LIVESTRONG 2010 Form 990

You're about to view LIVE**STRONG**'s 2010 IRS form 990. This government form doesn't always make for a light or easy read, but it does provide some valuable information. Public charities have a responsibility to conduct their business in an open and fully transparent manner, and we openly share our tax filings with the public and engaged supporters, as required by law. We also take transparency a step further by giving you the highlights, which you'll see below.

But before we dig in to the details, here's a sincere and heart-felt thank you from all of us to all of you who have contributed to LIVE**STRONG** throughout our history. Without your support, especially in tough economic times, we would not be the strong and effective organization that we are. We count on you as part of the LIVE**STRONG** community that pushes to make cancer a national and global priority. Through your generosity we've been able to provide direct services to thousands of people and families fighting cancer. We appreciate your support so much and look forward to serving you for years to come.

We thank our distinguished Board of Directors for the wisdom and guidance they provide us, all on their own dime. We thank our devoted and hard-working staff and volunteers whose efforts propel our mission. And we send a special note of thanks to our Chairman and Founder, Lance Armstrong, who has to date given us the largest donation in our history - $6 million – as well as countless hours of time and effort. Lance has never received compensation for his work on our behalf, nor taken reimbursement for his foundation-related travel.

And now, the highlights:

- The foundation raised $42.3 million in revenues during 2010 (compared to $41.8 million in 2009). Again, we can't thank enough all of you who helped us reach this figure, especially in a time of economic turmoil when deciding which causes and organizations to support is more important than ever. A summary of revenues information is shown on page 1 of the tax filing. A more detailed listing appears on page 9 that reflects the individual components ($29.7 million -- Contributions, $8.9 million – License Fees, $2.9 million – Merchandise Sales, $1.6 million -- Investment Income)

- The foundation had $31.5 million in expenditures in 2010, an increase of $2.7 million over 2009. The increase was due in part to the construction and operation of the new LIVE**STRONG** Cancer Navigation Center, which provides people and families in the Austin area free, bilingual cancer support services. Detailed expense information is found on page 1 of the tax filing. A detailed listing of the expenditures is provided on page 10, including program expenses of $25.4 million (80.4%), fundraising expenses of $4.2 million which includes LIVE**STRONG** Challenge and Team LIVE**STRONG** (13.4%) and management & general expenses of $1.9 million (6.2%).

- The tax return also includes basic information about our executive team and staffing, showing the foundation has 94 employees and 2,269 volunteers that provide services throughout the year (page 1). Once more, a special thanks to those hard-working folks! We participate in an external compensation survey each year to benchmark our executive compensation in the nonprofit community. Our Board of Directors reviews this market data and approves executive compensation on an annual basis.

- We provide information on our Governing Board and related corporate governance policies, including a listing of all board members on pages 6 and 7 of the tax filing. We're enormously grateful to all of our wonderful board members for their efforts.

- In addition to the programs and services LIVE**STRONG** provides, we also fund other organizations that do great work for cancer survivors in communities throughout the US. Schedule I provides detailed information for all 96 grant recipients who received funding during 2010. The majority of these entities received funding through our Community Impact Programs, sponsorship of various cancer-related meetings during the year, and Cooperative Agreements we have with national partners and universities. Camp Kesem, a college student-run summer camp for kids with a parent who has or has had cancer, is one example of the great organizations LIVE**STRONG** supports with grants. We're grateful to be able to fund grants that serve survivors and their families throughout the US and look forward to continuing our collaboration with many of our tremendous program partners who help us serve our constituents.

- Page 9, Section B has a list of our top vendors, from our great partners at the Patient Advocate Foundation whom we enlist to help people and families navigating insurance and financial challenges, to John Snow International, our implementing partner for our anti-stigma work in Mexico and South Africa.

- We have provided supporting detail for all of our legal expenses on page 10 of Schedule O. This details shows that over 2/3 of our legal fees goes to support the protection of our LIVE**STRONG** brand, one of our most valuable assets. The remainder of our legal fees goes towards our advocacy efforts and corporate governance program. This enhanced disclosure is not required, but we feel it is valuable information for our supporters to have.

- We have also disclosed a complete listing of any "Miscellaneous" expenses such as financial assistance and emotional support for cancer survivors, our advocacy activities and items like payroll and event costs. Both the amounts and the activities are reflected on Schedule O, page 11. Again, not required, but as a transparent organization, we make this information freely available.

- We have enhanced our disclosure of our travel expenses in 2010 to provide detail on the amount, category, and activity for our travel. This detail is found on Schedule O, Page 12. This schedule shows all of the detail for our $1.5 million in travel for 2010, including costs for non-staff expenses such as when the foundation pays for survivors, advocates and program partners to collaborate. An example of which is paying for travel for our Promotores, Hispanic/Latino healthcare workers in underserved communities, to attend necessary training sessions.

<u>Fulfilling an Important Compliance Obligation required of all Non-Profits</u>

By sharing financial, operational, and governance information each year, we provide both federal agencies and the general public with standardized information that allows them an inside look at the operations of the foundation.

With millions of non-profit organizations and public charities around the country, it is important to have a way to routinely and systematically share information about the operations and activities of tax exempt organizations operating in this country. This annual filing helps both oversight agencies and the general public access routine financial, operational, and governance information that can be used to review and evaluate both the efficiency/effectiveness and financial operations of tax exempt organizations and the public charities they follow and support. We're happy to share LIVE**STRONG**'s information with you and hope you'll let us know any questions.

Sincerely,

Greg Lee
LIVE**STRONG** Chief Financial Officer

2010

IRS Form 990

Lance Armstrong Foundation

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047

2010

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning and ending

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
LANCE ARMSTRONG FOUNDATION

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address) | Room/suite
2201 EAST 6TH STREET

City or town, state or country, and ZIP + 4
AUSTIN, TX 78702

F Name and address of principal officer: DOUG ULMAN
SAME AS C ABOVE

D Employer identification number
74-2806618

E Telephone number
512-236-8820

G Gross receipts $ 46,925,628.

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

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

J Website: ▶ WWW.LIVESTRONG.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1997 **M** State of legal domicile: TX

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: LAF PROVIDES A BROAD MENU OF MISSION-RELATED PROGRAMS CENTERED ON THE CANCER COMMMUNITY. (Schedule O, Pg 1)

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	16
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	16
5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	94
6 Total number of volunteers (estimate if necessary)	6	2269
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.

	Prior Year	Current Year
Revenue		
8 Contributions and grants (Part VIII, line 1h)	40,996,742.	29,724,618.
9 Program service revenue (Part VIII, line 2g)	490,500.	653,958.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	505,987.	1,658,759.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-223,228.	10,230,075.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	41,770,001.	42,267,410.
Expenses		
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	4,992,485.	9,058,100.
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)	5,892,864.	7,388,608.
16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 4,223,036.		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	18,013,407.	15,106,699.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	28,898,756.	31,553,407.
19 Revenue less expenses. Subtract line 18 from line 12	12,871,245.	10,714,003.

	Beginning of Current Year	End of Year
Net Assets or Fund Balances		
20 Total assets (Part X, line 16)	46,948,094.	96,318,094.
21 Total liabilities (Part X, line 26)	4,980,890.	5,712,533.
22 Net assets or fund balances. Subtract line 21 from line 20	41,967,204.	90,605,561.

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

▶ GREG LEE, CFO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN

Firm's name ▶ MAXWELL LOCKE & RITTER LLP — Firm's EIN ▶

Firm's address ▶ 401 CONGRESS AVENUE, SUITE 1100
AUSTIN, TX 78701-9682 — Phone no. (512) 370-3200

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
THE LANCE ARMSTRONG FOUNDATION (LAF) PROVIDES A BROAD MENU OF MISSION-RELATED PROGRAMS CENTERED ON THE CANCER COMMUNITY.
(Schedule O, Pg 1)

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 exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 $ 25383612. including grants of $ 9,058,100.) (Revenue $ 12484428.)
MISSION

THE FOUNDATION CONTINUES TO PROVIDE AN EXPANDED MENU OF MISSION-RELATED PROGRAMS. THESE INCLUDE GRANTS FOR CANCER SURVIVORSHIP RESEARCH; GRANTS TO COMMUNITY PROGRAMS; DELIVERY OF CANCER SURVIVORSHIP EDUCATION, INFORMATION, AND REFERRAL AND SUPPORT SERVICES; AND GRANTS TO SURVIVORSHIP CENTERS AT ACADEMIC MEDICAL INSTITUTIONS. THE FOUNDATION IS COMMITTED TO ENSURING THAT EACH AND EVERY INDIVIDUAL AFFECTED BY CANCER HAS THE OPPORTUNITY TO ACHIEVE THE HIGHEST QUALITY OF LIFE POSSIBLE.

SEE CONTINUATION ON SCHEDULE O.

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

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

4d Other program services. (Describe in Schedule O.)
(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses** ▶ 25,383,612.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for 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 Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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; 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 term, permanent, or 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, XII, and XIII*	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, XII, and XIII 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, and program service activities outside the United States? *If "Yes," complete Schedule F, Parts I and IV*	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Parts II and IV*	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Parts III and IV*	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*	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 hospitals? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	X	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		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 25*	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) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *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, Parts II, III, IV, and V, line 1*	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
a	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* ☐ Yes ☒ No			
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 in Schedule O for Part VI, lines 11 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 to any question in this Part V ☐

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	209		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	1		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		X	
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	94		
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," provide an explanation in Schedule O*	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			X
b	If "Yes," enter the name of the foreign country: ▶ _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	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?	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		X	
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		X	
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8			
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?	9a			
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b			
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 in Schedule O*	14b			

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

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	16		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	16		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		X
6	Does the organization have members or stockholders?		6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		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 in Schedule O*		9		X

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

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990. (Schedule O, Pg 10)			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this is done* (Schedule O, Pg 10)	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does 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 in Schedule O. (See instructions.) (Schedule O, Pg 10)			
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," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken 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 ▶ (Schedule O, Pg 10)

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

X Own website X Another's website X Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. (Schedule O, Pg 10)

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

GREG D. LEE, CPA - 512-279-8380

2201 EAST 6TH ST, AUSTIN, TX 78702

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

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

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

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

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

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

☐ 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 (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
SANJAY GUPTA, M.D. DIRECTOR	1.00	X						0.	0.	0.
NAVDEEP S. SOOCH DIRECTOR	1.00	X						0.	0.	0.
MITCHELL STOLLER DIRECTOR	1.00	X						0.	0.	0.
MICHAEL SHERWIN DIRECTOR	1.00	X						0.	0.	0.
MARK MCKINNON DIRECTOR	1.00	X						0.	0.	0.
LANCE ARMSTRONG DIRECTOR	1.00	X						0.	0.	0.
JULIAN DAY DIRECTOR	1.00	X						0.	0.	0.
JOSEPH C. ARAGONA DIRECTOR	1.00	X						0.	0.	0.
JEFFREY C. GARVEY DIRECTOR	1.00	X						0.	0.	0.
J. DENNIS CAVNER DIRECTOR	1.00	X						0.	0.	0.
E. LEE WALKER DIRECTOR	1.00	X						0.	0.	0.
DR. HAROLD FREEMAN, M.D. DIRECTOR	1.00	X						0.	0.	0.
DAVID JOHNSON, M.D. DIRECTOR	1.00	X						0.	0.	0.
CRAIG NICHOLS, M.D. DIRECTOR	1.00	X						0.	0.	0.
BLAINE P. ROLLINS DIRECTOR	1.00	X						0.	0.	0.
AMELIE G. RAMIREZ, DR PHD DIRECTOR	1.00	X						0.	0.	0.
ULMAN, DOUGLAS E PRESIDENT/CEO	40.00			X				321,821.	0.	18,300.

