** PUBLIC DISCLOSURE COPY **

Form **990**

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0047

2021

Open to Public Inspection

A For the 2021 calendar year, or tax year beginning OCT 1, 2021 and ending SEP 30, 2022

B Check if applicable:
- [ ] Address change
- [ ] Name change
- [ ] Initial return
- [ ] Final return/terminated
- [ ] Amended return
- [ ] Application pending

C Name of organization: AMERICAN INSTITUTE FOR CANCER RESEARCH

Doing business as

Number and street (or P.O. box if mail is not delivered to street address): 1560 WILSON BOULEVARD — Room/suite: 1000

City or town, state or province, country, and ZIP or foreign postal code: ARLINGTON, VA 22209

D Employer identification number: 52-1238026

E Telephone number: (202) 328-7744

G Gross receipts $ 15,019,567.

F Name and address of principal officer: DEIRDRE MCGINLEY-GIESER, SAME AS C ABOVE

H(a) Is this a group return for subordinates? [ ] Yes [X] No

H(b) Are all subordinates included? [ ] Yes [ ] No
If "No," attach a list. See instructions

H(c) Group exemption number ▶

I Tax-exempt status: [X] 501(c)(3) [ ] 501(c) ( ) ◀ (insert no.) [ ] 4947(a)(1) or [ ] 527

J Website: ▶ WWW.AICR.ORG

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other ▶

L Year of formation: 1981 **M** State of legal domicile: DC

Part I Summary

Activities & Governance

1	Briefly describe the organization's mission or most significant activities: ADVANCES RESEARCH, EDUCATION AND COMMUNITY PROGRAMS FOR CANCER PREVENTION AND SURVIVORSHIP.		
2	Check this box ▶ [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	6
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	6
5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	44
6	Total number of volunteers (estimate if necessary)	6	67066
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.

		Prior Year	Current Year
Revenue			
8	Contributions and grants (Part VIII, line 1h)	10,837,807.	12,273,935.
9	Program service revenue (Part VIII, line 2g)	1,053,412.	1,644,130.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	795,751.	350,304.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,555,721.	205,285.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	14,242,691.	14,473,654.
Expenses			
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,569,075.	1,576,143.
14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	4,152,124.	3,414,235.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	693,862.	647,752.
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 2,899,233.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	7,821,872.	8,046,039.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	14,236,933.	13,684,169.
19	Revenue less expenses. Subtract line 18 from line 12	5,758.	789,485.

	Net Assets or Fund Balances	Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	18,214,497.	16,915,707.
21	Total liabilities (Part X, line 26)	5,414,854.	4,780,725.
22	Net assets or fund balances. Subtract line 21 from line 20	12,799,643.	12,134,982.

Part II Signature Block

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

Sign Here

▶ Signature of officer — Date

▶ DEIRDRE MCGINLEY-GIESER, EXECUTIVE VP
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN
KRISTEN BARNETT	Kristen Barnett	07/18/23		P01234578

Firm's name ▶ RSM US LLP — Firm's EIN ▶ 42-0714325

Firm's address ▶ 1001 WATER ST. STE. 500, TAMPA, FL 33602 — Phone no. 813-316-2300

May the IRS discuss this return with the preparer shown above? See instructions [X] Yes [ ] No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

AICR CHAMPIONS THE LATEST AND MOST AUTHORITATIVE SCIENTIFIC RESEARCH FROM AROUND THE WORLD ON CANCER PREVENTION AND SURVIVAL THROUGH DIET, WEIGHT AND PHYSICAL ACTIVITY, SO THAT WE CAN HELP PEOPLE MAKE INFORMED LIFESTYLE CHOICES TO REDUCE THEIR CANCER RISK.

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

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? .... [ ] Yes [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 $ 6,876,430. including grants of $ 256,142.) (Revenue $ 1,577,643.)

SEE SCHEDULE O.

EDUCATION

4b (Code:) (Expenses $ 2,173,462. including grants of $ 1,320,001.) (Revenue $ 66,487.)

SEE SCHEDULE O.

RESEARCH

4c (Code:) (Expenses $ including grants of $) (Revenue $)

4d Other program services (Describe on Schedule O.)

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

4e Total program service expenses ▶ 9,049,892.

SEE SCHEDULE O FOR CONTINUATION(S)

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules *(continued)*

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

					Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	120			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance *(continued)*

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 44			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
	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		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation on Schedule O*		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a	X	
b	If "Yes," enter the name of the foreign country ▶ SEE SCHEDULE O				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8		
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation on Schedule O*		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year?		15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		16		X
	If "Yes," complete Form 4720, Schedule O.				
17	**Section 501(c)(21) organizations.** Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes," complete Form 6069.				

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 on Schedule O. See instructions.*

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

Section A. Governing Body and Management

		Line	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year ..... 1a: 6 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b: 6			
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, 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		X
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:			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses on Schedule O*	9		X

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ AL,AR,CA,FL,GA,HI,IL,IN,KS,KY,MD,MA

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

[X] Own website [ ] Another's website [X] Upon request [ ] Other *(explain on Schedule O)*

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶

DEIRDRE MCGINLEY-GIESER - (202) 328-7744

1560 WILSON BOULEVARD, 1000, ARLINGTON, VA 22209

SEE SCHEDULE O FOR FULL LIST OF STATES

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than $100,000 from the organization and any related organizations.
- 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.

See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) KELLY B. BROWNING FORMER EXECUTIVE VP	40.00						X	212,786.	2,657.	10,666.
(2) JENNIFER MERCER SENIOR VP DEVELOPMENT	40.00					X		178,212.	0.	23,215.
(3) DEIRDRE MCGINLEY-GIESER EXECUTIVE VP	40.00			X				176,577.	0.	18,790.
(4) MARILYN GENTRY PRESIDENT, WCRF INT'L & AICR	3.00 15.00			X				50,618.	120,995.	17,232.
(5) MICHAEL MCCARN CHIEF INFORMATION OFFICER	40.00					X		150,388.	0.	25,339.
(6) NIGEL BROCKTON VP RESEARCH	40.00					X		143,684.	0.	29,633.
(7) PATRICIA BODENSTEDT VP FINANCE	40.00					X		141,817.	0.	17,999.
(8) PETER CROWLEY MCCARTY VP OF CORPORATE FOUNDATIONS	40.00					X		133,860.	0.	1,954.
(9) MELVIN HUTSON BOARD CHAIR	2.00	X						0.	0.	0.
(10) LAWRENCE PRATT BOARD VICE CHAIR (THRU 07/19/22)	2.00	X						0.	0.	0.
(11) SUSAN PEPPER BOARD SECRETARY-TREASURER	2.00	X		X				0.	0.	0.
(12) JEFFREY BUNN BOARD MEMBER	2.00	X						0.	0.	0.
(13) BETTINA BRUCHS BOARD MEMBER (THRU 09/12/22)	2.00	X						0.	0.	0.
(14) GEOFFREY HERALD BOARD MEMBER (AS OF 09/28/22)	2.00	X						0.	0.	0.
(15) FRANK HILL BOARD MEMBER (AS OF 05/03/22)	2.00	X						0.	0.	0.
(16) MARILYN GENTRY BOARD MEMBER (AS OF 09/28/22)	2.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
1b Subtotal ▶								1,187,942.	123,652.	144,828.
c Total from continuation sheets to Part VII, Section A ▶								0.	0.	0.
d Total (add lines 1b and 1c) ▶								1,187,942.	123,652.	144,828.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 12

		Yes	No
3 Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3	X	
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	X	
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		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
SOUTHWEST PUBLISHING & MAILING CORP 4000 SE ADAMS STREET, TOPEKA, KS 66609	MAILHOUSE CONSULTANT	1,290,953.
THE DATA CENTER INC, 9720 CAPITAL COURT, SUITE 101, MANASSAS, VA 20110	DATA PROCESSING FEES	573,180.
DIRECT RESPONSE CONSULTING SERVICES 7918 JONES BRANCH DRIVE, MCLEAN, VA 22102	FUNDRAISING CONSULTANT	373,087.
CHLORINE LLC, 1627 K STREET NE, SUITE 710, WASHINGTON, DC 20006	REAL ESTATE MANAGEMENT	367,769.
RMI DIRECT MARKETING INC, 44 OLD RIDGEBURY RD, PLAZA ONE, DANBURY, CT 06810	LIST RENTAL CONSULTANT	312,170.

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 ▶ 12

Part VIII **Statement of Revenue**

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d	660,000.				
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	11,613,935.				
	g Noncash contributions included in lines 1a-1f	1g	$				
	h **Total.** Add lines 1a-1f		▶	12,273,935.			
Program Service Revenue			Business Code				
	2 a SERVICE FEES		900099	1,559,280.	1,559,280.		
	b BROCHURE SALES		900099	84,850.	84,850.		
	c						
	d						
	e						
	f All other program service revenue						
	g **Total.** Add lines 2a-2f		▶	1,644,130.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		▶	233,594.			233,594.
	4 Income from investment of tax-exempt bond proceeds		▶				
	5 Royalties		▶	1,295.			1,295.
		(i) Real	(ii) Personal				
	6 a Gross rents (6a)						
	b Less: rental expenses (6b)						
	c Rental income or (loss) (6c)						
	d Net rental income or (loss)		▶				
		(i) Securities	(ii) Other				
	7 a Gross amount from sales of assets other than inventory (7a)	662,623.					
	b Less: cost or other basis and sales expenses (7b)	545,913.					
	c Gain or (loss) (7c)	116,710.					
	d Net gain or (loss)		▶	116,710.			116,710.
	8 a Gross income from fundraising events (not including $ ____ of contributions reported on line 1c). See Part IV, line 18	8a					
	b Less: direct expenses	8b					
	c Net income or (loss) from fundraising events		▶				
	9 a Gross income from gaming activities. See Part IV, line 19	9a					
	b Less: direct expenses	9b					
	c Net income or (loss) from gaming activities		▶				
	10 a Gross sales of inventory, less returns and allowances	10a					
	b Less: cost of goods sold	10b					
	c Net income or (loss) from sales of inventory		▶				
Miscellaneous Revenue			Business Code				
	11 a MAILING LIST RENTAL		900099	167,003.			167,003.
	b OTHER INCOME		900099	36,987.			36,987.
	c						
	d All other revenue						
	e **Total.** Add lines 11a-11d		▶	203,990.			
	12 **Total revenue.** See instructions		▶	14,473,654.	1,644,130.	0.	555,589.

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	1,155,000.	1,155,000.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	421,143.	421,143.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	197,428.	197,428.		
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,747,611.	1,463,654.	882,018.	401,939.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	255,263.	131,337.	86,208.	37,718.
10 Payroll taxes	213,933.	121,984.	62,859.	29,090.
11 Fees for services (nonemployees):				
a Management				
b Legal	25,829.	12,991.	8,753.	4,085.
c Accounting	116,213.	8,943.	104,951.	2,319.
d Lobbying				
e Professional fundraising services. See Part IV, line 17	647,752.			647,752.
f Investment management fees	68,834.	32,948.	17,813.	18,073.
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	672,174.	644,048.	28,126.	
12 Advertising and promotion	12,486.	3,411.	6,009.	3,066.
13 Office expenses	145,418.	76,519.	40,673.	28,226.
14 Information technology	290,084.	210,916.	47,663.	31,505.
15 Royalties				
16 Occupancy	321,442.	173,579.	102,861.	45,002.
17 Travel	30,665.	27,591.	2,458.	616.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	10,384.	9,632.	226.	526.
20 Interest	35,675.		35,675.	
21 Payments to affiliates	69,219.	69,219.		
22 Depreciation, depletion, and amortization	117,379.	63,385.	37,561.	16,433.
23 Insurance	29,618.	15,994.	9,478.	4,146.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a POSTAGE & DELIVERY	2,449,201.	1,612,674.	38,241.	798,286.
b PRINTING & PUBLICATION	1,797,524.	1,258,041.	39,389.	500,094.
c DATA PROCESSING	811,046.	471,164.	79,303.	260,579.
d MAILHOUSE FEES	539,497.	455,403.	14,316.	69,778.
e All other expenses	503,351.	412,888.	90,463.	
25 **Total functional expenses.** Add lines 1 through 24e	13,684,169.	9,049,892.	1,735,044.	2,899,233.
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ [X] if following SOP 98-2 (ASC 958-720)	5,091,503.	3,105,934.	244.	1,985,325.

Part X Balance Sheet

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

					(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing			20,229.	1	9,899.
	2	Savings and temporary cash investments			6,398,645.	2	5,948,992.
	3	Pledges and grants receivable, net			1,636,079.	3	1,860,511.
	4	Accounts receivable, net			126,128.	4	97,957.
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons				5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			618,106.	9	613,345.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	1,122,848.			
	b	Less: accumulated depreciation	10b	811,938.	428,289.	10c	310,910.
	11	Investments - publicly traded securities			1,617,891.	11	1,305,239.
	12	Investments - other securities. See Part IV, line 11				12	
	13	Investments - program-related. See Part IV, line 11			6,510,345.	13	5,522,828.
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			858,785.	15	1,246,026.
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)			18,214,497.	16	16,915,707.
Liabilities	17	Accounts payable and accrued expenses			572,269.	17	476,349.
	18	Grants payable			2,061,301.	18	2,179,249.
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons				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			2,781,284.	25	2,125,127.
	26	**Total liabilities.** Add lines 17 through 25			5,414,854.	26	4,780,725.
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ▶ [X] and complete lines 27, 28, 32, and 33.**					
	27	Net assets without donor restrictions			8,018,204.	27	5,674,642.
	28	Net assets with donor restrictions			4,781,439.	28	6,460,340.
		Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.					
	29	Capital stock or trust principal, or current funds				29	
	30	Paid-in or capital surplus, or land, building, or equipment fund				30	
	31	Retained earnings, endowment, accumulated income, or other funds				31	
	32	Total net assets or fund balances			12,799,643.	32	12,134,982.
	33	Total liabilities and net assets/fund balances			18,214,497.	33	16,915,707.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	14,473,654.
2	Total expenses (must equal Part IX, column (A), line 25)	2	13,684,169.
3	Revenue less expenses. Subtract line 2 from line 1	3	789,485.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	12,799,643.
5	Net unrealized gains (losses) on investments	5	-1,377,280.
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 on Schedule O)	9	-76,866.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	12,134,982.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line 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 on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: [ ] Separate basis [ ] Consolidated basis [ ] Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: [X] Separate basis [ ] Consolidated basis [ ] Both consolidated and separate basis			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A (Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2021
Open to Public Inspection

Name of the organization AMERICAN INSTITUTE FOR CANCER RESEARCH
Employer identification number 52-1238026

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1 [ ] A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
2 [ ] A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
3 [ ] A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
4 [ ] A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: ______
5 [ ] An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
6 [ ] A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
7 [X] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
8 [ ] A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
9 [ ] An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: ______
10 [ ] An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
11 [ ] An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
12 [ ] An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

- a [ ] **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b [ ] **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c [ ] **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d [ ] **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e [ ] Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations ......
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	13,906,659.	16,279,595.	12,226,058.	10,837,807.	12,273,935.	65,524,054.
2 Tax revenues levied for the organization'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	13,906,659.	16,279,595.	12,226,058.	10,837,807.	12,273,935.	65,524,054.
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)						5,561,003.
6 **Public support.** Subtract line 5 from line 4.						59,963,051.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4	13,906,659.	16,279,595.	12,226,058.	10,837,807.	12,273,935.	65,524,054.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	418,623.	489,512.	240,918.	208,468.	275,814.	1,633,335.
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 VI.)	19,016.	46,605.	253,743.	1,555,351.	203,990.	2,078,705.
11 **Total support.** Add lines 7 through 10						69,236,094.

