization include with every solicitation an express statement that such contributions or girts were not tax deductibles a charitable contribution and partly for goods and services provided to the payor? 38 bit 1 "Yes," did the organization notify the donor of the value of the goods or services provided? 39 bit 1 "Yes," indicate the number of Forms 8892? filed during the year 40 bit the organization receive a payment in excess of \$75 made partly as a contribution and par	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, field for the calendary year ending with or within the year covered by this result. Secondary	С	Did the organization comply with backup withholding rules for reportable payments to vendors and re-	eporta	ble gaming			
field for the calendar year ending with or within the year covered by this return If all least one is reported on line 24, dit the organization file all required tederal 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) 3a X		(gambling) winnings to prize winners?			1c	X	
b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a At any time during the calandary year, did the organization have an inferrest 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 accountly? 4a At any time 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 aparty to a prohible dax shelter transaction at any time during the tax year? 5b Did any taxable party notify the organization that it was or is a party to a prohibled tax shelter transaction at any time during the tax year? 5b Did any taxable party notify the organization file Form 8886.7? 6c If Yes, it line 5a or 5b, did the organization file Form 8886.7? 6c Does the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that many receive deductible contributions under section 170(c). 8d Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that many receive deductible contributions under section 170(c). 8d Did the organization receive a payment in excess of 3/5 made partly as a contribution on any part on prohibition and partly for goods and services provided to the payor? 7b Did the organization selection approach of the value of the goods or services provided? 7c Did the organization selection approach of the value of the goods or services provided? 7d Did the organization in cereive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7d If the organiza	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a		filed for the calendar year ending with or within the year covered by this return	2a	2			
3a Dit the organization have unrelated business gross income of \$1,000 or more during the year? 4b If "Yes," has it filled a Form 980 T for this year? If "No," 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 accounts). 5b If "Yes," either the name of the foreign country" ▶ 5c einstructions for filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial accounts. 5c Was the organization or party to a prohibited tax shelter transaction at any time during the tax year? 5c If "Yes," to line 5a or 56, did the organization file Form 8886.17 6c If "Yes," to line 5a or 56, did the organization file Form 8886.17 6c If "Yes," to line 5a or 56, did the organization file Form 8886.17 6c If "Yes," to line 5a or 56, did the organization file Form 8886.17 6d If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6d If "Yes," did the organization include with every solicitation and partly for goods and services provided to the payor? 6d If "Yes," 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? 7b If "Yes," did the organization sells, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 6d If "Yes," did the organization receive any funds, directly or indirectly, on a personal benefit contract? 7c X 7d If "Yes," did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file form 1090 Payor 1000 Payor 1	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?		2b	X	
b if "Yes," has it filed a Form 990-T for this year? If "No." 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 accountly or "Yes," enter the name of the foreign country. ▶ 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5a Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles or that device the schariable contributions? 5b If "Yes," to line Sa or 5b, did the organization this Form 8886-1? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles a chariable contributions? 6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles? 7 Organizations that may receive deductible contributions under section 170(c). a) bill the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles? 7 Organizations that may receive deductible contributions under section 170(c). a) bill the organization neceive appyment in exess of \$76 made parity as contribution and party for goods and services provided to the payor? 7a X 7b If "Yes," indicate the number of Forms 8882 filed during the year appy premiums on a personal benefit contract? 7c X 7d Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 77 The organization received any funds, directly or indirectly, on a personal benefit contract? 77 The organization make any taxable distributions under section 996(a) supporting organization file Form 899 required		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 1			
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	X	
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b		Х
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		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	40.		
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Α.	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	40-		х
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b		
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		
С		12c		
13		13		Х
14	Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent	17		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	х	
	Other officers or key employees of the organization	15b		Х
~	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		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶IL			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availab	ole	
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Another's website X 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, are	d finar	ncial	
	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 of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person of	tion: 🕨		
	ALEXANDRA NIKITAS - 312-630-0055			
	3354 N PAULINA 208, CHICAGO, IL 60657			