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
PATEL, MONA R EVP, PEOPLE & ORGANIZATIONAL DEVELOP	40.00			X				170,170.	0.	13,767.
MILLER, JOHN A EVP, MISSION	40.00			X				161,498.	0.	14,767.
LEE, GREG D CFO	40.00			X				194,150.	0.	16,055.
HILLS, PHILIPPE G EVP, DEVELOPMENT	40.00			X				304,535.	0.	20,802.
DOUTHIT, MELISSA A EVP, ADVOCACY & ENGAGEMENT	40.00			X				166,170.	0.	11,473.
BINSWANGER, MORGAN L CHIEF OF STAFF	40.00			X				203,720.	0.	7,936.
MCLANE, KATHERINE A HIGHEST COMPENSATED EMPLOYEE	40.00					X		123,446.	0.	8,229.
LOFYE, DAVID C HIGHEST COMPENSATED EMPLOYEE	40.00					X		107,078.	0.	10,886.
KOLENIC, RONALD A HIGHEST COMPENSATED EMPLOYEE	40.00					X		112,950.	0.	12,479.
1b Sub-total ▶								1,865,538.	0.	134,694.
c Total from continuation sheets to Part VII, Section A ▶								220,973.	0.	22,120.
d Total (add lines 1b and 1c) ▶								2,086,511.	0.	156,814.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶ 15

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

(A) Name and business address	(B) Description of services	(C) Compensation
CONNEXTIONS.NET 3600 ECOMMERCE PLACE, ORLANDO, FL 32808	ONLINE STORE FULFILLMENT AND SERV	1,796,236.
GINNY'S COPYING PO BOX 143924, AUSTIN, TX 78714	PRINTING AND COPYING SERVICES	1,426,038.
JOHN SNOW, INC 44 FARNSWORTH ST, BOSTON, MA 02210	PUBLIC HEALTH RESEARCH AND CONSULT	1,051,244.
PATIENT ADVOCATE FOUNDATION 421 BUTLER FARM RD, HAMTON, VA 23666	PATIENT MEDIATION & ARBITRATION SERVICES	727,263.
UNIVERSITY OF PENNSLYVANIA, 3400 SPRUCE ST, 2 DONNER, PHILADELPHIA, PA 19104	FACILITATE THE LIVESTRONG CARE PLAN	605,000.

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶ 28

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JOYNER, JUSTIN SEAN HIGHEST COMPENSATED EMPLOYEE	40.00					X		107,078.	0.	10,886.
ARONSON, TIMOTHY J HIGHEST COMPENSATED EMPLOYEE	40.00					X		113,895.	0.	11,234.
Total to Part VII, Section A, line 1c								220,973.		22,120.

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c	5965120.			
	d Related organizations	1d	6889495.			
	e Government grants (contributions)	1e	844,856.			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	16,025,147.			
	g Noncash contributions included in lines 1a-1f: $ 296,270.					
	h **Total.** Add lines 1a-1f		29,724,618.			
Program Service Revenue		Business Code				
	2a EVENT REVENUE	900099	835,729.	835,729.		
	b EVENT INCENTIVES	900099	-181,771.	-181,771.		
	c					
	d					
	e					
	f All other program service revenue					
	g **Total.** Add lines 2a-2f		653,958.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		1613081.			1,613,081.
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
		(i) Real	(ii) Personal			
	6a Gross Rents					
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
		(i) Securities	(ii) Other			
	7a Gross amount from sales of assets other than inventory	160876.				
	b Less: cost or other basis and sales expenses	115198.				
	c Gain or (loss)	45,678.				
	d Net gain or (loss)		45,678.			45,678.
	8a Gross income from fundraising events (not including $ 5,965,120. of contributions reported on line 1c). See Part IV, line 18	a 1,082,587.				
	b Less: direct expenses	b 2,682,893.				
	c Net income or (loss) from fundraising events		-1,600,306.			-1,600,306.
	9a Gross income from gaming activities. See Part IV, line 19	a				
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities					
	10a Gross sales of inventory, less returns and allowances	a 4,771,137.				
	b Less: cost of goods sold	b 1,860,127.				
	c Net income or (loss) from sales of inventory		2911010.	2911010.		
	Miscellaneous Revenue	Business Code				
	11a LICENSE FEES	900099	8915752.	8915752.		
	b OTHER REVENUE	900099	3,619.	3,708.		-89.
	c					
	d All other revenue					
	e **Total.** Add lines 11a-11d		8919371.			
	12 **Total revenue.** See instructions.		42,267,410.	12,484,428.	0.	58,364.

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) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	8,768,530.	8,768,530.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	289,570.	289,570.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,625,163.	1,110,616.	150,181.	364,366.
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	4,696,322.	3,211,958.	433,751.	1,050,613.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	116,279.	76,394.	11,705.	28,180.
9 Other employee benefits	534,409.	368,618.	46,632.	119,159.
10 Payroll taxes	416,435.	291,825.	33,458.	91,152.
11 Fees for services (non-employees):				
a Management				
b Legal (Schedule O), Pg 10)	732,512.	650,261.	54,834.	27,417.
c Accounting	67,227.	34,816.	8,905.	23,506.
d Lobbying	45,844.	45,844.		
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	11,870.	7,726.	1,231.	2,913.
g Other (Schedule O, Pg 11)	5,587,863.	5,177,561.	161,949.	248,353.
12 Advertising and promotion	2,089,259.	1,722,693.	156,228.	210,338.
13 Office expenses	1,769,208.	1,191,136.	178,911.	399,161.
14 Information technology	1,957,267.	1,372,786.	252,115.	332,366.
15 Royalties				
16 Occupancy	247,139.	170,202.	16,682.	60,255.
17 Travel (Schedule O, Pg 12)	1,519,388.	931,620.	153,794.	433,974.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,050,188.	611,942.	121,095.	317,151.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	554,780.	381,505.	20,335.	152,940.
23 Insurance	56,365.	37,980.	7,404.	10,981.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a MERCHANDISE GIVEAWAY	1,824,943.	1,436,054.	111,899.	276,990.
b MISCELLANEOUS EXPENSES	193,656.	118,071.	18,525.	57,060.
c MEMBERSHIP DUES	82,083.	58,797.	7,125.	16,161.
d	0.			
e SPECIAL EVENT EXPENSES	-2,682,893.	-2,682,893.		
f All other expenses				
25 **Total functional expenses.** Add lines 1 through 24f	31,553,407.	25,383,612.	1,946,759.	4,223,036.
26 **Joint costs.** Check here ▶ ☒ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	238,916.	54,387.	9,076.	175,453.

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	9,364,299.	2	25,288,810.
	3	Pledges and grants receivable, net	6,728,143.	3	8,189,893.
	4	Accounts receivable, net	1,123,866.	4	3,534,629.
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	1,210.	8	3,383,000.
	9	Prepaid expenses and deferred charges	382,479.	9	607,497.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 13,870,658.			
	b	Less: accumulated depreciation — 10b: 2,161,257.	10,297,572.	10c	11,709,401.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11	15,286,154.	12	43,040,473.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets	564,392.	14	564,391.
	15	Other assets. See Part IV, line 11	3,199,979.	15	0.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	46,948,094.	16	96,318,094.
Liabilities	17	Accounts payable and accrued expenses	1,721,934.	17	2,842,779.
	18	Grants payable	3,057,033.	18	2,040,951.
	19	Deferred revenue	201,923.	19	828,803.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	4,980,890.	26	5,712,533.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	35,462,368.	27	75,230,896.
	28	Temporarily restricted net assets	6,504,836.	28	6,984,017.
	29	Permanently restricted net assets		29	8,390,648.
		Organizations that do not follow SFAS 117, check here ▶ [ ] and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	41,967,204.	33	90,605,561.
	34	Total liabilities and net assets/fund balances	46,948,094.	34	96,318,094.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	42,267,410.
2	Total expenses (must equal Part IX, column (A), line 25)	2	31,553,407.
3	Revenue less expenses. Subtract line 2 from line 1	3	10,714,003.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	41,967,204.
5	Other changes in net assets or fund balances (explain in Schedule O) (Schedule O, Pg 13)	5	37,924,354.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	90,605,561.

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c	X	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis			
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 in Schedule O and describe any steps taken to undergo such audits.	3b	X	

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization	**Employer identification number**
LANCE ARMSTRONG FOUNDATION	74-2806618

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

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

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

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

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

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

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

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

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

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An organization that normally receives: (1) more than 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.)

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

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

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Other

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

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

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

		Yes	No
(i)	A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? ..... **11g(i)**		
(ii)	A family member of a person described in (i) above? ..... **11g(ii)**		
(iii)	A 35% controlled entity of a person described in (i) or (ii) above? ..... **11g(iii)**		

h Provide the following information about the supported organization(s).

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	24,102,216.	27,316,914.	31,620,519.	40,996,742.	30,338,946.	154,375,337.
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	24,102,216.	27,316,914.	31,620,519.	40,996,742.	30,338,946.	154,375,337.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4.						154,375,337.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	24,102,216.	27,316,914.	31,620,519.	40,996,742.	30,338,946.	154,375,337.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,371,209.	1,708,676.	417,422.	505,023.	1,613,081.	5,615,411.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)		2,146,554.	30,001.	268,236.	1,082,587.	3,527,378.
11 **Total support.** Add lines 7 through 10						163,518,126.