12 Gross receipts from related activities, etc. (see instructions)	12	6,389,842.

13 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))	14	86.61 %
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	90.44 %

16a **33 1/3% support test - 2021.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support test - 2020.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10% -facts-and-circumstances test - 2021.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ▶ ☐

b **10% -facts-and-circumstances test - 2020.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ▶ ☐

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

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

14 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f))	15	%
16	Public support percentage from 2020 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2021** (line 10c, column (f), divided by line 13, column (f))	17	%
18	Investment income percentage from **2020** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2021.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests - 2020.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

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

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in* **Part VI** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* **Part VI** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer lines 3b and 3c below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* **Part VI** *when and how the organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* **Part VI** *what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in* **Part VI,** *including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990).*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in* **Part VI.**	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* **Part VI.**	9b		
c	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* **Part VI.**	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*	10b		

Part IV Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	**11a**		
b	A family member of a person described on line 11a above?	**11b**		
c	A 35% controlled entity of a person described on line 11a or 11b above? *If "Yes" to line 11a, 11b, or 11c, provide detail in* **Part VI.**	**11c**		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? *If "No," describe in* **Part VI** *how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	**1**		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* **Part VI** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*	**2**		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in* **Part VI** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	**1**		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	**1**		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* **Part VI** *how the organization maintained a close and continuous working relationship with the supported organization(s).*	**2**		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* **Part VI** *the role the organization's supported organizations played in this regard.*	**3**		

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year* **(see instructions).**

a ☐ The organization satisfied the Activities Test. *Complete* **line 2** *below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

c ☐ The organization supported a governmental entity. *Describe in* **Part VI** *how you supported a governmental entity (see instructions).*

			Yes	No
2	Activities Test. **Answer lines 2a and 2b below.**			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in* **Part VI identify those supported organizations and explain** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	**2a**		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* **Part VI** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	**2b**		
3	Parent of Supported Organizations. **Answer lines 3a and 3b below.**			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If "Yes" or "No" provide details in* **Part VI.**	**3a**		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.*	**3b**		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in* **Part VI**). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	**1**		
2 Recoveries of prior-year distributions	**2**		
3 Other gross income (see instructions)	**3**		
4 Add lines 1 through 3.	**4**		
5 Depreciation and depletion	**5**		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	**6**		
7 Other expenses (see instructions)	**7**		
8 **Adjusted Net Income** (subtract lines 5, 6, and 7 from line 4)	**8**		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	**1a**		
b Average monthly cash balances	**1b**		
c Fair market value of other non-exempt-use assets	**1c**		
d **Total** (add lines 1a, 1b, and 1c)	**1d**		
e **Discount** claimed for blockage or other factors (*explain in detail in* **Part VI**):			
2 Acquisition indebtedness applicable to non-exempt-use assets	**2**		
3 Subtract line 2 from line 1d.	**3**		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	**4**		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	**5**		
6 Multiply line 5 by 0.035.	**6**		
7 Recoveries of prior-year distributions	**7**		
8 **Minimum Asset Amount** (add line 7 to line 6)	**8**		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	**1**		
2 Enter 0.85 of line 1.	**2**		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	**3**		
4 Enter greater of line 2 or line 3.	**4**		
5 Income tax imposed in prior year	**5**		
6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	**6**		

7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations *(continued)*

Section D - Distributions		Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	1	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (prior IRS approval required - *provide details in* **Part VI**)	5	
6 Other distributions (*describe in* **Part VI**). See instructions.	6	
7 **Total annual distributions.** Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (*provide details in* **Part VI**). See instructions.	8	
9 Distributable amount for 2021 from Section C, line 6	9	
10 Line 8 amount divided by line 9 amount	10	

Section E - Distribution Allocations (see instructions)	**(i) Excess Distributions**	**(ii) Underdistributions Pre-2021**	**(iii) Distributable Amount for 2021**
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required - *explain in* **Part VI**). See instructions.			
3 Excess distributions carryover, if any, to 2021			
a From 2016			
b From 2017			
c From 2018			
d From 2019			
e From 2020			
f **Total** of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: $			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, *explain in* **Part VI.** See instructions.			
6 Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, *explain in* **Part VI**. See instructions.			
7 **Excess distributions carryover to 2022.** Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017			
b Excess from 2018			
c Excess from 2019			
d Excess from 2020			
e Excess from 2021			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

OTHER INCOME

2017 AMOUNT: $ 19,016.

2018 AMOUNT: $ 46,605.

2019 AMOUNT: $ 253,743.

2020 AMOUNT: $ 1,555,351.

2021 AMOUNT: $ 203,990.

** PUBLIC DISCLOSURE COPY **

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ **Attach to Form 990 or Form 990-PF.**
▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2021

Name of the organization	Employer identification number
AMERICAN INSTITUTE FOR CANCER RESEARCH	52-1238026

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	[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

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[ ] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

[X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year ▶ $ ____________

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), 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 its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization	Employer identification number
AMERICAN INSTITUTE FOR CANCER RESEARCH	52-1238026

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		$ 2,475,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
2		$ 1,200,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
3		$ 660,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
4		$ 359,024.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization: AMERICAN INSTITUTE FOR CANCER RESEARCH

Employer identification number: 52-1238026

Part II Noncash Property (see instructions). Use duplicate copies of Part 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
		$	

(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
		$	

Name of organization	Employer identification number
AMERICAN INSTITUTE FOR CANCER RESEARCH	52-1238026

Part III **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor.** Complete columns **(a)** through **(e) and** the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **$1,000 or less** for the year. (Enter this info. 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 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

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization: AMERICAN INSTITUTE FOR CANCER RESEARCH

Employer identification number: 52-1238026

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

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

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

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

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

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

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

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

			Held at the End of the Tax Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d	

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

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

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

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ ______

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

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

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

(i) Revenue included on Form 990, Part VIII, line 1 ▶ $ ______

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

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

a Revenue included on Form 990, Part VIII, line 1 ▶ $ ______

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

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

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

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

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

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

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

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

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

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

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	2,504,791.	2,045,005.	2,123,034.	1,911,046.	1,433,491.
b Contributions	290,307.	297,100.	3,365.	292,469.	505,778.
c Net investment earnings, gains, and losses	-537,422.	367,867.	242,611.	92,303.	131,638.
d Grants or scholarships	0.				
e Other expenditures for facilities and programs	172,788.	205,181.	324,005.	172,784.	159,861.
f Administrative expenses	0.				
g End of year balance	2,084,888.	2,504,791.	2,045,005.	2,123,034.	1,911,046.

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

a Board designated or quasi-endowment ▶ 17.0000 %

b Permanent endowment ▶ 29.0000 %

c Term endowment ▶ 54.0000 %

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

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

		Yes	No
(i) Unrelated organizations	3a(i)		X
(ii) Related organizations	3a(ii)		X
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	5,900.			5,900.
b Buildings				
c Leasehold improvements		513,031.	235,300.	277,731.
d Equipment		357,759.	341,172.	16,587.
e Other		246,158.	235,466.	10,692.
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶				310,910.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) CHARITABLE GIFT ANNUITIES	2,646,135.	END-OF-YEAR MARKET VALUE
(2) CHARITABLE REMAINDER UNITRUSTS	825,539.	END-OF-YEAR MARKET VALUE
(3) CANCER RESEARCH FUND	2,051,154.	END-OF-YEAR MARKET VALUE
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶	5,522,828.	

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) BENEFICIAL INT. IN PERPETUAL TRUST	308,626.
(2) DUE FROM AFFILIATES	937,400.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 15.)* ▶	1,246,026.

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED RENT	919,689.
(3) LIABILITY CHARITABLE GIFT ANNUITIES	851,051.
(4) LIABILITY CHARITABLE REMAINDER	354,387.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* ▶	2,125,127.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII [X]

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	12,983,405.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	-1,377,280.		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	-76,866.		
e	Add lines **2a** through **2d**			2e	-1,454,146.
3	Subtract line **2e** from line **1**			3	14,437,551.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	36,103.		
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	36,103.
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	14,473,654.

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	13,648,066.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	0.
3	Subtract line **2e** from line **1**			3	13,648,066.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	36,103.		
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	36,103.
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	13,684,169.

Part XIII Supplemental Information.

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

PART V, LINE 4:

THE ORGANIZATION'S ENDOWMENT FUNDS ARE ESTABLISHED TO FURTHER THE MISSION OF THE AMERICAN INSTITUTE FOR CANCER RESEARCH. THE PERSON ESTABLISHING THE FUND DESIGNATED THE PURPOSE OF THEIR FUND, (I.E., CANCER RESEARCH, EDUCATION OR GENERAL OPERATING).

PART X, LINE 2:

THE INSTITUTE IS RECOGNIZED AS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE ON INCOME OTHER THAN UNRELATED BUSINESS INCOME. NO PROVISION FOR INCOME TAXES IS REQUIRED AS OF SEPTEMBER 30, 2022 AND 2021, SINCE THE INSTITUTE HAD NO UNRELATED BUSINESS INCOME. THE INSTITUTE HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE

Part XIII Supplemental Information *(continued)*

AS A PUBLICLY SUPPORTED ORGANIZATION AND IS THEREFORE NOT A PRIVATE FOUNDATION. MANAGEMENT ANNUALLY REVIEWS ITS TAX POSITION AND HAS DETERMINED THAT THERE ARE NO UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

CHANGE IN VALUE OF SPLIT INTEREST AGREEMENT LIABILITY	166,722.
NET GAIN ON INTEREST IN PERPETUAL TRUST	-237,845.
CURRENCY LOSS	-5,743.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	-76,866.

SCHEDULE F **(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2021
Open to Public Inspection

Name of the organization: AMERICAN INSTITUTE FOR CANCER RESEARCH

Employer identification number: 52-1238026

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

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ...... [X] Yes [ ] No

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANTMAKING		256,143.
SOUTH AMERICA	0	0	GRANTMAKING		165,000.
3 a Subtotal	0	0			421,143.
b Total from continuation sheets to Part I	0	0			0.
c **Totals** (add lines 3a and 3b)	0	0			421,143.

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on 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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	EDUCATION	256,143.	WIRE	0.		
		SOUTH AMERICA	RESEARCH	165,000.	CASH/CHECK	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ 2

3 Enter total number of other organizations or entities ▶ 0

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

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

Part IV Foreign Forms

1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☐ **Yes** ☒ **No**

2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately 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; don't file with Form 990)* ☐ **Yes** ☒ **No**

3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* ☒ **Yes** ☐ **No**

4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ☐ **Yes** ☒ **No**

5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ☐ **Yes** ☒ **No**

6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* ☐ **Yes** ☒ **No**

Part V Supplemental Information

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

PART I, LINE 2:

AT THE END OF THE FIRST YEAR OF ANY TWO-YEAR GRANT, THE PRINCIPAL INVESTIGATOR MUST SUBMIT A PROGRESS REPORT, INCLUDING ABSTRACTS AND PUBLICATIONS OF RESEARCH SUPPORTED IN WHOLE OR IN PART BY AICR. AT THE DISCRETION OF AICR, FUNDS FOR THE SECOND YEAR OF THE GRANT MAY BE WITHHELD BASED ON THE PROGRESS REPORT OR IF PROGRESS REPORTS ARE NOT SUBMITTED.

FINAL SCIENTIFIC REPORT:

WITHIN THREE MONTHS OF THE COMPLETION OF THE GRANT PERIOD, AICR REQUIRES A FINAL COMPREHENSIVE REPORT TO OUTLINE THE PROJECT'S ACCOMPLISHMENTS. FAILURE TO SUBMIT A FINAL REPORT WILL RESULT IN AUTOMATIC DISQUALIFICATION FROM SUBMITTING A GRANT APPLICATION TO AICR FOR TWO YEARS.

FINAL FINANCIAL REPORT:

A FINAL REPORT OF EXPENDITURES MUST BE SUBMITTED WITHIN THREE MONTHS OF THE TERMINATION OF THE GRANT, TOGETHER WITH THE REFUND OF ANY UNSPENT FUNDS. UNSPENT FUNDS FROM AN EXISTING GRANT MAY ONLY BE CARRIED FORWARD AS A NO-COST EXTENSION TO THE GRANT TERM WITH THE WRITTEN PERMISSION OF AICR.

BEFORE GRANT RECOMMENDATIONS ARE PRESENTED TO THE BOARD OF DIRECTORS FOR APPROVAL, ALL APPLICANTS ARE CHECKED AND CLEARED AGAINST THE FOLLOWING TERRORIST WATCH LISTS: SPECIALLY DESIGNATED NATIONALS (SDN), STATE DEPARTMENT TERRORIST EXCLUSIONS LIST, UNITED NATIONS CONSOLIDATED LIST WITH RESPECT TO AL-QAIDA, THE TALIBAN, AND OSAMA BIN LADEN, AND THE

Part V **Supplemental Information**

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

EUROPEAN UNION TERRORIST LIST.

