

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

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

2020

Department of the Treasury Internal Revenue Service

Do not enter Social Security numbers on this form as it may be made public. Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A For the 2020 calendar year, or tax year beginning 04/01, 2020, and ending 03/31, 20 21

Form 990 header section containing organization name (THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP), EIN (75-2462834), address (13770 NOEL ROAD, SUITE 801889, DALLAS, TX 75380), principal officer (PAULA SUE SCHNEIDER), and other identifying information.

Part I Summary

Summary table with columns for Activities & Governance, Revenue, Expenses, and Net Assets or Fund Balances. Includes rows for mission statement, membership counts, revenue (Total: 27,822,325), expenses (Total: 39,406,959), and net assets (Total: 13,160,927).

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.

Signature block section with fields for officer signature (PAULA SUE SCHNEIDER), preparer name (KATHY PITTS), date (1/6/2022), and firm information (ERNST & YOUNG U.S. LLP).

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

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2020)

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

SUSAN G. KOMEN® 'S MISSION IS TO SAVE LIVES BY MEETING THE MOST CRITICAL NEEDS IN OUR COMMUNITIES & INVESTING IN BREAKTHROUGH RESEARCH TO PREVENT & CURE BREAST CANCER.

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

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

4a (Code:) (Expenses \$ 27,273,608. including grants of \$ 9,952,074.) (Revenue \$ -3,494.)

PATIENT CARE AND ADVOCACY: PROVISION OF BREAST CANCER SCREENING, DIAGNOSIS, AND TREATMENT PROGRAMS THROUGH GRANTS TO OTHER NON-PROFIT ORGANIZATIONS, THIRD-PARTY CONTRACTS AND DIRECTLY BY KOMEN, WITH A SPECIAL EMPHASIS ON PATIENT NAVIGATION, ESPECIALLY IN COMMUNITIES WHERE DISPARITIES IN OUTCOMES ARE SIGNIFICANT AND/OR ACCESS IS LIMITED. SEE SCHEDULE O FOR ADDITIONAL DETAILS.

4b (Code:) (Expenses \$ 2,917,959. including grants of \$ 0.) (Revenue \$ 0.)

RESEARCH PAYMENTS TO THE SUSAN G. KOMEN BREAST CANCER FOUNDATION, PARENT (PARENT) TO FUND GRANTS TO RESEARCH INSTITUTIONS AND OTHER NONPROFIT ORGANIZATIONS TO SUPPORT BREAST CANCER RESEARCH FOCUSED ON THE BIOLOGY OF BREAST CANCER; NEW STRATEGIES TO TREAT, DETECT, AND PREDICT RISK OF BREAST CANCER, AND UNDERSTANDING AND ADDRESSING DISPARITIES IN OUTCOMES. FUNDING FROM ORGANIZATIONS LIKE KOMEN AND ITS SUPPORTERS HAS PROVEN CRITICAL FOR ALL THESE ACTIVITIES. SEE SCHEDULE O FOR ADDITIONAL DETAILS.

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

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

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

4e Total program service expenses 30,191,567.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 covering various organizational requirements and schedules.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 16 regarding employee reporting, tax returns, business income, foreign accounts, prohibited transactions, and charitable trusts.

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include 1a (614), 1b (614), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 3 columns: Question, Yes, No. Rows include 10a, 10b, 11a, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ATTACHMENT 1
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) LINDA TANTAWI CEO - GREATER NYC (TERM 11/20)	40.00 0.				X			251,245.	0.	18,661.
(2) TIOSHA BAILEY EXEC DIR. - CHICAGOLAND	50.00 0.				X			226,653.	0.	30,497.
(3) ERICA R. TERRY CEO - KANSAS & W. MISSOURI	60.00 0.				X			194,171.	0.	1,358.
(4) DAVID EGAN EXECUTIVE DIRECTOR - MINNESOTA	50.00 0.				X			175,984.	0.	0.
(5) MEGAN KLINK (TERM 11/20) CEO - ORANGE COUNTY	50.00 0.				X			158,192.	0.	4,573.
(6) AMY TREADWAY (TERM 9/20) EXEC DIRECTOR-ARKANSAS	40.00 0.				X			157,055.	0.	3,389.
(7) KRISTIN S HARRIS EXEC DIRECTOR-CENTRAL/EAST VA	40.00 0.				X			148,961.	0.	6,752.
(8) GLEN PECK (TERM 11/20) SR DIRECTOR-GREATER NYC	40.00 0.						X	146,444.	0.	5,801.
(9) MOLLY M O'CONNOR (TERM 12/20) EXEC DIRECTOR-PUGET SOUND	40.00 0.						X	139,228.	0.	5,281.
(10) LINDA L MARICLE (TERM 1/21) EXEC DIRECTOR-MEMORIAL	40.00 0.						X	141,016.	0.	0.
(11) JULIE A JACOBSON (TERM 5/21) DEV DIRECTOR-CHICAGOLAND	50.00 0.						X	130,445.	0.	6,014.
(12) MARK K. PILON (TERM 10/23/20) EXEC DIRECTOR - LOS ANGELES	40.00 0.						X	122,583.	0.	12,348.
(13) SEE ATTACHMENT 2A FOR PART VII	0. 0.	X		X				0.	0.	0.
(14)										

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

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position (Individual trustee or director, Institutional trustee, Officer, Key employee, Highest compensated employee, Former), (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. Includes sub-totals for 1b, 1c, and 1d.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 29

Table with 3 columns: Question number, Question text, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

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

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Row 1 contains 'ATTACHMENT 2'.

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 2

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a	207,095.				
	b	Membership dues	1b					
	c	Fundraising events	1c	12,251,390.				
	d	Related organizations	1d					
	e	Government grants (contributions) . .	1e	2,414,302.				
	f	All other contributions, gifts, grants, and similar amounts not included above .	1f	8,901,918.				
	g	Noncash contributions included in lines 1a-1f.	1g	\$ 96,322.				
	h	Total. Add lines 1a-1f			23,774,705.			
	Program Service Revenue	2a	MISSION RELATED REVENUE	Business Code	900099	7,340.	7,340.	
b								
c								
d								
e								
f		All other program service revenue						
g		Total. Add lines 2a-2f			7,340.			
Other Revenue		3	Investment income (including dividends, interest, and other similar amounts).			130,705.		130,705.
	4	Income from investment of tax-exempt bond proceeds .			0.			
	5	Royalties			341,048.		341,048.	
	6a	Gross rents	6a	(i) Real				
				(ii) Personal				
	b	Less: rental expenses	6b					
	c	Rental income or (loss)	6c					
	d	Net rental income or (loss)			0.			
	7a	Gross amount from sales of assets other than inventory	7a	(i) Securities				
				(ii) Other		11,272,202.		
	b	Less: cost or other basis and sales expenses . .	7b		10,951,942.			
	c	Gain or (loss)	7c		320,260.			
	d	Net gain or (loss)			320,260.		320,260.	
8a	Gross income from fundraising events (not including \$ 12,251,390. of contributions reported on line 1c). See Part IV, line 18	8a		1,534,677.				
			8b	845,708.				
					688,969.		688,969.	
9a	Gross income from gaming activities. See Part IV, line 19	9a		32,345.				
b	Less: direct expenses	9b		15,993.				
c	Net income or (loss) from gaming activities			16,352.		16,352.		
10a	Gross sales of inventory, less returns and allowances	10a		21,907.				
			10b	32,741.				
					-10,834.		-10,834.	
c	Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11a	INTERCOMPANY REVENUE	Business Code	900099	2,553,780.		2,553,780.	
	b							
	c							
	d	All other revenue						
	e	Total. Add lines 11a-11d			2,553,780.			
12	Total revenue. See instructions			27,822,325.	-3,494.		4,051,114.	

Part IX Statement of Functional Expenses

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

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

Table with 5 columns: (A) Total expenses, (B) Program service expenses, (C) Management and general expenses, (D) Fundraising expenses. Rows include categories like Grants, Salaries, Payroll, and Total functional expenses.

Part X Balance Sheet

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

Table with columns for Assets, Liabilities, and Net Assets or Fund Balances. Rows include Cash, Savings, Pledges, Accounts receivable, Loans, Investments, Total assets, Accounts payable, Grants payable, Deferred revenue, Total liabilities, and Net assets.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	27,822,325.
2	Total expenses (must equal Part IX, column (A), line 25)	2	39,406,959.
3	Revenue less expenses. Subtract line 2 from line 1	3	-11,584,634.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	49,412,035.
5	Net unrealized gains (losses) on investments	5	117,883.
6	Donated services and use of facilities	6	-1,443,370.
7	Investment expenses	7	0.
8	Prior period adjustments	8	0.
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-27,807,877.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	8,694,037.

Part XII Financial Statements and Reporting

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

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- 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 on Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990 or Form 990-EZ.

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

Name of the organization

THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP

Employer identification number

75-2462834

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

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

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2 A school described in section 170(b)(1)(A)(ii).
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).
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).
6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi).
8 A community trust described in section 170(b)(1)(A)(vi).
9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture.
10 An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions...
11 An organization organized and operated exclusively to test for public safety.
12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations...
a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s)...
b Type II. A supporting organization supervised or controlled in connection with its supported organization(s)...
c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s)...
d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated...
e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations
g Provide the following information about the supported organization(s).

Table with 6 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization listed in your governing document?, (v) Amount of monetary support, (vi) Amount of other support. Rows (A) through (E) and 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

Table with 7 columns: (a) 2016, (b) 2017, (c) 2018, (d) 2019, (e) 2020, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2016, (b) 2017, (c) 2018, (d) 2019, (e) 2020, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 9 Net income from unrelated business activities; 10 Other income; 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities; 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)) 99.02%; 15 Public support percentage from 2019 Schedule A, Part II, line 14 99.16%; 16a 33 1/3% support test - 2020. 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. [X]; 16b 33 1/3% support test - 2019. 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 - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization; 17b 10%-facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization; 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Table with 7 columns: (a) 2016, (b) 2017, (c) 2018, (d) 2019, (e) 2020, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2016, (b) 2017, (c) 2018, (d) 2019, (e) 2020, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 13 Total support. (Add lines 9, 10c, 11, and 12.)

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

Section C. Computation of Public Support Percentage

Table with 3 columns: Description, 2020, 2019. Row 15: Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f)). Row 16: Public support percentage from 2019 Schedule A, Part III, line 15.

Section D. Computation of Investment Income Percentage

Table with 3 columns: Description, 2020, 2019. Row 17: Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f)). Row 18: Investment income percentage from 2019 Schedule A, Part III, line 17.

19a 33 1/3% support tests - 2020. 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.

19b 33 1/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? Row 2: Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)?

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

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

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

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

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

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

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

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2020 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2020 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3	Excess distributions carryover, if any, to 2020			
a	From 2015			
b	From 2016			
c	From 2017			
d	From 2018			
e	From 2019			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2020 distributable amount			
i	Carryover from 2015 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2020 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2020 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6	Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7	Excess distributions carryover to 2021. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2016			
b	Excess from 2017			
c	Excess from 2018			
d	Excess from 2019			
e	Excess from 2020			

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

Schedule B
(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

2020

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

Table with 2 columns: Name of the organization (THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP) and Employer identification number (75-2462834)

Organization type (check one):

Filers of:

Section:

- Form 990 or 990-EZ: [X] 501(c)(3) (enter number) organization, [] 4947(a)(1) nonexempt charitable trust not treated as a private foundation, [] 527 political organization
Form 990-PF: [] 501(c)(3) exempt private foundation, [] 4947(a)(1) nonexempt charitable trust treated as a private foundation, [] 501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

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

General Rule

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

Special Rules

- [X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
[] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
[] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP

Employer identification number
75-2462834

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	N/A	\$ 15,256,496.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP

Employer identification number

75-2462834

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	VARIOUS-SEE ATTACHMENT	\$ 121,951.	VAR

Name of organization THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP

Employer identification number 75-2462834

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) Use duplicate copies of Part III if additional space is needed.

Table with 4 columns: (a) No. from Part I, (b) Purpose of gift, (c) Use of gift, (d) Description of how gift is held.

Table with 2 columns: (e) Transfer of gift, Transferee's name, address, and ZIP + 4, Relationship of transferor to transferee.

Table with 4 columns: (a) No. from Part I, (b) Purpose of gift, (c) Use of gift, (d) Description of how gift is held.

Table with 2 columns: (e) Transfer of gift, Transferee's name, address, and ZIP + 4, Relationship of transferor to transferee.

Table with 4 columns: (a) No. from Part I, (b) Purpose of gift, (c) Use of gift, (d) Description of how gift is held.

Table with 2 columns: (e) Transfer of gift, Transferee's name, address, and ZIP + 4, Relationship of transferor to transferee.

Table with 4 columns: (a) No. from Part I, (b) Purpose of gift, (c) Use of gift, (d) Description of how gift is held.

Table with 2 columns: (e) Transfer of gift, Transferee's name, address, and ZIP + 4, Relationship of transferor to transferee.

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2020

Open to Public Inspection

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.

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

Department of the Treasury Internal Revenue Service

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

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

Table with 2 columns: Name of organization (THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP) and Employer identification number (75-2462834)

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. (See instructions for definition of "political campaign activities")
2 Political campaign activity expenditures (See instructions) \$
3 Volunteer hours for political campaign activities (See instructions)

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.

Table with 5 columns: (a) Name, (b) Address, (c) EIN, (d) Amount paid from filing organization's funds, (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. Rows 1-6 are empty.

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

A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)			38,616.
b Total lobbying expenditures to influence a legislative body (direct lobbying)		3,268.	137,126.
c Total lobbying expenditures (add lines 1a and 1b)		3,268.	175,742.
d Other exempt purpose expenditures		34,774,711.	95,547,558.
e Total exempt purpose expenditures (add lines 1c and 1d)		34,777,979.	95,723,300.
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		1,000,000.	1,000,000.
If the amount on line 1e, column (a) or (b) is:			
The lobbying nontaxable amount is:			
Not over \$500,000	20% of the amount on line 1e.		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
Over \$17,000,000	\$1,000,000.		
g Grassroots nontaxable amount (enter 25% of line 1f)		250,000.	250,000.
h Subtract line 1g from line 1a. If zero or less, enter -0-		0.	0.
i Subtract line 1f from line 1c. If zero or less, enter -0-		0.	0.
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> 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 separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(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	253,525.	279,269.	343,462.	175,742.	1,051,998.
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	19,478.	64,115.	86,368.	38,616.	208,577.

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)).

Table with 3 main columns: (a) Yes/No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation... 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?...