12 Gross receipts from related activities, etc. (see instructions) ▶ 12 13,730,277.

13 **First five 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 2010 (line 6, column (f) divided by line 11, column (f)) ▶ 14 94.41 %

15 Public support percentage from 2009 Schedule A, Part II, line 14 ▶ 15 95.04 %

16a **33 1/3% support test - 2010.** 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 - 2009.** 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 - 2010.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

b **10% -facts-and-circumstances test - 2009.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

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

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 **Total support** (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2010** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2009** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2010.** 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 - 2009.** 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 ▶ ☐

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **See separate instructions.**

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Open to Public Inspection

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

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

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

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

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

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

Name of organization	Employer identification number
LANCE ARMSTRONG FOUNDATION	74-2806618

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

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

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

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

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

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

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

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

A Check ▶ ☐ if the filing organization belongs to an affiliated group.

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)	22,604.	
b Total lobbying expenditures to influence a legislative body (direct lobbying)	60,224.	
c Total lobbying expenditures (add lines 1a and 1b)	82,828.	
d Other exempt purpose expenditures	31470579.	
e Total exempt purpose expenditures (add lines 1c and 1d)	31553407.	
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.	
g Grassroots nontaxable amount (enter 25% of line 1f)	250,000.	
h Subtract line 1g from line 1a. If zero or less, enter -0-	0.	
i Subtract line 1f from line 1c. If zero or less, enter -0-	0.	

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over $500,000	20% of the amount on line 1e.
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000.
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000.
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000.
Over $17,000,000	$1,000,000.

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☐ **No**

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	**(a)** 2007	**(b)** 2008	**(c)** 2009	**(d)** 2010	**(e)** Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures	512,124.	137,873.	124,466.	82,828.	857,291.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures	40,130.	34,821.	55,049.	22,604.	152,604.

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

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

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

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

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

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

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization

LANCE ARMSTRONG FOUNDATION

Employer identification number

74-2806618

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

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

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

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

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

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

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

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 8/17/06, 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, and enforcing conservation easements during the year ▶ _____

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

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

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

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

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

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

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

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

a Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

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

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

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

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

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

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

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

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

b If "Yes," explain the arrangement in Part XIV 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? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered "Yes" to 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	26,316,513.				
b Contributions	545,035.				
c Net investment earnings, gains, and losses	2,809,031.				
d Grants or scholarships					
e Other expenditures for facilities and programs	6,883.				
f Administrative expenses					
g End of year balance	29,663,696.				

2 Provide the estimated percentage of the year end balance held as:

a Board designated or quasi-endowment ▶ 71.71 %
b Permanent endowment ▶ 28.29 %
c Term endowment ▶ .00 %

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

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

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,958,336.		1,958,336.
b Buildings		9,068,435.	515,081.	8,553,354.
c Leasehold improvements				
d Equipment		2,843,887.	1,646,176.	1,197,711.
e Other				
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				11,709,401.

Part VII Investments - Other Securities. 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) LIMITED PARTNERSHIPS	1,395,570.	END-OF-YEAR MARKET VALUE
(B) TIFF MULTI-ASSET FUND	37,668,670.	END-OF-YEAR MARKET VALUE
(C) TIFF SHORT-TERM FUND	3,976,233.	END-OF-YEAR MARKET VALUE
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶	43,040,473.	

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15.)* ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25.)* ▶	

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	42,267,410.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	31,553,407.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	10,714,003.
4	Net unrealized gains (losses) on investments	4	2,992,647.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	34,931,707.
9	Total adjustments (net). Add lines 4 through 8	9	37,924,354.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	48,638,357.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	52,221,923.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a	2,992,647.		
b	Donated services and use of facilities	2b	368,159.		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV.)	2d	14,883,940.		
e	Add lines **2a** through **2d**			2e	18,244,746.
3	Subtract line **2e** from line **1**			3	33,977,177.
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b	8,290,233.		
c	Add lines **4a** and **4b**			4c	8,290,233.
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	42,267,410.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	34,861,990.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	368,159.		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV.)	2d	11,230,657.		
e	Add lines **2a** through **2d**			2e	11,598,816.
3	Subtract line **2e** from line **1**			3	23,263,174.
4	Amounts included on Form 990, Part IX, line 25, but not on line **1**:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b	8,290,233.		
c	Add lines **4a** and **4b**			4c	8,290,233.
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	31,553,407.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4: ENDOWMENT FUNDS AT THE FOUNDATION ARE FOR THE GENERAL PURPOSES OF THE FOUNDATION AND MAY PROVIDE SUPPORT FOR A SPECIFIC EDUCATIONAL PROGRAM, ASSIST A SPECIFIC NATIONAL ADVOCACY PROGRAM, FUND A PARTICULAR TYPE OF GRANT, OR BE AVAILABLE FOR OTHER PURPOSES AS MUTUALLY AGREED UPON WITH THE DONOR.

PART XI, LINE 8 - OTHER ADJUSTMENTS:

NET ASSETS TRANSFERRED FROM LANCE ARMSTRONG ENDOWMENT UPON

Part XIV Supplemental Information *(continued)*

MERGER 5/31/10	26,316,519.
NET ASSETS TRANSFERRED FROM LANCE ARMSTRONG EVENTS UPON MERGER 5/31/10	1,582,060.
NET ASSETS TRANSFERRED FROM LANCE ARMSTRONG MERCHANDISE UPON MERGER 5/31/10	7,033,128.
TOTAL TO SCHEDULE D, PART XI, LINE 8	34,931,707.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSE	2,682,893.
REVENUE REPORTED BY RELATED ENTITIES PRIOR TO MERGER WITH LAF ON 5/31/10	12,201,047.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	14,883,940.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

EXPENSES FOR BENEFITS TO DONORS	1,400,738.
REVENUES FROM RELATED ENTITIES PRIOR TO MERGER -ELIMINATED FOR CONSOLIDATION	6,889,495.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	8,290,233.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSE	2,682,893.
EXPENSES REPORTED BY RELATED ENTITIES PRIOR TO MERGER WITH LAF ON 5/31/10	8,547,764.
TOTAL TO SCHEDULE D, PART XIII, LINE 2D	11,230,657.

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

EXPENSES FOR BENEFITS TO DONORS	1,400,738.
EXPENSES FROM RELATED ENTITIES PRIOR TO MERGER -ELIMINATED	

Part XIV Supplemental Information *(continued)*

FOR CONSOLIDATION	6,889,495.
TOTAL TO SCHEDULE D, PART XIII, LINE 4B	8,290,233.

PART V, LINE 1A: BEGINNING BALANCE OF ENDOWMENT ASSETS REPRESENTS THE BALANCE TRANSFERRED ON 5/31/2010 FROM A RELATED ENTITY, LANCE ARMSTRONG FOUNDATION ENDOWMENT.

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.**
▶ **Attach to Form 990.** ▶ **See separate instructions.**

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization

LANCE ARMSTRONG FOUNDATION

Employer identification number

74-2806618

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

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of 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 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of grant funds 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 region	**(d)** Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	**(e)** If activity listed in (d) is a program service, describe specific type of service(s) in region	**(f)** Total expenditures for and investments in region
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION	SUPPORT OF NON-COMMUNICABLE DISEASE CAMPAIGN	165,000.
NORTH AMERICA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION	CANCER MEETING SPONSORSHIP	24,570.
EAST ASIA AND THE PACIFIC	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION	2010 WORLD CANCER CONGRESS SPONSORSHIP	100,000.
3 a Sub-total	0	0			289,570.
b Total from continuation sheets to Part I	0	0			0.
c **Totals** (add lines 3a and 3b)	0	0			289,570.

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Check this box if no one recipient received more than $5,000 ▶ ☐
Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	NON-COMMUNICABLE DISEASE SUMMIT	100000.	CHECK	0.		
		NORTH AMERICA	CANCER MEETING SPONSORSHIP	12,070.	CHECK	0.		
		EAST ASIA AND THE PACIFIC	2010 WORLD CANCER CONGRESS SPONSORSHIP	100000.	CHECK	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	NON-COMMUNICABLE DISEASE CIVIL STUDY CAMPAIGN	65,000.	CHECK	0.		
		NORTH AMERICA	CANCER MEETING SPONSORSHIP	12,500.	CHECK	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ 5

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" to Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

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

Part IV Foreign Forms

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

Part V **Supplemental Information**

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

SCHEDULE F, PART I, LINE 2: THE ORGANIZATIONS ARE REQUIRED BY LEGAL AGREEMENT TO USE THE FUNDS ONLY FOR THE PURPOSES STATED WITHIN THE INCORPORATED PROPOSAL, AND ALSO MUST SUBMIT A NARRATIVE REPORT ON USE OF FUNDS UPON COMPLETION OF GRANT TERM. NON COMMUNITY IMPACT PROJECT GRANTEES MUST ALSO SUBMIT A FINANCIAL REPORT ON USE OF FUNDS UPON COMPLETION OF THE GRANT TERM.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No. 1545-0047

2010

Open To Public Inspection

Name of the organization
LANCE ARMSTRONG FOUNDATION

Employer identification number
74-2806618

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

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

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

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

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

(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
Total ▶						

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

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

		(a) Event #1 LIVESTRONG CHALLENGE (event type)	(b) Event #2 (event type)	(c) Other events NONE (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	7,047,707.			7,047,707.
	2 Less: Charitable contributions	5,965,120.			5,965,120.
	3 Gross income (line 1 minus line 2)	1,082,587.			1,082,587.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes	322,438.			322,438.
	6 Rent/facility costs	108,622.			108,622.
	7 Food and beverages	279,760.			279,760.
	8 Entertainment	55.			55.
	9 Other direct expenses	1,972,018.			1,972,018.
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				(2,682,893.)
	11 Net income summary. Combine line 3, column (d), and line 10 ▶				-1,600,306.