PART I, LINE 3:

GRANTMAKING EXPENDITURES ARE RECORDED ON THE ACCRUAL BASIS.

SCHEDULE G (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ **Attach to Form 990 or Form 990-EZ.**

▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization: AMERICAN INSTITUTE FOR CANCER RESEARCH

Employer identification number: 52-1238026

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

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

a [X] Mail solicitations
b [X] Internet and email solicitations
c [X] Phone solicitations
d [X] In-person solicitations
e [ ] Solicitation of non-government grants
f [ ] Solicitation of government grants
g [ ] Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? [X] **Yes** [ ] **No**

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col. **(i)**	**(vi)** Amount paid to (or retained by) organization
DIRECT RESPONSE CONSULTING - 7918 JONES BRANCH DRIVE,	DIRECT MAIL		X	4,077,172.	383,070.	3,694,102.
INFOCISION MANAGEMENT CORP - 325 SPRINGSIDE DR, AKRON, OH	PHONE		X	335,139.	253,182.	81,957.
ANNE LEWIS STRATEGIES - 650 MASSACHUSETTS AVE NW,	DIGITAL		X	0.	11,500.	-11,500.
Total ▶				4,412,311.	647,752.	3,764,559.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AL,AK,AZ,AR,CA,CO,CT,DE,FL,GA,HI,ID,IL,IN,IA,KS,KY,LA,ME,MD,MA,MI,MN,MS,MO
MT,NE,NV,NH,NJ,NM,NY,NC,ND,OH,OK,OR,PA,RI,SC,SD,TN,TX,UT,VT,VA,WA,WV,WI,WY

SEE PART IV FOR CONTINUATIONS

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

		(a) Event #1	**(b)** Event #2	**(c)** Other events	**(d)** Total events (add col. **(a)** through col. **(c)**)
		(event type)	(event type)	(total number)	
Revenue	**1** Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	**4** Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				

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

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

9 Enter the state(s) in which the organization conducts gaming activities: __________

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

b If "No," explain: __________

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

b If "Yes," explain: __________

11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No

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

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility **13a** %

b An outside facility **13b** %

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

Name ▶

Address ▶

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

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ ________ and the amount of gaming revenue retained by the third party ▶ $ ________

c If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ $

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

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

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: DIRECT RESPONSE CONSULTING

(I) ADDRESS OF FUNDRAISER: 7918 JONES BRANCH DRIVE, MCLEAN, VA 22102

(I) NAME OF FUNDRAISER: INFOCISION MANAGEMENT CORP

(I) ADDRESS OF FUNDRAISER: 325 SPRINGSIDE DR, AKRON, OH 44144

(I) NAME OF FUNDRAISER: ANNE LEWIS STRATEGIES

Part IV Supplemental Information *(continued)*

(I) ADDRESS OF FUNDRAISER: 650 MASSACHUSETTS AVE NW, WASHINGTON, DC 20001

SCHEDULE G, PART I:

PAYMENTS TO INFOCISION MANAGEMENT CORPORATION INCLUDE FEES FOR PROFESSIONAL FUNDRAISING SERVICES PLUS FUNDRAISING EXPENSES - LIST DEVELOPMENT, DATA PROCESSING, PRINTING AND MAILHOUSE FEES. INVOICES CLEARLY DISTINGUISH FUNDRAISING FEES FROM FUNDRAISING EXPENSES.

ADDITIONAL COSTS, SUCH AS CAGING, BANK CHARGES, OTHER DATA PROCESSING AND POSTAGE ASSOCIATED WITH PHONE SOLICITATIONS ARE PAID DIRECTLY TO THE VENDOR AND THEREFORE NOT INCLUDED IN SCHEDULE G, COLUMN (V) AMOUNTS.

PAYMENTS TO DIRECT RESPONSE CONSULTING SERVICES ARE FOR PROFESSIONAL FUNDRAISING SERVICES ONLY. ALL OTHER FUNDRAISING EXPENSES ASSOCIATED WITH DIRECT MAIL FUNDRAISING ARE PAID DIRECTLY TO THE VENDOR PROVIDING THE SERVICE AND THEREFORE NOT INCLUDED IN SCHEDULE G, COLUMN (V) AMOUNTS.

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" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization: AMERICAN INSTITUTE FOR CANCER RESEARCH

Employer identification number 52-1238026

Part I — General Information on Grants and Assistance

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

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

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

1 **(a)** Name and address of organization or government	**(b)** EIN	**(c)** IRC section (if applicable)	**(d)** Amount of cash grant	**(e)** Amount of noncash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of noncash assistance	**(h)** Purpose of grant or assistance
CHILDREN'S HOSPITAL , CA, USA 4650 SUNSET BOULEVARD LOS ANGELES, CA 90027	95-1690977	501(C)(3)	247,500.	0.			RESEARCH GRANT
THE REGENTS OF THE UNIVERSITY OF MICHIGAN - 3003 S. STATE STREET - ANN ARBOR, MI 48109	38-6006309	501(C)(3)	247,500.	0.			RESEARCH GRANT
THE TRUSTEES OF COLUMBIA UNIVERSITY IN THE CITY OF NEW YORK - 630 WEST 168TH STREET - NEW YORK, NY 10032	13-5598093	501(C)(3)	165,000.	0.			RESEARCH GRANT
THE REGENTS OF THE UNIVERSITY OF CALIFORNIA, SAN FRANCISCO - 490 ILLINOIS STREET - SAN FRANCISCO, CA 94143	94-6036493	501(C)(3)	165,000.	0.			RESEARCH GRANT
THE CHILDREN'S HOSPITAL OF PHILADELPHIA - 2716 SOUTH STREET - PHILADELPHIA, PA 19146	23-1352166	501(C)(3)	165,000.	0.			RESEARCH GRANT
THOMAS JEFFERSON UNIVERSITY 833 CHESTNUT STREET PHILADELPHIA, PA 19107	23-1352651	501(C)(3)	165,000.	0.			RESEARCH GRANT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 6.

3 Enter total number of other organizations listed in the line 1 table ▶ 0.

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

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

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

PART I, LINE 2:

PROGRESS REPORT:

AT THE END OF THE FIRST YEAR OF ANY TWO-YEAR GRANT, THE PRINCIPAL INVESTIGATOR MUST SUBMIT A PROGRESS REPORT, INCLUDING ABSTRACTS AND PUBLICATIONS OF RESEARCH SUPPORTED IN WHOLE OR IN PART BY AICR. AT THE DISCRETION OF AICR, FUNDS FOR THE SECOND YEAR OF THE GRANT MAY BE WITHHELD BASED ON THE PROGRESS REPORT OR IF PROGRESS REPORTS ARE NOT SUBMITTED.

FINAL SCIENTIFIC REPORT:

Part IV Supplemental Information

WITHIN THREE MONTHS OF THE COMPLETION OF THE GRANT PERIOD, AICR REQUIRES A FINAL COMPREHENSIVE REPORT TO OUTLINE THE PROJECT'S ACCOMPLISHMENTS. FAILURE TO SUBMIT A FINAL REPORT WILL RESULT IN AUTOMATIC DISQUALIFICATION FROM SUBMITTING A GRANT APPLICATION TO AICR FOR TWO YEARS.

FINAL FINANCIAL REPORT:

A FINAL REPORT OF EXPENDITURES MUST BE SUBMITTED WITHIN THREE MONTHS OF THE TERMINATION OF THE GRANT, TOGETHER WITH THE REFUND OF ANY UNSPENT FUNDS. UNSPENT FUNDS FROM AN EXISTING GRANT MAY ONLY BE CARRIED FORWARD AS A NO-COST EXTENSION TO THE GRANT TERM WITH THE WRITTEN PERMISSION OF AICR.

BEFORE GRANT RECOMMENDATIONS ARE PRESENTED TO THE BOARD OF DIRECTORS FOR APPROVAL, ALL APPLICANTS ARE CHECKED AND CLEARED AGAINST THE FOLLOWING TERRORIST WATCH LISTS: SPECIALLY DESIGNATED NATIONALS (SDN), STATE DEPARTMENT TERRORIST EXCLUSIONS LIST, UNITED NATIONS CONSOLIDATED LIST WITH RESPECT TO AL-QAEDA, THE TALIBAN, AND OSAMA BIN LADEN, AND THE EUROPEAN UNION TERRORIST LIST.

SCHEDULE J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization: AMERICAN INSTITUTE FOR CANCER RESEARCH

Employer identification number: 52-1238026

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Travel for companions ☒ Tax indemnification and gross-up payments ☐ Discretionary spending account ☒ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	X	
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ☒ Compensation committee ☐ Independent compensation consultant ☐ Form 990 of other organizations ☐ Written employment contract ☒ Compensation survey or study ☒ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b	X	
c	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) KELLY B. BROWNING	(i)	112,460.	0.	100,326.	6,093.	4,573.	223,452.	0.
FORMER EXECUTIVE VP	(ii)	2,657.	0.	0.	0.	0.	2,657.	0.
(2) JENNIFER MERCER	(i)	177,974.	0.	238.	5,438.	17,777.	201,427.	0.
SENIOR VP DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) DEIRDRE MCGINLEY-GIESER	(i)	175,906.	0.	671.	5,374.	13,416.	195,367.	0.
EXECUTIVE VP	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) MARILYN GENTRY	(i)	50,000.	0.	618.	0.	0.	50,618.	0.
PRESIDENT, WCRF INT'L & AICR	(ii)	61,900.	0.	59,095.	0.	17,232.	138,227.	0.
(5) MICHAEL MCCARN	(i)	149,572.	0.	816.	4,612.	20,727.	175,727.	0.
CHIEF INFORMATION OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) NIGEL BROCKTON	(i)	143,398.	0.	286.	4,579.	25,054.	173,317.	0.
VP RESEARCH	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) PATRICIA BODENSTEDT	(i)	141,817.	0.	0.	4,180.	13,819.	159,816.	0.
VP FINANCE	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 1A:

THE PRESIDENT (MS. MARILYN GENTRY) RECEIVED A HOUSING ALLOWANCE AND GROSS UP PAYMENTS FROM WCRF INTERNATIONAL FROM JANUARY 1, 2021 THROUGH JUNE 30, 2021. ALL AMOUNTS ARE CONSIDERED TAXABLE AND INCLUDED ON SCHEDULE J, PART II, COLUMN B(III).

PART I, LINE 4B:

EFFECTIVE JANUARY 1, 2001, AICR'S BOARD OF DIRECTORS ADOPTED A SUPPLEMENTAL RETIREMENT BENEFIT ARRANGEMENT FOR THE INSTITUTE'S PRESIDENT AND CHIEF EXECUTIVE OFFICER IN RECOGNITION OF THEIR LONG TERM SERVICE AND CONTINUING COMMITMENT TO THE CHARITABLE ACTIVITIES OF AICR. THE SUPPLEMENTAL RETIREMENT BENEFIT IS EQUAL TO THE LUMP SUM PRESENT VALUE OF THE SINGLE LIFE ANNUITY IN THE AMOUNT OF 1% OF AVERAGE COMPENSATION FOR EACH YEAR OF SERVICE WITH AICR AND VESTED OVER A FIVE- YEAR PERIOD. BOTH EXECUTIVES ARE FULLY VESTED, AND AMOUNTS ARE CONSIDERED TAXABLE AND INCLUDED ON SCHEDULE J, PART II, COLUMN B(III).

SUPPLEMENT RETIREMENT BENEFIT FOR 2021:

KELLY B BROWNING (EXECUTIVE VICE PRESIDENT): $98,742. MR. BROWNING RETIRED

Part III Supplemental Information

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

AS OF FEBRUARY 2021.

SINCE 2012, MS. GENTRY NO LONGER PARTICIPATED IN THIS PLAN.

SCHEDULE J, PART II, COLUMN (B), LINE (1):

MARILYN GENTRY (PRESIDENT, WCRF INTERNATIONAL): $120,995

MS. GENTRY'S COMPENSATION PACKAGE IS PAID BY WCRF INTERNATIONAL. AICR IS REQUIRED TO REPORT ALL COMPENSATION PAID TO MS. GENTRY BY ALL OF AICR'S AFFLILIATES. AICR DOES NOT PAY MS. GENTRY FOR HER ROLE AS PRESIDENT OF AICR.

KELLY B. BROWNING (EXECUTIVE VICE PRESIDENT): $2,657

MR. BROWNING RECEIVES THE ABOVE COMPENSATION FROM WCRF INTERNATIONAL. AICR IS REQUIRED TO REPORT ALL COMPENSATION PAID TO MR. BROWNING BY ALL OF AICR'S AFFILIATES. AICR DOES NOT PAY FOR THIS COMPENSATION.

SCHEDULE L
(Form 990)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**
▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

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Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1 (a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected? Yes	No

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ▶ $
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ $

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization? To	From	(e) Original principal amount	(f) Balance due	(g) In default? Yes	No	(h) Approved by board or committee? Yes	No	(i) Written agreement? Yes	No
Total ▶ $												

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

Part IV **Business Transactions Involving Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
DIRECT RESPONSE CONSULTING	100% CONTROLLED ENT	373,087.	FUNDRAISING		X

Part V **Supplemental Information.**

Provide additional information for responses to questions on Schedule L (see instructions).

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: DIRECT RESPONSE CONSULTING SERVICES

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

100% CONTROLLED ENTITY OF THE FOUNDERS OF AICR

(D) DESCRIPTION OF TRANSACTION: FUNDRAISING CONSULTANT

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

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for the latest information.

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AMERICAN INSTITUTE FOR CANCER RESEARCH	52-1238026

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

EDUCATION PROGRAMS

THE AMERICAN INSTITUTE FOR CANCER RESEARCH (AICR) CHAMPIONS THE LATEST AND MOST AUTHORITATIVE SCIENTIFIC RESEARCH ON CANCER PREVENTION AND SURVIVAL THROUGH DIET, WEIGHT AND PHYSICAL ACTIVITY SO THAT WE CAN HELP PEOPLE MAKE INFORMED LIFESTYLE CHOICES TO REDUCE THEIR RISK.

WE WANT TO LIVE IN A WORLD WHERE NO ONE DEVELOPS A PREVENTABLE CANCER.

IN FY22, AICR RECEIVED A GRANT TO SUPPORT AICR'S EDUCATION PROGRAMS FROM THE SAFEWAY FOUNDATION.