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

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

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

Table with 2 main columns: Question, Amount. Rows include: 1 Dues, assessments and similar amounts from members 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). 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. 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? 5 Taxable amount of lobbying and political expenditures (See instructions)

Part IV Supplemental Information

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

SEE PAGE 4

Part IV Supplemental Information (continued)

PART II-A - LOBBYING EXPENSES

KOMEN IS THE NONPARTISAN VOICE OF MORE THAN 3.8 MILLION BREAST CANCER SURVIVORS, THOSE LIVING WITH THE DISEASE AND THE PEOPLE WHO LOVE THEM. KOMEN WORKS TO EDUCATE PEOPLE ABOUT PUBLIC POLICY ISSUES, SO THEY ARE EMPOWERED TO BECOME FORCEFUL ADVOCATES FOR THEMSELVES AND THEIR NEIGHBORS, AND THEN UNITES THEIR COLLECTIVE VOICES FOR MAXIMUM IMPACT. THROUGH OUR CENTER FOR PUBLIC POLICY, KOMEN ENSURES THAT OUR POLICYMAKERS ARE EDUCATED ABOUT THE NEEDS OF BREAST CANCER PATIENTS AND PRIORITIZE THE ISSUES IMPACTING THEM. ONLY THROUGH INFORMED GOVERNMENT ACTION CAN WE MAKE THE BROAD, SYSTEMIC AND LASTING CHANGE REQUIRED.

KOMEN'S 2020-2021 PUBLIC POLICY AND ADVOCACY PRIORITIES INCLUDED:
EXPANDING ACCESS TO AFFORDABLE, HIGH-QUALITY HEALTH CARE FOR ALL PATIENT POPULATIONS; SUPPORTING INCREASED STATE AND FEDERAL FUNDING FOR BREAST CANCER RESEARCH AND INCREASED EDUCATION, UTILIZATION OF AND ACCESS TO CLINICAL TRIALS; SUPPORTING STATE AND FEDERAL FUNDING FOR THE CENTERS FOR DISEASE CONTROL AND PREVENTION'S (CDC) NATIONAL BREAST AND CERVICAL CANCER EARLY DETECTION PROGRAM (NBCCEDP); ADVOCATING FOR STATE AND FEDERAL POLICIES TO IMPROVE INSURANCE COVERAGE OF BREAST CANCER TREATMENTS, INCLUDING THOSE THAT WOULD REQUIRE ORAL PARITY, PRECLUDE SPECIALTY TIERS AND PREVENT STEP THERAPY PROTOCOLS; AND ADVOCATING FOR STATE AND FEDERAL POLICIES TO REDUCE OR ELIMINATE OUT-OF-POCKET COSTS FOR MEDICALLY NECESSARY DIAGNOSTIC IMAGING.

IN ADDITION TO THE STATE AND FEDERAL WORK ON OUR PUBLIC POLICY AND ADVOCACY PRIORITIES, KOMEN ALSO ENGAGED ON ISSUES RELATED TO CUSTOM

Part IV Supplemental Information *(continued)*

BREAST PROTHESES, GENETIC AND GENOMIC TESTING, LYMPHEDEMA, MEDICARE
WAITING PERIODS, PALLIATIVE CARE, SURPRISE MEDICAL BILLING AND
SURVIVORSHIP.

KOMEN DEVELOPED AND IMPLEMENTED ADVOCACY CAMPAIGNS TO ENCOURAGE LAWMAKERS
AND AGENCY OFFICIALS TO SUPPORT AND IMPLEMENT PROGRAMS THAT WOULD ADVANCE
OUR PRIORITY ISSUES. KOMEN CONTINUED TO RECRUIT AND ENGAGE ADVOCATES TO
FURTHER STRENGTHEN ITS GRASSROOTS ADVOCACY NETWORK.

PUBLIC INSPECTION COPY

The Susan G Komen Breast Cancer Foundation, Inc.
Year Ended March 31, 2021

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

	<u>Grassroots Expenditures</u>	<u>Direct Lobbying Expenditures</u>	<u>Total Lobbying Expenditures</u>	<u>Other Exempt Expenditures</u>	<u>Total Exempt Purpose Expenditures</u>	
Susan G. Komen Breast Cancer Foundation Address for parent and all affiliates is: 13770 Noel Road, Suite 801889, Dallas, TX 75380						
1	Arkansas Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 71-0724439	-	-	-	792,185	792,185 AR101
2	Austin Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2854966	-	-	-	729,768	729,768 TX101
3	Baton Rouge Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2854972	-	-	-	403,613	403,613 LA101
4	Boise, Idaho Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2854965	-	-	-	218,290	218,290 ID100
5	Central and South Jersey Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 43-2052349	-	-	-	408,902	408,902 NJ100
6	Central Indiana Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2941627	-	-	-	372,725	372,725 IN101
7	Central Tennessee Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 62-1671774	-	-	-	633,058	633,058 TN105
8	Central Virginia Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2844659	-	-	-	728,734	728,734 VA100
9	Charlotte Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2854959	-	-	-	464,437	464,437 NC100
10	Chicagoland Area Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 36-4111723	-	-	-	1,965,100	1,965,100 IL101
11	Coastal Georgia Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 56-2583644	-	-	-	542,066	542,066 GA102
12	Columbus Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2844651	-	-	-	588,524	588,524 OH102
13	Dallas County Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2444724	-	-	-	384,200	384,200 TX102
14	Denver Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 84-1199858	-	-	-	406,627	406,627 CO102
15	Evansville Tri-State Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2844632	-	-	-	168,557	168,557 IN100
16	Greater Detroit Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 72-1562627	-	-	-	69,244	69,244 MI103

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17	Greater Atlanta Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 58-1959763	-	-	-	772,693	772,693	GA100
18	Greater Fort Worth Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2445070	-	-	-	333,400	333,400	TX104
19	Greater Kansas City Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2844634	-	489	489	417,583	418,072	MO101
20	Greater New York City Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 91-2049420	-	-	-	2,350,433	2,350,433	NY104
21	Hawaii Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2844635	-	-	-	254,831	254,831	HI100
22	Houston Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 76-0360372	-	-	-	727,818	727,818	TX105
23	Inland Empire Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 33-0802964	-	-	-	315,917	315,917	CA103
24	Iowa Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 42-1438018	-	-	-	1,024,709	1,024,709	IA103
25	Kentucky Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2855046	-	-	-	474,771	474,771	KY101
26	Knoxville Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2854955	-	-	-	633,979	633,979	TN103
27	Los Angeles County Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 95-4582064	-	-	-	695,515	695,515	CA104
28	Lowcountry Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2844655	-	-	-	370,504	370,504	SC100
29	Maryland Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 52-2053491	-	-	-	783,684	783,684	MD100
30	Memorial Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 37-1286285	-	-	-	814,489	814,489	IL102
31	Memphis-Midsouth Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2942859	-	-	-	912,739	912,739	TN104
32	Miami-Ft Lauderdale Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2844638	-	-	-	240,370	240,370	FL103
33	Michigan Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2844631	-	-	-	172,109	172,109	MI101
34	Minnesota Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 41-1924790	-	-	-	477,475	477,475	MN101

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35	Missouri Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2844650	-	-	-	623,999	623,999	MO102
36	NC Triangle Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2845066	-	-	-	564,616	564,616	NC101
37	Nebraska Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 26-0056671	-	-	-	436,268	436,268	NE100
38	Nevada Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 88-0372386	-	-	-	131,262	131,262	NV100
39	New Orleans Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 72-1222127	-	-	-	327,718	327,718	LA102
40	North Central Alabama Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2844656	-	-	-	353,653	353,653	AL100
41	North Jersey Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 22-3528454	-	-	-	181,314	181,314	NJ101
42	North Texas Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2356437	-	-	-	211,015	211,015	TX107
43	Northeast Ohio Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 34-1793460	-	-	-	428,850	428,850	OH101
44	Northwest Ohio Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2845063	-	-	-	278,443	278,443	OH103
45	Orange County Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 33-0487943	-	859	859	1,305,799	1,306,658	CA100
46	Oregon & Southwest Washington Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 93-1068897	-	-	-	1,054,177	1,054,177	OR100
47	Ozark Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2845062	-	-	-	313,952	313,952	AR100
48	Pittsburgh Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 81-0665396	-	-	-	1,526,164	1,526,164	PA101
49	Puget Sound Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 91-1624040	-	-	-	1,156,649	1,156,649	WA100
50	Sacramento Valley Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 94-3169358	-	1,610	1,610	154,258	155,868	CA101
51	San Antonio Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 74-2856696	-	-	-	530,326	530,326	TX108
52	San Diego Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 33-0638911	-	-	-	635,654	635,654	CA105
53	San Francisco Bay Area Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	-	9	9	215,883	215,892	CA106

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EIN # 94-3047626						
54	South Florida Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 65-0254225	-	-	-	238,689	238,689 FL105
55	Southeast Wisconsin Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2844639	-	-	-	1,013,033	1,013,033 WI101
56	Southern New England Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2844629	-	-	-	433,039	433,039 CT100
57	Southwest Ohio Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2855038	-	-	-	336,169	336,169 OH100
58	Tulsa Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2854974	-	-	-	470,257	470,257 OK101
59	Virginia Blue Ridge Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 56-2619425	-	-	-	741,517	741,517 VA101
60	Western New York Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. EIN # 75-2875179	-	301	301	462,959	463,259 NY100
	Totals - Affiliates	<u>-</u>	<u>3,268</u>	<u>3,268</u>	<u>34,774,711</u>	<u>34,777,979</u>
	Susan G. Komen Breast Cancer Foundation, Inc. (Parent) EIN# 75-1835298	38,616	133,858	172,474	60,772,846	60,945,320
	Totals for Parent and Affiliates	<u><u>38,616</u></u>	<u><u>137,126</u></u>	<u><u>175,742</u></u>	<u><u>95,547,558</u></u>	<u><u>95,723,300</u></u>

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

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

Name of the organization

Employer identification number

THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP

75-2462834

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

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 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?

Part II Conservation Easements.

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

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 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., 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?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items., 1b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1., (ii) Assets included in Form 990, Part X., 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1., b Assets included in Form 990, Part X.

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

Schedule D (Form 990) 2020

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
a Public exhibition
b Scholarly research
c Preservation for future generations
d Loan or exchange program
e Other
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

Part IV Escrow and Custodial Arrangements.

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?
b If "Yes," explain the arrangement in Part XIII and complete the following table:
Table with columns: Description, Amount
1c Beginning balance
1d Additions during the year
1e Distributions during the year
1f Ending balance
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

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

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows include: 1a Beginning of year balance, b Contributions, c Net investment earnings, gains, and losses, d Grants or scholarships, e Other expenditures for facilities and programs, f Administrative expenses, g End of year balance.

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

- a Board designated or quasi-endowment %
b Permanent endowment %
c Term endowment %

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

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

- (i) Unrelated organizations
(ii) Related organizations

Table with 2 columns: Yes, No. Rows: 3a(i), 3a(ii), 3b

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

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

Part VI Land, Buildings, and Equipment.

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

Table with 5 columns: (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows include: 1a Land, b Buildings, c Leasehold improvements, d Equipment, e Other

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

Part VII Investments - Other Securities.

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

Table with 3 columns: (a) Description of security or category, (b) Book value, (c) Method of valuation. Rows include Financial derivatives, Closely held equity interests, and Other (A-H).

Part VIII Investments - Program Related.

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

Table with 3 columns: (a) Description of investment, (b) Book value, (c) Method of valuation. Rows numbered 1 through 9.

Part IX Other Assets.

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

Table with 2 columns: (a) Description, (b) Book value. Rows numbered 1 through 9.

Part X Other Liabilities.

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

Table with 2 columns: (a) Description of liability, (b) Book value. Rows include Federal income taxes, DUE TO KOMEN PARENT, ACCRUED EXPENSES, and Total.

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

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

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

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and a final column for totals. Rows include: 1 Total revenue, gains, and other support per audited financial statements; 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12; 3 Subtract line 2e from line 1; 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1; 5 Total revenue. Add lines 3 and 4c.

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

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

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and a final column for totals. Rows include: 1 Total expenses and losses per audited financial statements; 2 Amounts included on line 1 but not on Form 990, Part IX, line 25; 3 Subtract line 2e from line 1; 4 Amounts included on Form 990, Part IX, line 25, but not on line 1; 5 Total expenses. Add lines 3 and 4c.

Part XIII Supplemental Information.

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

SEE PAGE 5

Multiple horizontal lines provided for entering supplemental information.

Part XIII Supplemental Information *(continued)*

FIN 48 (ASC 740) FINANCIAL STATEMENT DISCLOSURE

SCHEDULE D, PART X, LINE 2

THE ORGANIZATION IS SUBJECT TO A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. THERE WERE NO UNCERTAIN TAX POSITIONS RECORDED IN THE FINANCIAL STATEMENTS AT MARCH 31, 2021.

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

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

2020

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

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

Name of the organization

THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP

Employer identification number

75-2462834

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

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

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

- 2a Did the organization have a written or oral agreement with any individual... [X] Yes [] No
b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements...

Table with 6 columns: (i) Name and address of individual or entity (fundraiser), (ii) Activity, (iii) Did fundraiser have custody or control of contributions?, (iv) Gross receipts from activity, (v) Amount paid to (or retained by) fundraiser listed in col. (i), (vi) Amount paid to (or retained by) organization. Includes a Total row with values 221,150, 20,800, and 207,350.

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" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1		(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		RACE WALK (event type)		GALA (event type)	72. (total number)	
Revenue	1	Gross receipts	12,207,849.	674,561.	903,657.	13,786,067.
	2	Less: Contributions	10,993,198.	502,664.	755,528.	12,251,390.
	3	Gross income (line 1 minus line 2)	1,214,651.	171,897.	148,129.	1,534,677.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes	402,529.	2,538.	27,105.	432,172.
	6	Rent/facility costs	15,778.	21,000.	32,246.	69,024.
	7	Food and beverages	98,756.	21,134.	46,229.	166,119.
	8	Entertainment	998.		9,960.	10,958.
	9	Other direct expenses	100,138.	7,208.	60,089.	167,435.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				
11	Net income summary. Subtract line 10 from line 3, column (d)					688,969.

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1	Gross revenue		
Direct Expenses	2	Cash prizes			
	3	Noncash prizes		15,993.	15,993.
	4	Rent/facility costs			
5	Other direct expenses				
6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes 80.0000% <input type="checkbox"/> No	
7	Direct expense summary. Add lines 2 through 5 in column (d)				15,993.
8	Net gaming income summary. Subtract line 7 from line 1, column (d)				16,352.

9 Enter the state(s) in which the organization conducts gaming activities: SEE SUPPLEMENTAL PAGE

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

b If "No," explain:
BE REQUIRED. SEE SUPPLEMENTAL INFORMATION.

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

b If "Yes," explain:

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ THE TREASURER OF EACH INDIVIDUAL KOMEN AFFILIATE

Address ▶ SAME ADDRESS AS KOMEN AFFILIATE NA, NA NA

- 15 a 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 ▶ NONE

Gaming manager compensation ▶ \$ _____

Description of services provided ▶

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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

SCHEDULE G, PART II - NET INCOME SUMMARY

GROSS RECEIPTS ARE REDUCED BY THE AMOUNT OF CONTRIBUTIONS PER IRS

INSTRUCTIONS. THE CONTRIBUTIONS FOR FYE 3/31/21 WERE \$12,251,390.

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

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

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

Name ▶ _____

Address ▶ _____

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

- 17 Mandatory distributions:
 - a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
 - b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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

SCHEDULE G, PART III, LINE 11

THE AFFILIATES DO NOT HAVE ANY MEMBERS WHICH COULD CONDUCT GAMING ACTIVITIES. RATHER, THE MAJORITY OF GAMING ACTIVITIES WERE CONDUCTED BY VOLUNTEERS.