12-10-12

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

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

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

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

(A)	(B)	l		((100.	(D)	(E)	(F)
Name and Title	Average		Position (do not check more than one box, unless person is both an officer and a director/trustee)					Reportable	Reportable	Estimated
	hours per week	box offic					h an tee)	compensation from	compensation from related	amount of other
	(list any	ctor						the	organizations	compensation
	hours for	Individual trustee or director	au au			ated		organization	(W-2/1099-MISC)	from the
	related organizations	nstee	truste		8	suadu		(W-2/1099-MISC)		organization and related
	below	dual tr	nstitutional trustee	_	key employee	Highest compensated employee	ie i			organizations
	line)	Indivi	Instit	Officer	Key e	Highe emplo	Former			
(1) MR. S. GOLDBLATT	5.00									_
CHAIRMAN	F 00	Х		Х				0.	0.	0.
(2) MRS. M. COHEN	5.00	٠,,		3,7					_	0
PRESIDENT (3) MR. J. GOLDBLATT	5.00	Х		Х				0.	0.	0.
(3) MR. J. GOLDBLATT TREASURER	3.00	x		х				0.	0.	0.
(4) MR. M. FREED	2.00	^		_				0.	0.	
DIRECTOR	2.00	x						0.	0.	0.
(5) MR. R. GOLDSTEIN	2.00									
DIRECTOR		х						0.	0.	0.
(6) MR. T. SHIELDS	2.00									
DIRECTOR		Х						0.	0.	0.
(7) MS. L. COHEN SCHENKMAN	2.00								_	0
SECRETARY	2 00	Х		Х				0.	0.	0.
(8) MR. J. MICHAEL LOCKE DIRECTOR	2.00	x						0.	0.	0.
(9) MR. T. NOARD	2.00								0.	
DIRECTOR		x						0.	0.	0.
(10) MR. D. KINNEAR	2.00									
DIRECTOR		Х						0.	0.	0.
(11) MS. K. KOZLOWSKI	2.00									_
DIRECTOR		Х						0.	0.	0.
(12) MRS. A. NIKITAS	20.00	ļ		х				60 500	_	0
EXECUTIVE DIRECTOR				^				60,500.	0.	0.
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Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 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 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 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 Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B)	0.
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 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 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 Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B)	0.
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 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 Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B)	Yes No
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 Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B)	X
Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B)	
the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B)	X
	from
	from
	from
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 ▶ 0	from

			K KESEAL	CH FOUNDA	ALLON		30-2303	Page 9
Pa	rt V							
_		Check if Schedule O conta	ains a response	to any question ir	this Part VIII	(D)	(0)	
					(A) Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
<u>s s</u>	1 :	a Federated campaigns	1a	458,747.				,
la al		b Membership dues		,				
اغ"		c Fundraising events						
業点		d Related organizations						
S, E		e Government grants (contribution						
isi		f All other contributions, gifts, grant						
the later		similar amounts not included abov	· I I	854,693.				
Contributions, Gifts, Grants and Other Similar Amounts	9	g Noncash contributions included in lines						
a So		h Total. Add lines 1a-1f		>	1,313,440.			
				Business Code				
ا بو	2 :	а						
اھ کَ		b						
Sal	,	с						
eve		d						
Program Service Revenue	,	е						
곱	1	f All other program service rever	nue					
		g Total. Add lines 2a-2f						
	3	Investment income (including	dividends, inter	est, and				
		other similar amounts)		▶ _	216,740.			216,740.
	4	Income from investment of tax	exempt bond	oroceeds 🕨				
	5	Royalties						
			(i) Real	(ii) Personal				
	6	a Gross rents						
	ı	b Less: rental expenses						
		c Rental income or (loss)						
	(d Net rental income or (loss)		>				
	7 :	a Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	1,680,092					
	- 1	b Less: cost or other basis						
		and sales expenses	1,546,083					
	(c Gain or (loss)	134,009					
		d Net gain or (loss)			134,009.			134,009.
e l	8	a Gross income from fundraising						
len		including \$						
Be		contributions reported on line	,					
Other Revenue		Part IV, line 18						
₹		b Less: direct expenses						
		c Net income or (loss) from fund		>				
	9 ;	a Gross income from gaming act						
		Part IV, line 19						
		b Less: direct expenses						
		c Net income or (loss) from gami						
	10	a Gross sales of inventory, less i						
		and allowances						
		b Less: cost of goods sold						
ł		c Net income or (loss) from sales Miscellaneous Revenue		Business Code				
ł	11 :	_		Programes Code				
		С						
		d All other revenue						
		e Total. Add lines 11a-11d						

45802101

1,664,189.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response to any question in this Part IX (R) (D) Do not include amounts reported on lines 6b. Total expenses Program service Management and general expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to governments and 650,000. 650,000. organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in the United States. See Part IV, line 22 Grants and other assistance to governments. organizations, and individuals outside the 15,000 15,000. United States. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 60,500 33,275. 18,150. 9,075. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 65,005. 35,753. 19,501 9,751. Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 9,639. 5,301. 2,892. 1,446. Payroll taxes 10 Fees for services (non-employees): Management 13,900. 5,560. 5,560. 2,780. Accounting Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 21,376. 21,376. Advertising and promotion 12 13 Office expenses 3,787. 3,030. 757. Information technology 14 15 Rovalties 12,570 5,028. 5,028. 2,514. 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Payments to affiliates _____ 21 793. 793. 22 Depreciation, depletion, and amortization 3,110. 1,555. 1,244. $\overline{311}$. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 5,231.PRINTING AND PUBLICATIO 4,185. 1,046. 0. POSTAGE AND SHIPPING 3,572. 1,429. 1,429 714. 1,058. 2,645. 1,058. 529. TELEPHONE d MISCELLANEOUS 130. 52. 52. 26. All other expenses 867,258. 762,019. 54,914. 50,325. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. 7,215 9,018 0. 1,803. if following SOP 98-2 (ASC 958-720)