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 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. Combine line 1, column d, and line 7 ▶				

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

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

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

13 Indicate the percentage of gaming activity operated in:

a The organization's facility	**13a**	%
b An outside facility	**13b**	%

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

Name ▶ _____

Address ▶ _____

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

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

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

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ $ _____

Description of services provided ▶ _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

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

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

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

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization
LANCE ARMSTRONG FOUNDATION

Employer identification number
74-2806618

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 Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Check this box if no one recipient 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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
A MILTON MILLER MEMORIAL FUND INC 919 ALBANY STREET LOS ANGELES, CA 90015	95-2960607	501(C)(3)	8,000.	0.			COMMUNITY GRANT SUPPLEMENT
ADVOCATE LUTHERAN GENERAL CHILDREN'S HOSPITAL - 1175 DEMPSTER STREET E205 - PARK RIDGE, IL 60068	36-3297360	501(C)(3)	10,000.	0.			COMMUNITY IMPACT PROJECT: SUPERSIBS
ALFRED I. DUPONT HOSPITAL FOR CHILDREN OF THE NEMOURS FOUNDATION - 1600 ROCKLAND RD - WILMINGTON, DE 19803	59-0634433	501(C)(3)	10,000.	0.			COMMUNITY IMPACT PROJECT: SUPERSIBS
AMERICAN CANCER SOCIETY 250 WILLIAMS ST ATLANTA, GA 30303	13-1788491	501(C)(3)	50,000.	0.			COMP CANCER CONTROL
AMERICAN COLLEGE HEALTH ASSOCIATION - 891 ELKRIDGE LANDING RD - LINTHICUM, MD 21090	36-2681352	501(C)(3)	5,000.	0.			ACHA ANNUAL MEETING-SPONSOR
AMERICAN PAIN FOUNDATION 201 N CHARLES STREET STE 710 BALTIMORE, MD 21201	52-2002328	501(C)(3)	10,000.	0.			MEETING SPONSORSHIP

2 Enter total number of section 501(c)(3) and government organizations ..... ▶ 96.

3 Enter total number of other organizations ..... ▶ 0.

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN PSYCHOSOCIAL ONCOLOGY SOCIETY - 2365 HUNTERS WAY - CHARLOTTESVILLE, VA 22911	04-3720121	501(C)(3)	10,000.	0.			MEETING SPONSORSHIP
AMERICAN SOCIETY OF PEDIATRIC HEMATOLOGY/ONCOLOGY - 4700 WEST LAKE AVE - GLENVIEW, IL 60025	11-2564191	501(C)(3)	7,500.	0.			MEETING SPONSORSHIP
AOSW 100 N 20TH ST 4TH FL PHILADELPHIA, PA 19103	13-3736895	501(C)(3)	7,500.	0.			MEETING SPONSORSHIP
ASCO FOUNDATION 2318 MILL RD STE 800 ALEXANDRIA, VA 22314	31-1667995	501(C)(3)	359,610.	0.			MEETING SPONSORSHIP
ATLANTIC HEALTH 475 SOUTH STREET MORRISTOWN, NJ 07960	22-3392808	501(C)(3)	16,000.	0.			COMMUNITY IMPACT PROJECT: CREATIVE CENTER
AVERA MCKEENAN HOSPITAL & UNIVERSITY HEALTH SYSTEM - 1000 E 21ST STREET STE 3400 - SIOUX FALLS, SD 57105	46-0224743	501(C)(3)	16,000.	0.			COMMUNITY IMPACT PROJECT: CREATIVE CENTER
BANNER HEALTH 1111 E MCDOWELL RD PHOENIX, AZ 85006	45-0233470	501(C)(3)	16,000.	0.			COMMUNITY IMPACT PROJECT: CREATIVE CENTER
BLOOD & MARROW TRANSPLANT INFORMATION NETWORK - 2310 SKOKIE VALLEY RD STE 104 - HIGHLAND PARK, IL 60035	36-3774980	501(C)(3)	5,000.	0.			MEETING SPONSORSHIP
CANCER CARE, INC 275 7TH AVE 22ND FL NEW YORK, NY 10001	13-1825919	501(C)(3)	47,015.	0.			COOPERATIVE AGREEMENT

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CANCER SUPPORT COMMUNITY 1050 17TH STREET N.W. WASHINGTON, DC 20036	95-4163931	501(C)(3)	57,650.	0.			MEETING SPONSORSHIP
CANYON RANCH INSTITUTE 8600 E. ROCKCLIFF RD. TUCSON, AZ 85750	82-0566227	501(C)(3)	5,000.	0.			MEETING SPONSORSHIP
CENTER FOR PRACTICAL BIOETHICS, INC - 1111 MAIN STREET 5TH FL - KANSAS CITY, KS 64105	48-0985815	501(C)(3)	25,000.	0.			SPONSORSHIP
CHARITY WATER 200 VARICK ST, SUITE 201 NEW YORK, NY 10014	22-3936753	501(C)(3)	25,000.	0.			COOPERATIVE FUNDING AGREEMENT
CHILDRENS CANCER FUND OF NEW MEXICO - 112 14TH ST - ALBUQUERQUE, AZ 87102	23-7116828	501(C)(3)	10,000.	0.			COMMUNITY IMPACT PROJECT: SUPERSIBS
CHILDREN'S CANCER NETWORK 195 E CAROLINE LANE TEMPE, AZ 85284	20-2129902	501(C)(3)	5,000.	0.			MEETING SPONSORSHIP
CHILDREN'S HEALTHCARE OF ATLANTA FOUNDATION, INC. - 1600 TULLIE CIRCLE - ATLANTA, GA 30329	58-1710601	501(C)(3)	10,000.	0.			COMMUNITY IMPACT PROJECT: SUPERSIBS
CHILDREN'S HOSPITAL MEDICAL CENTER OF AKRON - ONE PERKINS SQUARE - AKRON, OH 44308	34-0714357	501(C)(3)	16,000.	0.			COMMUNITY IMPACT PROJECT: CREATIVE CENTER
CHILDREN'S HOSPITAL OF BOSTON 300 LONGWOOD AVENUE BOSTON, MA 02115	04-2774441	501(C)(3)	16,000.	0.			COMMUNITY IMPACT PROJECT: CREATIVE CENTER

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDREN'S HOSPITAL OF PITTSBURGH OF UPMC - 4401 PENN AVE UNIT 9C 9580 - PITTSBURGH, PA 15224	25-1865744	501(C)(3)	10,000.	0.			COMMUNITY IMPACT PROJECT: SUPERSIBS
CHILDREN'S MERCY HOSPITAL 2401 GILHAM RD KANSAS CITY, KS 64108	44-0605373	501(C)(3)	10,000.	0.			COMMUNITY IMPACT PROJECT: SUPERSIBS
CHILDREN'S NATIONAL MEDICAL CENTER 111 MICHIGAN AVE NW WASHINGTON, DC 20010	52-1640403	501(C)(3)	10,000.	0.			COMMUNITY IMPACT PROJECT: SUPERSIBS
CHILDRENS ONCOLOGY CAMP FOUNDATION PO BOX 7456 MISSOULA, MT 59807	81-0472959	501(C)(3)	5,000.	0.			MEETING SPONSORSHIP
COASTAL AREA HEALTH EDUCATION CENTER - 410 BAYLOR ST - AUSTIN, TX 78703	76-0417449	501(C)(3)	25,000.	0.			ATX PROMOTORA OUTREACH/SUPPORT
COOK CHILDREN'S MEDICAL CENTER 901 7TH AVE STE 220 FORTH WORTH, TX 76104	75-2051646	501(C)(3)	16,000.	0.			COMMUNITY IMPACT PROJECT: CREATIVE CENTER
CREATIVE CENTER 273 BOWERY NEW YORK, NY 10002	11-3204305	501(C)(3)	25,000.	0.			MODEL PROGRAM AWARD
DANA FARBER CANCER INSTITUTE 44 BINNEY STREET, BP431 BOSTON, MA 02115	04-2263040	501(C)(3)	10,000.	0.			MEETING SPONSORSHIP
DELL CHILDREN'S MEDICAL CENTER 4900 MUELLER BLVD AUSTIN, TX 78723	20-0468031	501(C)(3)	155,555.	0.			COOPERATIVE AGREEMENT

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DOCTORS WITHOUT BORDERS 333 7TH AVE 2ND FL NEW YORK, NY 10001	13-3433452	501(C)(3)	125,000.	0.			COOPERATIVE AGREEMENT
DUKE PEDIATRIC BLOOD & MARROW TRANSPLANT SUPPORT PROGRAM - DUMC BOX 3350 - DURHAM, NC 27710	56-0532129	501(C)(3)	10,000.	0.			COMMUNITY IMPACT PROJECT: SUPERSIBS
ENTREPRENEURS FOUNDATION PO BOX 684826 AUSTIN, TX 78768	74-2930535	501(C)(3)	100,000.	0.			HAITI RELIEF
FAMILIAS EN ACCION 2710 NE 14TH AVE PORTLAND, OR 97212	93-1284335	501(C)(3)	5,000.	0.			MEETING SPONSORSHIP
FRED HUTCHINSON CANCER RESEARCH CENTER - 1100 FAIRVIEW AVE N, MAILSTOP J6-500 - SEATTLE, WA 98109	23-7156071	501(C)(3)	358,817.	0.			MEETING SPONSORSHIP
GILDAS CLUB OF SOUTH FLORIDA 119 ROSE DRIVE FORT LAUDERDALE, FL 33316	65-0528626	501(C)(3)	10,000.	0.			COMMUNITY IMPACT PROJECT: SUPERSIBS
GLOBAL HEALTH COUNCIL 1111 19TH ST NW, SUITE 1120 WASHINGTON, DC 20036	52-1048393	501(C)(3)	5,000.	0.			MEETING SPONSORSHIP
H. LEE MOFFITT CANCER CENTER & RESEARCH INST. - 12902 USF MAGNOLIA DRIVE - TAMPA, FL 33612	59-3238636	501(C)(3)	10,000.	0.			MEETING SPONSORSHIP
HARMONY HILL RETREAT CENTER 7362 EAST STATE ROUTE 106 UNION, WA 87592	94-3050703	501(C)(3)	10,000.	0.			COMMUNITY IMPACT PROJECT: SUPERSIBS