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

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

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

Name ▶ _____

Address ▶ _____

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

- 17 Mandatory distributions:
 - a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
 - b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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

SCHEDULE G, PART III, LINE 17

ALL FUNDS FROM GAMING ACTIVITIES SUCH AS CHARITABLE RAFFLES ARE EITHER DISTRIBUTED TO OTHER EXEMPT ORGANIZATIONS OR SPENT ON THE AFFILIATE'S OWN EXEMPT ACTIVITIES DURING THE TAX YEAR.

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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

SCHEDULE G, PART III- STATES IN WHICH ORG. OPERATES GAMING ACTIVITIES

AR, CA, CO, CT, GA, IL, IN, IA, KY, LA, MD, MS, MO, MT, NV, NJ, NM, NY,
 NC, OH, OK, OR, PA, SC, SD, TX, VT, VA, WV

990, SCHEDULE G, PART I - HIGHEST PAID FUNDRAISER

NAME AND ADDRESS OF FUNDRAISER	ACTIVITY	DID FUNDRAISER HAVE CUSTODY OR CONTROL OF CONTRIBUTIONS?		GROSS RECEIPTS FROM ACTIVITY	AMOUNT PAID TO (OR RETAINED BY) FUNDRAISER	AMOUNT PAID TO (OR RETAINED BY) ORGANIZATION
		YES	NO			
W. STEWART MCKEOUGH 2817 MCGAW AVE IRVINE CA 92614	SOLICIT SPONSORS		X	219,150.	11,800.	207,350.
FERNANDO AGUIRRE 5901 W CENTURY BLVD LOS ANGELES CA 90045	SOLICIT SPONSORS		X	2,000.	9,000.	

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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

SCHEDULE G, PART III-STATES IN WHICH ORG. OPERATES GAMING ACTIVITIES

AR, CA, CO, CT, GA, IL, IN,

IA, KY, LA, MD, MS, MO, MT, NV, NJ, NM, NY, NC, OH,

OK, OR, PA, SC, SD, TX, VT, VA, WV, WI,

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990.

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

Name of the organization

THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP

Employer identification number

75-2462834

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) SEE ATTACHED STATEMENT 13770 NOEL ROAD STE 801889 DALLAS, TX 75380			10,254,962.				VARIOUS
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 253.

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

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

Schedule I (Form 990) 2020

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

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

DESCRIPTION OF ORGANIZATION'S PROCEDURES FOR MONITORING THE USE OF GRANTS

PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANTS

SUSAN G. KOMEN'S (KOMEN) POLICIES FOR MANAGING EDUCATION, SCREENING, AND TREATMENT GRANTS FROM THE TIME OF PRE-AWARD THROUGH CLOSEOUT ARE DESIGNED TO MAXIMIZE FLEXIBILITY WHILE MAINTAINING A HIGH STANDARD OF ACCOUNTABILITY AND PRESERVING THE INTEGRITY OF THE REVIEW AND AWARD PROCESS.

KOMEN REQUIRES ALL GRANTEES TO SIGN A GRANT AGREEMENT SETTING FORTH THE

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

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

TERMS OF THE GRANT INCLUDING: PURPOSE, AMOUNT, BUDGETARY RESTRICTIONS, DURATION, PAYMENT SCHEDULE, REPORTING REQUIREMENTS, AND AUDIT AND EARLY TERMINATION RIGHTS. KOMEN CONTINUES TO MAINTAIN COMMITMENTS MADE THROUGH GRANTS BY KOMEN AFFILIATES. GRANTS CONTINUE TO BE SUPPORTED BY THE CONSOLIDATED ORGANIZATION.

GRANTS MANAGED BY KOMEN INCLUDING AFFILIATE STAFF REQUIRE GRANTEES TO SUBMIT PROGRESS AND FINAL REPORTS THAT PROVIDE INFORMATION ABOUT PROGRESS MADE TOWARD THE FUNDED PROGRAM'S GOALS AND OBJECTIVES AND A FINANCIAL REPORT ON THE EXPENDITURE OF FUNDS AWARDED. FUTURE PAYMENTS UNDER THE

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

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

GRANT ARE CONTINGENT UPON KOMEN'S RECEIPT OF SATISFACTORY REPORTS. IF THE REPORTS DO NOT REFLECT SATISFACTORY PROGRESS OR THERE IS A CONCERN ABOUT THE EXPENDITURE OF FUNDS, KOMEN MAY EITHER TERMINATE THE GRANT OR REFUSE TO ISSUE ADDITIONAL PAYMENTS UNTIL CORRECTIVE ACTION IS TAKEN. KOMEN ALSO MAY CONDUCT SITE VISITS TO BUILD STRONGER RELATIONSHIPS WITH GRANTEES, GAIN A BETTER UNDERSTANDING OF THEIR WORK, AND ADDRESS ANY CHALLENGES OR PROBLEMS THE GRANTEES MAY BE FACING.

SEE SCHEDULE O, PART IX, LINE 1 NARRATIVE FOR ADDITIONAL DETAILS.

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SUSAN G. KOMEN BREAST CANCER FOUNDATION - GROUP
 YEAR ENDED MARCH 31, 2021
 SCHEDULE I

EIN # 75-2462834
 2020 Form 990

Recipient Name	Street Address	City	State	Zip	EIN #	IRS Section	Total Amount of Cash Grants	Method of Valuation	Description of Non-Cash assistance	Purpose of Grant - Education, Screening or Treatment
North Central Alabama Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.										
Auburn University	208 M.White Smith Hall	Auburn University	AL	36849-5110	636000724	501(c)(3)	\$ 2,500.00			Education
Journey of Faith	1629 4th Ave. SE Suite 131	Decatur	AL	35601	813507334	501(c)(3)	\$ 2,500.00			Education
American Cancer Society,	1100 Ireland Way	Birmingham	AL	35205	580659875	501(c)(3)	\$ 2,500.00			Education
University of Alabama at Birmingham,	School of Public Health - LNB 1081-2001 3rd Ave S	Birmingham	AL	35294	636005396	501(c)(3)	\$ 1,250.00			Education
My Beauty Is Mine, Inc.	3381 Main St.	Adamsville	AL	35005	833411482	501(c)(3)	\$ 1,250.00			Education
Hispanic Interest Coalition of Alabama	117 Southcrest Dr.	Birmingham	AL	35209	631225764	501(c)(3)	\$ 2,500.00			Education
Sister Survivors, Inc.	P.O. Box 13071	Birmingham	AL	35202	263591985	501(c)(3)	\$ 1,000.00			Education
Spirit of Luke Charitable Foundation	516 Tuscaloosa Ave. SW	Birmingham	AL	35211	726235260	501(c)(3)	\$ 4,000.00			Education
St. Vincents Hospital	2800 University Blvd. Suite 234	Birmingham	AL	35233	630868066	501(c)(3)	\$ 10,000.00			Education
Alabama Dept. of Public Health	RSA Tower, 201 Monroe St Suite 1364	Montgomery	AL	36130-3017	631106545	501(c)(3)	\$ 10,000.00			Education
Cooper Green Hospital Foundation	1515 6th Avenue South	Birmingham	AL	35233	636001579	501(c)(3)	\$ 10,000.00			Education
UAB-University of Alabama at Birmingham	1720 2nd Ave. South, AB 1170	Birmingham	AL	35294	163605396	501(c)(3)	\$ 10,000.00			Education
Baptist Health Foundation, Inc.	1130 22nd St. S Ste. 3200	Birmingham	AL	35205	636062097	501(c)(3)	\$ 10,000.00			Education
Baptist Health Foundation, Inc.	1130 22nd St. S Ste. 3200	Birmingham	AL	35205	636062097	501(c)(3)	\$ 10,000.00			Education
St. Vincents Hospital	2800 University Blvd. Suite 234	Birmingham	AL	35233	630868066	501(c)(3)	\$ 10,000.00			Education
RMC Foundation	Regional Medical Center 400 East 10th St.	Anniston	AL	36202	630981593	501(c)(3)	\$ 10,000.00			Education
DCH Foundation, Inc.	809 University Blvd. E	Tuscaloosa	AL	35401	630718581	501(c)(3)	\$ 10,000.00			Education
Russell Hill Cancer	3601 CCI Drive	Huntsville	AL	35805	205015568	501(c)(3)	\$ 10,000.00			Education
Spirit of Luke Charitable Foundation	516 Tuscaloosa Ave. SW	Birmingham	AL	35211	726235260	501(c)(3)	\$ 5,000.00			Education
V.I.R.T.U.E., Inc	1909 27th Ave.S	Homewood	AL	35209	870776775	501(c)(3)	\$ 1,000.00			Education
Ozark Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.										
Madison County Health Coalition	PO Box 336	Huntsville	AR	72740	710842427	501(c)(3)	\$ 25,450.00			Education, Treatment
Madison County Health Coalition	PO Box 336	Huntsville	AR	72740	710842427	501(c)(3)	\$ 25,450.00			Education, Treatment
Madison County Health Coalition	PO Box 336	Huntsville	AR	72740	710842427	501(c)(3)	\$ 25,450.00			Education, Treatment
Madison County Health Coalition	PO Box 336	Huntsville	AR	72740	710842427	501(c)(3)	\$ 25,450.00			Education, Treatment
St. Francis House NWA, Inc., dba	614 E. Emma Avenue, Suite 300	Springdale	AR	72464	311553455	501(c)(3)	\$ 21,775.00			Education, Screening, Treatment
St. Francis House NWA, Inc., dba	614 E. Emma Avenue, Suite 300	Springdale	AR	72464	311553455	501(c)(3)	\$ 21,775.00			Education, Screening, Treatment
St. Francis House NWA, Inc., dba	614 E. Emma Avenue, Suite 300	Springdale	AR	72464	311553455	501(c)(3)	\$ 21,775.00			Education, Screening, Treatment
St. Francis House NWA, Inc., dba	614 E. Emma Avenue, Suite 300	Springdale	AR	72464	311553455	501(c)(3)	\$ 21,775.00			Education, Screening, Treatment
Mercy Health Foundation Fort Smith	PO Box 17000	Fort Smith	AR	72917	237330425	501(c)(3)	\$ 11,391.00			Education, Screening, Treatment
Mercy Health Foundation Fort Smith	PO Box 17000	Fort Smith	AR	72917	237330425	501(c)(3)	\$ 11,391.00			Education, Screening, Treatment
Mercy Health Foundation Fort Smith	PO Box 17000	Fort Smith	AR	72917	237330425	501(c)(3)	\$ 11,391.00			Education, Screening, Treatment
Mercy Health Foundation Fort Smith	PO Box 17000	Fort Smith	AR	72917	237330425	501(c)(3)	\$ 11,391.00			Education, Screening, Treatment
Cancer Support Foundation	3324 South "M" St.	Ft. Smith	AR	72903	710507618	501(c)(3)	\$ 5,850.00			Treatment
Cancer Support Foundation	3324 South "M" St.	Ft. Smith	AR	72903	710507618	501(c)(3)	\$ 5,850.00			Treatment
Cancer Support Foundation	3324 South "M" St.	Ft. Smith	AR	72903	710507618	501(c)(3)	\$ 5,850.00			Treatment
Cancer Support Foundation	3324 South "M" St.	Ft. Smith	AR	72903	710507618	501(c)(3)	\$ 5,850.00			Treatment
Cox Medical Center Branson	3525 S National Ave Suite 204	Springfield	MO	65807	440584290	501(c)(3)	\$ 18,950.00			Education, Screening, Treatment
Cox Medical Center Branson	3525 S National Ave Suite 204	Springfield	MO	65807	440584290	501(c)(3)	\$ 18,950.00			Education, Screening, Treatment
Cox Medical Center Branson	3525 S National Ave Suite 204	Springfield	MO	65807	440584290	501(c)(3)	\$ 18,950.00			Education, Screening, Treatment
Cox Medical Center Branson	3525 S National Ave Suite 204	Springfield	MO	65807	440584290	501(c)(3)	\$ 18,950.00			Education, Screening, Treatment
Mercy Health Foundation of NW Arkansas	PO Box 98	Rogers	AR	72757	710601687	501(c)(3)	\$ 9,225.00			Treatment
Mercy Health Foundation of NW Arkansas	PO Box 98	Rogers	AR	72757	710601687	501(c)(3)	\$ 9,225.00			Treatment
Mercy Health Foundation of NW Arkansas	PO Box 98	Rogers	AR	72757	710601687	501(c)(3)	\$ 9,225.00			Treatment
Mercy Health Foundation of NW Arkansas	PO Box 98	Rogers	AR	72757	710601687	501(c)(3)	\$ 9,225.00			Treatment
Washington Regional	1101 North Woolsey Avenue	Fayetteville	AR	72703	710664687	501(c)(3)	\$ 24,300.00			Education, Screening, Treatment
Washington Regional	1101 North Woolsey Avenue	Fayetteville	AR	72703	710664687	501(c)(3)	\$ 24,300.00			Education, Screening, Treatment
Washington Regional	1101 North Woolsey Avenue	Fayetteville	AR	72703	710664687	501(c)(3)	\$ 24,300.00			Education, Screening, Treatment
Washington Regional	1101 North Woolsey Avenue	Fayetteville	AR	72703	710664687	501(c)(3)	\$ 24,300.00			Education, Screening, Treatment
Hope Cancer Resources	5835 W Sunset Ave	Springdale	AR	72762	311637431	501(c)(3)	\$ 1,000.00			Education
Hope Cancer Resources	5835 W Sunset Ave	Springdale	AR	72762	311637431	501(c)(3)	\$ 5,000.00			Education
The Arkansas Affiliate of the Susan G. Komen Breast Cancer Foundation										
CARTI	P.O. Box 55011	Little Rock	AR	72215	710589907	501(c)(3)	\$ 9,515.00			Treatment