Form 990 (2012)
Part X Balance Sheet

Part X	Balance Sheet			
	Check if Schedule O contains a response to any question in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	812,968.	1	188,554
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	15,831
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under	r		
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contribution	ng		
	employers and sponsoring organizations of section 501(c)(9) voluntary			
	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets 8 8	Notes and loans receivable, net		7	
8 §	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	1 200	9	1,100
10a	Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 10a 5,153			
b	Less: accumulated depreciation 10b 3,430		10c	1,717 7,958,664
11	Investments - publicly traded securities	6,162,878.	11	7,958,664
12	Investments - other securities. See Part IV, line 11		12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11	1,700.	15	1,700
16	Total assets. Add lines 1 through 15 (must equal line 34)	7,080,702 .	16	8,167,566
17	Accounts payable and accrued expenses	9,544.	17	4,375
18	Grants payable	150,000.	18	250,000
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
စ္မ 21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
<u> </u>	Loans and other payables to current and former officers, directors, trustees,			
21 22 22 22 22 23 23 24 25 25 25 25 25 25 25	key employees, highest compensated employees, and disqualified persons.			
-	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X of			
	Schedule D		25	054 055
26	Total liabilities. Add lines 17 through 25	159,544.	26	254,375
	Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
Se	complete lines 27 through 29, and lines 33 and 34.	6 110 117		E 10E 006
를 27	Unrestricted net assets	6,112,147.	27	7,187,096
ē 28	Temporarily restricted net assets	98,746.	28	15,830
Net Assets or Fund Balances 27 28 29 29 30 31 32 32 32 33 34 35 35 35 35 35 35 35 35 35 35 35 35 35	Permanently restricted net assets	710,265.	29	710,265
로	Organizations that do not follow SFAS 117 (ASC 958), check here			
ا <u>ة</u>	and complete lines 30 through 34.			
왕 30	Capital stock or trust principal, or current funds		30	
g 31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds		32	7 042 424
33	Total net assets or fund balances	1 7 000 700	33	7,913,191
34	Total liabilities and net assets/fund balances	7,080,702.	34	8,167,566

Га	Reconciliation of Net Assets							
	Check if Schedule O contains a response to any question in this Part XI				<u>Ш</u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,66	<u>4,1</u>	<u>89.</u>			
2	Total expenses (must equal Part IX, column (A), line 25)	2		7,2 6,9				
3	Revenue less expenses. Subtract line 2 from line 1							
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))							
5	Net unrealized gains (losses) on investments	5	19	5,1	02.			
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,							
	column (B))	10	7,91	3,1	91.			
Pa	rt XII Financial Statements and Reporting				\equiv			
	Check if Schedule O contains a response to any question in this Part XII				X			
				Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.							
2a	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 reviewer	d on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		2b	X	<u> </u>			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,						
	consolidated basis, or both:							
	X Separate basis Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,						
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X				
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit						
	Act and OMB Circular A-133?		3a		Х			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit						
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b					

Form **990** (2012)

45802101

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

CANCER RESEARCH FOUNDATION

Employer identification number 36-2385213

Pa	rt I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this par	t.) See ins	tructions.					
The	organ	ization is not a	a private foundation	because it is: (For lines 1	1 through	11, check	only one b	oox.)						
1			•	s, or association of chur	•	-	•	•).					
2		A school des	cribed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E.)									
3				tal service organization			170(b)(1)	(A)(iii).						
4		•	•	operated in conjunction					(b)(1)(A)(ii	i). Enter	the hosp	ital's	nam	ie,
		city, and stat	te:								-			
5		An organizati	ion operated for the	benefit of a college or ur	niversity o	wned or op	perated by	a govern	mental uni	t describ	ed in			
		section 170	(b)(1)(A)(iv). (Comple	ete Part II.)										
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).												
7				eives a substantial part					or from the	general	public de	escri	bed i	n
		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	X			eives: (1) more than 33 1			rom contri	butions, n	nembershi	p fees, a	and gross	rece	eipts	from
				nctions - subject to certa										
		income and u	unrelated business t	axable income (less sect	tion 511 ta	ax) from bu	sinesses a	acquired b	y the orga	nization	after Jun	e 30), 197	' 5.
			509(a)(2). (Complete											
10		An organizati	ion organized and or	perated exclusively to te	st for publ	lic safety. S	See sectio	on 509(a)(4	4).					
11		An organizat	ion organized and or	perated exclusively for th	ne benefit	of, to perfo	orm the fu	nctions of	, or to carr	y out the	e purpose	s of	one	or
	describes the type of supporting organization and complete lines 11e through 11h.													
		a Type	I b 🗔 Ту	ype II 💢 🗀 Ty	ype III - Fu	nctionally i	integrated		ј 🗀 тур	e III - No	n-functio	nally	integ	grated
е		By checking	this box, I certify tha	at the organization is not	controlled	d directly o	r indirectly	by one o	r more disc	qualified	persons	othe	er tha	n
		foundation m	nanagers and other t	han one or more publicly	y supporte	ed organiza	ations des	cribed in s	ection 509	9(a)(1) or	section 5	509(a)(2).	
f		If the organiz	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III					
		supporting o	rganization, check th	nis box										
g		Since Augus	t 17, 2006, has the o	organization accepted ar								_		
		(i) A perso	n who directly or ind	lirectly controls, either al	one or tog	ether with	persons o	described	in (ii) and (i	iii) below	, <u> </u>		Yes	No
		the gov	erning body of the s	upported organization?							11g	(i)		
		(ii) A family	member of a persor	n described in (i) above?							11g	(ii)		
				person described in (i) o								iii)		
h		Provide the f	ollowing information	about the supported org	ganization	(s).								
(i)	Name	of supported	(ii) EIN	(iii) Type of organization		organization		u notify the	(vi) Is organizatio	the	(vii) Amo	unt d	of mor	netary
	orga	anization		· `		sted in your		ion in col.	(i) organiz	ed in the	' '	supp	ort	-
				above or IRC section (see instructions))		document?	(i) of your suppor		<u> </u>	.?]			
				(6666.1 25.115.115))	Yes	No	Yes	No	Yes	No				
Tota	al													
LHA	For P	aperwork Re	duction Act Notice	, see the Instructions for	or				Schedul	e A (For	m 990 or	990)-EZ)	2012