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HARVARD GLOBAL EQUITY INITIATIVE 651 HUNTINGTON AVE BOSTON, MA 02115	04-2103580	501(C)(3)	10,000.	0.			MEETING SPONSORSHIP
HARVARD UNIVERSITY P.O. BOX 415649 BOSTON, MA 02241-5649	04-2103580	501(C)(3)	210,000.	0.			COOPERATIVE AGREEMENT
INTERCULTURAL CANCER COUNCIL 1709 DRYDEN ROAD, SUITE 10.25 MC BC HOUSTON, TX 77030	74-1613878	501(C)(3)	50,000.	0.			MEETING SPONSORSHIP
INTERNATIONA PSYCHO-ONCOLOGY SOCIETY, INC. - 154 HANSEN ROAD, SUITE 201 - CHARLOTTESVILLE, VA 22911	13-3345696	501(C)(3)	10,000.	0.			MEETING SPONSORSHIP
JOHNS HOPKINS HOSPITAL, PEDIATRIC ONCOLOGY INPATIENT OUT PATIENT - 5801 SMITH AVE, JHHS LEGAL DEPT. MCAULEY HALL - BALTIMORE, MD 21287	52-0595110	501(C)(3)	26,000.	0.			COMMUNITY IMPACT PROJECT: SUPERSIBS
JONATHAN JACQUES CHILDREN'S CANCER CTR-MILLER CHILDERNS HOSPITAL - 2801 ALTANIC AVENUE - LONG BEACH, CA 80806	95-6105984	501(C)(3)	10,000.	0.			COMMUNITY IMPACT PROJECT: SUPERSIBS
LATINAS CONTRA CANCER 127 N. 4TH STREET SAN JOSE, CA 95112	56-2412069	501(C)(3)	10,000.	0.			MEETING SPONSORSHIP
LEO JENKINS CANCER CENTER 600 MOYE BLVD, BRODY SCHOOL OF MEDI GREENVILLE, NC 27834	23-7138921	501(C)(3)	16,000.	0.			COMMUNITY IMPACT PROJECT: CREATIVE CENTER
MAYO CLINIC ROCHESTER 200 FIRST ST SW ROCHESTER, MN 55905	41-6011702	501(C)(3)	10,000.	0.			COMMUNITY IMPACT PROJECT: SUPERSIBS

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MEMORIAL CHILDREN'S FOUNDATION OF SOUTH BEND - 615 NORTH MICHIGAN STREET, 6TH FL - SOTH BEND, IN 46601	35-1536129	501(C)(3)	10,000.	0.			COMMUNITY IMPACT PROJECT: SUPERSIBS
MEMORIAL SLOAN-KETTERING CANCER CENTER - PO BOX 026338 - NEW YORK, NY 10017	13-1924236	501(C)(3)	226,000.	0.			COOPERATIVE AGREEMENT
MERCY FOUNDATION OF DES MOINES IOWA - 411 LAUREL STREET, SUITE A110 - DES MOINES, IA 50314	23-7358794	501(C)(3)	16,000.	0.			COMMUNITY IMPACT PROJECT: CREATIVE CENTER
MOUNT SINAI HOSPITAL 19 E. 98TH ST, BOX 1252 NEW YORK, NY 10029	13-1624096	501(C)(3)	66,000.	0.			COOPERATIVE AGREEMENT
NATIONAL PALLIATIVE CARE RESEARCH CENTER - MOUNT SINAI SCHOOL OF MED DEPT OF GERIATICS & PALLIATIVE, PO BOX 1070 NEW YO - NEW YORK, NY	13-6171197	501(C)(3)	10,000.	0.			MEETING SPONSORSHIP
NATIONWIDE CHILDRENS HOSPITAL 700 CHILDREN'S DRIVE COLUMBUS, OH 4 COLUMBUS, OH 43205	31-6056230	501(C)(3)	16,000.	0.			COMMUNITY IMPACT PROJECT: CREATIVE CENTER
NEVADA CILDHOOD CANCER FOUNDATION 6070 S. EASTERN AVENUE, STE 200 LAS VEGAS, NV 89119 - LAS VEGAS, NV 89119	04-3632553	501(C)(3)	10,000.	0.			COMMUNITY IMPACT PROJECT: SUPERSIBS
NURSE ONCOLOGY EDUCATION PROGRAM 7600 BURNET ROAD AUSTIN, TX 78757 AUSTIN, TX 78757	74-2239886	501(C)(3)	26,152.	0.			COOPERATIVE AGREEMENT
OHIO STATE UNIVERSITY RESEARCH FOUNDATION - 1960 KENNY ROAD, 2ND FLOOR COLUMBUS, OH 43210 - COLUMBUS, OH 43210	31-6401599	501(C)(3)	136,019.	0.			SURVIVORSHIP CENTER

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OREGON HEALTH & SCIENCE UNIVERSITY 3181 SW SAM JACKSON PARK ROAD PORTLAND, OR 97239	93-1176109	501(C)(3)	75,000.	0.			COOPERATIVE ARGEEMENT
OVARIAN CANCER NATIONAL ALLIANCE 910 17TH ST NW, SUITE 1190 WASHINGTON, DC 20006	31-1581756	501(C)(3)	5,000.	0.			MEETING SPONSORSHIP
PARTNERS IN HEALTH 641 HUNTINGTON AVE BOSTON, MA 02115	04-3567502	501(C)(3)	458,330.	0.			COOPERATIVE ARGEEMENT
PATIENT ADVOCATE FOUNDATION 700 THIMBLE SHOALS BLVD, SUITE 200 NEWPORT NEWS, VA 23606	54-1806317	501(C)(3)	5,000.	0.			MEETING SPONSORSHIP
PHOENIX CHILDREN'S HOSPITAL CENTER FOR CANCER & BLOOD DISORDERS - 2929 EAST CAMELBACK ROAD, SUITE 122 - PHOENIX, AZ 85016	74-2421549	501(C)(3)	10,000.	0.			COMMUNITY IMPACT PROJECT: SUPERSIBS
PROVIDENCE SACRED HEART MEDICAL CENTER FOR CHILDREN'S HOSPITAL - 101 WEST 8TH AVENUE SPOKANE, WA 99204 - SPOKANE, WA 99204	32-0014330	501(C)(3)	16,000.	0.			COMMUNITY IMPACT PROJECT: CREATIVE CENTER
RAND 1776 MAIN STREET SANTA MONICA, CA 9 SANTA MONICA, CA 90401	95-1958142	501(C)(3)	469,498.	0.			COOPERATIVE AGREEMENT
REGENTS OF THE UNIVERSITY OF CALIFORNIA - LOS ANGELES - 405 HILGARD AVENUE BOX 951432, 1125 MURPHY HALL LOS ANGELES, CA 90095	95-6006143	501(C)(3)	250,000.	0.			SURVIVORSHIP CENTER
REGENTS OF THE UNIVERSITY OF COLORADO - 1600 PIERCE ST DENVER, CO 80214 - DENVER, CO 80214	84-6000555	501(C)(3)	25,000.	0.			SURVIVORSHIP CENTER

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RILEY CHILDREN'S FOUNDATION 30 SOUTH MERIDIAN STREET, SUITE 200 INDIANAPOLIS, IN 46204 - INDIANAPOLIS, I	35-0868147	501(C)(3)	10,000.	0.			COMMUNITY IMPACT PROJECT: SUPERSIBS
RONALD MCDONALD HOUSE CHARITIES OF THE CAPITAL REGION, INC - 139 SOUTH LAKE AVENUE - ALBANY, NY 12208	22-2356004	501(C)(3)	10,000.	0.			COMMUNITY IMPACT PROJECT: SUPERSIBS
SAINT ALPHONSUS CANCER CARE CENTER 1055 NORTH CURTIS ROAD BOISE, ID 83706	82-6009027	501(C)(3)	16,000.	0.			COMMUNITY IMPACT PROJECT: CREATIVE CENTER
SEATTLE CHILDREN'S HOSPITAL FOUNDATION - P.O. BOX 5371 MAILSTOP S-200 - SEATTLE, WA 98150	91-1156519	501(C)(3)	16,000.	0.			COMMUNITY IMPACT PROJECT: CREATIVE CENTER
SGIM SOCIETY OF GENERAL INTERNAL MEDICINE - 1500 KING STREET, STE 303 - ALEXANDRIA, VA 22314	23-2532466	501(C)(3)	10,000.	0.			MEETING SPONSORSHIP
SITEMAN CANCER CENTER 660 SOUTH EUCLID AVENUE CAMPUS BOX ST. LOUIS, MO 63110	43-0653611	501(C)(3)	16,000.	0.			COMMUNITY IMPACT PROJECT: CREATIVE CENTER
ST LUKES HOSPITAL & HEALTH NETWORK 801 OSTRUM STRRET BETHLEHAM, PA 180 BETHLEHAM, PA 18015	22-3026263	501(C)(3)	16,000.	0.			COMMUNITY IMPACT PROJECT: CREATIVE CENTER
ST. LOUIS CHILDREN'S HOSPITAL FOUNDATION - ONE CHILDREN'S PLACE ST. LOUIS, MO 63110 - ST. LOUIS, MO 63110	43-1626863	501(C)(3)	10,000.	0.			COMMUNITY IMPACT PROJECT: SUPERSIBS
SUPER SIBS! 660 N. FIRST BANK DRIVE PALATINE, P PALATINE, IL 60067	32-0038863	501(C)(3)	97,000.	0.			E. LEE WALKER AWARD

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE CHILDREN'S HOSPITAL 13123 EAST 16TH AVENUE, B045 AURORA, CO 80045 - AURORA, CA 80045	84-0166760	501(C)(3)	10,000.	0.			COMMUNITY IMPACT PROJECT: SUPERSIBS
THE CHILDREN'S HOSPITAL OF PHILADELPHIA FOUNDATION - 34TH STREET & CIVIC BLVD, DEVELOPMENT CTR PHILADELPHIA, PA 19104 -	23-2237932	501(C)(3)	26,000.	0.			COMMUNITY IMPACT PROJECT: SUPERSIBS
THE CREATIVE CENTER 273 BOWERY NEW YORK, NY 10002	11-3204305	501(C)(3)	82,000.	0.			E. LEE WALKER AWARD
THE PATRICK DEMPSEY CANCER CENTER FOR CANCER HOPE & HEALING - 10 HIGH STREET - LEWISTON, ME 04240	01-0211404	501(C)(3)	10,000.	0.			COMMUNITY IMPACT PROJECT: SUPERSIBS
TREASURE VALLEY YMCA CALDWELL BRANCH - 1050 WEST STATE STREET - BOISE, ID 83702	82-0200908	501(C)(3)	10,000.	0.			COMMUNITY IMPACT PROJECT: SUPERSIBS
UNC-LINEBERGER COMPREHENSIVE CANCER CARE - 1700 MARTIN LUTHER KING JR. BLVD UNC-CH CB 7294, ROOM 320 - CHAPEL HILL, NC 27599	56-6001393	501(C)(3)	16,000.	0.			COMMUNITY IMPACT PROJECT: CREATIVE CENTER
UNITED ARTS OF CENTRAL FLORIDA, INC - 2450 MAITLAND CENTER PARKWAY, SUITE 201 - MAITLAND, FL 32751	59-1166446	501(C)(3)	16,000.	0.			COMMUNITY IMPACT PROJECT: CREATIVE CENTER
UNIVERSITY OF COLORADO 13001 EAST 17TH AVE. MS F434 AURORA, CO 80045	84-6000555	501(C)(3)	289,054.	0.			SURVIVORSHIP CENTER
UNIVERSITY OF FLORIDA PROTON THERAPY INSTITUTE - 2015 NORTH JEFFERSON STREET - JACKSONVILLE, FL 32206	01-0554709	501(C)(3)	16,000.	0.			COMMUNITY IMPACT PROJECT: CREATIVE CENTER