EDUCATION: AICR'S MESSAGE

AICR'S EDUCATION PROGRAMS ARE EVIDENCE-BASED. THIS EVIDENCE COMES FROM BOTH THE RESEARCH WE FUND, AND THE CONCLUSIONS DRAWN IN OUR SCIENTIFIC REPORTS. FROM THESE FINDINGS WE PRODUCE EDUCATIONAL MATERIALS TO MEET A WIDE VARIETY OF NEEDS, ACROSS ALL STAGES OF THE CANCER CONTINUUM.

AICR NEWSLETTER

IN FISCAL YEAR (FY) 2022, AICR DISTRIBUTED OVER 1.1 MILLION COPIES OF ITS NEWSLETTER TO SUPPORTERS. EACH QUARTERLY ISSUE IS FILLED WITH ARTICLES ON RESEARCH, PHYSICAL ACTIVITY, WEIGHT MANAGEMENT AND NUTRITION, INCLUDING RECIPES RELATED TO REDUCING CANCER RISK FOR PREVENTION AND HEALTHY SURVIVORSHIP. THE PRACTICAL TIPS, ADVICE AND

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FEATURED STORIES ARE ALL MADE POSSIBLE BY AICR'S GENEROUS SUPPORTERS.

EACH ISSUE IS REVIEWED BY AN ADVISORY GROUP OF CLINICIANS, REGISTERED DIETITIANS, RECIPE DEVELOPERS AND CANCER RESEARCHERS.

BROCHURES AND FACT SHEETS

DEVELOPED TO PUT THE LATEST CANCER RESEARCH FINDINGS IN A CONCISE FORMAT, AICR'S BROCHURES, LEAFLETS AND FACT SHEETS OFFER MANY DIFFERENT AUDIENCES OUR EMPOWERING MESSAGE THAT WE CAN TAKE STEPS TO REDUCE OUR OWN CANCER RISK. FOLLOWING THE LAUNCH OF OUR THIRD EXPERT REPORT IN MAY 2018, ALL THESE RESOURCES WERE REVIEWED AND UPDATED TO REFLECT THE MOST CURRENT SCIENTIFIC EVIDENCE.

IN FY22, WE OFFERED 21 DIFFERENT BROCHURE TITLES AND 11 FACT SHEETS FOR CANCER PREVENTION AND CANCER SURVIVORSHIP.

INDIVIDUALS CAN ORDER SINGLE FREE COPIES; HEALTH PROFESSIONALS AND MEDICAL CENTERS (E.G., HOSPITALS, CANCER CLINICS, ETC.) CAN MAKE BULK PURCHASES. AICR ALSO DISTRIBUTES BROCHURES AT CONFERENCES, EVENTS AND HEALTH FAIRS. IN FY22, AICR DISTRIBUTED OVER 33,000 BROCHURES AND OTHER PUBLICATIONS.

HEALTH AIDS

AICR PRODUCES HEALTH AIDSINCLUDING A TOOLKIT, CHARTS, TEAR SHEETS, MAGNETS, A CALENDAR AND MORETO TURN LOWERING CANCER RISK INTO A "HANDS-ON" EXPERIENCE.

INDIVIDUALS CAN ORDER SINGLE FREE COPIES; HEALTH PROFESSIONALS AND MEDICAL CENTERS (HOSPITALS, CANCER CLINICS, ETC.) CAN MAKE BULK PURCHASES. AICR ALSO DISTRIBUTES HEALTH AIDS AT CONFERENCES, EVENTS AND HEALTH FAIRS. IN FY22, AICR DISTRIBUTED ALMOST 7,000 HEALTH AIDS.

FOODS THAT FIGHT CANCER CALENDAR

IN FY22, WE DISTRIBUTED 4,783 "FOODS THAT FIGHT CANCER" CALENDARS, WITH 12 MONTHLY MESSAGES ON PREVENTING CANCER AND 12 RECIPES.

AICR WEBSITE

THE GOAL OF THE AICR WEBSITE (WWW.AICR.ORG) IS TO INSPIRE USERS TO TAKE CONTROL OF THEIR HEALTH USING RESEARCH-BACKED CANCER PREVENTION AND SURVIVORSHIP RESOURCES. THE WEBSITE OFFERS UPDATED INFORMATION ON AICR RESEARCH; HEALTHY, CANCER-PROTECTIVE RECIPES AND FITNESS TIPS; AND A HOST OF INTERACTIVE TOOLS AND RESOURCES ON THE SCIENCE OF LOWERING CANCER RISK. IN FY22, AICR'S WEBSITE RECEIVED OVER 1 MILLION USERS (UNIQUE VISITORS) AND THE TOTAL NUMBER OF PAGE VIEWS EXCEEDED 2 MILLION.

AICR'S WEBSITE ALSO INCLUDES INSPIRING STORIES OF IMPACT. THESE ARE TESTIMONIALS BY HEALTH PROFESSIONALS WHO REGULARLY USE AICR'S RESOURCES TO BUILD HEALTHIER COMMUNITIES THROUGH CANCER CENTERS, SURVIVORSHIP PROGRAMS AND MORE.

THE AUTHORS RANGED FROM A CANCER SURVIVOR WHO BECAME A CANCER AWARENESS ADVOCATE BY FOUNDING HIS OWN CANCER NONPROFIT TO REGISTERED DIETITIANS

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IN CANCER CENTERS, HOSPITALS AND SCHOOL SYSTEMS TO A NURSE PRACTITIONER AND A MEDICAL ONCOLOGIST FROM ALL PARTS OF THE COUNTRY INCLUDING RURAL, SUBURBAN AND URBAN AREAS.

THERE ARE ALSO TESTIMONIALS BY PEOPLE WHO HAVE BEEN DIRECTLY AFFECTED BY CANCER OR KNOW SOMEONE WHO HAS BEEN AFFECTED BY CANCER, AND HOW THEY HAVE USED AICR'S RESOURCES TO HELP THEMSELVES OR OTHERS NAVIGATE CANCER FROM DIAGNOSIS THROUGH SURVIVORSHIP.

FREE E-PUBLICATIONS

AICR HAS A LIBRARY OF E-PUBLICATIONS THAT DELIVER THE LATEST INFORMATION ON LOWERING CANCER RISK STRAIGHT TO SUBSCRIBERS' INBOXES. OUR TWO E-PUBLICATIONS ARE REVIEWED BY CANCER RESEARCHERS, CLINICIANS, DIETITIANS AND AICR STAFF. BOTH CONTINUE TO GET STRONG OPEN AND CLICK-THROUGH RATESWELL ABOVE THE INDUSTRY AVERAGE. THE CONTENT CONTINUES TO BE REPURPOSED AND USED BY OTHER CANCER CENTERS AND HEALTH PROFESSIONALS.

THE MONTHLY NEWSLETTER CANCER FOCUS ENCOMPASSES THREE AREAS: HOW TO START LIVING FOR LOWER CANCER RISK TODAY; BREAKING NEWS AND CURRENT RESEARCH IN THE FIGHT AGAINST CANCER; AND RESEARCH, RECIPES AND FOODS TO HELP SURVIVORS NAVIGATE THEIR CANCER JOURNEY. AS OF SEPTEMBER 2022, OVER 90,000 PEOPLE HAVE SUBSCRIBED TO AICR CANCER FOCUS.

AICR HEALTHY RECIPES IS FOR THOSE LOOKING FOR WAYS TO BRING THE RESEARCH HOME WITH QUICK, EASY AND DELICIOUS CANCER-PROTECTIVE MEALS. ALL MONTHLY RECIPES ARE SPECIALLY CRAFTED WITH CANCER PREVENTION AND

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HEALTHY SURVIVORSHIP IN MIND AND FOLLOW AICR'S RECIPE GUIDELINES. AS OF SEPTEMBER 2022, OVER 40,000 PEOPLE HAVE SUBSCRIBED TO AICR HEALTHY RECIPES.

AICR BLOG AND SOCIAL MEDIA

THE AICR BLOG (AICR.ORG/RESOURCES/BLOG) SPEAKS TO SUPPORTERS; CANCER PATIENTS, SURVIVORS AND CAREGIVERS; HEALTH PROFESSIONALS; THE MEDIA AND THE GENERAL PUBLIC. THE AICR BLOG IS ONE WAY AICR ENGAGES IN AN ONGOING DISCUSSION ABOUT RESEARCH AND SEPARATES CANCER MYTHS FROM CANCER FACTS, ESPECIALLY THOSE THAT ARE HOT TOPICS IN THE MEDIA. IT IS WHERE WE SHARE OUR TAKE ON CURRENT NEWS AND ENCOURAGE READERS TO POST COMMENTS. IN FY22, THE AICR BLOG RECEIVED OVER 360,000 USERS (UNIQUE VISITORS), AND NEARLY 560,000 PAGE VIEWS.

FACEBOOK AND TWITTER HAVE HISTORICALLY BEEN IMPORTANT COMMUNICATION CHANNELS FOR AICR TO SHARE MESSAGES WITH A WIDE AND DIVERSE AUDIENCE. IN ADDITION TO FACEBOOK AND TWITTER, AICR INCREASED SOCIAL MEDIA EFFORTS IN FY22 TO HELP GROW OUR BRAND ON INSTAGRAM, LINKEDIN, PINTEREST AND YOUTUBE. AT THE END OF FY22, AICR GAINED A TOTAL OF 4,550 SOCIAL MEDIA FOLLOWERS FOR 12% GROWTH COMPARED TO FY21. OVER THE COURSE OF FY22 AICR SOCIAL MEDIA CHANNELS HAD A TOTAL OF 1,724,165 IMPRESSIONS AND 61,200 ENGAGEMENTS. SOCIAL MEDIA TOTAL NUMBER OF FOLLOWERS (AS OF 9/30/2022): 50,849 (TWITTER, FACEBOOK, INSTAGRAM, LINKEDIN, PINTEREST).

IN FY22 INSTAGRAM (@CANCERPREVENTION) HAD 2,391 NEW FOLLOWERS, TOTALING 9,266 FOLLOWERS AT THE END OF SEPTEMBER 2022. THIS IS A 34.8% INCREASE COMPARED TO FY21. ON AVERAGE, INSTAGRAM CONTENT REACHED 667 USERS

DAILY.

AT THE CLOSE OF FY22, AICR'S FACEBOOK PAGE HAD 24,735 FOLLOWERS AND ON AVERAGE, OUR CONTENT REACHED OVER 8,000 USERS DAILY. TWITTER (@AICRTWEETS) HAD 7,730 FOLLOWERS, LINKEDIN HAD 9,266 AND PINTEREST HAD 2,075.

CANCER PREVENTION MONTH

FEBRUARY IS CANCER PREVENTION MONTH TO RAISE AWARENESS THAT 40% OF CANCERS CAN BE PREVENTED AND PROVIDE EMPOWERING MESSAGES TO HELP CANCER SURVIVORS TAKE CONTROL OF THEIR HEALTH.

WE HAD A SUCCESSFUL CANCER PREVENTION MONTH WITH A NEW THEME OF "CLICK, CONNECT, COMMIT." WEBSITE VISITORS AND SOCIAL MEDIA IMPRESSIONS ALL INCREASED DURING THE MONTH AND 17 INDIVIDUALS SIGNED UP TO BE AMBASSADORS FOR AICR DURING THE MONTH. A PARTNERSHIP WITH THE MONDAY'S CAMPAIGN GENERATED ADDITIONAL DOWNLOADS OF OUR MATERIALS AND ENGAGEMENT WITH OUR PROGRAMS. PZAZZ AND GIANT NUTRITION WERE EDUCATION SPONSORS AND THEIR ADVERTISEMENTS DIRECTED PEOPLE TO TAKE OUR CANCER HEALTH CHECK.

WE ALSO ENCOURAGED PEOPLE TO "TAKE THE TEN" AN ONLINE TOOL (AICR'S HEALTHY10 CHALLENGE) TO HELP PEOPLE CHANGE THEIR LIFESTYLE HABITS AND PUT AICR'S CANCER PREVENTION RECOMMENDATIONS INTO ACTION. THE HEALTHY10 CHALLENGE IS DESIGNED TO HELP INDIVIDUALS IMPROVE THEIR DIET, NUTRITION, PHYSICAL ACTIVITY AND WEIGHT FOR LOWER CANCER RISK AND BETTER OVERALL HEALTH.

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HEALTHY10 CHALLENGE

AICR'S EVIDENCE-BASED MATERIALS HELP PEOPLE LEARN ABOUT WHAT THEY CAN DO TO PROTECT THEMSELVES FROM CANCER, BUT WE ALSO SUPPLY THEM WITH TOOLS THAT SUPPORT THE KIND OF REAL, LASTING BEHAVIOR CHANGE THAT LEADS TO LOWER RISK.

THE HEALTHY10 CHALLENGE IS A 10-WEEK, FREE, INTERACTIVE, ONLINE PROGRAM TO HELP USERS IMPROVE THEIR DIET, NUTRITION, PHYSICAL ACTIVITY AND WEIGHT FOR LOWER CANCER RISK AND BETTER OVERALL HEALTH. IT IS BASED ON AICR'S EVIDENCE-BASED CANCER PREVENTION RECOMMENDATIONS AND IS INTENDED FOR ADULTS WANTING TO REDUCE THEIR CANCER RISK (INCLUDING RECURRENCE AND SECONDARY CANCER). ITS MOTIVATIONAL CHALLENGES ALTERNATE BETWEEN DIET AND PHYSICAL ACTIVITY TO HELP USERS EAT SMARTER AND MOVE MORE. EACH WEEK USERS WILL BE GIVEN A GOAL AS WELL AS TIPS AND TOOLS TO HELP CONQUER EACH CHALLENGE. THIS IS A SIMPLE AND FUN WAY TO BECOME HEALTHIER AND TAKE ACTION TO REDUCE CANCER RISK AT ANY STAGE OF LIFE AND MEETS INDIVIDUALS WHERE THEY ARE AT IN THEIR HEALTH JOURNEY.

FORM 990, PART III, LINE 4A, CONTINUED.

THERE WAS A TOTAL OF OVER 1,839 EMAILS COLLECTED AND INDIVIDUALS WHO SIGNED UP FOR THE HEALTHY10 CHALLENGE IN FY22, AND THE HEALTHY10 CHALLENGE RECEIVED THE GOLD DIGITAL HEALTH AWARD FOR HEALTH WEBSITES.