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2012

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

(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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
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)						
6	Public support. Subtract line 5 from line 4.						
Se	ction B. Total Support			_			
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instructi	ons)			12	
13	First five years. If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth t	ax year as a section	on 501(c)(3)	
_	organization, check this box and stop						<u></u>
	ction C. Computation of Publ					1 1	
	Public support percentage for 2012 (I					14	%
	Public support percentage from 2011					15	%
16a	33 1/3% support test - 2012. If the o	•		•		•	
	stop here. The organization qualifies						
k	33 1/3% support test - 2011. If the c	-					
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test	•					•
	and if the organization meets the "fac			=	· ·	-	
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances test	-					
	more, and if the organization meets the		•				•
	organization meets the "facts-and-circ						▶;
18	Private foundation. If the organization	n did not check a	box on line 13, 16	ia, 16b, 17a, or 17	b, check this box a		ns • L

Schedule A (Form 990 or 990-EZ) 2012

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to

60	qualify under the tests listed be	clow, picase comp					
	ction A. Public Support		# N				
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	010 100	055 040	T00 006	1046631	1212440	E018114
	include any "unusual grants.")	910,189.	957,948.	788,906.	1046631.	1313440.	5017114.
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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5	910,189.	957,948.	788,906.	1046631.	1313440.	5017114.
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						0.
k	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						0.
C	Add lines 7a and 7b						0.
	Public support (Subtract line 7c from line 6.)						5017114.
Se	ction B. Total Support					_	
	ndar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Cale	ndar year (or fiscal year beginning in) Amounts from line 6	(a) 2008 910, 189.	(b) 2009 957, 948.	(c) 2010 788, 906.	(d) 2011 1046631.	(e) 2012 1313440.	(f) Total 5017114.
Cale 9	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties	910,189.	957,948.	(c) 2010 788, 906.	1046631.	(e) 2012 1313440. 216,740.	(f) Total 5017114. 903,810.
Cale 9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on	910,189.	(b) 2009 957,948. 171,360.		(d) 2011 1046631. 165,689.	1313440.	5017114.
Cale 9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	910,189.	957,948.		1046631.	1313440.	5017114.
Cale 9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income	910,189.	957,948.		1046631.	1313440.	5017114.
Cale 9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	910,189.	957,948. 171,360.	173,808.	1046631.	216,740.	903,810.
Cale 9 10a k	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	910,189.	957,948.		1046631.	1313440.	5017114.
Cale 9 10a k	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	910,189. 176,213.	957,948. 171,360.	173,808.	1046631. 165,689.	216,740. 216,740.	903,810.
Cale 9 10a k	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital	910,189. 176,213.	957,948. 171,360.	173,808.	1046631. 165,689.	216,740.	903,810.
Cale 9 10a h	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	910,189. 176,213. 176,213.	957,948. 171,360. 171,360.	173,808. 173,808. 962,714.	1046631. 165,689. 165,689.	1313440. 216,740. 216,740.	903,810. 903,810. 5920924.
Cale 9 10a k 11 12 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here	910,189. 176,213. 176,213. 1086402. the organization's	957,948. 171,360. 171,360.	173,808. 173,808. 962,714. d, fourth, or fifth ta	165,689. 165,689. 1212320. Ix year as a sectio	1313440. 216,740. 216,740. 1530180. n 501(c)(3) organiz	903,810. 903,810. 5920924. ation,
11 12 13 14 See	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here	910,189. 176,213. 176,213. 1086402. the organization's	957,948. 171,360. 171,360. 1129308. e first, second, third	173,808. 173,808. 962,714. d, fourth, or fifth ta	1046631. 165,689. 165,689. 1212320. Ix year as a section	1313440. 216,740. 216,740. 1530180. n 501(c)(3) organiz	5017114. 903,810. 903,810. 5920924. ation,
11 12 13 14 See	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here	910,189. 176,213. 176,213. 1086402. the organization's	957,948. 171,360. 171,360. 1129308. e first, second, third	173,808. 173,808. 962,714. d, fourth, or fifth ta	1046631. 165,689. 165,689. 1212320. Ix year as a section	1313440. 216,740. 216,740. 1530180. n 501(c)(3) organiz	5017114. 903,810. 903,810. 5920924. ation, ation, 84.74 %
110 12 13 14 Sec 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public Public support percentage from 2011	176,213. 176,213. 176,213. 1086402. the organization's ic Support Perine 8, column (f) di Schedule A, Part	957,948. 171,360. 171,360. 1129308. first, second, third rcentage vided by line 13, c III, line 15	173,808. 173,808. 962,714. d, fourth, or fifth ta	165,689. 165,689. 1212320. Ex year as a section	1313440. 216,740. 216,740. 1530180. n 501(c)(3) organiz	903,810. 903,810. 5920924. ation,