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF NORTH CAROLINA, CHAPLE HILL - 104 AIRPORT DRIVE STE #2200 CB - CHAPEL HILL, NC 27599	56-6001393	501(C)(3)	315,517.	0.			CARE PLAN STUDY
UNIVERSITY OF PENNSYLVANIA FRANKLIN BLDG, 3451 WALNUT ST, P221 PHILADELPHIA, PA 19104	23-1352685	501(C)(3)	658,047.	0.			SURVIVORSHIP CENTER
UNIVERSITY OF WISCONSIN 21 N PARK STREET, SUITE 6401 MADISON, WI 53715	39-6006492	501(C)(3)	900,000.	0.			COOPERATIVE AGREEMENT
UT HEALTH SCIENCE CENTER AT SAN ANTONIO - 7979 WURZBACH ROAD - SAN ANTONIO, TX 78229-3900	74-1587488	501(C)(3)	16,000.	0.			COMMUNITY IMPACT PROJECT: CREATIVE CENTER
UT MD ANDERSON CANCER CENTER PO BOX 4486 HOUSTON, TX 77210	74-6001118	501(C)(3)	10,000.	0.			COMMUNITY IMPACT PROJECT: SUPERSIBS
VISION Y COMPROMISO 2536 EDWARDS AVENUE EL CERRITO, CA 94530	32-0071651	501(C)(3)	5,000.	0.			8TH ANNUAL PROMATORAS CHW CONF
YMCA 101 NORTH WACKER DR CHICAGO, IL 60606	36-3253696	501(C)(3)	424,555.	0.			LIVESTRONG AT THE YMCA
YMCA OF GREATER RICHMOND 2244 JOHN ROLF PARKWAY HENRICO, VA 23233	54-0505986	501(C)(3)	10,000.	0.			COMMUNITY IMPACT PROJECT: SUPERSIBS
YOUNG SURVIVAL COALITION 61 BROADWAY, SUITE 2235 NEW YORK, NY 10006	13-4057685	501(C)(3)	5,000.	0.			MEETING SPONSORSHIP

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

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

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2: THE ORGANIZATIONS ARE REQUIRED BY LEGAL AGREEMENT TO USE THE FUNDS ONLY FOR THE PURPOSES STATED WITHIN THE INCORPORATED PROPOSAL, AND ALSO MUST SUBMIT A NARRATIVE AND FINANCIAL REPORT ON USE OF FUNDS UPON COMPLETION OF GRANT TERM.

SCHEDULE J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 23.**

▶ **Attach to Form 990.** ▶ **See separate instructions.**

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization

LANCE ARMSTRONG FOUNDATION

Employer identification number

74-2806618

Part I Questions Regarding Compensation

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

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

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 ULMAN, DOUGLAS E	(i)	251,821.	20,000.	50,000.	10,120.	8,180.	340,121.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 PATEL, MONA R	(i)	155,170.	15,000.	0.	6,200.	7,567.	183,937.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3 MILLER, JOHN A	(i)	147,998.	13,500.	0.	6,200.	8,567.	176,265.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
4 LEE, GREG D	(i)	174,150.	15,000.	5,000.	7,218.	8,837.	210,205.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
5 HILLS, PHILIPPE G	(i)	291,035.	13,500.	0.	11,628.	9,174.	325,337.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
6 DOUTHIT, MELISSA A	(i)	152,670.	13,500.	0.	3,906.	7,567.	177,643.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
7 BINSWANGER, MORGAN L	(i)	188,720.	15,000.	0.	0.	7,936.	211,656.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 4B: DOUGLAS ULMAN HAS A 457(F) DEFERRED COMPENSATION PLAN. IN 2010, $33,500 OF COMPENSATION WAS DEFERRED UNDER THE PLAN.

PART I, LINE 7: ALL STAFF WERE ELIGIBLE FOR PARTICIPATION IN A MANAGEMENT BY OBJECTIVE INCENTIVE PLAN, WHEREBY THEY WERE ELIGIBLE TO EARN A BONUS IF THEY ACHIEVED SPECIFIC PERFORMANCE OBJECTIVES.

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

▶ **Attach to Form 990.**

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization

LANCE ARMSTRONG FOUNDATION

Employer identification number

74-2806618

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods	X		25,000.	FAIR MARKET VALUE
6	Cars and other vehicles	X	1	1,500.	FAIR MARKET VALUE
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded				
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory	X	6	130,073.	FAIR MARKET VALUE
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (TECHNOLOGY)	X	5	54,313.	FAIR MARKET VALUE
26	Other ▶ (CYCLING ITEMS)	X	3	43,100.	FAIR MARKET VALUE
27	Other ▶ (MISC ITEMS)	X	2	27,283.	FAIR MARKET VALUE
28	Other ▶ (FLOWERS)	X	1	15,000.	FAIR MARKET VALUE

29	Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29	0

			Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		X
b	If "Yes," describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	X	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		X
b	If "Yes," describe in Part II.			
33	If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization

LANCE ARMSTRONG FOUNDATION

Employer identification number

74-2806618

Form 990, Part I, Line 1, Mission and Most Significant Activities:

The Lance Armstrong Foundation provides a broad menu of mission related programs centered on the Cancer community. These include a comprehensive offering of Navigation Services to cancer patients, their friends, families, and caregivers; delivery of cancer survivorship education programs; information, referral, and support services; and grants for survivorship research, community programs, and survivorship centers at academic medical institutions. The foundation is committed to ensuring that each and every individual affected by cancer has the opportunity to achieve the highest quality of life possible.

Form 990, Part III, Line 1, Description of the Organization's Mission:

The Lance Armstrong Foundation provides a broad menu of mission related programs centered on the Cancer community. These include a comprehensive offering of Navigation Services to cancer patients, their friends, families, and caregivers; delivery of cancer survivorship education programs; information, referral, and support services; and grants for survivorship research, community programs, and survivorship centers at academic medical institutions. The foundation is committed to ensuring that each and every individual affected by cancer has the opportunity to achieve the highest quality of life possible.

Form 990, Part III, Line 4A, Program Service Accomplishments:

The foundation continues to provide and expanded menu of mission related programs including a comprehensive offering of Navigation Services, delivery of cancer education, information, referral, and support services; and grants for community programs, research, and survivorship centers at academic medical institutions. The foundation is committed to ensuring that each and every individual affected by cancer has the opportunity to achieve the highest quality of life possible. To that end, the foundation works tirelessly to ensure that the issues affecting cancer survivorship are addressed by organizations and entities around the nation so that the needs of the approximately 12 million cancer survivors in the United States are met. The Mission Department funds a wide range of initiatives across the country in partnership with leading academic, community, and advocacy organizations to ensure it is fulfilling its mission.

Name of the organization: LANCE ARMSTRONG FOUNDATION

Employer identification number: 74-2806618

Grants and Partnerships

Community Programs: Through Community Programs, the Foundation funds initiatives that address cancer survivorship issues. The relationship between the Foundation and an organization funded through Community Programs begins with a grant of financial support through a competitive grant cycle, but goes on to encompass much more through technical and capacity-building support. Throughout 2010, Community Programs continued funding of over one dozen multiyear grants, began funding of 80 one year replication awards through our Community Impact Project, and supported thirty-two cancer focused conferences.

The Lance Armstrong Foundation's Community Impact Project offered the opportunity to replicate evidence based programs in communities across the United States. The Lance Armstrong Foundation selected three programs for replication for our first year, which were:

- Cancer Transitions, a six week post treatment course that helps adapt survivors to life after cancer. (currently replicating in 33 cities)
- The Creative Center, providing artists to hospitals and cancer centers for infusion suites, bedside art programs, and BMT units. The program is shown to lessen depression, loneliness, and anxiety. (currently replicating in 22 cities)
- SuperSibs!, a pediatric centered program offering support to the siblings of pediatric oncology patients. (currently replicating in 25 cities).

These three programs will offer psychosocial centered support to an estimated 31,000 people. Sites for replication were chosen based on an online voting process, the first of its kind at the Lance Armstrong Foundation, where our constituents were able to vote for nearly 200 programs vying for the awards; over a two week period over 334,000 votes were cast. In addition to funding programs and offering grants, the Community Program also manages certain aspects of engagement within the organization and external organizations. In 2010, the program engaged over 500 hospitals and cancer centers with our mission and resources, along with nearly 300 cancer focused community based organizations.

LIVESTRONG at the YMCA: The Foundation and the YMCA have partnered to create LIVESTRONG at the YMCA, an evidence-based physical activity and wellness program for people affected by cancer. The program is currently available in 40 cities and over 100 branches around the country. Since initiation of the program, over 3,600 individuals have been served.

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In addition to further dissemination of the LIVESTRONG at the YMCA program, the Lance Armstrong Foundation, committed to spread the program to 40 additional cities in 2011 and to develop additional program opportunities for YMCA sites. These programs include development of a childcare program, implementation of LIVESTRONG at School within YMCA after school and summer programs and exploration into culturally-competent strategies for a Hispanic/Latino version of LIVESTRONG at School.

Hispanic/Latino Outreach and Education:

In 2010, the Lance Armstrong Foundation continued to provide culturally and linguistically appropriate information to Hispanic/Latinos affected by cancer. To do this, the Lance Armstrong Foundation convened our existing Hispanic/Latino expert panel to develop a three-year strategic plan for serving Hispanic/Latinos affected by cancer. We also continued to develop new online resources including new videos and a cancer dictionary application for iPhone users. In 2010, the Lance Armstrong Foundation served over 480 Spanish-speakers through LIVESTRONG Navigation Services and disseminated over 26,600 Spanish-language resources.