CANCER HEALTH CHECK

AN ONLINE ASSESSMENT TOOL TO HELP INDIVIDUALS UNDERSTAND HOW THE

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LIFESTYLE CHOICES THEY MAKE EVERY DAY CAN REDUCE THEIR RISK FOR CANCER. THIS SIMPLE AND EASY TOOL MEASURES INDIVIDUAL LIFESTYLE CHOICES, LIKE DIET AND EXERCISE HABITS, AGAINST AICR'S EVIDENCE-BASED 10 CANCER PREVENTION RECOMMENDATIONS. AFTER USERS ANSWER A BRIEF SERIES OF QUESTIONS, THEY IMMEDIATELY RECEIVE A SUMMARY OF RESULTS THAT SHOW AREAS WHERE THEY ARE DOING WELL AND WHERE THERE ARE AREAS FOR IMPROVEMENT. THIS IS AN APPROACHABLE TOOL THAT IS USED BY BOTH THE GENERAL PUBLIC AND BY HEALTH-CARE PROVIDERS. THIS INNOVATIVE TOOL LAUNCHED IN FEBRUARY 2020 WAS AWARDED GOLD/FIRST PLACE IN THE DIGITAL HEALTH RESOURCES/TOOL CATEGORY IN THE 2020 FALL DIGITAL HEALTH AWARDS. THERE WAS A TOTAL OF 2,717 USERS/E-MAILS COLLECTED IN FY2022.

LIVING WITH CANCER AND BEYOND: CANCERRESOURCE PROGRAM

AICR OFFERS A FREE BOOKLET OF ADVICE FOR NEWLY DIAGNOSED CANCER PATIENTS AND THEIR LOVED ONES. DEVELOPED WITH A TEAM OF PHYSICIANS, NURSES, DIETITIANS, PSYCHOLOGISTS AND CANCER PATIENTS, CANCERRESOURCE LAYS OUT INFORMATION PATIENTS NEED, INCLUDING QUESTIONS TO ASK YOUR DOCTOR, TREATMENT OPTIONS, WHERE TO FIND HELP, NUTRITION DURING TREATMENT AND MUCH MORE.

AICR STAFF CAN CREATE CUSTOMIZED PACKETS FOR ANY CANCER BY INCLUDING SPECIFIC, DETAILED AND UP-TO-DATE PRINTOUTS ABOUT THE RELEVANT CANCER. REQUESTS FOR EACH PACKET ARE FILLED IMMEDIATELY TO GET THIS VITAL INFORMATION TO THOSE WHO NEED IT AS QUICKLY AS POSSIBLE.

CANCERRESOURCE IS ALSO AVAILABLE IN SPANISH AND INCREASES ACCESS TO THIS INFORMATION EVEN FURTHER AS A FREE DOWNLOADABLE ON AICR'S ONLINE

STORE. IN FY22 THERE WERE A TOTAL OF 47 DOWNLOADS OF CANCERRESOUCE IN SPANISH, 341 DOWNLOADS IN ENGLISH AND 234 CANCERRESOURCE BOOKS WERE SOLD IN FY22.

AICR'S HEALTH PROFESSIONAL AND EDUCATOR COMMUNITY

AICR'S HP COMMUNITY PROVIDES AN ONLINE DESTINATION FOR HEALTH PROFESSIONALS, FEATURING A WEALTH OF INTERACTIVE TOOLS, CONTINUING EDUCATION OPPORTUNITIES AND PRACTICAL EVIDENCE-BASED RESOURCES FOR PATIENTS AND CLIENTS. IN FY22, AICR SENT MONTHLY RESEARCH AND PRACTICE UPDATES TO ALMOST 4,400 ACTIVE MEMBERS (DIETITIANS, NURSES, HEALTH EDUCATORS, PHYSICIANS, RESEARCHERS, WELLNESS PROFESSIONALS AND OTHERS) SO MEMBERS COULD CONNECT WITH AICRAND WITH EACH OTHERAT HOSPITALS, CLINICS, CANCER CENTERS, UNIVERSITIES AND DEPARTMENTS OF HEALTH.

PROGRAMS FOR CANCER SURVIVORS

THE OVERALL AGING OF THE UNITED STATES POPULATION AND CHANGING PREVALENCE OF RISK FACTORS, INCLUDING OBESITY, HAVE INCREASED THE INCIDENCE OF MANY TYPES OF CANCER WHILE ADVANCES IN THE EARLY DETECTION AND TREATMENT OF CANCER HAVE LED TO REDUCED CANCER MORTALITY. THESE FACTORS HAVE COMBINED TO DRAMATICALLY INCREASE THE NUMBER OF CANCER SURVIVORS. MORE THAN 18 MILLION PEOPLE IN THE US WERE LIVING WITH A HISTORY OF A CANCER DIAGNOSIS AS OF JANUARY 2022. THIS NUMBER IS PROJECTED TO GROW TO ABOUT 26 MILLION BY 2030 AND TO MORE THAN 29 MILLION BY 2040.

DURING FY22, AICR PROACTIVELY FUNDED RESEARCH, DEVELOPED EVIDENCE-BASED

INFORMATION AND CONTRIBUTED TOOLS, RESOURCES AND PROGRAMS THAT ARE ATTUNED TO THIS GROWING POPULATION.

COPING WITH CANCER IN THE KITCHEN

DESIGNED FOR CANCER SURVIVORS, COPING WITH CANCER IN THE KITCHEN (CCK) IS A UNIQUE, EVIDENCE-BASED, INTERACTIVE, MULTI-DISCIPLINARY, EIGHT-WEEK INTERVENTION WITH THE EVENTUAL OPTION OF VIRTUAL OR IN-PERSON DELIVERY. IT IS BASED ON AICR'S CANCER PREVENTION RECOMMENDATIONS AND WILL BE PACKAGED AS A TURNKEY PROGRAM SPECIFICALLY FOR COMMUNITIES.

USING AICR'S EVIDENCE-BASED INTERVENTION CURRICULUM, CCK IS DESIGNED TO BE JOINTLY DELIVERED BY A LOCAL REGISTERED DIETITIAN AND A LOCAL MENTAL HEALTH PROFESSIONAL. EACH OF ITS EIGHT 90-MINUTE SESSIONS PROVIDES CANCER SURVIVORS WITH KNOWLEDGE, SKILLS AND SUPPORT TO REDUCE THEIR RISK OF A RECURRENCE AND SECONDARY CANCER AND TO IMPROVE THEIR OVERALL HEALTH.

CCK IS THE ANSWER TO MANY CANCER SURVIVORS' QUESTIONS ABOUT WHAT TO DO ABOUT THE "CLIFF" THEY FACE POST-TREATMENT. THE INTERVENTION WILL ALSO BE THE ANSWER TO MANY HEALTH PROFESSIONALS WHO HAVE LAMENTED THE LACK OF A GOLD-STANDARD, MULTI-DISCIPLINARY, EVIDENCE-BASED, VALIDATED AND TURNKEY SURVIVORSHIP PROGRAM UNTIL NOW.

THE COPING WITH CANCER IN THE KITCHEN PROGRAM WAS FEATURED IN CANCERTODAY IN OCTOBER. IN APRIL, AICR STAFF DISCUSSED THE EVOLUTION OF COPING WITH CANCER IN THE KITCHEN AT THE SOCIETY OF BEHAVIORAL MEDICINE

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CONFERENCE.

TOLL-FREE PHONE SERVICES

VIA AICR'S TOLL-FREE NUMBER, 1-800-843-8114, MEMBERS OF THE PUBLIC CAN ORDER BROCHURES AND HEALTH AIDS, REQUEST A COPY OF CANCERRESOURCE FOR CANCER PATIENTS AND MUCH MORE.

THE NEW AMERICAN PLATE COOKBOOK

TO PLACE AICR'S MESSAGE ABOUT LOWERING CANCER RISK IN A COMPREHENSIVE AND HANDSOMELY PRODUCED FORMAT, AICR'S NEW AMERICAN PLATE COOKBOOK (PUBLISHED BY THE UNIVERSITY OF CALIFORNIA PRESS) IS AVAILABLE IN BOOKSTORES. MORE THAN 34,000 COPIES HAVE BEEN SOLD, AND ALL ROYALTIES SUPPORT AICR CANCER RESEARCH.

CONFERENCES AND EXHIBITS

IN FY22, AICR STAFF ATTENDED, PRESENTED, NETWORKED, EXHIBITED AND/OR DISTRIBUTED MATERIALS AT MANY AND VARIOUS VIRTUAL CONFERENCES AND ANNUAL MEETINGS, INCLUDING:

-ACADEMY OF NUTRITION AND DIETETICS ANNUAL FOOD AND NUTRITION CONFERENCE AND EXPO VIRTUAL CONFERENCE (OCTOBER)

-MD ANDERSON CENTER FOR ENERGY BALANCE IN CANCER PREVENTION AND SURVIVORSHIP RESEARCH SEMINAR (DECEMBER)

-AMERICAN ASSOCIATION FOR CANCER RESEARCH PATIENT ADVOCATE FORUM (DECEMBER)

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-ONE VOICE AGAINST CANCER (JANUARY)

-AMERICAN ASSOCIATION FOR CANCER RESEARCH CONFERENCE (APRIL)

-SOCIETY OF BEHAVIORAL MEDICINE CONFERENCE (APRIL)

-AMERICAN COLLEGE OF SPORTS MEDICINE ANNUAL MEETING AND WORLD CONGRESSES (MAY)

-HARVARD SCHOOL OF PUBLIC HEALTH CANCER RISK, PREVENTION AND EARLY DETECTION SYMPOSIUM (MAY)

-FOOD AS MEDICINE SUMMIT (MAY)

-ACADEMY OF NUTRITION AND DIETETICS' ONCOLOGY NUTRITION SYMPOSIUM (JUNE)

-SOCIETY FOR NUTRITION EDUCATION AND BEHAVIOR ANNUAL CONFERENCE (JULY)

EXTERNAL RELATIONS

IN FY22, AICR CONTINUED TO BUILD DEEPER RELATIONSHIPS WITH KEY NATIONAL, REGIONAL AND LOCAL STAKEHOLDER ORGANIZATIONS TO LEVERAGE THESE PARTNERSHIPS AND ENSURE OUR EVIDENCE-BASED MESSAGES AND EDUCATIONAL RESOURCES ARE UNDERSTOOD AND UTILIZED. AICR PROACTIVELY JOINED ADDITIONAL ORGANIZATIONS' COMMITTEES AND SERVED ON ADVISORY PANELS, WORK GROUPS AND EXPERT FORUMS TO BUILD VISIBILITY AND AWARENESS OF OUR MISSION.

IN FY22, AICR SUCCESSFULLY SOLICITED AND SECURED INVITATIONS FROM TARGET ORGANIZATIONS TO FEATURE AICR'S EXPERTS AND RESOURCES. THIS WORK INCREASED AICR'S REACH INTO NEW AND EXISTING AUDIENCES AND ENHANCED THE AWARENESS OF AICR'S WORK AMONG HEALTH PROFESSIONALS, RESEARCHERS, CANCER SURVIVORS AND THE GENERAL PUBLIC. SOME EXAMPLES OF THIS WORK IN FY22 INCLUDED BEING FEATURED IN OR PARTICIPATING IN PODCASTS, SEMINARS

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AND WEBINARS: BAGIT, CDC'S DIVISION OF CANCER PREVENTION AND CONTROL, COALITION AGAINST CHILDHOOD CANCER, MEMORIAL SLOAN KETTERING CANCER CENTER, NATIONAL INSTITUTES OF HEALTH, OLDWAYS, SCHAR CANCER INSTITUTE, SOCIETY FOR INTEGRATED ONCOLOGY, TRANSPLANT RECIPIENTS INTERNATIONAL ORGANIZATION, WHOLE GRAINS COUNCIL.

AICR ALSO WAS REPRESENTED IN ACTIVITIES RELATED TO CANCER AT THE FEDERAL LEVEL:

-PRESENTED AT A CAPITOL HILL BRIEFING ABOUT THE FOOD LABEL MODERNIZATION ACT.

-ATTENDED WHITE HOUSE CONFERENCE LISTENING SESSIONS HOSTED BY TUFTS UNIVERSITY.

-ATTENDED USDA'S VIRTUAL ROUNDTABLE ON CUTTING-EDGE NUTRITION RESEARCH AND SCIENCE.

-ATTENDED CHILDHOOD CANCER CONFERENCE AT THE WHITE HOUSE.

-ATTENDED ONE VOICE AGAINST CANCER'S RALLY FOR MEDICAL RESEARCH ON CAPITOL HILL.

COALITIONS

-JOINED THE ASSOCIATION FOR NATIONAL ADVERTISERS' MARKETING COMMITTEE, GOVERNMENT RELATIONS COMMITTEE AND CONTENT MARKETING COMMITTEE.

-BECAME AN ORGANIZATIONAL CHAMPION OF THE OBESITY CARE WEEK 2022 CAMPAIGN.

-JOINED THE CDC'S ACTIVE PEOPLE, HEALTHY NATION MOVEMENT, INTENDED TO HELP GET 27 MILLION PEOPLE MORE PHYSICALLY ACTIVE BY 2027.

-INVITED TO JOIN THE NEW, CDC-FUNDED CENTER FOR ADVANCING ALCOHOL

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SCIENCE TO PRACTICE PARTNERSHIP COUNCIL.

-ESTABLISHED A PARTNERSHIP WITH FRED HUTCHINSON CANCER CENTER'S COOK FOR YOUR LIFE PROGRAM, WHICH IS NOW FEATURING AICR RECIPES ON ITS WEBSITE (AND HAS TRANSLATED THEM INTO SPANISH, ENHANCING THEIR REACH INTO THIS NEW AUDIENCE).

MEDIA PROGRAMS

AICR HAD SOLID MEDIA COVERAGE IN ALL THE USUAL OUTLETS INCLUDING A REGULAR COLUMN IN CANCER, AN ONLINE MAGAZINE. WE ALSO HAD STRONG COVERAGE ABOUT ALCOHOL AND CANCER, PROCESSED FOODS AND CANCER RISK AND DEBUNKING CANCER MYTHS ON THE INTERNET. THESE TOPICS GENERATED INTERVIEWS AND REQUESTS FOR COMMENTS FROM OUR EXPERTS WITH COVERAGE ACROSS PRINT AND ONLINE OUTLETS, SUCH AS MSN, ONCOLOGY NURSING NEWS, POLITIFACT AND WEBMD. AICR'S REGISTERED DIETITIAN WAS FEATURED IN AN APPLE PODCAST: BEYOND THE RIBBON. SHE DISCUSSED AICR'S CANCER PREVENTION RECOMMENDATIONS.