110 12 13 14 Sec 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here	176,213. 176,213. 176,213. 1086402. the organization's ic Support Perine 8, column (f) di Schedule A, Part	957,948. 171,360. 171,360. 1129308. first, second, third rcentage vided by line 13, c III, line 15	173,808. 173,808. 962,714. d, fourth, or fifth ta	165,689. 165,689. 1212320. Ex year as a section	1313440. 216,740. 216,740. 1530180. n 501(c)(3) organiz	5017114. 903,810. 903,810. 5920924. ation,
9 10 a b b 11 12 13 14 See 15 16 See 17	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here Etion C. Computation of Public support percentage for 2012 (li Public support percentage from 2011 etion D. Computation of Investines.)	176,213. 176,213. 176,213. 1086402. the organization's ric Support Per line 8, column (f) di Schedule A, Part struent Income 12 (line 10c, column 12)	171,360. 171,360. 171,360. 1129308. first, second, third rcentage vided by line 13, contage lill, line 15 e Percentage nn (f) divided by line	173,808. 173,808. 962,714. d, fourth, or fifth ta	165,689. 165,689. 1212320. 1212320. 1x year as a section	1313440. 216,740. 216,740. 1530180. n 501(c)(3) organiz	5017114. 903,810. 903,810. 5920924. ation, ation, 84.74 % 85.34 % 15.26 %
11 12 13 14 Sec 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here extion C. Computation of Public support percentage for 2012 (lipublic support percentage from 2011 extion D. Computation of Investment income percentage from 2011 livestment percentage from 2011 livestment income percentage from 2011 livestment line livestment	176,213. 176,213. 176,213. 1086402. the organization's ic Support Perine 8, column (f) di Schedule A, Part street Income 12 (line 10c, colum 2011 Schedule A, I	171,360. 171,360. 171,360. 1129308. first, second, third reentage vided by line 13, cell, line 15 e Percentage on (f) divided by line 17	173,808. 173,808. 962,714. d, fourth, or fifth ta	165,689. 165,689. 1212320. Ix year as a section	1313440. 216,740. 216,740. 1530180. 1501(c)(3) organiz	5017114. 903,810. 903,810. 5920924. ation, 84.74 % 85.34 % 15.26 % 14.66 %
11 12 13 14 Sec 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here Etion C. Computation of Public support percentage for 2012 (li Public support percentage from 2011 etion D. Computation of Investines.)	176,213. 176,213. 176,213. 1086402. the organization's ic Support Perine 8, column (f) di Schedule A, Part street Income 12 (line 10c, colum 2011 Schedule A, I	171,360. 171,360. 171,360. 1129308. first, second, third reentage vided by line 13, cell, line 15 e Percentage on (f) divided by line 17	173,808. 173,808. 962,714. d, fourth, or fifth ta	165,689. 165,689. 1212320. Ix year as a section	1313440. 216,740. 216,740. 1530180. 1501(c)(3) organiz	903,810. 903,810. 903,810. 5920924. ation, ation, 84.74 % 85.34 % 15.26 % 14.66 % 7 is not
11 12 13 14 Sec 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here extion C. Computation of Public support percentage for 2012 (lipublic support percentage from 2011 extion D. Computation of Investment income percentage from 2011 livestment percentage from 2011 livestment income percentage from 2011 livestment line livestment	176,213. 176,213. 176,213. 1086402. the organization's ic Support Perine 8, column (f) di Schedule A, Part Stment Income 12 (line 10c, colum 2011 Schedule A, I organization did n	171,360. 171,360. 171,360. 1129308. Ifirst, second, third rcentage vided by line 13, colli, line 15 e Percentage nn (f) divided by line Part III, line 17 ot check the box of	173,808. 173,808. 962,714. d, fourth, or fifth ta olumn (f)) e 13, column (f)) on line 14, and line	1046631. 165,689. 1212320. Ix year as a section	1313440. 216,740. 216,740. 1530180. 1501(c)(3) organiz 1516 1718 31/3%, and line 1	903,810. 903,810. 5920924. ation, 84.74 % 85.34 % 15.26 % 14.66 % 7 is not
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Cale 9 10a 11 11 12 13 14 Sec 15 16 Sec 17 18 19a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here ection C. Computation of Public support percentage from 2011 Detion D. Computation of Investment income percentage from 2013 1/3% support tests - 2012. If the more than 33 1/3%, check this box and stop tests and 31/3%, check this box and 31/3%.	176,213. 176,213. 176,213. 176,213. 1086402. the organization's ic Support Perione 8, column (f) di Schedule A, Part stment Income 12 (line 10c, column 2011 Schedule A, I organization did nod stop here. The organization did norganization did	171,360. 171,360. 171,360. 171,360. 1129308. In first, second, third recentage vided by line 13, could like line 15. Part III, line 17. ot check the box of organization quality of check a box on line line line line line line line lin	173,808. 173,808. 962,714. d, fourth, or fifth tamount (f)) e 13, column (f)) on line 14, and line fies as a publicly so line 14 or line 19a	165,689. 165,689. 1212320. Ex year as a section 15 is more than 3 supported organizar, and line 16 is more	1313440. 216,740. 216,740. 1530180. n 501(c)(3) organiz 15 16 17 18 3 1/3%, and line 1 ation are than 33 1/3%, a	5017114. 903,810. 903,810. 5920924. ation, 84.74 % 85.34 % 15.26 % 14.66 % 7 is not X and