PUBLIC INSPECTION COPY

SUSAN G. KOMEN BREAST CANCER FOUNDATION - GROUP
 YEAR ENDED MARCH 31, 2021
 SCHEDULE I

EIN # 75-2462834
 2020 Form 990

Recipient Name	Street Address	City	State	Zip	EIN #	IRS Section	Total Amount of Cash Grants	Method of Valuation	Description of Non-Cash assistance	Purpose of Grant - Education, Screening or Treatment
The Orange County Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.										
Share Our Selves Corporation	20151 SW Birch St., Suite 250	Newport Beach	CA	92660	953222316	501(c)(3)	\$ 15,000.02			Education, Screening, Treatment
Share Our Selves Corporation	20151 SW Birch St., Suite 250	Newport Beach	CA	92660	953222316	501(c)(3)	\$ 15,000.01			Education, Screening, Treatment
Share Our Selves Corporation	20151 SW Birch St., Suite 250	Newport Beach	CA	92660	953222316	501(c)(3)	\$ 15,000.01			Education, Screening, Treatment
Share Our Selves Corporation	20151 SW Birch St., Suite 250	Newport Beach	CA	92660	953222316	501(c)(3)	\$ 15,000.01			Education, Screening, Treatment
Korean Community Services, Inc.	451 West Lincoln Avenue Suite #100	Anaheim	CA	92805	953245254	501(c)(3)	\$ 12,000.00			Screening, Treatment
Korean Community Services, Inc.	451 West Lincoln Avenue Suite #100	Anaheim	CA	92805	953245254	501(c)(3)	\$ 12,000.00			Screening, Treatment
Korean Community Services, Inc.	451 West Lincoln Avenue Suite #100	Anaheim	CA	92805	953245254	501(c)(3)	\$ 12,000.00			Screening, Treatment
Korean Community Services, Inc.	451 West Lincoln Avenue Suite #100	Anaheim	CA	92805	953245254	501(c)(3)	\$ 12,000.00			Screening, Treatment
AltaMed Health Services Corporation	2040 Camfield Avenue	Los Angeles	CA	90040	952810095	501(c)(3)	\$ 15,821.99			Education, Screening, Treatment
AltaMed Health Services Corporation	2040 Camfield Avenue	Los Angeles	CA	90040	952810095	501(c)(3)	\$ 15,821.99			Education, Screening, Treatment
AltaMed Health Services Corporation	2040 Camfield Avenue	Los Angeles	CA	90040	952810095	501(c)(3)	\$ 15,821.99			Education, Screening, Treatment
AltaMed Health Services Corporation	2040 Camfield Avenue	Los Angeles	CA	90040	952810095	501(c)(3)	\$ 15,821.99			Education, Screening, Treatment
Planned Parenthood Orange and	801 E. Katella Ave.	Anaheim	CA	92805	956152773	501(c)(3)	\$ 14,997.70			Treatment
Planned Parenthood Orange and	801 E. Katella Ave.	Anaheim	CA	92805	956152773	501(c)(3)	\$ 14,997.70			Treatment
Planned Parenthood Orange and	801 E. Katella Ave.	Anaheim	CA	92805	956152773	501(c)(3)	\$ 14,997.70			Treatment
Planned Parenthood Orange and	801 E. Katella Ave.	Anaheim	CA	92805	956152773	501(c)(3)	\$ 14,997.70			Treatment
Vietnamese American Cancer Foundation	17150 Newhope St. Suite #203	Fountain Valley	CA	92708	912170415	501(c)(3)	\$ 15,000.00			Education, Screening, Treatment
Vietnamese American Cancer Foundation	17150 Newhope St. Suite #203	Fountain Valley	CA	92708	912170415	501(c)(3)	\$ 15,000.00			Education, Screening, Treatment
Vietnamese American Cancer Foundation	17150 Newhope St. Suite #203	Fountain Valley	CA	92708	912170415	501(c)(3)	\$ 15,000.00			Education, Screening, Treatment
Vietnamese American Cancer Foundation	17150 Newhope St. Suite #203	Fountain Valley	CA	92708	912170415	501(c)(3)	\$ 15,000.00			Education, Screening, Treatment
North Orange County Regional	901 W. Orangethorpe Ave	Fullerton	CA	92832	330970731	501(c)(3)	\$ 6,299.93			Education, Screening, Treatment
The San Diego Chapter of the Susan G. Komen Breast Cancer Foundation, Inc.										
Jewish Family Service	Jewish Family Service of San Diego, 8804 Balboa Ave	San Diego	CA	92123-1506	222119902	501(c)(3)	\$ 32,500.00			Treatment
Jewish Family Service	Jewish Family Service of San Diego, 8804 Balboa Ave	San Diego	CA	92123-1506	222119902	501(c)(3)	\$ 32,500.00			Treatment
Jewish Family Service	Jewish Family Service of San Diego, 8804 Balboa Ave	San Diego	CA	92123-1506	222119902	501(c)(3)	\$ 70,000.00			Treatment
Jewish Family Service	Jewish Family Service of San Diego, 8804 Balboa Ave	San Diego	CA	92123-1506	222119902	501(c)(3)	\$ 70,000.00			Treatment
Scripps Mercy Hospital Chula Vista	237 Church Ave.	Chula Vista	CA	91910	951684089	501(c)(3)	\$ 12,000.00			Screening, Treatment
Scripps Mercy Hospital Chula Vista	237 Church Ave.	Chula Vista	CA	91910	951684089	501(c)(3)	\$ 12,000.00			Screening, Treatment
Connecticut Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.										
Northwestern Medical Center	133 Fairfield St.	St. Albans	VT	05478-1726	030266986	501(c)(3)	\$ 7,300.00			Education, Screening, Treatment
Hispanic Health Council	175 Main Street	Hartford	CT	06106-0000	061018979	501(c)(3)	\$ 22,500.00			Education, Screening, Treatment
Miami Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.										
Holy Cross Health	4725 North Federal Hwy	Fort Lauderdale	FL	33308	520738041	501(c)(3)	\$ 24,990.00			Screening, Treatment
Gilda's Club - South Florida	119 Rose Drive	Fort Lauderdale	FL	33316	650528626	501(c)(3)	\$ 24,807.70			Education, Screening
La Liga Contra el Cancer	2180 SW 12th Avenue	Miami	FL	33129	591629554	501(c)(3)	\$ 24,999.92			Treatment
Saint John Bosco Clinic	3661 S. Miami Ave #103	Miami	FL	33133	650435764	501(c)(3)	\$ 17,642.41			Screening, Treatment
Public Health Trust of Miami-Dade County	1500 NW 12th Avenue , Suite 803	Miami	FL	33136	591713947	501(c)(3)	\$ 25,000.00			Screening, Treatment
Health Education Prevention	2103 Coral Way, 2nd Floor	Miami	FL	33145	461240368	501(c)(3)	\$ 8,825.00			Education, Screening
Southeast Georgia Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.										
St. Joseph's / Candler Hospital	5353 Reynolds Street	Savannah	GA	31405	581553254	501(c)(3)	\$ 12,500.00			Education, Screening, Treatment
St. Joseph's / Candler Hospital	5353 Reynolds Street	Savannah	GA	31405	581553254	501(c)(3)	\$ 12,500.00			Education, Screening, Treatment
Southeast Georgia Health System-Brunswic	2415 Parkwood Drive	Brunswick	GA	31520	586000498	501(c)(3)	\$ 12,500.00			Screening, Treatment
Southeast Georgia Health System-Brunswic	2415 Parkwood Drive	Brunswick	GA	31520	586000498	501(c)(3)	\$ 12,500.00			Screening, Treatment
Curtis V. Cooper Primary Health Care	106 E. Broad Street	Savannah	GA	31401	581136296	501(c)(3)	\$ 12,500.00			Screening, Treatment
Curtis V. Cooper Primary Health Care	106 E. Broad Street	Savannah	GA	31401	581136296	501(c)(3)	\$ 12,500.00			Screening, Treatment
Hearts and Hands Clinic	127 North College Street	Statesboro	GA	30459	264597700	501(c)(3)	\$ 7,409.25			Education, Screening, Treatment
Hearts and Hands Clinic	127 North College Street	Statesboro	GA	30459	264597700	501(c)(3)	\$ 7,409.25			Education, Screening, Treatment
Diversity Health Center Inc.	301 Fraser Drive	Hinesville	GA	31313	205746618	501(c)(3)	\$ 12,500.00			Education, Screening, Treatment
Diversity Health Center Inc.	301 Fraser Drive	Hinesville	GA	31313	205746618	501(c)(3)	\$ 12,500.00			Education, Screening, Treatment
St. Joseph's / Candler Hospital	5353 Reynolds Street	Savannah	GA	31405	581553254	501(c)(3)	\$ 52,000.00			Screening
Southeast Georgia Health System-Brunswic	2415 Parkwood Drive	Brunswick	GA	31520	586000498	501(c)(3)	\$ 52,000.00			Screening
Curtis V. Cooper Primary Health Care	106 E. Broad Street	Savannah	GA	31401	581136296	501(c)(3)	\$ 52,000.00			Screening

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SUSAN G. KOMEN BREAST CANCER FOUNDATION - GROUP
 YEAR ENDED MARCH 31, 2021
 SCHEDULE I

EIN # 75-2462834
 2020 Form 990

Recipient Name	Street Address	City	State	Zip	EIN #	IRS Section	Total Amount of Cash Grants	Method of Valuation	Description of Non-Cash assistance	Purpose of Grant - Education, Screening or Treatment
Hearts and Hands Clinic	127 North College Street	Statesboro	GA	30459	264597700	501(c)(3)	\$ 52,000.00			Screening
Coastal Health District 9-1	400 Mall Blvd Suite G	Savannah	GA	31406	461859206	501(c)(3)	\$ 52,000.00			Screening
Diversity Health Center Inc.	301 Fraser Drive	Hinesville	GA	31313	205746618	501(c)(3)	\$ 52,000.00			Screening
Southeast Georgia Health System-Brunswic	2415 Parkwood Drive	Brunswick	GA	31520	586000498	501(c)(3)	\$ 9,250.00			Treatment
Curtis V. Cooper Primary Health Care	106 E. Broad Street	Savannah	GA	31401	581136296	501(c)(3)	\$ 9,250.00			Treatment
Hearts and Hands Clinic	127 North College Street	Statesboro	GA	30459	264597700	501(c)(3)	\$ 3,000.00			Treatment
Diversity Health Center Inc.	301 Fraser Drive	Statesboro	GA	31313	205746618	501(c)(3)	\$ 9,250.00			Treatment
St. Joseph's / Candler Hospital	5353 Reynolds Street	Savannah	GA	31405	581553254	501(c)(3)	\$ 9,250.00			Treatment
Headquarters Susan G. Komen Breast Cancer Foundation, Inc.										
Holy Cross Health	4725 North Federal Hwy	Fort Lauderdale	FL	33308	520738041	501(c)(3)	\$ 24,990.00			Education
Gilda's Club - South Florida	119 Rose Drive	Fort Lauderdale	FL	33316	650528626	501(c)(3)	\$ 24,807.70			Education
Barbara Ann Karmanos Cancer Institute	4100 John R. St. VE01FS	Detroit	MI	48201-2013	381613280	501(c)(3)	\$ 46,875.00			Education
La Liga Contra el Cancer	2180 SW 12th Avenue	Miami	FL	33129	591629554	501(c)(3)	\$ 24,999.93			Education
Saint John Bosco Clinic	3661 S. Miami Ave #103	Miami	FL	33133	650435764	501(c)(3)	\$ 17,642.41			Education
Health Education Prevention	2103 Coral Way, 2nd Floor	Miami	FL	33145	461240368	501(c)(3)	\$ 8,825.00			Education
Arab Community Center for Economic and	6450 Maple Street	Dearborn	MI	48126	237444497	501(c)(3)	\$ 46,875.00			Education
Gilda's Club Metro Detroit	3517 Rochester Rd.	Royal Oak	MI	48073-2814	383150211	501(c)(3)	\$ 30,377.00			Education
Kingman Regional Medical Center	3269 Stockton Hill Rd	Kingman	AZ	86409	742388735	501(c)(3)	\$ 14,453.57			Education
Kingman Regional Medical Center	3269 Stockton Hill Rd	Kingman	AZ	86409	742388735	501(c)(3)	\$ 14,453.57			Education
Mountain Park Health Cntr.	3003 N. 3rd Street, Suite 1600	Phoenix	AZ	85012	860498020	501(c)(3)	\$ 16,666.67			Education
North Country Healthcare, Inc.	2920 N. 4th Street	Flagstaff	AZ	86004-1816	860663432	501(c)(3)	\$ 16,666.66			Education
North Country Healthcare, Inc.	2920 N. 4th Street	Flagstaff	AZ	86004-1816	860663432	501(c)(3)	\$ 16,666.67			Education
Utah Cancer Control Program	PO Box 144620	Salt Lake City	UT	84114-4620	876000545	501(c)(3)	\$ 64,966.67			Education
Utah Cancer Control Program	PO Box 144620	Salt Lake City	UT	84114-4620	876000545	501(c)(3)	\$ 64,996.66			Education
Valleywise Health Foundation	2901 E Camelback Rd Ste. 202	Phoenix	AZ	85016	860777567	501(c)(3)	\$ 16,666.67			Education
Wesley Community Center	1300 S. 10th Street	Phoenix	AZ	85034	860133770	501(c)(3)	\$ 14,831.66			Education
Wesley Community Center	1300 S. 10th Street	Phoenix	AZ	85034	860133770	501(c)(3)	\$ 14,831.67			Education
The Des Moines Chapter of the Susan G. Komen Breast Cancer Foundation										
Genesis Medical Center	1227 East Rusholme St	Davenport	IA	52803	421418847	501(c)(3)	\$ 37,499.76			Education, Screening, Treatment
Genesis Medical Center	1227 East Rusholme St	Davenport	IA	52803	421418847	501(c)(3)	\$ 37,499.76			Education, Screening, Treatment
Polk County Health Department	1907 Carpenter Ave.	Des Moines	IA	50314-1310	421063074	501(c)(3)	\$ 51,675.35			Education, Screening, Treatment
Genesis Medical Center	1227 East Rusholme St	Davenport	IA	52803	421418847	501(c)(3)	\$ 3,608.00			Education
Polk County Health Department	1907 Carpenter Ave.	Des Moines	IA	50314-1310	421063074	501(c)(3)	\$ 150,000.00			Education
Iowa Department of Public Health	Lucas State Office Building 321 E 12th Street	Des Moines	IA	50319-0075	426004523	501(c)(3)	\$ 75,000.00			Education
River Hills Community Health Center	P.O. Box 458 216 South Market	Ottumwa	IA	52501	421489471	501(c)(3)	\$ 75,000.00			Education
Genesis Health System	1227 E. Rusholme Street	Davenport	IA	52803	421418847	501(c)(3)	\$ 50,000.00			Education
Trinity Medical Center	500 John Deere Road	Moline	IL	61265	362739299	501(c)(3)	\$ 50,000.00			Education
Jennie Edmundson Hospital	933 East Pierce Street	Council Bluffs	IA	51503-4652	420680355	501(c)(3)	\$ 40,000.00			Education
Promise Community Health Center, Inc.	338 1st Ave NW	Sioux Center	IA	51250-1875	205896415	501(c)(3)	\$ 35,000.00			Education
Gilda's Club	1234 East River Drive	Davenport	IA	52803	061662883	501(c)(3)	\$ 15,000.00			Education
Cerro Gordo County Dept of Public Health	22 N. Georgia Ave Suite 300	Mason City	IA	50401-3435	421351175	501(c)(3)	\$ 15,000.00			Education
Casting for Recovery, Inc.	109 East Oak Street, Ste 1G	Bozeman	MT	59715	030354382	501(c)(3)	\$ 5,000.00			Education
Can Do Cancer	P.O. Box 602 530 NE 44th Court	Ankeny	IA	50021	455315972	501(c)(3)	\$ 5,000.00			Education
Above + Beyond Cancer	1915 Grand Avenue	Des Moines	IA	50309	453951308	501(c)(3)	\$ 5,000.00			Education
Living Proof Exhibit	2814 47 Street	Moline	IL	61265	273500764	501(c)(3)	\$ 5,000.00			Education
Strands of Strength Inc	1310 Tulip Tree Lane	West Des Moines	IA	50266	454145232	501(c)(3)	\$ 20,000.00			Education
Free Clinics of Iowa	PO Box 12099	Des Moines	IA	50312	421428706	501(c)(3)	\$ 15,000.00			Education
His Hands Free Clinic	1245 2nd Ave SE	Cedar Rapids	IA	52403	391878606	501(c)(3)	\$ 15,000.00			Education
Can Do Cancer	P.O. Box 602 530 NE 44th Court	Ankeny	IA	50021	455315972	501(c)(3)	\$ 20,000.00			Education
John Stoddard Cancer Center	1200 Pleasant Street	Des Moines	IA	50309	420680452	501(c)(3)	\$ 25,000.00			Education
Boise, Idaho Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.										
North Canyon Medical Center	267 North Canyon Drive	Gooding	ID	83330	261938641	501(c)(3)	\$ 3,588.18			Screening
Panhandle Health District #1	8500 N. Atlas Road	Hayden	ID	83835	820537262	501(c)(3)	\$ 3,662.32			Screening
Panhandle Health District #1	8500 N. Atlas Road	Hayden	ID	83835	820537262	501(c)(3)	\$ 3,662.33			Screening