IN ADDITION, AICR'S RESEARCH WAS COVERED IN A RANGE OF OTHER ONLINE MEDIA OUTLETS AND SEVERAL TV AND RADIO STATIONS INCLUDING:

ABC, CBS, CNN, NBC, NBC TODAY, ASSOCIATED PRESS, FORBES, NEW YORK TIMES, USA TODAY, WALL STREET JOURNAL, WASHINGTON POST, YAHOO NEWS, BUSINESS INSIDER, BUZZFEED, CANCER HEALTH, CANCERTODAY, EVERYDAY HEALTH, HEALTH DAY, HEALTHLINE, THE HILL, MEDIUM, MEDSCAPE, MSN HEALTH, NEWSMAX HEALTH, READER'S DIGEST AND TODAY'S DIETITIAN, VERYWELL HEALTH.

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FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

SCIENTIFIC STUDY OF THE RELATIONSHIP OF DIET, PHYSICAL ACTIVITY AND WEIGHT MANAGEMENT TO CANCER RISK AND SURVIVORSHIP CONTINUES TO BE THE PRIMARY FOCUS OF AMERICAN INSTITUTE FOR CANCER RESEARCH (AICR) RESEARCH INVESTMENT AND ACTIVITIES. EVIDENCE SHOWS THAT WEIGHT MANAGEMENT, PHYSICAL ACTIVITY, FOOD AND NUTRITION PLAY IMPORTANT ROLES IN CANCER PREVENTION, TREATMENT AND SURVIVORSHIP. RESEARCH SHOWS THAT APPROXIMATELY 40% OF ALL CANCERS COULD BE PREVENTED IF EVERYONE REACHED AND MAINTAINED A HEALTHY WEIGHT, FOLLOWED THE RECOMMENDATIONS FOR REGULAR PHYSICAL ACTIVITY, CONSUMED A HEALTHY DIET, AVOIDED USE OF TOBACCO PRODUCTS AND FOLLOWED APPROPRIATE SCREENING AND VACCINATION GUIDELINES.

AICR IS UNIQUE IN ITS FOCUS ON PREVENTING CANCER AND IMPROVING SURVIVAL THROUGH DIET, NUTRITION, BODY COMPOSITION AND PHYSICAL ACTIVITY. WE COLLATE AND INTERPRET THE LATEST AND MOST AUTHORITATIVE GLOBAL SCIENTIFIC RESEARCH ON THE LINKS BETWEEN CANCER AND DIET, NUTRITION, BODY COMPOSITION AND PHYSICAL ACTIVITY. WE THEN TRANSLATE OUR FINDINGS INTO PRACTICAL, CLEAR, EVIDENCE-BASED RECOMMENDATIONS ON CANCER PREVENTION FOR USE BY HEALTH PROFESSIONALS, INDIVIDUALS AND GOVERNMENTS WORLDWIDE.

IN TOTAL, THROUGH FY22, AICR HAS COMMITTED MORE THAN $111 MILLION FOR HUNDREDS OF INDIVIDUAL RESEARCH PROJECTS AT UNIVERSITIES, HOSPITALS AND RESEARCH CENTERS.

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AICR PIONEERED THE FUNDING OF RESEARCH EXAMINING DIET AND CANCER AND WAS THE FIRST ORGANIZATION TO DEVOTE ITSELF TO STUDYING THE ROLE OF DIET AND OTHER LIFESTYLE FACTORS IN LOWERING CANCER RISK. THE RESEARCH THAT WE HAVE FUNDED HAS HELPED TRANSFORM THE ONCE-RADICAL NOTIONTHAT EVERYDAY CHOICES CAN DRAMATICALLY REDUCE CANCER RISKINTO A UNIVERSALLY ACCEPTED MEDICAL FACT AND PUBLIC HEALTH POLICY.

OUR MULTI-FACETED INVESTMENT IN RESEARCH CONTINUES ACROSS SEVERAL CORE ACTIVITIES.

AICR GRANT PROGRAM

THE AICR GRANT PROGRAM IS DEDICATED TO FUNDING RESEARCH ON CANCER PREVENTION, TREATMENT AND SURVIVAL RELATED TO DIET, NUTRITION, BODY COMPOSITION AND PHYSICAL ACTIVITY. IN THE 2022 GRANT CYCLE, WE RECEIVED 106 LETTERS OF INTENT. WE INVITED 49 APPLICANTS TO SUBMIT FULL APPLICATIONS AND RECEIVED 42 FOR OUR GRANT PANEL TO REVIEW AND DISCUSS, 30 FOCUSED ON CANCER SURVIVORSHIP AND 12 FOCUSED ON CANCER PREVENTION.

ALL APPLICATIONS ARE SUBJECTED TO RIGOROUS PEER REVIEW. THE 2022 GRANT REVIEW PANEL WAS CHAIRED BY DR. JAMES FLEET, THE MARGARET MCKEAN LOVE ENDOWED PROFESSOR OF NUTRITION, CELLULAR, AND MOLECULAR SCIENCE AT THE UNIVERSITY OF TEXAS AT AUSTIN. OUR CO-CHAIR WAS DR. LINDA COOK, CO-LEADER, CANCER CONTROL RESEARCH PROGRAM, UNIVERSITY OF NEW MEXICO COMPREHENSIVE CANCER CENTER. THE GRANT REVIEW PANEL INCLUDED 11 ADDITIONAL EXPERTS WITH THE DEPTH AND BREADTH OF EXPERTISE TO EVALUATE THE SCIENTIFIC MERIT AND IMPACT OF THE PROPOSED RESEARCH.

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REVIEWERS:

LINDA COOK, UNIVERSITY OF NEW MEXICO HSC

JAMES FLEET, UNIVERSITY OF TEXAS-AUSTIN

KERI SCHADLER, MD ANDERSON CANCER CENTER

EMILY LAVOY, UNIVERSITY OF HOUSTON

PAUL SPAGNUOLO, UNIVERSITY OF GUELPH

CARRIE DANIEL-MACDOUGALL, UNIVERSITY OF TEXAS MD ANDERSON CANCER CENTER

JOANNE ELENA, NIH/NCI

MICHAEL DE LISIO, UNIVERSITY OF OTTAWA

JUSTIN BROWN, PENNINGTON BIOMEDICAL RESEARCH CENTER

NATHALIE MCKENZIE, ADVENT HEALTH MEDICAL GROUP

CHRISTINA DIELI-CONWRIGHT, HARVARD UNIVERSITY

HEATHER LEACH, COLORADO STATE UNIVERSITY

THOMAS O'CONNELL, INDIANA UNIVERSITY

FUNDED GRANTS

1. ETAN ORGEL, MD DIET AND EXERCISE TO IMPROVE TREATMENT OUTCOMES FOR CHILDREN AND ADOLESCENTS WITH B-CELL ACUTE LYMPHOBLASTIC LEUKEMIA. CHILDREN'S HOSPITAL LOS ANGELES, LOS ANGELES, CA

2. JEANINE GENKINGER, PHD, MHS IMPROVING PRECISION PREVENTION OF COLORECTAL CANCER BY ACCOUNTING FOR FAMILIAL RISK. THE TRUSTEES OF COLUMBIA UNIVERSITY IN THE CITY OF NEW YORK, NEW YORK, NY

3. ERIN VAN BLARIGAN, SCD HEALTH BEHAVIORS AND COLORECTAL CANCER SURVIVAL IN THE MULTIETHNIC COHORT STUDY. THE REGENTS OF THE UNIVERSITY OF CALIFORNIA, SAN FRANCISCO, SAN FRANCISCO, CA

4. ANA PEREIRA, PHD DISENTANGLING THE RELATIONSHIP BETWEEN TRAJECTORIES OF BODY FATNESS AND POST-PUBERTAL BREAST COMPOSITION IN THE GROWTH AND OBESITY CHILEAN COHORT STUDY: ROLE OF METABOLIC, HORMONAL, AND

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INFLAMMATORY MARKERS DURING CHILDHOOD. INSTITUTO DE NUTRICION Y TECNOLOGIA DE LOS ALIMENTOS/CORPORACION PARA APOYO DE LA INVESTIGACION CIENTIFICA EN NUTRICION, SANTIAGO, CHILE

5. LISA SCHWARTZ, PHD. USING INNOVATIVE DIGITAL TECHNOLOGIES TO CAPTURE THE DYNAMIC PREDICTORS AND BENEFITS OF PHYSICAL ACTIVITY IN ADOLESCENTS AND YOUNG ADULTS WITH CANCER. THE CHILDREN'S HOSPITAL OF PHILADELPHIA, PHILADELPHIA, PA

6. KUANG-YI WEN, PHD TXT4FASTING: AN INTERACTIVE MOBILE TIME-RESTRICTED EATING DIET INTERVENTION FOR PATIENTS WITH BRAIN METASTASES TO MAXIMIZE RADIATION OUTCOMES. THOMAS JEFFERSON UNIVERSITY, PHILADELPHIA, PA

7. SUZANNA ZICK, ND, MPH LIVING WELL WITH LYMPHOMA: IMPROVING DIET QUALITY TO IMPROVE ENERGY, SLEEP AND QUALITY OF LIFE. THE REGENTS OF THE UNIVERSITY OF MICHIGAN, ANN ARBOR, MI

AICR EXPERT REPORTS

SINCE 2007, AICR AND ITS INTERNATIONAL AFFILIATE, THE WORLD CANCER RESEARCH FUND (WCRF), HAVE WORKED TOGETHER ON THE CONTINUOUS UPDATE PROJECT (CUP). THE CUP HAS BUILT ON THE SYSTEMATIC LITERATURE REVIEW CONDUCTED FOR OUR 2007 SECOND EXPERT REPORT FOOD, NUTRITION, PHYSICAL ACTIVITY, AND THE PREVENTION OF CANCER: A GLOBAL PERSPECTIVE. IN 2018, AICR AND WCRF PUBLISHED DIET, NUTRITION, PHYSICAL ACTIVITY AND CANCER: A GLOBAL PERSPECTIVE, THE THIRD EXPERT REPORT TO UPDATE BOTH THE ASSESSMENT OF THE EVIDENCE FOR THE IMPACT OF EACH FACTOR ON CANCER RISK AND REVISE THE CANCER PREVENTION RECOMMENDATIONS THE CUP PROVIDES THROUGH TIMELY REVIEWS AND EXPERT PANEL ASSESSMENTS OF THE AVAILABLE PEER-REVIEWED EVIDENCE. THE CUP REPORTS HAVE IDENTIFIED EMERGING RESEARCH AREAS AND KNOWLEDGE GAPS THAT COULD BE ADDRESSED WITHIN OUR

GRANT PROGRAM. EQUALLY, NEW DATA GENERATED FROM STUDIES FUNDED THROUGH OUR GRANT PROGRAM ARE INCLUDED IN THE CUP REVIEWS. THUS, AICR'S RESEARCH GRANT PROGRAMS AND THE CUP ACT SYNERGISTICALLY TO STRENGTHEN THE SCIENTIFIC EVIDENCE ON THE IMPACT OF DIET, NUTRITION, BODY COMPOSITION AND PHYSICAL ACTIVITY ON CANCER PREVENTION AND CONTROL.

IN 2020, THE CUP HAS EMBARKED ON A PROCESS OF EVALUATION AND STRATEGIC PLANNING, TERMED THE CUP TRANSITION, WITH A PANEL OF INTERNATIONAL EXPERTS TO DETERMINE THE OPTIMAL DIRECTIONS FOR FUTURE RESEARCH IN THIS FIELD. THIS PROCESS CONTINUED THROUGH 2022, CONCLUDING WITH THE DEVELOPMENT OF A NEW STRATEGY IN 2022 WITH SPECIFIED FOCUS AREAS OF CANCER SURVIVORSHIP, CANCER INCIDENCE, CANCER MECHANISMS AND OBESITY. CONCURRENTLY, THE CUP TRANSITION PANEL REVIEWED THE COMPLETED SYSTEMATIC LITERATURE REVIEWS ON MEDICAL OUTCOMES AND QUALITY OF LIFE IN BREAST CANCER SURVIVORS AND SUBMITTED SEVERAL MANUSCRIPTS FOR PUBLICATION IN PEER-REVIEWED JOURNALS.

SCIENTIFIC PRESENTATIONS:

AICR EVENTS

2022 AICR LIFESTYLE & CANCER SYMPOSIUM-INNOVATION TO IMPACT

IN APRIL 2022, AICR PRESENTED THE "AICR LIFESTYLE & CANCER SYMPOSIUM-INNOVATION TO IMPACT"; THIS WAS A FULLY VIRTUAL EVENT CO-CHAIRED BY DR. FANG FANG ZHANG (TUFTS UNIVERSITY) AND DR. JUSTIN BROWN (PENNINGTON BIOMEDICAL RESEARCH CENTER) FEATURING INTERNATIONALLY RENOWNED CLINICIANS, SCIENTISTS, RESEARCHERS AND HEALTH PROFESSIONALS PRESENTING AND DISCUSSING THE LATEST EVIDENCE AND PERSPECTIVES ON

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ISSUES AT THE INTERSECTION OF DIET, NUTRITION, PHYSICAL ACTIVITY AND CANCER RISK AND SURVIVORSHIP.

THIS SYMPOSIUM PRESENTED RECENT INNOVATIONS, SPANNING THE CHRONIC DISEASE SPECTRUM, AND CONSIDERED THEIR IMPLEMENTATION AND IMPACT ON REDUCING CANCER RISK AND IMPROVING SURVIVORSHIP.

THE SYMPOSIUM IS AIMED AT HEALTH PROFESSIONALS (INCLUDING PHYSICIANS, NURSES, PHYSICIAN ASSISTANTS, NURSE PRACTITIONERS, SOCIAL WORKERS AND DIETITIANS), RESEARCHERS AND POLICY ADVOCATES ALIKE, WITH A REAL FOCUS ON HOW THE SOMETIMES REMOTE AND ABSTRACT WORLD OF ACADEMIC AND CLINICAL RESEARCH RELATES TO EVERYDAY DECISIONS AND LIFESTYLE CHANGES.