Schedule B (Form 990, 990-EZ, or 990-PF)

Internal Revenue Service

or 990-PF)
Department of the Treasury

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

2012

Name of the organization

CANCER RESEARCH FOUNDATION

Employer identification number

36-2385213

Organization type (check one):					
Filers of:	Section:				
Form 990 or 990-EZ	$\boxed{\textbf{X}}$ 501(c)(3) (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	527 political organization				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
, ,	on is covered by the General Rule or a Special Rule. 1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.				
General Rule					
	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one implete Parts I and II.				
Special Rules					
509(a)(1) and 1	01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 70(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.				
total contribution	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, ons of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or of cruelty to children or animals. Complete Parts I, II, and III.				
contributions for If this box is ch purpose. Do no	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, or use <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. Hecked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., ot complete any of the parts unless the General Rule applies to this organization because it received nonexclusively stable, etc., contributions of \$5,000 or more during the year				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

CANCER RESEARCH FOUNDATION

36-2385213

CANCE	R RESEARCH FOUNDATION		-2385213
Part I	Contributors (see instructions). Use duplicate copies of Part I if ac	lditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ESTATE OF MARY JANE WILKIN 115 S SIXTH ST PO BOX 100 MARSHALL, IL 62441	\$\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	STANFORD GOLDBLATT 35 W. WACKER DRIVE CHICAGO, IL 60601		Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	ROBERT TINNEY TRUST 7015 W. SCHOOL ST CHICAGO, IL 60634	\$6,000.	Person X Payroll Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	ESTATE OF JACK H BOGHOSIAN 3333 EAST AMERICAN AVE, SUITE G FRESNO, CA 93725		Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	DOROTHY A VAUGHAN TRUST PO BOX 583 CORTE MADERA, CA 94976	\$\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	ESTATE OF RUTH JARROT 123 MAIN S. WHITE PLAINS, NY 10601	\$50,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
223452 12-2	1-12	Schedule B (Form	990, 990-EZ, or 990-PF) (2012)

Name of organization

Employer identification number

CANCER RESEARCH FOUNDATION

36-2385213

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	ANTONIA SENOFONTE DECL OF TRUST		Person X Payroll
	384 ADDISION RD	\$\$	Noncash (Complete Part II if there
	RIVERSIDE, IL 60546		is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	J. MICHAEL & HEATHER LOCKE		Person X Payroll
	3909 FRANKLIN AVE	\$	Noncash
	WESTERN SPRINGS, IL 60558		(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	TROY & KERRI NOARD		Person X
	1636 MONTEREY DRIVE	\$5,000.	Payroll Noncash
	GLENVIEW, IL 60026		(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	DUANE D. HARMS PLAZA MANAGEMENT LLC - 411 TENTH AVE SW	\$5,000.	Person X Payroll Noncash (Complete Part II if there
	ABERDEEN, SD 57041		is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	HEWLETT-PACKARD PAC		Person X
	PO BOX 39990	\$5,000.	Payroll Noncash
	WASHINGTON, DC 20016		(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Name of organization **Employer identification number**

CANCER RESEARCH FOUNDATION

36-2385213

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
		<u> </u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3453 12-21-	12		990, 990-EZ, or 990-PF) (20

Schedule B (Form 990, 990-EZ, or 990-PF) (2012) Page 4 Name of organization Employer identification number 36-2385213 CANCER RESEARCH FOUNDATION Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter Part III the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. `from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

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.

2012
Open to Public Inspection

Name of the organization

CANCER RESEARCH FOUNDATION

Employer identification number 36-2385213

Pa	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 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 v	vriting that the assets held in donor advi	ised 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 ad	dvisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for any other purpose	e conferring
Pa	t II Conservation Easements. Complete if the org	anization answered "Yes" to Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	ducation) Preservation of an hi	istorically important land area
	Protection of natural habitat	Preservation of a cer	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the form	n of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	• • • • • • • • • • • • • • • • • • • •		
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 8/17/06, and not on a historic struc	ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by th	ne organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and e		
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation	·	
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes	s the organization's accounting for
D-	conservation easements.	Aut Historical Transcruss on	Other Circilar Assats
Pa	t III Organizations Maintaining Collections of		otner Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS	•	*
	historical treasures, or other similar assets held for public exh		ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ		
b	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, ec	lucation, or research in furtherance of p	ublic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical trea	•	ial gain, provide
	the following amounts required to be reported under SFAS 1		
a	Revenues included in Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		\$