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SUSAN G. KOMEN BREAST CANCER FOUNDATION - GROUP
 YEAR ENDED MARCH 31, 2021
 SCHEDULE I

EIN # 75-2462834
 2020 Form 990

Recipient Name	Street Address	City	State	Zip	EIN #	IRS Section	Total Amount of Cash Grants	Method of Valuation	Description of Non-Cash assistance	Purpose of Grant - Education, Screening or Treatment
Family Health Services	794 Eastland Dr.	Twin Falls	ID	83301-0685	820371093	501(c)(3)	\$ 3,542.50			Screening, Treatment
Family Health Services	794 Eastland Dr.	Twin Falls	ID	83301-0685	820371093	501(c)(3)	\$ 3,542.50			Screening, Treatment
Terry Reilly Health Services	211 16th Ave N	Nampa	ID	83687	820300537	501(c)(3)	\$ 2,277.72			Screening
Terry Reilly Health Services	211 16th Ave N	Nampa	ID	83687	820300537	501(c)(3)	\$ 2,277.72			Screening
St. Luke's MSTI - Breast Care Services	3525 E. Louise Dr., Ste 320	Meridian	ID	83642	562570681	501(c)(3)	\$ 11,247.00			Screening, Treatment
St. Luke's MSTI - Breast Care Services	3525 E. Louise Dr., Ste 320	Meridian	ID	83642	562570681	501(c)(3)	\$ 11,247.00			Screening, Treatment
Minidoka Memorial Hospital	1224 8th Street	Rupert	ID	83350	820291854	501(c)(3)	\$ 3,693.21			Screening, Treatment
Minidoka Memorial Hospital	1224 8th Street	Rupert	ID	83350	820291854	501(c)(3)	\$ 3,693.21			Screening, Treatment
St. Luke Community Healthcare Foundation	107 6th Ave. SW	Ronan	MT	59864	810539096	501(c)(3)	\$ 2,238.50			Treatment
St. Luke Community Healthcare Foundation	107 6th Ave. SW	Ronan	MT	59864	810539096	501(c)(3)	\$ 2,238.50			Treatment
The Chicagoland Area Chapter of the Susan G. Komen Breast Cancer Foundation										
The Hektoen Institute of Medicine	1339 S Wood St, Suite G	Chicago	IL	60608	362244897	501(c)(3)	\$ 25,000.00			Screening
Esperanza Health Centers	2001 S. California Ave, Suite 100	Chicago	IL	60608	320115907	501(c)(3)	\$ 50,000.00			Screening
Swedish Hospital Foundation	5145 N California Ave	Chicago	IL	60625	362179813	501(c)(3)	\$ 50,000.00			Treatment
The Hektoen Institute of Medicine	1339 S Wood St, Suite G	Chicago	IL	60608	362244897	501(c)(3)	\$ 25,000.00			Treatment
The Peoria Memorial Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.										
Fulton County Health Department	700 East Oak Street	Canton	IL	61520	376000896	501(c)(3)	\$ 2,482.16			Education, Screening
Montgomery County Health Department	11191 Illinois Route 185	Hillsboro	IL	62049	376001661	501(c)(3)	\$ 11,041.50			Treatment
Fulton County Health Department	700 East Oak Street	Canton	IL	61520	376000896	501(c)(3)	\$ 5,170.70			Education, Treatment
Tazewell County Health Department	21306 Illinois Rt 9	Tremont	IL	61568-9252	376002170	501(c)(3)	\$ 24,248.00			Education, Screening, Treatment
VNA of Fox Valley	400 North Highland Ave.	Aurora	IL	60506	362182095	501(c)(3)	\$ 12,483.00			Screening
Tazewell County Health Department	21306 Illinois Rt 9	Tremont	IL	61568-9252	376002170	501(c)(3)	\$ 18,512.00			Education, Screening, Treatment
Illinois Public Health Association	500 West Monroe Suite 1E	Springfield	IL	62704	366108790	501(c)(3)	\$ 17,225.28			Education, Treatment
Lake County Health Department	415 E. Washington Street, Suite 112	Waukegan	IL	60085	593502843	501(c)(3)	\$ 7,575.00			Screening
McDonough County Health Department	505 E Jackson Street	Macomb	IL	61455	376001537	501(c)(3)	\$ 4,992.57			Education, Screening, Treatment
McDonough County Health Department	505 E Jackson Street	Macomb	IL	61455	376001537	501(c)(3)	\$ 4,992.56			Education, Screening, Treatment
Stephenson County Health Department	10 West Linden Street	Freeport	IL	61032	366006654	501(c)(3)	\$ 2,562.50			Screening
Stephenson County Health Department	10 West Linden Street	Freeport	IL	61032	366006654	501(c)(3)	\$ 2,562.50			Screening
Illinois Public Health Association	500 West Monroe Suite 1E	Springfield	IL	62704	366108790	501(c)(3)	\$ 14,955.50			Education, Treatment
Illinois Public Health Association	500 West Monroe Suite 1E	Springfield	IL	62704	366108790	501(c)(3)	\$ 14,955.50			Education, Treatment
Fulton County Health Department	700 East Oak Street	Canton	IL	61520	376000896	501(c)(3)	\$ 2,655.37			Education, Screening
Fulton County Health Department	700 East Oak Street	Canton	IL	61520	376000896	501(c)(3)	\$ 2,655.38			Education, Screening
Tazewell County Health Department	21306 Illinois Rt 9	Tremont	IL	61568-9252	376002170	501(c)(3)	\$ 12,144.58			Education, Screening, Treatment
Tazewell County Health Department	21306 Illinois Rt 9	Tremont	IL	61568-9252	376002170	501(c)(3)	\$ 12,144.57			Education, Screening, Treatment
UnityPoint Health-Methodist/Proctor	120 NE Glen Oak, Ste 101	Peoria	IL	61603	510186460	501(c)(3)	\$ 4,964.00			Screening, Treatment
UnityPoint Health-Methodist/Proctor	120 NE Glen Oak, Ste 101	Peoria	IL	61603	510186460	501(c)(3)	\$ 4,964.00			Screening, Treatment
VNA of Fox Valley	400 North Highland Ave.	Aurora	IL	60506	362182095	501(c)(3)	\$ 12,483.00			Screening
VNA of Fox Valley	400 North Highland Ave.	Aurora	IL	60506	362182095	501(c)(3)	\$ 12,483.00			Screening
UnityPoint Health-Methodist/Proctor	5409 N. Knoxville Ave	Peoria	IL	61614	510186460	501(c)(3)	\$ 18,282.50			Education, Screening
UnityPoint Health-Methodist/Proctor	5409 N. Knoxville Ave	Peoria	IL	61614	510186460	501(c)(3)	\$ 18,282.50			Education, Screening
Community Cancer Center	407 E. Vernon Ave.	Normal	IL	61761-3840	364425147	501(c)(3)	\$ 20,367.50			Education, Treatment
Community Cancer Center	407 E. Vernon Ave.	Normal	IL	61761-3840	364425147	501(c)(3)	\$ 20,367.50			Education, Treatment
OSF-St Francis Medical Center	530 NE Glen Oak Avenue	Peoria	IL	61637-0002	371259284	501(c)(3)	\$ 2,507.55			Treatment
OSF-St Francis Medical Center	530 NE Glen Oak Avenue	Peoria	IL	61637-0002	371259284	501(c)(3)	\$ 2,507.55			Treatment
Tazewell County Health Department	21306 Illinois Rt 9	Tremont	IL	61568-9252	376002170	501(c)(3)	\$ 29,391.42			Education, Screening, Treatment
Tazewell County Health Department	21306 Illinois Rt 9	Tremont	IL	61568-9252	376002170	501(c)(3)	\$ 29,391.41			Education, Screening, Treatment
OSF-St Francis Medical Center	8800 N. Route 91	Peoria	IL	61615	371259284	501(c)(3)	\$ 10,000.00			Treatment
OSF-St Francis Medical Center	8800 N. Route 91	Peoria	IL	61615	371259284	501(c)(3)	\$ 10,000.00			Treatment
Southern Illinois University	P.O. Box 19616	Springfield	IL	62794-9616	376005961	501(c)(3)	\$ 10,115.50			Screening, Treatment
Illinois Public Health Association	500 West Monroe Suite 1E	Springfield	IL	62704	366108790	501(c)(3)	\$ 1,000.00			Education
Southern Illinois University	P.O. Box 19616	Springfield	IL	62794-9616	376005961	501(c)(3)	\$ 10,115.50			Screening, Treatment
Illinois Public Health Association	500 West Monroe Suite 1E	Springfield	IL	62704	366108790	501(c)(3)	\$ 1,000.00			Education
Lake County Health Department	415 E. Washington Street, Suite 112	Waukegan	IL	60085	593502843	501(c)(3)	\$ 7,575.00			Screening

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SUSAN G. KOMEN BREAST CANCER FOUNDATION - GROUP
 YEAR ENDED MARCH 31, 2021
 SCHEDULE I

EIN # 75-2462834
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Recipient Name	Street Address	City	State	Zip	EIN #	IRS Section	Total Amount of Cash Grants	Method of Valuation	Description of Non-Cash assistance	Purpose of Grant - Education, Screening or Treatment
Greater Evansville Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.										
Owensboro Health Foundation, Inc.	P.O.Box 22505, 2211 Mayfair Drive, Ste 403	Owensboro	KY	42304	611251763	501(c)(3)	\$ 12,119.50			Screening, Treatment
Indianapolis Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.										
Eskenazi Health	720 Eskenazi Avenue, 5th Floor Fifth Third Bank Bldg at Eskenazi	Indianapolis	IN	46202	356005697	501(c)(3)	\$ 32,071.00			Treatment, Screening
Little Red Door Cancer Agency	1801 N Meridian Street	Indianapolis	IN	46202	350914096	501(c)(3)	\$ 38,254.50			Education, Treatment
Little Red Door Cancer Agency	1801 N Meridian Street	Indianapolis	IN	46202	350914096	501(c)(3)	\$ 3,595.25			Screening
YWCA Greater Lafayette	605 N. 6th Street	Lafayette	IN	47901	350868224	501(c)(3)	\$ 25,272.00			Education, Screening, Treatment
The Louisville, Kentucky Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.										
University Medical Center.	530 S. Jackson Street	Louisville	KY	40202	611293786	501(c)(3)	\$ 5,731.50			Screening, Treatment
King's Daughters Medical Center	2201 Lexington Ave.	Ashland	KY	41101-2843	610503715	501(c)(3)	\$ 3,750.00			Screening, Treatment
Saint Joseph Hospital Foundation.	1451 Harrodsburg Road Suite D-308	Lexington	KY	40504	611159649	501(c)(3)	\$ 9,070.00			Education, Screening, Treatment
Saint Joseph Berea Foundation	1451 Harrodsburg Road Suite D-308	Lexington	KY	40504	260152877	501(c)(3)	\$ 3,637.50			Screening, Treatment
Flaget Memorial Hospital Foundation, Inc	4305 New Shepherdsville Road	Bardstown	KY	40004	530196617	501(c)(3)	\$ 2,927.50			Screening, Treatment
Flaget Memorial Hospital Foundation, Inc	4305 New Shepherdsville Road	Bardstown	KY	40004	530196617	501(c)(3)	\$ 10,000.00			Education
Saint Joseph Hospital Foundation.	1451 Harrodsburg Road Suite D-308	Lexington	KY	40504	611159649	501(c)(3)	\$ 40,000.00			Education
James Graham Brown Cancer Center	529 S. Jackson Street	Louisville	KY	40202	611029626	501(c)(3)	\$ 50,000.00			Treatment
Norton Healthcare Foundation	234 East Gray Street, Suite 450	Louisville	KY	40202	310914919	501(c)(3)	\$ 50,000.00			Education
University of Louisville	501 E Broadway James Graham Brown Resource Ctr.	Louisville	KY	40202	611029626	501(c)(3)	\$ 25,000.00			Treatment
Saint Joseph Hospital Foundation.	1451 Harrodsburg Road Suite D-308	Lexington	KY	40504	611159649	501(c)(3)	\$ 32,500.00			Treatment
Greater Detroit Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.										
Barbara Ann Karmanos Cancer Institute	4100 John R. St. VE01FS	Detroit	MI	48201-2013	381613280	501(c)(3)	\$ 78,125.00			Screening, Treatment
Arab Community Center for Economic and	6450 Maple Street	Dearborn	MI	48126	237444497	501(c)(3)	\$ 78,125.00			Education, Screening, Treatment
Gilda's Club Metro Detroit	3517 Rochester Rd.	Royal Oak	MI	48073-2814	383150211	501(c)(3)	\$ 30,377.00			Education, Treatment
Minnesota Affiliate of the Susan G. Komen Breast Cancer Foundation										
Allina Associated Foundation	303 Catlin St	Buffalo	MN	55313	274116873	501(c)(3)	\$ 45,000.00			Screening, Treatment
Angel Foundation	1155 Centre Pointe Dr. Suite 7	Mendota Heights	MN	55120	411990883	501(c)(3)	\$ 45,000.00			Treatment
Cancer Legal Care	3503 High Point Drive Suite 270	Oakdale	MN	55128	020736402	501(c)(3)	\$ 50,000.00			Education
Care Partners, Inc.	P.O. Box 217 Eveleth	Eveleth	MN	55734-0217	412011488	501(c)(3)	\$ 14,400.00			Treatment
Hennepin Health Foundation	701 Park Ave. LSB-3	Minneapolis	MN	55415	410845733	501(c)(3)	\$ 26,675.00			Treatment
Open Arms of Minnesota	2500 Bloomington Avenue South	Minneapolis	MN	55404-2134	411681317	501(c)(3)	\$ 50,000.00			Treatment
Ridgeview Foundation	490 S. Maple Street, Suite 110	Waconia	MN	55387-1791	411328097	501(c)(3)	\$ 45,000.00			Treatment
Greater Kansas City Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.										
Kansas Dept of Health & Environment	1000 SW Jackson, Suite 230	Topeka	KS	66612-1274	480299250	501(c)(3)	\$ 7,915.50			Screening, Treatment
St. Louis Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.										
Mercy Health Foundation St. Louis	615 S. New Ballas Road	St. Louis	MO	63141	522440020	501(c)(3)	\$ 35,000.00			Screening, Treatment
Barnes-Jewish Hospital	4249 Clayton Avenue Suite 316	St. Louis	MO	63110	237309937	501(c)(3)	\$ 63,654.00			Screening
Missouri Baptist Medical Center	3015 N. Ballas Road Bldg. D Suite 630	St. Louis	MO	63131	430652656	501(c)(3)	\$ 55,000.00			Education, Screening, Treatment
Gateway to Hope	425 N. New Ballas Rd. Suite 220	St. Louis	MO	63141	202737792	501(c)(3)	\$ 26,000.00			Treatment
SSM St. Joseph Foundation	12312 Olive Blvd, Suite 100	St. Louis	MO	63141	431591556	501(c)(3)	\$ 45,000.00			Education, Screening, Treatment
Charlotte Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.										
Care Ring	601 E. 5th St., Suite 140	Charlotte	NC	28202	560621073	501(c)(3)	\$ 10,881.87			Education, Screening, Treatment
Care Ring	601 E. 5th St., Suite 140	Charlotte	NC	28202	560621073	501(c)(3)	\$ 10,881.87			Education, Screening, Treatment
Care Ring	601 E. 5th St., Suite 140	Charlotte	NC	28202	560621073	501(c)(3)	\$ 21,763.74			Education, Screening, Treatment
Novant Health Presbyterian Medical Cente	PO Box 33549, 200 Hawthorne Lane	Charlotte	NC	28204	581413074	501(c)(3)	\$ 14,994.33			Education, Screening, Treatment
Novant Health Presbyterian Medical Cente	PO Box 33549, 200 Hawthorne Lane	Charlotte	NC	28204	581413074	501(c)(3)	\$ 14,994.33			Education, Screening, Treatment
Novant Health Presbyterian Medical Cente	PO Box 33549, 200 Hawthorne Lane	Charlotte	NC	28204	581413074	501(c)(3)	\$ 14,994.32			Education, Screening, Treatment
Novant Health Presbyterian Medical Cente	PO Box 33549, 200 Hawthorne Lane	Charlotte	NC	28204	581413074	501(c)(3)	\$ 14,994.32			Education, Screening, Treatment
Novant Health Huntersville Med Center	PO Box 33549, 200 Hawthorne Lane	Charlotte	NC	28233-3549	581413074	501(c)(3)	\$ 13,360.80			Screening, Treatment
Novant Health Huntersville Med Center	PO Box 33549, 200 Hawthorne Lane	Charlotte	NC	28233-3549	581413074	501(c)(3)	\$ 13,360.80			Screening, Treatment
Novant Health Huntersville Med Center	PO Box 33549, 200 Hawthorne Lane	Charlotte	NC	28233-3549	581413074	501(c)(3)	\$ 13,360.80			Screening, Treatment