SPEAKERS AND TOPICS

DARIUSH MOZAFFARIAN, MD, DRPH FOOD AS MEDICINE: EVIDENCE AND POLICY ACTIONS TO INTEGRATE FOOD AND NUTRITION INTO HEALTHCARE

ELIZABETH FELICIANO, SCD, SM HEALTHFUL DIETARY PATTERNS AND BREAST CANCER SURVIVAL

SANDEEP PRABHU, PHD EFFECT OF DIETARY SELENIUM IN ACUTE MYELOID LEUKEMIA

LEANN PERKINS, FNP-BC, DIPACLM CANCER SURVIVORSHIP TO PREVENTION: AN INTERDISCIPLINARY TEAM APPROACH

COLLEEN SPEES, PHD, MED, RDN, LD, FAND INTEGRATION OF FOOD AND NUTRITION INTO ONCOLOGY CARE: A MEDICALLY TAILORED MEAL PLUS NUTRITION COUNSELING INTERVENTION AMONG PATIENTS WITH LUNG CANCER

WILLIAM KRAUS, MD THE ROLES OF CLINICAL EXERCISE PHYSIOLOGISTS IN PERSONALIZING EXERCISE THERAPYAN ESSENTIAL PART OF THE CARE TEAM

MICHAEL DE LISIO, PHD EXERCISE, OBESITY, AND THE LATE EFFECTS OF

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RADIATION THERAPY

KATHRYN SCHMITZ, PHD, MPH ADDRESSING SYMPTOMS IN METASTATIC BREAST CANCER WITH TECHNOLOGY: THE NURSE AMIE PLATFORM

FORM 990, PART III, LINE 4B, CONTINUED.

ALIX SLEIGHT, PHD, OTD, MPH, OTR/L RISK-STRATIFIED SELF-MANAGEMENT CARE: A NEW APPROACH TO INCREASING ADHERENCE TO HEALTH BEHAVIOR RECOMMENDATIONS IN CANCER SURVIVORS

GRAHAM MELSTRAND IT'S TIME TO MOVE: A HISTORIC PROJECT TO MAKE PHYSICAL ACTIVITY ASSESSMENTS, PRESCRIPTIONS AND REFERRALS A STANDARD OF CARE IN THE US HEALTHCARE SYSTEM

THE SYMPOSIUM ATTRACTED A NEW AUDIENCE TO AICR, WITH 355 TOTAL REGISTRANTS MADE UP OF 45% RESEARCHERS, 24% REGISTERED DIETITIANS, 15% CLINICAL PROFESSIONALS AND 16% OTHER.

AICR ANNUAL RESEARCH CONFERENCE

THE RISING TIDE OF COVID-19 INFECTIONS IN THE FALL OF 2021 NECESSITATED THE CANCELLATION OF THE IN-PERSON COMPONENT OF THE 2021 AICR RESEARCH CONFERENCE BUT THE MEETING WAS SEAMLESSLY TRANSITIONED TO A FULLY VIRTUAL EXPERIENCE NOVEMBER 13, 2021. THE SAME INCREDIBLE SPEAKERS AND PROGRAM WERE DELIVERED AND WITH THE ADDED ADVANTAGE THAT THE CONTENT WAS RECORDED AND CAN BE REVISITED.

PLENARY SESSIONS:

-STRENGTH OF EVIDENCE HOW DO WE ASSESS IT AND WHEN IS IT STRONG ENOUGH?

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-LIFESTYLE IMPACT ON IMMUNOTHERAPY EMERGING ROLES OF OBESITY, PHYSICAL
ACTIVITY AND DIET ON IMMUNOTHERAPY

-CANCERS ON THE RISETHE IMPACT OF DIET, NUTRITION AND PHYSICAL
ACTIVITY ON THE INCIDENCE OF YOUNG ONSET COLORECTAL CANCER, LIVER
CANCER AND CHILDHOOD CANCERS

-WHAT CAN WE TELL OUR PATIENTS? CURRENT KNOWLEDGE, LIMITATIONS AND
OPPORTUNITIES FOR REDUCING RISK AND IMPROVING OUTCOMES THROUGH DIET,
NUTRITION AND PHYSICAL ACTIVITY IN CANCER RISK AND SURVIVAL

SPEAKERS AND TOPICS

DORIS CHAN, PHD ASSESSING STRENGTH OF EVIDENCE FOR DIET, NUTRITION,
PHYSICAL ACTIVITY IN CANCER RISK AND OUTCOMES

ED GIOVANNUCCI, MD, SCD EVALUATING EVIDENCE ON DIET AND CANCER:
RANDOMIZED CONTROLLED TRIALS AND OBSERVATIONAL EVIDENCE

JENNIFER MCQUADE, MD, MS, MA, LAC THE IMPACT OF HOST METABOLIC
PHENOTYPE ON TUMOR METABOLISM AND RESPONSE TO IMMUNOTHERAPY

LYSE NORIAN, PHD IDENTIFYING DRIVERS OF OBESITY-ASSOCIATED
IMMUNOTHERAPY RESISTANCE

KATHERINE COOK, PHD CROSSTALK BETWEEN DIET AND MICROBIOTA REGULATES
IMMUNE CHECKPOINT THERAPY RESPONSIVENESS

RICHARD SIMPSON, PHD EXERCISE-INDUCED ADRENERGIC STIMULATION AS AN
ADJUVANT FOR CANCER IMMUNOTHERAPY

DANIEL ROSENBERG, PHD POTENTIAL MANIPULATION OF THE GUT MICROBIOME FOR
CANCER PREVENTION

KRISTY BROWN, PHD OBESITY INCREASES BREAST CANCER PENETRANCE IN BRCA
MUTATION CARRIERS: A ROLE FOR LOCALLY-DERIVED FACTORS

ELIZABETH WELLBERG, PHD FGFR/ER-CROSSTALK IN THE BREAST TUMOR
MICROENVIRONMENT LINKS WEIGHT GAIN AND ENDOCRINE-THERAPY RESISTANCE IN

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A PRECLINICAL MODEL OF OBESITY

LEE JONES, PHD EXERCISE REGULATION OF THE TUMOR MICROENVIRONMENT

LISA FORCE, MD, MPH THE GLOBAL BURDEN OF CHILDHOOD CANCER

ELENA LADAS, PHD, RD CHANGING PATTERNS OF LIFESTYLE EXPOSURES IN LMIC

IMPLICATIONS FOR CHILDHOOD CANCER SURVIVORS

KIMMIE NG, MD, MPH YOUNG ONSET COLORECTAL CANCER: UNDERSTANDING THE

RISE

ROHIT LOOMBA, MD, MHSC LIVER CANCER INCREASING RATES AND IMPACT OF

MODIFIABLE LIFESTYLE FACTORS

MELISSA HUDSON, MD HEALTH PROMOTION ACROSS THE CANCER CARE CONTINUUM

WENDY DEMARK-WAHNEFRIED, PHD, RD WHAT WE KNOW AND DON'T KNOW ABOUT DIET

AFTER A CANCER DIAGNOSIS

KATHRYN SCHMITZ, PHD, MPH HOW TO IMPLEMENT EXERCISE DURING CANCER

TREATMENT: BARRIERS AND FACILITATORS

NEIL IYENGAR, MD TARGETING OBESITY TO IMPROVE CANCER OUTCOMES

DANIEL SANTA MINA, PHD IMPLEMENTING HOSPITAL-BASED SURGICAL

PREHABILITATION: STRATEGIES TO CREATE AND MEASURE IMPACT

JENNIFER TRILK, PHD, FACSM, FAGLN, DIPACLM EXERCISE IS MEDICINE

GREENVILLE: DESIGN AND IMPLEMENTATION OF A CLINIC-TO-COMMUNITY,

PHYSICAL ACTIVITY HEALTH PROMOTION MODEL FOR HEALTHCARE PROVIDERS

WENDY DEMARK-WAHNEFRIED, PHD, RD OPPORTUNITIES AND CHALLENGES IN

ADAPTING, IMPLEMENTING AND EVALUATING DIET AND EXERCISE INTERVENTIONS

IN THE VIRTUAL WORLD

TERESA FUNG, SCD, RD CURRENT EVIDENCE AND IMPACT OF DIETARY PATTERNS ON

CHRONIC DISEASE RISK AND ISSUES OF TRANSLATION

FRED TABUNG, PHD, MSPH CHALLENGES, OPPORTUNITIES AND FUTURE STRATEGIES

IN DIETARY PATTERN RESEARCH IN CANCER

MELISSA MAITIN-SHEPARD, MPP POLICY IMPLICATIONS OF DIETARY PATTERN

Name of the organization: AMERICAN INSTITUTE FOR CANCER RESEARCH

Employer identification number: 52-1238026

RESEARCH AND PRACTICE

EXTERNAL EVENTS:

AICR FEATURED PROMINENTLY SEVERAL IN-PERSON AND VIRTUAL CONFERENCES AND WEBINARS.

LIFESTYLE MEDICINE AND BREAST CANCER: AWARENESS TO ACTION. AMERICAN COLLEGE OF LIFESTYLE MEDICINE WEBINAR, OCTOBER 5, 2021

DIET, NUTRITION, PHYSICAL ACTIVITY & CANCER: EVIDENCE TO ACTION. SOCIETY FOR INTEGRATIVE ONCOLOGY WEBINAR, NOVEMBER 18, 2021

DIET, NUTRITION, PHYSICAL ACTIVITY AND CANCER EVIDENCE, EXCEPTIONS AND EXPECTATIONS, CONTEMPORARY MANAGEMENT OF CANCER RISK AND PREVENTION SYMPOSIUM (KEYNOTE), UNIVERSITY OF NEBRASKA MEDICAL CENTER, FEBRUARY 11, 2022

"FOSTERING TRUST AND DEVELOPING EFFECTIVE COMMUNICATION IN A COMPLEX ENVIRONMENT ROUNDTABLE DISCUSSION." ADVANCING PROGRESS IN CANCER PREVENTION AND RISK REDUCTION. NATIONAL ACADEMIES OF SCIENCE ENGINEERING & MEDICINE, WASHINGTON DC, JUNE 28, 2022

AICR AUTHORS ALSO PUBLISHED TWO MANUSCRIPTS IN COLLABORATION WITH COLLEAGUES AT THE NATIONAL CANCER INSTITUTE:

KORN AR, REEDY J, BROCKTON NT, KAHLE LL, MITROU P, SHAMS-WHITE MM. THE 2018 WORLD CANCER RESEARCH FUND/AMERICAN INSTITUTE FOR CANCER RESEARCH SCORE AND CANCER RISK: A LONGITUDINAL ANALYSIS IN THE NIH-AARP DIET AND HEALTH STUDY. CANCER EPIDEMIOLOGY BIOMARKERS & PREVENTION. JULY 25, 2022

SHAMS-WHITE MM, BROCKTON NT, MITROU P, KAHLE LL, JILL REEDY J. THE 2018 WORLD CANCER RESEARCH FUND/AMERICAN INSTITUTE FOR CANCER RESEARCH (WCRF/AICR) SCORE AND ALL-CAUSE, CANCER, AND CARDIOVASCULAR DISEASE

Name of the organization: AMERICAN INSTITUTE FOR CANCER RESEARCH
Employer identification number: 52-1238026

MORTALITY RISK: A LONGITUDINAL ANALYSIS IN THE NIH-AARP DIET AND HEALTH STUDY. CURRENT DEVELOPMENTS IN NUTRITION 2022 JUN 2;6(6)

PUBLIC POLICY

AICR ENGAGED IN FEDERAL LEGISLATION, ADVOCACY AND REGULATORY ADVISEMENT TO INFORM DECISIONS AND SUPPORT POLICIES THAT HELP PROVIDE PEOPLE WITH THE TOOLS TO PREVENT AND SURVIVE CANCER.

AICR'S FEDERAL POLICY PRIORITIES INCLUDED: 1) NUTRITION AND ALCOHOL LABELING TO PROMOTE INFORMED CONSUMER CHOICES; 2) FEDERAL DIETARY GUIDELINES ALIGNED WITH CANCER PREVENTION RESEARCH; 3) FEDERAL GUIDELINES AND POLICIES TO PROMOTE PHYSICAL ACTIVITY; 4) AN INCREASE IN FEDERAL FUNDING FOR CANCER RESEARCH AT THE NATIONAL INSTITUTES OF HEALTH AND NATIONAL CANCER INSTITUTE; AND 5) ACCESS TO DIET, PHYSICAL ACTIVITY AND WEIGHT LOSS INTERVENTIONS FOR PEOPLE WITH CANCER.

AICR WORKED TO ADVANCE THESE PRIORITIES THROUGH COLLABORATION WITH OTHER PUBLIC HEALTH STAKEHOLDERS THROUGH FORMAL COALITIONS (SUCH AS THE PHYSICAL ACTIVITY ALLIANCE, ONE VOICE AGAINST CANCER AND THE AD HOC COALITION FOR MEDICAL RESEARCH) AND INFORMAL WORKGROUPS. ACTIVITIES INCLUDED OUTREACH TO REGULATORS, ADMINISTRATION OFFICIALS AND CONGRESSIONAL OFFICES THROUGH RESPONDING TO PUBLIC COMMENT OPPORTUNITIES; EMAILS, PHONE CALLS AND VIRTUAL MEETINGS; AND ENGAGEMENT THROUGH TRADITIONAL AND SOCIAL MEDIA.

FOR EXAMPLE, IN FY22, AICR PARTICIPATED IN LOBBY DAYS FOCUSED ON INCREASING FEDERAL FUNDING FOR CANCER AND BIOMEDICAL RESEARCH. AICR

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ALSO ATTENDED PARTICIPATORY MEETINGS AND LISTENING SESSIONS AS WELL AS SUBMITTED ADVISEMENT LETTERS ABOUT THE CANCER RISK REDUCTION AND HEALTHY CANCER SURVIVORSHIP EVIDENCE IN THE MONTHS LEADING UP TO THE 2ND WHITE HOUSE CONFERENCE ON HUNGER, NUTRITION AND HEALTH, A HISTORIC EVENT THAT HAD NOT BEEN HELD IN MORE THAN 50 YEARS.