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

	t III Organizations Maintaining C	collections of A		easures. or Oth	ner Sin	nilar Asse			e Z
3	Using the organization's acquisition, accession								
•	(check all that apply):	on, and on or room	,		o.g				
а									
b	Scholarly research	e		nango programo					
c	Preservation for future generations	Ü							—
4	Provide a description of the organization's co	allections and explain	n how they further t	ne organization's ex	emnt ni	ırnose in Par	+ XIII		
5	During the year, did the organization solicit o						t Am.		
J	to be sold to raise funds rather than to be ma						Yes		No
Par	t IV Escrow and Custodial Arran								140
	reported an amount on Form 990, Par		oto ii tiro organizatio	Transversa 100 t	0 1 01111 0	,00,1 4,111,			
	Is the organization an agent, trustee, custodi		liary for contribution	s or other assets no	ot includ	ed			
	on Form 990, Part X?						Yes		No
b	If "Yes," explain the arrangement in Part XIII								
_							Amount		_
С	Beginning balance				10	:			_
	Additions during the year								_
	Distributions during the year								_
f	Ending balance								_
2a	Did the organization include an amount on Fo					<u> </u>	Yes		No
	If "Yes," explain the arrangement in Part XIII.								
Par									_
		(a) Current year	(b) Prior year	(c) Two years back		ee years back	(e) Four	years ba	ack
1a	Beginning of year balance	1,876,150.	1,759,516.	1,645,264	. 1	,293,133.	1,	,645,0	08.
	Contributions	-450,000.							
С	Net investment earnings, gains, and losses	107,923.	131,904.	128,445		364,955.	-	-338,8	79.
d	Grants or scholarships								_
	Other expenditures for facilities								_
	and programs								
f	Administrative expenses	13,542.	15,270.	14,193		12,823.		12,9	96.
g	End of year balance	1,520,531.	1,876,150.	1,759,516	. 1	,645,264.	1,	,293,1	33.
2	Provide the estimated percentage of the curr	ent year end balanc	e (line 1g, column (a	a)) held as:	•		•		_
а	Board designated or quasi-endowment		%						
b	Permanent endowment > 100.00	%	_						
	Temporarily restricted endowment ▶								
	The percentages in lines 2a, 2b, and 2c shou	ıld equal 100%.							
За	Are there endowment funds not in the posse		ation that are held a	nd administered for	the orga	anization			
	by:							Yes 1	No
	(i) unrelated organizations						3a(i)		X
	(ii) related organizations						3a(ii)		X
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	n Schedule R?				. 3b		
4	Describe in Part XIII the intended uses of the								
Par	t VI Land, Buildings, and Equipm	ent. See Form 990	, Part X, line 10.						
	Description of property	(a) Cost or o			Accumu epreciat		(d) Book	(value	
1a	Land								_
	Buildings								_
	Leasehold improvements								_
	Equipment								_
	Other			5,153.	3,	436.		1,71	7.
	. Add lines 1a through 1e. (Column (d) must e	<u> </u>			-	•		1,71	

CANCER RE	ででみりぐむ	$\mathbf{m} + \mathbf{m}$

Part VII Investments - Other Securities. See (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation	: Cost or end-of-	year market value
(1) Financial derivatives				
2) Closely-held equity interests				
3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(1)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶				
Part VIII Investments - Program Related. See				
(a) Description of investment type	(b) Book value	(c) Method of valuation	: Cost or end-of-	year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶				
Part IX Other Assets. See Form 990, Part X, line 1				
(a) D	Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)	45)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line			>	
Part X Other Liabilities. See Form 990, Part X, lin (a) Description of liability	ne 25.	(h) Dook volue		
		(b) Book value		
(1) Federal income taxes				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line				

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.

PRINCIPAL MUST BE KEPT INTACT IN PERPETUITY AND INCOME DERIVED IS USED FOR

PART XI, LINE 4B - OTHER ADJUSTMENTS:

REALIZED GAINS

ON THE FINANCIAL STATEMENTS, REALIZED GAINS ARE LISTED SEPARATELY FROM NET

SCHEDULE F (Form 990)

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.

2012
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Inspection

Employer identification number

Nam	e of the organization					Employer identif	ication number
CZI	NCER RESEARCH	TOIINDAT	TON			36-238521	3
Pa				tside the United States. Comple	ete if the organ		
	to Form 990, Par			to the complete control of the contr	oto ii tiic organ	nzation answered	103
1			n maintain recor	ds to substantiate the amount of its gra	ants and other	assistance,	
				the selection criteria used to award the			Yes X No
•	For eventmelters Door	wibe in Dout Vithe	ovacnization's	procedures for manitoring the use of it	. aranta and a	thar agaistanas aut	nida tha
2	United States.	inbe in Part V the	e organization s	procedures for monitoring the use of its	s grants and o	ther assistance out	side trie
3		he following Parl	t L line 3 table ca	an be duplicated if additional space is r	needed)		
	(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in region		vity listed in (d)	(f) Total
	(4)	offices	employees,	(by type) (e.g., fundraising, program		gram service,	expenditures
		in the region	employees, agents, and independent contractors	services, investments, grants to		e specific type	for and investments
			contractors in region	recipients located in the region)	of servi	ce(s) in region	in region
	Sub-total	0	0				0.
b	Total from continuation		_				
	sheets to Part I	0	0				0.
С	Totals (add lines 3a	0	0				0.
	and 3b)	1					٠.