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SUSAN G. KOMEN BREAST CANCER FOUNDATION - GROUP
 YEAR ENDED MARCH 31, 2021
 SCHEDULE I

EIN # 75-2462834
 2020 Form 990

Recipient Name	Street Address	City	State	Zip	EIN #	IRS Section	Total Amount of Cash Grants	Method of Valuation	Description of Non-Cash assistance	Purpose of Grant - Education, Screening or Treatment
Novant Health Huntersville Med Center	PO Box 33549, 200 Hawthorne Lane	Charlotte	NC	28233-3549	581413074	501(c)(3)	\$ 13,360.80			Screening, Treatment
Novant Health Matthews Medical Center	PO Box 33549, 200 Hawthorne Lane	Charlotte	NC	28204	581413074	501(c)(3)	\$ 14,617.35			Screening, Treatment
Novant Health Matthews Medical Center	PO Box 33549, 200 Hawthorne Lane	Charlotte	NC	28204	581413074	501(c)(3)	\$ 14,617.35			Screening, Treatment
Novant Health Matthews Medical Center	PO Box 33549, 200 Hawthorne Lane	Charlotte	NC	28204	581413074	501(c)(3)	\$ 14,617.35			Screening, Treatment
Novant Health Matthews Medical Center	PO Box 33549, 200 Hawthorne Lane	Charlotte	NC	28204	581413074	501(c)(3)	\$ 14,617.35			Screening, Treatment
NC Triangle Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.										
OIC, Inc.	PO Box 2723	Rocky Mount	NC	27802	560946196	501(c)(3)	\$ 40,000.00			Education, Screening, Treatment
UNC Health Foundation Inc.	Post Office Box 1050	Chapel Hill	NC	27514-1050	566057494	501(c)(3)	\$ 21,000.00			Treatment
The Las Vegas Chapter of the Susan G. Komen Breast Cancer Foundation										
St. Rose Dominican Health Foundation	3001 St. Rose Parkway	Henderson	NV	89052	880349432	501(c)(3)	\$ 12,483.50			Treatment
St. Rose Dominican Health Foundation	3001 St. Rose Parkway	Henderson	NV	89052	880349432	501(c)(3)	\$ 12,483.87			Treatment
St. Rose Dominican Health Foundation	3001 St. Rose Parkway	Henderson	NV	89052	880349432	501(c)(3)	\$ 6,253.50			Treatment
St. Rose Dominican Health Foundation	3001 St. Rose Parkway	Henderson	NV	89052	880349432	501(c)(3)	\$ 6,252.00			Treatment
St. Rose Dominican Health Foundation	3001 St. Rose Parkway	Henderson	NV	89052	880349432	501(c)(3)	\$ 1.50			Treatment
Access to HealthCare Network	4001 S. Virginia St. Suite F	Reno	NV	89502	721619489	501(c)(3)	\$ 7,812.00			Treatment
Access to HealthCare Network	4001 S. Virginia St. Suite F	Reno	NV	89502	721619489	501(c)(3)	\$ 7,812.00			Treatment
Nevada Health Foundation	3325 Research Way	Carson City	NV	89706-7913	812013851	501(c)(3)	\$ 8,750.00			Education, Screening
Nevada Health Foundation	3325 Research Way	Carson City	NV	89706-7913	812013851	501(c)(3)	\$ 8,750.00			Education, Screening
Community Health Alliance Foundation	680 South Rock Blvd.	Reno	NV	89502-4113	880293149	501(c)(3)	\$ 4,107.70			Education, Treatment
Community Health Alliance Foundation	680 South Rock Blvd.	Reno	NV	89502-4113	880293149	501(c)(3)	\$ 4,107.30			Education, Treatment
Community Health Alliance Foundation	680 South Rock Blvd.	Reno	NV	89502-4113	880293149	501(c)(3)	\$ 0.40			Education, Treatment
Nevada Childhood Cancer Foundation	3711 E. Sunset Rd.	Las Vegas	NV	89120	880302673	501(c)(3)	\$ 3,125.00			Screening, Treatment
Nevada Childhood Cancer Foundation	3711 E. Sunset Rd.	Las Vegas	NV	89120	880302673	501(c)(3)	\$ 3,125.00			Screening, Treatment
Renown Health Foundation	245 E. Liberty St., Suite 400	Reno	NV	89501-2210	942972749	501(c)(3)	\$ 5,562.50			Screening, Treatment
Renown Health Foundation	245 E. Liberty St., Suite 400	Reno	NV	89501-2210	942972749	501(c)(3)	\$ 5,562.50			Screening, Treatment
Reno Cancer Foundation	1155 Mill Street C-14	Reno	NV	89502	886002500	501(c)(3)	\$ 2,812.50			Treatment
Reno Cancer Foundation	1155 Mill Street C-14	Reno	NV	89502	886002500	501(c)(3)	\$ 2,812.50			Treatment
Western New York Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.										
Onondaga County Health Department	421 Montgomery Street, 15th Floor	Syracuse	NY	13202-2923	156000461	501(c)(3)	\$ 12,040.00			Education, Screening, Treatment
YWCA of Binghamton/Broome	80 Hawley Street	Binghamton	NY	13901	150564074	501(c)(3)	\$ 12,374.84			Education, Screening, Treatment
The Upstate Foundation, Inc.	750 East Adams Street	Syracuse	NY	13210	161068101	501(c)(3)	\$ 15,725.00			Education, Screening, Treatment
The Upstate Foundation, Inc.	750 East Adams Street	Syracuse	NY	13210	161068101	501(c)(3)	\$ 15,725.00			Education, Screening, Treatment
ECMC Lifeline Foundation	462 Grider Street, Suite G-1	Buffalo	NY	14215	223283946	501(c)(3)	\$ 24,881.49			Education, Screening
Erie County Dept of Health	95 Franklin St. Room 950	Buffalo	NY	14202	166002558	501(c)(3)	\$ 22,100.50			Education, Screening, Treatment
Erie County Dept of Health	95 Franklin St. Room 950	Buffalo	NY	14202	166002558	501(c)(3)	\$ 22,100.50			Education, Screening, Treatment
Kevin Guest House	782 Ellicott Street	Buffalo	NY	14203	237218160	501(c)(3)	\$ 2,500.00			Treatment
Kevin Guest House	782 Ellicott Street	Buffalo	NY	14203	237218160	501(c)(3)	\$ 2,500.00			Treatment
University of Rochester	AAC Building, 300 E River Rd.	Rochester	NY	14627	160743209	501(c)(3)	\$ 10,000.00			Education, Screening, Treatment
University of Rochester	AAC Building, 300 E River Rd.	Rochester	NY	14627	160743209	501(c)(3)	\$ 10,000.00			Education, Screening, Treatment
Adagio Health Inc	603 Stanwix Street, Suite 500	Pittsburgh	PA	15222	237104168	501(c)(3)	\$ 10,000.00			Screening
Adagio Health Inc	603 Stanwix Street, Suite 500	Pittsburgh	PA	15222	237104168	501(c)(3)	\$ 10,000.00			Screening
Research Found of SUNY-Univ at Buffalo	PO Box 9	Albany	NY	12201-0009	160865182	501(c)(3)	\$ 24,187.27			Education, Screening
Research Found of SUNY-Univ at Buffalo	PO Box 9	Albany	NY	12201-0009	160865182	501(c)(3)	\$ 24,187.27			Education, Screening
Fund for Women	PO Box 777	Corning	NY	14830	300752244	501(c)(3)	\$ 7,500.00			Treatment
Adirondack Medical Center	2233 State Rt. 86	Saranac Lake	NY	12983	141731786	501(c)(3)	\$ 22,375.50			Education
Saratoga Hospital	211 Church Street	Saratoga Springs	NY	12866	141775218	501(c)(3)	\$ 13,422.83			Education, Screening
Saratoga Hospital	211 Church Street	Saratoga Springs	NY	12866	141775218	501(c)(3)	\$ 13,422.82			Education, Screening
Onondaga County Health Department	421 Montgomery Street, 15th Floor	Syracuse	NY	13202-2923	156000461	501(c)(3)	\$ 12,600.00			Education, Screening, Treatment
To Life!	410 Kenwood Avenue	Delmar	NY	12054	141808431	501(c)(3)	\$ 11,951.18			Education, Screening, Treatment
Greater New York City Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.										
NYU Langone Health	550 First Avenue	New York	NY	10016	135562308	501(c)(3)	\$ 50,000.00			Education, Treatment
Staten Island University Hospital	475 Seaview Ave.	Staten Island	NY	10305	112868878	501(c)(3)	\$ 15,000.00			Education, Screening, Treatment
Staten Island University Hospital	475 Seaview Ave.	Staten Island	NY	10305	112868878	501(c)(3)	\$ 15,000.00			Education, Screening, Treatment

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SUSAN G. KOMEN BREAST CANCER FOUNDATION - GROUP
 YEAR ENDED MARCH 31, 2021
 SCHEDULE I