IN ADDITION, AICR CONTRIBUTED TO ONGOING WORK TO ALLOW FOR MORE SEAMLESS INTEGRATION OF PHYSICAL ACTIVITY CLINICAL MEASURES INTO PATIENT CARE PLANS AND RELATED WORK TO MAKE PHYSICAL ACTIVITY PRESCRIPTIONS A STANDARD OF CARE AS PART OF ITS BOARD OF DIRECTORS POSITION FOR THE PHYSICAL ACTIVITY ALLIANCE.

TO PROMOTE GRASSROOTS ADVOCACY IN SUPPORT OF NATIONAL INVESTMENTS IN CANCER RESEARCH DURING THE FEDERAL APPROPRIATIONS PROCESS, AICR PROVIDED GUIDANCE TO THE PUBLIC ABOUT HOW TO CONTACT THEIR MEMBERS OF CONGRESS AND ALSO PROVIDED RECOMMENDED TALKING POINTS FOR THESE CONVERSATIONS.

FURTHERMORE, AICR SUBMITTED FORMAL RECOMMENDATIONS TO THE DEPARTMENT OF HEALTH AND HUMAN SERVICES FOR ITS DEVELOPMENT OF RESEARCH QUESTIONS THAT THE DIETARY GUIDELINES FOR AMERICANS COMMITTEE 2025-2030 WOULD USE AS THEY DEVELOP THESE GUIDELINES FOR 2025-2030. MOREOVER, AICR NOMINATED AN AICR-AFFILIATED HARVARD UNIVERSITY PROFESSOR TO THE DIETARY GUIDELINES FOR AMERICANS COMMITTEE TO PROMOTE THE INCLUSION OF CANCER PREVENTION AND SURVIVORSHIP EVIDENCE INTO THE DEVELOPMENT OF THE DIETARY GUIDELINES FOR AMERICANS 2025-2030.

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FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:

UNITED KINGDOM, NETHERLANDS, HONG KONG, BELGIUM,

FRANCE

FORM 990, PART VI, SECTION B, LINE 11B:

THE 990 FORM IS PREPARED AND REVIEWED IN DETAIL BY KEY STAFF IN THE AICR ACCOUNTING DEPARTMENT. THE 990 FORM IS THEN REVIEWED BY AICR EXECUTIVE MANAGEMENT, RSM TAX AND THE LAW FIRM STEPTOE & JOHNSON. RSM TAX AND STEPTOE & JOHNSON BOTH CONDUCT DETAILED REVIEWS OF THE 990 FORM.

ONCE THE 990 FORM AND ACCOMPANYING SCHEDULES ARE IN FINAL DRAFT FORM, THE AICR BOARD OF DIRECTORS ARE ASKED TO REVIEW AND PROVIDE FEEDBACK PRIOR TO THE FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

THE INSTITUTE'S BOARD OF DIRECTORS HAS A CONFLICT OF INTEREST POLICY IN EFFECT.

A COPY OF THE POLICY IS PROVIDED TO EACH DIRECTOR, OFFICER AND STAFF MEMBER OF AICR WHO IS PRESENTLY SERVING IN A CAPACITY WHERE A CONFLICT OF INTEREST COULD ARISE.

THE POLICY IS REVIEWED ANNUALLY. IF THE BOARD DETERMINES THAT CHANGES DO NOT NEED TO BE MADE, THE POLICY IS REAFFIRMED. NEW DIRECTORS, OFFICERS, AND STAFF MEMBERS ARE ADVISED OF THE POLICY IN EFFECT UPON TAKING OFFICE OR UPON THE START OF EMPLOYMENT, AS THE CASE MAY BE. SINCE FISCAL YEAR 2010, DIRECTORS, OFFICERS, EXECUTIVES, AND SENIOR LEVEL MANAGEMENT STAFF HAVE

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BEEN REQUIRED TO SIGN A "DECLARATION OF LACK OF CONFLICT OF INTEREST."

THE POLICY PROVIDES THAT IN THE EVENT OF A CONFLICT OF INTEREST RELEVANT TO A MATTER REQUIRING ACTION BY THE BOARD, THE PERSON SHALL CALL IT TO THE ATTENTION OF THE BOARD (OR COMMITTEE OF THE BOARD, AS THE CASE MAY BE), AND SUCH PERSON SHALL NOT VOTE ON THE MATTER. THE PERSON HAVING A CONFLICT OF INTEREST SHALL PROVIDE THE BOARD (OR COMMITTEE OF THE BOARD, AS THE CASE MAY BE), WITH ANY AND ALL RELEVANT INFORMATION, AND SHALL RETIRE FROM THE ROOM IN WHICH THE BOARD (OR COMMITTEE OF THE BOARD, AS THE CASE MAY BE) IS MEETING CONCERNING SUCH MATTER, AND SHALL NOT PARTICIPATE IN THE FINAL DELIBERATION OR DECISION REGARDING THE MATTER UNDER CONSIDERATION. THE MINUTES OF THE MEETING OF THE BOARD (OR COMMITTEE OF THE BOARD, AS THE CASE MAY BE) SHALL REFLECT THAT THE CONFLICT OF INTEREST WAS DISCLOSED AND THAT THE INTERESTED PERSON WAS NOT PRESENT DURING THE FINAL DISCUSSION OF SUCH MATTER OR VOTE AND DID NOT VOTE ON SUCH MATTER. WHEN THERE IS A DOUBT AS TO WHETHER A CONFLICT OF INTEREST EXISTS, THE MATTER SHALL BE RESOLVED BY VOTE OF THE BOARD OF DIRECTORS (OR COMMITTEE OF THE BOARD, AS THE CASE MAY BE), EXCLUDING THE INTERESTED PERSON.

FORM 990, PART VI, SECTION B, LINE 15:
THE COMPENSATION COMMITTEE, THROUGH A RESOLUTION OF THE AICR BOARD OF DIRECTORS, IS RESPONSIBLE FOR SETTING THE COMPENSATION OF THE PRINCIPLE OFFICERS. THIS COMMITTEE CONDUCTS AN ANNUAL REVIEW OF PERFORMANCE AT THE END OF EACH CALENDAR YEAR AGAINST THE GOALS AND OBJECTIVES ESTABLISHED IN THE YEARLY BUDGETS, THE YEARLY OPERATION PLAN AND THE LONG-TERM STRATEGIC PLANS.

INFORMATION UTILIZED IN DETERMINING COMPENSATION ADJUSTMENTS FOR THIS

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Employer identification number: 52-1238026

REPORTING PERIOD INCLUDE: 1) REPORT FROM THE EXECUTIVE TEAM FOR THE CALENDAR YEAR; 2) FISCAL YEAR PERFORMANCE AND EFFECTIVENESS ASSESSMENT REPORT; 3) HRA-NCA COMPENSATION SURVEY; 4) AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES ASSOCIATION COMPENSATION AND BENEFITS REPORT; 5) GUIDESTAR COMPENSATION REPORT 5) NONPROFIT TIMES NONPROFIT SALARY AND BENEFITS REPORT.

AFTER REVIEWING COMPENSATION STUDIES AND OTHER INDUSTRY INFORMATION, COMPENSATION IS DETERMINED AND AWARDED. INCREASES ARE CONSISTENT WITH COMPENSATION PAID BY ORGANIZATIONS SIMILAR TO AICR HAVING COMPARABLE RESPONSIBILITY AND DUTIES. INCREASES ARE DOCUMENTED AND A MEMO IS DRAFTED FROM THE COMPENSATION COMMITTEE TO THE SENIOR VICE PRESIDENT OF FINANCE, HUMAN RESOURCE FILE AND TO THE EXECUTIVES RECEIVING THE REVIEW INCLUDING THE INSTRUCTIONS AND DETAILS FOR THE COMPENSATION CHANGES.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL,AR,CA,FL,GA,HI,IL,IN,KS,KY,MD,MA,MI,MN,MS,NH,NJ,NM,NY,NC,OR,PA,RI,SC,TN UT,VA,WV,WI

FORM 990, PART VI, SECTION C, LINE 19:

ALL GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST FOR THE SAME PERIOD OF DISCLOSURE AS SET FORTH IN SECTION 6104(D).

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN VALUE OF SPLIT INTEREST AGREEMENT LIABILITY	166,722.
NET GAIN ON INTEREST IN PERPETUAL TRUST	-237,845.
CURRENCY LOSS	-5,743.

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TOTAL TO FORM 990, PART XI, LINE 9 -76,866.

FORM 990, PART XII, LINE 2C:

THE PROCESS FOR OVERSEEING THE AUDIT OF THE FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT THAT AUDITED THE FINANCIAL STATEMENTS HAS BEEN CONSISTENT WITH PRIOR YEARS.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047
2021
Open to Public Inspection

Name of the organization
AMERICAN INSTITUTE FOR CANCER RESEARCH

Employer identification number
52-1238026

Part I **Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II **Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
WORLD CANCER RESEARCH FUND 140 PENTONVILLE RD LONDON, UNITED KINGDOM N1 9FW	AFFILIATED CHARITY	UNITED KINGDOM			AICR	X	
WORLD CANCER RESEARCH FUND LIMITED HALDANES, 7TH FLOOR 11 DUDDELL STREET, CENTRAL, HONG KONG	AFFILIATED CHARITY	HONG KONG			AICR	X	
WORLD CANCER RESEARCH FUND INTERNATIONAL 140 PENTONVILLE RD LONDON, UNITED KINGDOM N1 9FW	AFFILIATE	BELGIUM			AICR	X	

Part III **Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	No	(k) Percentage ownership

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity? Yes	No
WCRF (TRADING) LTD. THE BROADGATE TOWER, THIRD FLOOR 20 PRIMROSE STREET, LONDON EC2A 2RS, UNITED	LIST RENTAL	UNITED KINGDOM	WORLD CANCER RESEARCH FUND	C CORP	0.	0.	.00%		X
CHARITABLE REMAINDER TRUST 1560 WILSON BOULEVARD, SUITE 1000 ARLINGTON, VA 22209	UNITRUST	CA	N/A	TRUST					X
PERPETUAL TRUST 1560 WILSON BOULEVARD, SUITE 1000 ARLINGTON, VA 22209	PERPETUAL TRUST	PA	N/A	TRUST					X

SEE PART VII FOR CONTINUATIONS

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

			Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	**1a**		X
b	Gift, grant, or capital contribution to related organization(s)	**1b**	X	
c	Gift, grant, or capital contribution from related organization(s)	**1c**	X	
d	Loans or loan guarantees to or for related organization(s)	**1d**		X
e	Loans or loan guarantees by related organization(s)	**1e**		X
f	Dividends from related organization(s)	**1f**		X
g	Sale of assets to related organization(s)	**1g**		X
h	Purchase of assets from related organization(s)	**1h**		X
i	Exchange of assets with related organization(s)	**1i**		X
j	Lease of facilities, equipment, or other assets to related organization(s)	**1j**		X
k	Lease of facilities, equipment, or other assets from related organization(s)	**1k**		X
l	Performance of services or membership or fundraising solicitations for related organization(s)	**1l**	X	
m	Performance of services or membership or fundraising solicitations by related organization(s)	**1m**		X
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	**1n**		X
o	Sharing of paid employees with related organization(s)	**1o**		X
p	Reimbursement paid to related organization(s) for expenses	**1p**	X	
q	Reimbursement paid by related organization(s) for expenses	**1q**	X	
r	Other transfer of cash or property to related organization(s)	**1r**		X
s	Other transfer of cash or property from related organization(s)	**1s**	X	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	**(b)** Transaction type (a-s)	**(c)** Amount involved	**(d)** Method of determining amount involved
(1) WORLD CANCER RESEARCH FUND INTERNATIONAL	B	256,143.	CASH
(2) WORLD CANCER RESEARCH FUND INTERNATIONAL	L	899,280.	CASH
(3) WORLD CANCER RESEARCH FUND INTERNATIONAL	P	69,219.	CASH
(4) WORLD CANCER RESEARCH FUND INTERNATIONAL	Q	79,333.	CASH
(5) WORLD CANCER RESEARCH FUND INTERNATIONAL	S	752,313.	CASH
(6) WORLD CANCER RESEARCH FUND	C	660,000.	CASH

Part V **Continuation of Transactions With Related Organizations** (Schedule R (Form 990), Part V, line 2)

	(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(7)	WORLD CANCER RESEARCH FUND	Q	77,480.	CASH
(8)	WORLD CANCER RESEARCH FUND	S	264,645.	CASH
(9)				
(10)				
(11)				
(12)				
(13)				
(14)				
(15)				
(16)				
(17)				
(18)				
(19)				
(20)				
(21)				
(22)				
(23)				
(24)				

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec. 501(c)(3) orgs.?		(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor-tionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

132164 11-17-21

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.

PART IV, IDENTIFICATION OF RELATED ORGANIZATIONS TAXABLE AS CORP OR TRUST:

NAME AND ADDRESS OF RELATED ORGANIZATION:

WCRF (TRADING) LTD.

THE BROADGATE TOWER, THIRD FLOOR

20 PRIMROSE STREET, LONDON EC2A 2RS, UNITED KINGDOM

SCHEDULE R, PART IV, COLUMN (C):

A CHARITABLE REMAINDER TRUST IS DOMICILED IN CALIFORNIA.

Form **8868** (Rev. January 2022) Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.*

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. AMERICAN INSTITUTE FOR CANCER RESEARCH	Taxpayer identification number (TIN) 52-1238026
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 1560 WILSON BOULEVARD, 1000	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. ARLINGTON, VA 22209	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12
Form 990-T (corporation)	07		

- The books are in the care of ▶ DEIRDRE MCGINLEY-GIESER 1560 WILSON BOULEVARD, 1000 - ARLINGTON, VA 22209

Telephone No. ▶ (202) 328-7744 Fax No. ▶

- If the organization does not have an office or place of business in the United States, check this box .... ▶ ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ________ . If this is for the whole group, check this box ▶ ☐ . If it is for part of the group, check this box ▶ ☐ and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until AUGUST 15, 2023, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶ ☐ calendar year ______ or
▶ ☒ tax year beginning OCT 1, 2021, and ending SEP 30, 2022.

2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

3a	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	**3a**	$ 0.
b	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	**3b**	$ 0.
c	**Balance due.** Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	**3c**	$ 0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.