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

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)
		ICELAND &	TO FUND RESEARCH IN EMERGING CANCER THERAPIES/CURES	15,000.	WIRE TRANSFER	0.		
	he grantee or couns	el has provided a section	recognized as charities by the n 501(c)(3) equivalency letter					1

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

Page 4

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	X 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	X 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	X 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	X 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	X 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	X No

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.
SCHEDULE F, PART I, LINE 2: ORGANIZATION RECORDS ALL GRANTS DISPERSED AND
HAS SUPPORTING DOCUMENTATION FROM THE PARTIES RECEIVING THE GRANTS.
ORGANIZATION'S BOARD OF DIRECTORS DISCUSSES AND MEETS WITH SPECIALISTS TO
DETERMINE WHICH RESEARCHER WILL RECEIVE GRANTS. AFTER THE GRANTS, THE
ORGANIZATION FOLLOWS THE PROGRESS OF THE RESEARCH CONTINUOUSLY.

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.

Open to Public Inspection

OMB No. 1545-0047

► Attach to Form 990.

CANCER RESEARCH FOUNDATION					36-2385213		
Part I General Information on Grants a	nd Assistance					•	
Does the organization maintain records to criteria used to award the grants or assist Describe in Part IV the organization's properties. Grants and Other Assistance to recipient that received more than Statement	stance? ocedures for monit Governments and	oring the use of grant	t funds in the Unite	d States. Complete if the org			X Yes No
(a) Name and address of organization or government	(b) EIN	(c) IRC 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 CHICAGO 5841 S. MARYLAND AVE CHICAGO, IL 60637	36-2177139		575,000.	0.			TO FUND RESEARCH IN EMERGING CANCER THERAPIES/CURES
WASHINGTON UNIVERSITY IN ST. LOUIS 1 BROOKINGS DR ST LOUIS, MO 63130	43-0653611		75,000.	0.			TO FUND RESEARCH IN EMERGING CANCER THERAPIES/CURES
2 Enter total number of section 501(c)(3) a	nd government or	ganizations listed in th	he line 1 table	<u> </u>	<u> </u>	1	
3 Enter total number of other organizations							
LHA For Paperwork Reduction Act Notice							Schedule I (Form 990) (2012)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Complete this part to prov	de the information	n required in Part I,	, line 2, Part III, colum	n (b), and any other additional in	formation.
CHEDULE I, PART I, LINE 2: ORGAN	ZATION R	ECORDS ALI	GRANTS DI	SPERSED AND	
AS SUPPORTING DOCUMENTATION FROM	THE PART	IES RECEIV	ING THE GR	ANTS.	
RGANIZATION'S BOARD OF DIRECTORS	DISCUSSE	S AND MEET	rs with spe	CTALISTS TO	
ETERMINE WHICH RESEARCHER WILL RE	ECEIVE GRA	ANTS. AFT	TER THE GRA	NTS, THE	
RGANIZATION FOLLOWS THE PROGRESS	OF THE R	ESEARCH CO	ONTINUOUSLY	•	
					_

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2012
Open to Public Inspection

Internal Revenue Service

Name of the organization

CANCER RESEARCH FOUNDATION

Employer identification number 36-2385213

FORM 990, PART I, ITEM K, OTHER ORGANIZATION TYPE:

501(C)(3)

FORM 990, PART VI, SECTION A, LINE 2: MERLE GOLDBLATT COHEN, STANFORD J.

GOLDBLATT, JEREMY S. GOLDBLATT AND ALEXANDRA NIKITAS ARE FAMILY MEMBERS

FORM 990, PART VI, SECTION A, LINE 8B: THERE IS THE GOVERNING BODY, WHICH
HAS DOCUMENTED ITS MEETINGS. THERE IS ALSO AN AUDIT COMMITTEE, WHICH
HOWEVER, HAD NO RECORDED MINUTES.

FORM 990, PART VI, SECTION B, LINE 11: A COPY OF THE 990 WAS COMPLETED BY
THE ACCOUNTANT AND SUBMITED TO THE GOVERNING BODY FOR QUESTIONS AND
COMMENTS. ONCE THE RETURN WAS SIGNED BY ORGANIZATION, THE RETURN WAS
FILED.

FORM 990, PART VI, SECTION B, LINE 15A: THE BOARD OF DIRECTORS USED

AVAILABLE DATA IN DECIDING AND APPROVING THE SALARY OF THE EXECUTIVE

DIRECTOR.

FORM 990, PART VI, SECTION C, LINE 19: FINANCIAL STATEMENTS ARE AVAILABLE
ONLINE AT THE FOUNDATION WEBSITE, THROUGH A THIRD PARTY WEBSITE AND
FINANCIAL STATEMENTS ARE ALSO AVAILABLE TO THE PUBLIC UPON REQUEST BY
CONTACTING THE ORGANIZATION.

THE PROCESS FOR THE COMMITTEE CHOOSING AN INDEPENDENT AUDITOR HAS NOT CHANGED FROM THE PRIOR YEAR.

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

Schedule O (Form 990 or 990-EZ) (2012)