The Lance Armstrong Foundation also continued to expand our network of LIVESTRONG certified Promotores through partnerships with local and national community-based organizations. In 2010, the Lance Armstrong Foundation trained over 350 Promotores nationally with over 100% reporting an increased confidence in their ability to serve cancer survivors in their community.

LIVESTRONG at School:

The LIVESTRONG at School curriculum offers online lessons for grades K–12 to help school professionals talk with students about cancer in a way that is age-appropriate, inspiring and empowering. We have engaged approximately 1.5 million students in the fight against cancer and have reached approximately 80,000 teachers through our partnership with Scholastic, Inc. In 2010, we developed LIVESTRONG Day collateral to engage with schools around a global day of action; and we developed new high school lessons, including DVD's of young adult survivors sharing their stories, encouraging students and schools to get involved in the fight against cancer. Our work to support educators and students in the fight against cancer has been published in Cure, LIVESTRONG Quarterly and the Journal of Cancer Education

Research Program:

The opportunity to support research that is patient-centered remains a high priority of the Foundation. While the Foundation did not fund new research grants in 2010, it continued to monitor and fund 45 active grants from past grant cycles that address key recommendations from the National Action Plan on Cancer Survivorship & the reports of the Adolescent and Young Adult Oncology Progress Review Group.

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Our research program is unique in its position to hear – and respond to – the voices of people affected by cancer from several levels, whether from constituents who follow us online, who join us at our public events, or from those who simply call us, looking for help and support. In 2010, we made progress with research on several fronts. The Foundation created and promoted, in partnership with Parade magazine the results of the first LIVESTRONG Survey and launched an update version of the LIVESTRONG survey to understand the experiences of all people affected by cancer – those newly diagnosed, in treatment, post-treatment, and their families and loved ones. When the survey closes in spring 2011, the results will be used to directly inform the services the Foundation provides through our our navigation services. Additionally, the Foundation will use the survey results to advocate for continued health policy changes to support people affected by cancer across their entire cancer journey. Also in 2010, the Foundation surveyed more than 8,000 people affected by cancer about their preferences regarding electronic health information exchange and will release a report on the findings in early 2011.

LIVESTRONG Survivorship Center of Excellence Network:

The Foundation has supported the work of survivorship centers since 2000. These centers historically worked autonomously and served both pediatric and adult survivors. In 2005, the Foundation launched a new initiative to create and maintain a network of survivorship centers to foster collaboration among centers and further the impact on cancer survivorship. Only pre-selected NCI-designated Comprehensive Cancer Centers are invited to apply for funding and each must collaborate with community-based hospitals.

Network members:

- Abramson Cancer Center, University of Pennsylvania - Philadelphia, PA
- Dana-Farber Cancer Institute - Boston, MA
- Fred Hutchinson Cancer Research Center, Seattle, WA
- Memorial Sloan-Kettering, New York City, NY
- Ohio State University Cancer Institute James Cancer Hospital and Solove Research Institute - Columbus, OH
- UCLA's Jonsson Comprehensive Cancer Center, Los Angeles, CA
- University of Colorado Cancer Center, Denver, CO
- University of North Carolina Lineberger Comprehensive Cancer Center - Chapel Hill, NC

Non-network centers receiving funding in 2010:

- Dell Children's Medical Center of Central Texas- Austin, TX

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LIVESTRONG Young Adult Alliance:

Each year, nearly 70,000 young adults between the ages of 15 and 39 are diagnosed with cancer. In contrast to those younger and older, survival rates for young adults have not increased since 1975, possibly due to factors such as lack of insurance, less participation in clinic and delayed diagnoses.

In addition, young survivors often are caught between the worlds of pediatric and adult oncology. They may face a variety of unique long term effects that will need to be addressed over their lifetimes, such as: re-entry into school or the workforce, insurance coverage issues, infertility as a result of treatment, neurocognitive effects or secondary malignancies.

The LIVESTRONG Young Adult Alliance (the "Alliance") is a coalition of 160 organizations (medical institutions, non-profit organizations, and government agencies) with the goal to improve the survival rates and quality of of life for young adults with cancer between the ages of 15 and 40.

In 2010, the Standards of Care Task Force published two papers in the Journal of Clinical Oncology:

1. Adolescent and Young Adult Oncology Training for Health Professionals: A Position Statement
2. Quality Cancer Care for Adolescents and Young Adults: A Position Statement

An awareness campaign, BREAK CANCER was launched in November 2010 to raise awareness about young adults and cancer by creating and breaking world records. By the end of 2010, dozens of records had been set and we expect the campaign to gain more momentum in in the coming months/year.

Through the Research Task Force, a cohort study was funded in three institutions to learn more about the effects of cancer and its treatment on the adolescent and young adult population. With the information gained from this study, it is hoped that interventions can be designed and used to improve the quality of life during and after treatment, and the survival of adolescents and young adults with cancer.

The Research Task Force also looked at the current availability of clinical trials for young adults compared to the incidence rates of cancer diagnosis in that population to identify the gap between available trials and diagnosis.

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Professional Education

Continuing Nursing Education – In collaboration with the Nurse Oncology Education Program (NOEP) and Nurse.com, the Lance Armstrong Foundation created/is creating free, video continuing nursing education (CNE) opportunity for nurses in all fields of of practice. The Adolescent and Young Adult Cancer CNE focuses on the unique physical, emotional and practical needs of the 15—39 age group and will help address the special problems faced by this patient group that has historically been overlooked. The CNEs are divided into topics, or "modules," which include: delayed diagnosis, access to care, knowledge gap, emotional needs, and practical needs.

Continuing Medical Education – The American Society of Clinical Oncology (ASCO) Foundation and the Lance Armstrong Foundation have collaborated to launch Focus Under Forty, an education curriculum for physicians designed to build awareness of and provide training to address the challenges of treating adolescent and young adult patients with cancer. Focus Under Forty is designed to help physicians better understand the the unique challenges regarding support, diagnosis, treatment and fertility of cancer patients ages 15 to 39. In many cases, this group of patients is challenged with inadequate or no health coverage. There can also be a delay in diagnosis or referrals if if cancer is overlooked as a possibility due to the age of the the patient. This age range of people living with cancer may also have physical and psychosocial concerns, including knowledge about fertility preservation options and relationship challenges.

Direct Services

LIVESTRONG Cancer Navigation Services - LIVESTRONG Cancer Navigation Services are for anyone affected by cancer. At any point in a survivor's or caregiver's cancer experience, the Foundation provides free professional support with:

- Emotional concerns and accessing local resources
- Financial, insurance and job concerns
- Clinical trials and new treatments in development
- Fertility preservation information and assistance
- Learning more about cancer and treatment options
- Connections to peer support

In December 2010, the Foundation opened the LIVESTRONG Cancer Navigation Center (The Center), adding in-person cancer support services to our existing direct service framework on the phone and online. Research was conducted and community forums were held in

Research was conducted and community forums were held in the summer of 2010 to inform the services that The Center will provide to meet

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the needs of the Austin community and five surrounding counties.

In addition to direct support with cancer needs, LIVESTRONG Navigation Services provide educational resources that help survivors learn learn more about this disease. It helps survivors understand their diagnosis and treatment options. And for healthcare professionals, the Foundation provides the information, tools and training opportunities to help them effectively care for cancer patients.

Throughout 2010, the Foundation touched over 608,000 lives of individuals affected by cancer. This report includes information about the Foundation's reach to people affected by cancer through the LIVESTRONG Cancer Navigation Services as well as all print and online educational materials. A few highlights for 2010 include:

• The Foundation saved clients approximately $2.4 million through negotiating discounts, maximizing available medication programs and and overturning denials from insurance companies.

• The Foundation connected more than 11,000 individuals to over 38,000 services.

• The Foundation distributed more than 195,000 Living After Cancer Treatment brochures and LIVESTRONG Guidebooks.

Advocacy, Government Relations and Health Policy

LIVESTRONG Day - Each year, the Foundation invites supporters to participate in LIVESTRONG Day, a one-day initiative to unite people affected by cancer. The goal is to raise awareness and funds for the cancer fight and to show support for people affected by cancer with their local community events.

In 2010, more than 1000 LIVESTRONG Day events where held by supporters across the globe. Close to 10,000 committed to wear yellow with Lance on LIVESTRONG Day and encouraged friends, family, neighbors and coworkers to do the same. Here are a few examples:

• Wrote letters to the editors of local newspapers about the issues cancer survivors face and the need to make cancer a global priority.

• Told their stories to colleagues, community organizations and groups of friends and family.

• Held candlelight vigils in honor of cancer survivors in their local communities.

• Had a local priest, minister or rabbi hold a survivorship spiritual ceremony at a local place of worship.

• Hosted a LIVESTRONG Day event at their school and educated students about cancer awareness

• Raised funds for LIVESTRONG and/or raised awareness about our navigation services

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LIVESTRONG Day events are unique to the location; the day is about doing something to make a difference in the fight against cancer in a way that is meaningful and comfortable to each community.

Advocacy Coalitions - The Foundation also participates as a member of two cancer advocacy coalitions: the One Voice Against Cancer ("OVAC") coalition and the Cancer Leadership Council ("CLC") in Washington, D.C. The President's Cancer Panel, of which Mr. Armstrong is a member, released their yearly report focusing on translational research.

Policy and Government Relations - The primary focus of 2010 was ensuring the federal health care reform legislation incorporated items that were meaningful for those affected by cancer. The Foundation worked with members of Congress and the White House for inclusion of provisions that would alter health insurance in the following ways:

- Remove pre-existing conditions as a discriminatory practice.
- Remove caps on lifetime limits for coverage.
- Ensure routine care for those enrolled in clinical trials was covered.
- Made it possible for young adults to stay on their parent's insurance until age 26.

International Program

In 2010, the Lance Armstrong Foundation entered a new phase of our international work, launching two innovative pilot projects in South Africa. These projects continue to focus on key goals of our Global Cancer Campaign of empowering cancer survivor survivors and ending the stigma associated with cancer.

Anti-Stigma Initiative

Venturing into the vast, untouched issue of cancer stigma, we launched our Anti-Stigma Initiative nationally in South Africa, with partner, John Snow Inc. Through a mass media campaign which shares the stories of South African cancer survivors, and a focused educational outreach effort in targeted communities, the Initiative is beginning to successfully change myths and misperceptions around cancer and encourage a dialogue about the disease, breaking a silence that has isolated those suffering from cancer and shrouded communities in fear.