EIN # 75-2462834
 2020 Form 990

Recipient Name	Street Address	City	State	Zip	EIN #	IRS Section	Total Amount of Cash Grants	Method of Valuation	Description of Non-Cash assistance	Purpose of Grant - Education, Screening or Treatment
Long Island Jewish Medical Center	P.O. Box 95000-7530	Philadelphia	PA	19195-7530	112241326	501(c)(3)	\$ 17,500.00			Education, Screening, Treatment
Long Island Jewish Medical Center	P.O. Box 95000-7530	Philadelphia	PA	19195-7530	112241326	501(c)(3)	\$ 17,500.00			Education, Screening, Treatment
Peconic Bay Medical Center	1300 Roanoke Avenue	Riverhead	NY	11901	111661359	501(c)(3)	\$ 17,500.00			Screening, Treatment
Peconic Bay Medical Center	1300 Roanoke Avenue	Riverhead	NY	11901	111661359	501(c)(3)	\$ 17,500.00			Screening, Treatment
Open Door Family Medical Centers	165 Main Street	Ossining	NY	10562	132813103	501(c)(3)	\$ 20,000.00			Education, Screening, Treatment
Open Door Family Medical Centers	165 Main Street	Ossining	NY	10562	132813103	501(c)(3)	\$ 20,000.00			Education, Screening, Treatment
St. Luke's - Roosevelt Hospital	One Gustave L. Levy Place Box 1049	New York	NY	10029	132997301	501(c)(3)	\$ 17,500.00			Education, Screening, Treatment
St. Luke's - Roosevelt Hospital	One Gustave L. Levy Place Box 1049	New York	NY	10029	132997301	501(c)(3)	\$ 17,500.00			Education, Screening, Treatment
St. John's Riverside Hospital	967 N. Broadway	Yonkers	NY	10701	131760126	501(c)(3)	\$ 15,000.00			Education, Screening, Treatment
St. John's Riverside Hospital	967 N. Broadway	Yonkers	NY	10701	131760126	501(c)(3)	\$ 15,000.00			Education, Screening, Treatment
God's Love We Deliver	166 Avenue of the Americas	New York	NY	10013	133366846	501(c)(3)	\$ 7,500.00			Education, Treatment
God's Love We Deliver	166 Avenue of the Americas	New York	NY	10013	133366846	501(c)(3)	\$ 7,500.00			Education, Treatment
Gilda's Club New York City Inc.	195 West Houston Street	New York	NY	10014-4803	134046652	501(c)(3)	\$ 7,500.00			Education
University Settlement Society	184 Eldridge Street	New York	NY	10002	136127348	501(c)(3)	\$ 2,500.00			Education
Gilda's Club New York City Inc.	195 West Houston Street	New York	NY	10014-4803	134046652	501(c)(3)	\$ 15,000.00			Education
Gilda's Club Westchester	80 Maple Avenue	White Plains	NY	10601-5105	133939823	501(c)(3)	\$ 15,000.00			Education
Sharsheret	1086 Teaneck Road, Suite 2G	Teaneck	NJ	07666	134198529	501(c)(3)	\$ 20,000.00			Education
Moving For Life	55 Avenue C South Storefront	New York	NY	10009	465251831	501(c)(3)	\$ 15,000.00			Education
Memorial Sloan-Kettering Cancer Center	1275 York Avenue	New York	NY	10065	131924236	501(c)(3)	\$ 20,000.00			Education
Triple Negative Breast Cancer Foundation	P.O. Box 204	Norwood	NJ	07648	205880756	501(c)(3)	\$ 639.00			Education
Moving For Life	55 Avenue C South Storefront	New York	NY	10009	465251831	501(c)(3)	\$ 3,375.00			Education
Sharsheret	1086 Teaneck Road, Suite 2G	Teaneck	NJ	07666	134198529	501(c)(3)	\$ 5,000.00			Education
Maimonides Medical Center	4802 10th Avenue	Brooklyn	NY	11219	111635081	501(c)(3)	\$ 100,000.00			Education
Moving For Life	55 Avenue C South Storefront	New York	NY	10009	465251831	501(c)(3)	\$ 14,023.94			Education
Memorial Sloan-Kettering Cancer Center	1275 York Avenue	New York	NY	10065	131924236	501(c)(3)	\$ 100,000.00			Education
Sharsheret	1086 Teaneck Road, Suite 2G	Teaneck	NJ	07666	134198529	501(c)(3)	\$ 100,000.00			Education
Independence Care System	257 Park Ave. South, 2nd Floor	New York	NY	10010	133964284	501(c)(3)	\$ 25,000.00			Education
Albert Einstein College of Medicine, Inc	1300 Morris Park Avenue	Bronx	NY	10461	472209056	501(c)(3)	\$ 20,000.00			Education
Project Renewal	200 Varick Street, 9th Floor	New York	NY	10014	132602882	501(c)(3)	\$ 25,000.00			Education
Weill Medical College of Cornell Univ	1300 York Avenue	New York	NY	10061	131623978	501(c)(3)	\$ 100,000.00			Education
Tulsa Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.										
Mercy Health Center	13321 N. Meridian Suite 206	Oklahoma City	OK	73120	731593024	501(c)(3)	\$ 20,860.00			Education, Screening, Treatment
Mercy Health Center	13321 N. Meridian Suite 206	Oklahoma City	OK	73120	731593024	501(c)(3)	\$ 20,860.00			Education, Screening, Treatment
Mercy Health Center	13321 N. Meridian Suite 206	Oklahoma City	OK	73120	731593024	501(c)(3)	\$ 20,860.00			Education, Screening, Treatment
Mercy Health Center	13321 N. Meridian Suite 206	Oklahoma City	OK	73120	731593024	501(c)(3)	\$ 20,860.00			Education, Screening, Treatment
Good Samaritan Health Services, Inc.	PO Box 1191	Tulsa	OK	74101	731559561	501(c)(3)	\$ 15,237.50			Education, Screening, Treatment
Good Samaritan Health Services, Inc.	PO Box 1191	Tulsa	OK	74101	731559561	501(c)(3)	\$ 15,237.50			Education, Screening, Treatment
Good Samaritan Health Services, Inc.	PO Box 1191	Tulsa	OK	74101	731559561	501(c)(3)	\$ 15,237.50			Education, Screening, Treatment
Good Samaritan Health Services, Inc.	PO Box 1191	Tulsa	OK	74101	731559561	501(c)(3)	\$ 15,237.50			Education, Screening, Treatment
Oklahoma Project Woman	7146 S. Braden Ave Suite 300	Tulsa	OK	74136	731616817	501(c)(3)	\$ 7,925.00			Screening, Treatment
Oklahoma Project Woman	7146 S. Braden Ave Suite 300	Tulsa	OK	74136	731616817	501(c)(3)	\$ 7,925.00			Screening, Treatment
Oklahoma Project Woman	7146 S. Braden Ave Suite 300	Tulsa	OK	74136	731616817	501(c)(3)	\$ 7,925.00			Screening, Treatment
Oklahoma Project Woman	7146 S. Braden Ave Suite 300	Tulsa	OK	74136	731616817	501(c)(3)	\$ 7,925.00			Screening, Treatment
The Oregon & SW Washington Affiliate of the Susan G. Komen Breast Cancer Foundation										
Breast Friends, Inc.	14050 SW Pacific Hwy #201	Tigard	OR	97224	582414145	501(c)(3)	\$ 10,000.00			Education
Pink Lemonade Project	1207 Washington Street Suite 125	Vancouver	WA	98600	371699288	501(c)(3)	\$ 10,000.00			Education
Northwest Family Services	6200 SE King Road	Portland	OR	97222	930841022	501(c)(3)	\$ 15,000.00			Education
The Black United Fund of Oregon	2828 NE Alberta St.	Portland	OR	97211	930843267	501(c)(3)	\$ 95,000.00			Education
Knoxville Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.										
UT Cancer Institute	1926 Alcoa Hwy, Suite 400 Bldg F	Knoxville	TN	37920	65-0207764	501(c)(3)	100,000.00			Screening
TN Department of Health	710 James Robertson Pkwy, 8th Fl	Nashville	TN	32743	626001445	501(c)(3)	80,000.00			Screening
TN Department of Health	710 James Robertson Pkwy, 8th Fl	Nashville	TN	34743	626001445	501(c)(3)	100,000.00			Screening
Memphis-Midsouth Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.										

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SUSAN G. KOMEN BREAST CANCER FOUNDATION - GROUP
 YEAR ENDED MARCH 31, 2021
 SCHEDULE I

EIN # 75-2462834
 2020 Form 990

Recipient Name	Street Address	City	State	Zip	EIN #	IRS Section	Total Amount of Cash Grants	Method of Valuation	Description of Non-Cash assistance	Purpose of Grant - Education, Screening or Treatment
Methodist Richardson Medical Center/CFWH	401 W. Campbell Road	Richardson	TX	75080	751788520	501(c)(3)	\$ 86,999.90			Education, Screening, Treatment
Methodist Richardson Medical Center/CFWH	401 W. Campbell Road	Richardson	TX	75080	751788520	501(c)(3)	\$ 86,999.90			Education, Screening, Treatment
Bridge Breast Network	4000 Junius Street	Dallas	TX	75246	752436606	501(c)(3)	\$ 87,500.00			Education, Treatment
Bridge Breast Network	4000 Junius Street	Dallas	TX	75246	752436606	501(c)(3)	\$ 87,500.00			Education, Treatment
Methodist Health System Foundation	1441 N. Beckley Ave.	Dallas	TX	75203	751548343	501(c)(3)	\$ 53,060.41			Screening, Treatment
Methodist Health System Foundation	1441 N. Beckley Ave.	Dallas	TX	75203	751548343	501(c)(3)	\$ 53,060.40			Screening, Treatment
Parkland Foundation	1341 W. Mockingbird Ln. Suite 1100E	Dallas	TX	75247	752089180	501(c)(3)	\$ 50,000.00			Treatment
Parkland Foundation	1341 W. Mockingbird Ln. Suite 1100E	Dallas	TX	75247	752089180	501(c)(3)	\$ 50,000.00			Treatment
Planned Parenthood of Greater Texas	7424 Greenville Ave Suite 206	Dallas	TX	75231	521243221	501(c)(3)	\$ 15,368.57			Screening, Treatment
Planned Parenthood of Greater Texas	7424 Greenville Ave Suite 206	Dallas	TX	75231	521243221	501(c)(3)	\$ 15,368.58			Screening, Treatment
Alliance for Progress	P.O. Box 210192	Dallas	TX	75211	384063707	501(c)(3)	\$ 12,500.00			Education
Alliance for Progress	P.O. Box 210192	Dallas	TX	75211	384063707	501(c)(3)	\$ 12,500.00			Education
American Cancer Society	1199 S. Beltline Rd. Suite 160	Coppell	TX	75019	741185665	501(c)(3)	\$ 12,500.00			Treatment
Methodist Dallas Medical Center	1441 North Beckley Ave	Dallas	TX	75203	750800661	501(c)(3)	\$ 87,419.91			Screening, Treatment
Methodist Dallas Medical Center	1441 North Beckley Ave	Dallas	TX	75203	750800661	501(c)(3)	\$ 87,419.91			Screening, Treatment
The Susan G. Komen Breast Cancer Foundation, Tarrant County Affiliate										
Cancer Care Services	623 S. Henderson	Fort Worth	TX	76104	751025511	501(c)(3)	\$ 2,500.00			Treatment
Cancer Care Services	623 S. Henderson	Fort Worth	TX	76104	751025511	501(c)(3)	\$ 2,500.00			Treatment
Cancer Care Services	623 S. Henderson	Fort Worth	TX	76104	751025511	501(c)(3)	\$ 2,500.00			Treatment
Cancer Care Services	623 S. Henderson	Fort Worth	TX	76104	751025511	501(c)(3)	\$ 2,500.00			Treatment
JPS Foundation	1223 South Main St	Fort Worth	TX	76104	752717782	501(c)(3)	\$ 29,673.32			Treatment
JPS Foundation	1223 South Main St	Fort Worth	TX	76104	752717782	501(c)(3)	\$ 29,673.32			Treatment
JPS Foundation	1223 South Main St	Fort Worth	TX	76104	752717782	501(c)(3)	\$ 29,673.32			Treatment
JPS Foundation	1223 South Main St	Fort Worth	TX	76104	752717782	501(c)(3)	\$ 29,673.32			Treatment
Moncrief Cancer Institute / UTSW	400 W Magnolia Avenue	Ft. Worth	TX	76104	756002868	501(c)(3)	\$ 31,250.00			Screening, Treatment
Moncrief Cancer Institute / UTSW	400 W Magnolia Avenue	Ft. Worth	TX	76104	756002868	501(c)(3)	\$ 31,250.00			Screening, Treatment
Moncrief Cancer Institute / UTSW	400 W Magnolia Avenue	Ft. Worth	TX	76104	756002868	501(c)(3)	\$ 31,250.00			Screening, Treatment
Texas Health Resources Foundation	612 East Lamar St, Ste 300	Arlington	TX	76011	752022128	501(c)(3)	\$ 31,224.88			Education, Screening, Treatment
Texas Health Resources Foundation	612 East Lamar St, Ste 300	Arlington	TX	76011	752022128	501(c)(3)	\$ 31,224.88			Education, Screening, Treatment
Texas Health Resources Foundation	612 East Lamar St, Ste 300	Arlington	TX	76011	752022128	501(c)(3)	\$ 31,224.87			Education, Screening, Treatment
Texas Health Resources Foundation	612 East Lamar St, Ste 300	Arlington	TX	76011	752022128	501(c)(3)	\$ 31,224.87			Education, Screening, Treatment
Shine Threapy	400 W Magnolia Avenue	Ft. Worth	TX	76104	753103666	501(c)(3)	\$ 10,000.00			Treatment
The Houston Chapter of the Susan G. Komen Breast Cancer Foundation, Inc.										
UTMD Anderson Cancer Ctr.	1515 Holcombe Boulevard, Unit 1677	Houston	TX	77030	746001118	501(c)(3)	\$ 20,000.00			Education, Screening, Treatment
North Texas Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.										
Bridge Breast Network	4000 Junius Street	Dallas	TX	75246	752436606	501(c)(3)	\$ 11,235.48			Screening, Treatment
Bridge Breast Network	4000 Junius Street	Dallas	TX	75246	752436606	501(c)(3)	\$ 11,264.52			Screening, Treatment
Bridge Breast Network	4000 Junius Street	Dallas	TX	75246	752436606	501(c)(3)	\$ 22,500.00			Screening, Treatment
Harrington Cancer Center	500 S. Taylor St., Unit 223	Amarillo	TX	79101-2442	751578415	501(c)(3)	\$ 6,000.98			Screening, Treatment
Harrington Cancer Center	500 S. Taylor St., Unit 223	Amarillo	TX	79101-2442	751578415	501(c)(3)	\$ 11,476.58			Screening, Treatment
Harrington Cancer Center	500 S. Taylor St., Unit 223	Amarillo	TX	79101-2442	751578415	501(c)(3)	\$ 17,477.56			Screening, Treatment
North Central Texas Community Health Car	P.O. Box 720	Wichita Falls	TX	76307-0720	752429644	501(c)(3)	\$ 5,161.02			Screening, Treatment
North Central Texas Community Health Car	P.O. Box 720	Wichita Falls	TX	76307-0720	752429644	501(c)(3)	\$ 12,335.46			Screening, Treatment
North Central Texas Community Health Car	P.O. Box 720	Wichita Falls	TX	76307-0720	752429644	501(c)(3)	\$ 17,496.48			Screening, Treatment
Moncrief Cancer Institute / UTSW	400 W. Magnolia Ave.	Fort Worth	TX	76104	756002868	501(c)(3)	\$ 10,142.68			Screening, Treatment
Moncrief Cancer Institute / UTSW	400 W. Magnolia Ave.	Fort Worth	TX	76104	756002868	501(c)(3)	\$ 12,357.32			Screening, Treatment
Moncrief Cancer Institute / UTSW	400 W. Magnolia Ave.	Fort Worth	TX	76104	756002868	501(c)(3)	\$ 22,500.00			Screening, Treatment
Methodist Richardson Medical Center/CFWH	401 W. Campbell Road	Richardson	TX	75080	751788520	501(c)(3)	\$ 5,172.50			Education, Screening, Treatment
Methodist Richardson Medical Center/CFWH	401 W. Campbell Road	Richardson	TX	75080	751788520	501(c)(3)	\$ 12,327.50			Education, Screening, Treatment
Methodist Richardson Medical Center/CFWH	401 W. Campbell Road	Richardson	TX	75080	751788520	501(c)(3)	\$ 17,500.00			Education, Screening, Treatment
UMC Foundation	601 Indiana Ave.	Lubbock	TX	79415	742540513	501(c)(3)	\$ 4,254.58			Screening, Treatment
UMC Foundation	601 Indiana Ave.	Lubbock	TX	79415	742540513	501(c)(3)	\$ 7,197.58			Screening, Treatment
UMC Foundation	601 Indiana Ave.	Lubbock	TX	79415	742540513	501(c)(3)	\$ 11,452.16			Screening, Treatment
Texas Health Resources Foundation	612 E. Lamar Blvd. Suite 300	Arlington	TX	76011	752022128	501(c)(3)	\$ 1,824.12			Education, Screening, Treatment

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SUSAN G. KOMEN BREAST CANCER FOUNDATION - GROUP
 YEAR ENDED MARCH 31, 2021
 SCHEDULE I