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Since the project began only nine months ago, we have:

• Reached over 1.4 million people with documentary survivor stories through airing them in 471 clinics nationwide; and reached over 2

2 million people per week over nine weeks to date, with the survivor story public service announcements on the radio.

• Launched an SMS campaign to 30,000 cell phone users with a 10% response

• Trained over 150 community leaders

• Launched a door-to-door educational campaign reaching over 11,000 people with information on cancer and stigma, in only two months

• Held 4 large special events in 3 different communities countrywide with an overall attendance of about 4,000 people

Survivor Empowerment Initiative:

In an effort to enact change at the policy level in South Africa, the Lance Armstrong Foundation in collaboration with American Cancer Society, launched the Survivor Empowerment Initiative, which empowers cancer survivors to become cancer control advocates & prepares cancer organizations to plan and host a Survivor Forum. In May of 2011, after one year of training and planning with leadership of local NGOs, the South African Survivor Forum will occur in Cape Town. Bringing together survivors, media, NGOs, advocates, & representatives from the health sector and government, the Forum will give a voice to cancer survivors and the issues they face, and if successful, will not only launch a national call to action on cancer in South Africa, but will jumpstart a survivor advocacy movement in the country, potentially impacting cancer control policy at a national level, improving quality of life for people affected by cancer in communities around the country.

In 2011, we are bringing both of these projects to Mexico, to not only test each pilot in a significantly different cultural context, but to begin to shape each into a global model which can be adapted and replicated across the world to transform the way communities, organizations, and governments fight cancer.

Note on Organizational Structure

Effective May 31, 2010, the operations of the three supporting organizations - Lance Armstrong Foundation Events (EIN = 20-4232365), Lance Armstrong Foundation Merchandise (EIN = 20-4232261), and Lance Armstrong Foundation Endowment (EIN = 20-0208394) were merged into the Lance Armstrong Foundation (EIN = 74-2806618), a non-profit organization under IRC Section 501 (c) (3). The function and activities of these supporting organizations will be continued and carried on by the Lance Armstrong Foundation in the future.

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From 990, Part VI, Section B, Line 11:

Foundation staff are responsible for compiling and preparing the financial statements that are then audited by an outside firm. Upon completion of the audit, an outside tax firm is engaged to prepare the Annual Form 990 tax return. Before filing, the return is reviewed in detail by the Chief Financial Officer. The draft tax return is then provided to the Finance Committee for their review and comment. As a final step, the completed return is provided to the governing body prior to filing.

Form 990, Part VI, Section B, Line 12c:

Annually we require Board Members to complete a comprehensive and detailed conflicts of interest disclosure statement that identifies any interests that could give rise to conflicts.

Form 990, Part VI, Line 15:

The Executive Committee reviews comparative compensation information for the President & Officers; sets appropriate compensation.

Form 990, Part VI, Line 17, List of States Receiving a Copy of the Federal Form 990:

Alabama, Alaska, Arizona, California, Colorado, Connecticut, Florida, Georgia, Illinois, Kentucky, Maine, Maryland, Massachusetts, Michigan, Minnesota, Kansas, New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, Tennessee, Utah, Washington, West Virginia, and Wisconsin.

Form 990, Part VI, Section C, Line 19:

Financial Statements are posted and made available to the public on the foundation's website. All other governing documents and policies are available upon request.

Form 990, Par IX, Line 11B -- Legal Fee Detail:

Legal Fees - Program and General	$264,177
Legal Fees - Domestic Trademark Infringement	$308,465
Legal Fees - Int'l Trademark Infringement	$159,870
Total Legal Fees	$732,512

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From 990, Par IX, Line 11G -- Detail - Other Fees for Services:

International Anti-Stigma Campaigns	$1,051,241	Fertility Preservation Initiatives	$103,083
Financial Assistance Advice for Cancer Survivors	$727,263	Survivorship Centers of Excellence Network	$72,053
Livestrong at School Outreach	$629,961	Caging Services	$46,946
Event Production Services	$444,688	Brand Awareness and Assessment	$40,947
Merchandise Fullfillment & Customer Service	$248,440	Search Engine Optimization	$40,265
Advocacy and Engagement Activities	$465,985	Navigation Center Programs & Initiatives	$34,950
Hispanic / Latino Outreach	$233,866	Dashboard Software Consultants	$23,960
Clinical Trials Matching Services	$157,069	Event Permits, Logistics, and Security	$64,521
Young Adult Initiatives and Programs	$369,406	Payroll Services	$18,424
Emotional Support for Cancer Survivors	$122,503	IT Consultant	$17,267
Cancer Guide Application Development	$149,325	Charitable State Registrations	$14,253
Mobile Merchandise Consultants	$115,000	Communications Consultant	$13,506
Communications and Public Relations Services	$176,228	Accounting Consultant	$8,313
Global Awareness Initiatives	$75,147	Development Consultant	$25,484
Website Redesign and Optimization	$83,821	Human Resource Consultant	$7,000
		Unemployment Benefits	$6,948
		Total - Other Fees for Services	$5,587,863

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From 990, Par IX, Line 17 -- Detail - Travel:

Airfare	$291,813	Vehicle Rental	$36,848	Transit Fees	$16,245
Lodging	$237,485	Cab Fare	$21,243	Mileage Reimbursements	$6,729
Meals	$65,836	Parking Fees	$10,568	Non-Staff Travel***	$832,621
				Total Travel Expenses	$1,519,388

***Non-Staff Travel - Represents travel costs associated with cancer survivors, constituents and industry experts coming together to build, evaluate, and model successful cancer prevention, survivorship, health, and wellness programs.

Travel Detail by Activity:

Accounting	$6,644	Advocacy	$45,502	Annual Giving	$1,857
Board Mtgs	$15,201	Business Development	$6,473	Communications	$16,627
Community Engage	$1,955	Const. Relations	$122	Core Leadership	$89,362
Corp Giving	$20,037	Corp P/S	$155	Dev Communications	$15,312
Dev Services	$6,725	Fundraising Events	$181,720	Facilities	$1,451
Global Access	$1,753	Global Awareness	$6,988	Global Empowerment	$41,752
Global Envoy	$1,361	Govt Relations	$27,560	Legal Services	$4,340
L/S at School	$1,495	L/S Challenge	$322,641	L/S Day Activities	$544
Lobbying	$4,664	Major Giving	$99,578	Marathons	$54,788
Marketing	$26,541	Mission Activities	$40,495	Navigation Services	$54,414
Planned Giving	$321	Programs & Policy	$84,995	Promotores	$1,458
Research & Eval	$67,304	Rides	$14,804	Science & Policy	$16,036
Stewardship	$16,944	Survivorship Ctrs	$55,944	Triathlons	$1,927
Venture Events	$17,481	Grassroots Lobbying	$18,397	Hispanic / Latino Outreach	$2,920
Human Resources	$4,259	Volunteer Services	$674	Young Adult Initatives	$107,877
				Total Travel	$1,519,388

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Form 990, Part XI, Line 5, Changes in Net Assets:

Net Unrealized Gains on Investments	$2,992,647
Net Assets Transferred from Lance Armstrong Foundation Endowment	$26,316,519
Net Assets Transferred from Lance Armstrong Foundation Events	$1,582,060
Net Assets Transferred from Lance Armstrong Foundation Merchandise	$7,033,128
Total to Form 990, Part XI, Line 5	$37,924,354

Form 990, Part XII, Line 2c:

The process of selecting an Independent Auditor and overseeing the audit of the financial statements has not changed from prior years.

All of this work is done by the Audit Committee, with final approval by the Board of Directors.

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

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047
2010
Open to Public Inspection

Name of the organization
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Employer identification number
74-2806618

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

(a) Name, address, and EIN 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" to 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	(g) Section 512(b)(13) controlled entity? No
LANCE ARMSTRONG FOUNDATION ENDOWMENT - 20-0208394, 2201 EAST 6TH STREET, AUSTIN, TX 78702	HOLDING & BUILDING THE ENDOWMENT FUND AND TO ESTABLISH OTHER ENDOWED	TEXAS	501(C)(3)	11A	N/A		X
LANCE ARMSTRONG FOUNDATION EVENTS - 20-4232365, 2201 EAST 6TH STREET, AUSTIN, TX 78702	FACILITATE SPECIAL EVENT COORDINATION	TEXAS	501(C)(3)	11A	N/A		X
LANCE ARMSTRONG FOUNDATION MERCHANDISE - 20-4232261, 2201 EAST 6TH STREET, AUSTIN, TX 78702	FACILITATE MERCHANDISE SALES	TEXAS	501(C)(3)	11A	N/A		X

Part III **Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to 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	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" to 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

Part V **Transactions With Related Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, 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 other organization(s)	1b		X
c Gift, grant, or capital contribution from other organization(s)	1c	X	
d Loans or loan guarantees to or for other organization(s)	1d		X
e Loans or loan guarantees by other organization(s)	1e		X
f Sale of assets to other organization(s)	1f		X
g Purchase of assets from other organization(s)	1g		X
h Exchange of assets	1h		X
i Lease of facilities, equipment, or other assets to other organization(s)	1i		X
j Lease of facilities, equipment, or other assets from other organization(s)	1j		X
k Performance of services or membership or fundraising solicitations for other organization(s)	1k	X	
l Performance of services or membership or fundraising solicitations by other organization(s)	1l	X	
m Sharing of facilities, equipment, mailing lists, or other assets	1m	X	
n Sharing of paid employees	1n	X	
o Reimbursement paid to other organization for expenses	1o	X	
p Reimbursement paid by other organization for expenses	1p	X	
q Other transfer of cash or property to other organization(s)	1q		X
r Other transfer of cash or property from other organization(s)	1r	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 other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations? Yes	(d) No	(e) Share of end-of-year assets	(f) Disproportionate allocations? Yes	(f) No	(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner? Yes	(h) No

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

EFFECTIVE MAY 31, 2010, THE OPERATIONS OF THREE SUPPORTING ORGANIZATIONS - LANCE ARMSTRONG FOUNDATION EVENTS (EIN 20-4232365), LANCE ARMSTRONG FOUNDATION MERCHANDISE (EIN 20-4232261), AND LANCE ARMSTRONG FOUNDATION ENDOWMENT (EIN 20-0208394) WERE MERGED INTO THE LANCE ARMSTRONG FOUNDATION.