EIN # 75-2462834
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Recipient Name	Street Address	City	State	Zip	EIN #	IRS Section	Total Amount of Cash Grants	Method of Valuation	Description of Non-Cash assistance	Purpose of Grant - Education, Screening or Treatment
Texas Health Resources Foundation	612 E. Lamar Blvd. Suite 300	Arlington	TX	76011	752022128	501(c)(3)	\$ 15,663.12			Education, Screening, Treatment
Texas Health Resources Foundation	612 E. Lamar Blvd. Suite 300	Arlington	TX	76011	752022128	501(c)(3)	\$ 17,487.24			Education, Screening, Treatment
YWCA of Lubbock	3101 35th Street	Lubbock	TX	79413	750939427	501(c)(3)	\$ 8,011.25			Screening, Treatment
YWCA of Lubbock	3101 35th Street	Lubbock	TX	79413	750939427	501(c)(3)	\$ 9,488.75			Screening, Treatment
YWCA of Lubbock	3101 35th Street	Lubbock	TX	79413	750939427	501(c)(3)	\$ 17,500.00			Screening, Treatment
The San Antonio Chapter of the Susan G. Komen Breast Cancer Foundation, Inc.										
Alamo Breast Cancer Foundation	8115 Datapoint Drive	San Antonio	TX	78229	742692725	501(c)(3)	\$ 12,500.00			Treatment
YWCA of San Antonio	503 Castroville Road	San Antonio	TX	78237	741143135	501(c)(3)	\$ 8,250.00			Education
YWCA of San Antonio	503 Castroville Road	San Antonio	TX	78237	741143135	501(c)(3)	\$ 24,932.32			Education
Martinez Street Womens Center	801 N. Olive	San Antonio	TX	78202	742934053	501(c)(3)	\$ 13,750.00			Education, Screening
Martinez Street Womens Center	801 N. Olive	San Antonio	TX	78202	742934053	501(c)(3)	\$ 15,118.00			Education, Screening
Support Lending for Emotional Well-being	12525 Nacogdoches Rd, Ste 104	San Antonio	TX	78217	421580967	501(c)(3)	\$ 24,583.33			Treatment
Support Lending for Emotional Well-being	12525 Nacogdoches Rd, Ste 104	San Antonio	TX	78217	421580967	501(c)(3)	\$ 10,416.00			Treatment
University Health System	4502 Medical Dr., MS# 45-2	San Antonio	TX	78229	742335396	501(c)(3)	\$ 21,750.00			Screening
ThriveWell Cancer Foundation	P. O. Box 29331	San Antonio	TX	78229	260371270	501(c)(3)	\$ 56,250.00			Treatment
ThriveWell Cancer Foundation	P. O. Box 29331	San Antonio	TX	78229	260371270	501(c)(3)	\$ 3,750.00			Treatment
W.I.N.G.S.	PO Box 5007	San Antonio	TX	78201	742920912	501(c)(3)	\$ 31,666.67			Screening, Treatment
W.I.N.G.S.	PO Box 5007	San Antonio	TX	78201	742920912	501(c)(3)	\$ 25,783.68			Screening, Treatment
Friends of Santa Rosa Foundation	100 NE Loop 410, Suite 706	San Antonio	TX	78216	742723391	501(c)(3)	\$ 36,250.00			Screening
American Cancer Society	7800 W IH-10 Suite 130	San Antonio	TX	78230	741185665	501(c)(3)	\$ 25,000.00			Treatment
Greater Richmond Virginia Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.										
VCU Community Memorial Healthc	P.O. Box 90, 416 Durant Street	South Hill	VA	23970	540551711	501(c)(3)	35,000.00			Screening
Bon Secours Richmond Health Ca	5008 Monument Avenue, 2nd Floor	Richmond	VA	23230	541201346	501(c)(3)	40,000.00			Screening
Sentara Norfolk General Hospit	600 Gresham Drive	Norfolk	VA	23507	541547408	501(c)(3)	30,000.00			Screening
Riverside Hospital, Inc.	608 Denbigh Blvd 800	Newport News	VA	23608	521245746	501(c)(3)	30,000.00			Screening
Bon Secours Richmond Health Ca	5008 Monument Avenue, 2nd Floor	Richmond	VA	23230	541201346	501(c)(3)	70,000.00			Screening
Sentara Norfolk General Hospit	600 Gresham Drive	Norfolk	VA	23507	541547408	501(c)(3)	70,000.00			Screening
Greater Roanoke Valley Area Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.										
Virginia Tech Polytechnic and State Univ	300 Turner Street NW, Suite 3300	Blacksburg	VA	24061-0001	546001805	501(c)(3)	\$ 45,000.00			Research
Virginia Department of Health, Mt. Roger	201 Francis Marion Lane, Marion, VA 24354	Marion	VA	24354	546001775	501(c)(3)	\$ 100,000.00			Screening
Carilion Clinic Breast Care Center	213 South Jefferson St., Suite 301, Roanoke, VA 24011	Roanoke	VA	24001	540506332	501(c)(3)	\$ 125,000.00			Screening
Centra Health, Inc.	1920 Atherholt Road, Lynchburg, VA 24501	Lynchburg	VA	24501	540715569	501(c)(3)	\$ 50,000.00			Screening
Martinsville Henry County Coalition	22 East Church St. Suite 311, Martinsville, VA 24112-6208	Martinsville	VA	24112-6208	202448149	501(c)(3)	\$ 97,260.00			Screening
Mountain States Health Alliance.	303 MedTech Parkway, Suite 370, Johnson City, TN 37604	Johnson City	TN	37604	540544705	501(c)(3)	\$ 44,368.00			Screening
Piedmont Access To Health Services, Inc.	705 Main Street, Danville, VA 24541-1803	Danville	VA	24541-1803	542026502	501(c)(3)	\$ 49,286.43			Screening
Wisconsin Affiliate of the Susan G. Komen Foundation										
ABCD	5775 North Glen Park Rd, Ste 201	Glendale	WI	53209	391967028	501(c)(3)	\$ 2,500.00			Education
Aspirus Health Foundation	425 Pine Ridge Blvd.	Wausau	WI	54401	391609532	501(c)(3)	\$ 12,000.00			Screening
Aurora Health Care, Inc.	950 N. 12th St .Ste A511	Milwaukee	WI	53233	391442285	501(c)(3)	\$ 5,000.00			Education
Breast Cancer Recovery	6180 Verona Rd, Ste 300	Fitchburg	WI	53719	391894850	501(c)(3)	\$ 2,500.00			Education
Catholic Multicultural Center	1862 Beld Street	Madison	WI	53713	390824008	501(c)(3)	\$ 2,500.00			Education
Columbia St. Mary's Foundation	2320 N. Lake Drive	Milwaukee	WI	53211	391494981	501(c)(3)	\$ 5,000.00			Education
Cynthia's Breast Cancer Giving	5421 W Keefe Ave	Milwaukee	WI	56216	273669440	501(c)(3)	\$ 4,000.00			Education
Gerald L Ignace Indian Health	930 W. Historic Mitchell Street	Milwaukee	WI	53204-3310	391958089	501(c)(3)	\$ 5,000.00			Screening
Gilda's Club	7907 UW Health Court	Madison	WI	53562	061662883	501(c)(3)	\$ 5,000.00			Education
iMETx, Inc	8806 Royal Oaks Dr	Verona	WI	53593	824877969	501(c)(3)	\$ 20,000.00			Education
Justice for a Cure	2935 S. Fish Hatchery Rd., #333	Madison	WI	53711	462420205	501(c)(3)	\$ 2,500.00			Education
Marshfield Clinic Research Fou	1000 North Oak Avenue	Marshfield	WI	54449-5790	390452970	501(c)(3)	\$ 5,000.00			Screening
Medical College of Wisconsin	8701 W Watertown Plank Rd.	Milwaukee	WI	53226	390806261	501(c)(3)	\$ 20,000.00			Education
Medical College of Wisconsin	8701 W Watertown Plank Rd.	Milwaukee	WI	53226	390806261	501(c)(3)	\$ 20,000.00			Treatment
Milwaukee Consortium for Hmong	1445 North 24th Street	Milwaukee	WI	53205	263285743	501(c)(3)	\$ 5,000.00			Screening
Milwaukee Health Services, Inc	2555 N. Martin Luther King Jr. Drive	Milwaukee	WI	53212-2707	391664109	501(c)(3)	\$ 5,000.00			Screening
Muslim Community and Health Ce	803 West Layton Ave	Milwaukee	WI	53221-2426	452385629	501(c)(3)	\$ 5,000.00			Education

PUBLIC INSPECTION COPY

SUSAN G. KOMEN BREAST CANCER FOUNDATION - GROUP
 YEAR ENDED MARCH 31, 2021
 SCHEDULE I

EIN # 75-2462834
 2020 Form 990

Recipient Name	Street Address	City	State	Zip	EIN #	IRS Section	Total Amount of Cash Grants	Method of Valuation	Description of Non-Cash assistance	Purpose of Grant - Education, Screening or Treatment
ProHealth Care	725 American Avenue	Waukesha	WI	53188	390910727	501(c)(3)	\$ 5,000.00			Education
University of WI - Milwaukee F	P.O. Box 413	Milwaukee	WI	53201	391805963	501(c)(3)	\$ 5,000.00			Screening
University of Wisconsin Hospit	21 N. Park Street 6230	Madison	WI	53715-1218	396006492	501(c)(3)	\$ 20,000.00			Education
UW Carbone Cancer Center	600 Highland Avenue	Madison	WI	53792	391805963	501(c)(3)	\$ 12,000.00			Education
Wheaton Franciscan Healthcare	3237 South 16th Street	Milwaukee	WI	5315	320135258	501(c)(3)	\$ 5,000.00			Education
Wisconsin Breast Cancer Coalit	PO Box 170031	Milwaukee	WI	53217-8000	391831382	501(c)(3)	\$ 2,500.00			Education
Wisconsin Inter-tribal Pink Sh	3960 S Avon Dr	New Berlin	WI	53151	264247458	501(c)(3)	\$ 5,000.00			Education
Total							\$ 10,254,962.21			

SCHEDULE J (Form 990)

Compensation Information

OMB No. 1545-0047

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

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

2020

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP

Employer identification number

75-2462834

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- First-class or charter travel, Travel for companions, Tax indemnification and gross-up payments, Discretionary spending account, Housing allowance or residence for personal use, Payments for business use of personal residence, Health or social club dues or initiation fees, Personal services (such as maid, chauffeur, chef)

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- Compensation committee, Independent compensation consultant, Form 990 of other organizations, Written employment contract, Compensation survey or study, Approval by the board or compensation committee

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a Receive a severance payment or change-of-control payment?
b Participate in or receive payment from a supplemental nonqualified retirement plan?
c Participate in or receive payment from an equity-based compensation arrangement?
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a The organization?
b Any related organization?
If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a The organization?
b Any related organization?
If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III.

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Table with 3 columns: Question, Yes, No. Rows 1a-9 with 'X' marks in Yes/No columns.

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

Schedule J (Form 990) 2020

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 TIOSHA BAILEY EXEC DIR. - CHICAGOLAND	(i)	226,653.	0.	0.	0.	30,497.	257,150.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 MEGAN KLINK (TERM 11/20) CEO - ORANGE COUNTY	(i)	158,192.	0.	0.	0.	4,573.	162,765.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3 AMY TREADWAY (TERM 9/20) EXEC DIRECTOR-ARKANSAS	(i)	157,055.	0.	0.	0.	3,389.	160,444.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
4 DAVID EGAN EXECUTIVE DIRECTOR - MINNESOTA	(i)	175,984.	0.	0.	0.	0.	175,984.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
5 ERICA R. TERRY CEO - KANSAS & W. MISSOURI	(i)	194,171.	0.	0.	0.	1,358.	195,529.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
6 LINDA TANTAWI CEO - GREATER NYC (TERM 11/20)	(i)	251,245.	0.	0.	0.	18,661.	269,906.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
7 KRISTIN S HARRIS EXEC DIRECTOR-CENTRAL/EAST VA	(i)	148,961.	0.	0.	0.	6,752.	155,713.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
8 GLEN PECK (TERM 11/20) SR DIRECTOR-GREATER NYC	(i)	146,444.	0.	0.	0.	5,801.	152,245.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
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

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

SCHEDULE J, PART I, LINE 4A

DAVID EGAN RECEIVED SEVERANCE OF \$58,661.

AMY TREADWAY RECEIVED SEVERANCE OF \$57,692.

TIOSHA BAILEY RECEIVED SEVERANCE OF \$75,479.

ERICA TERRY RECEIVED SEVERANCE OF \$56,769.

LINDA TANTAWI RECEIVED SEVERANCE OF \$94,050.

KRISTIN HARRIS RECEIVED SEVERANCE OF \$57,206.

GLEN PECK RECEIVED SEVERANCE OF \$5,760

MOLLY M O'CONNOR RECEIVED SEVERANCE OF \$31,111.

LINDA L MARICLE RECEIVED SEVERANCE OF \$42,000.

JULIE A JACOBSON RECEIVED SEVERANCE OF \$44,447.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP	Employer identification number 75-2462834
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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				
6 Cars and other vehicles.				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (<u>ATCH 1</u>)		258 .	96,322 .	
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

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

		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't 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 nonstandard 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 didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

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

Schedule M (Form 990) 2020

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

SCHEDULE M, PART II, LINE 32A

IN CONJUNCTION WITH MAJOR EVENTS, AFFILIATES EMPLOY SERVICES OF THIRD PARTIES TO HELP PRODUCE THE EVENT. THE SERVICES MAY INCLUDE OBTAINING IN-KIND GOODS AND SERVICES RELATED DIRECTLY TO THESE EVENTS.

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

ATTACHMENT 1

SCHEDULE M, PART I - OTHER NONCASH CONTRIBUTIONS

<u>DESCRIPTION</u>	<u>(A) CHECK</u>	<u>(B) NUMBER OF CONTRIBUTIONS</u>	<u>(C) REVENUES REPORTED</u>	<u>(D) METHOD OF DETERMINING</u>
EVENT-RELATED ITEMS	X	258.	96,322.	FMV OF DONATED PROP
TOTALS		<u>258.</u>	<u>96,322.</u>	

SCHEDULE N
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Liquidation, Termination, Dissolution, or Significant Disposition of Assets

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 31 or 32, or Form 990-EZ, line 36.
- ▶ Attach certified copies of any articles of dissolution, resolutions, or plans.
- ▶ Attach to Form 990 or 990-EZ.
- ▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP

Employer identification number

75-2462834

Part I **Liquidation, Termination, or Dissolution.** Complete this part if the organization answered "Yes" on Form 990, Part IV, line 31, or Form 990-EZ, line 36. Part I can be duplicated if additional space is needed.

1	(a) Description of asset(s) distributed or transaction expenses paid	(b) Date of distribution	(c) Fair market value of asset(s) distributed or amount of transaction expenses	(d) Method of determining FMV for asset(s) distributed or transaction expenses	(e) EIN of recipient	(f) Name and address of recipient	(g) IRC section of recipient(s) (if tax-exempt) or type of entity
	NORTH JERSEY AFFILIATE	07/28/2020	753,829.	ACTUAL COST	75-1835298	SUSAN G. KOMEN BREAST CANCER FDN INC. 13770 NOEL RD STE 801889 DALLAS, TX 75380	501(C)(3)

2 Did or will any officer, director, trustee, or key employee of the organization:

- a Become a director or trustee of a successor or transferee organization?
- b Become an employee of, or independent contractor for, a successor or transferee organization?
- c Become a direct or indirect owner of a successor or transferee organization?
- d Receive, or become entitled to, compensation or other similar payments as a result of the organization's liquidation, termination, or dissolution?
- e If the organization answered "Yes" to any of the questions on lines 2a through 2d, provide the name of the person involved and explain in Part III. ▶

	Yes	No
2a		X
2b		X
2c		X
2d		X

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

Schedule N (Form 990 or 990-EZ) 2020

Part I Liquidation, Termination, or Dissolution (continued)

Note: If the organization distributed all of its assets during the tax year, then Form 990, Part X, column (B), line 16 (Total assets), and line 26 (Total liabilities), should equal -0-

	Yes	No
3 Did the organization distribute its assets in accordance with its governing instrument(s)? If "No," describe in Part III	X	
4a Is the organization required to notify the attorney general or other appropriate state official of its intent to dissolve, liquidate, or terminate?	X	
4b If "Yes," did the organization provide such notice?	X	
5 Did the organization discharge or pay all of its liabilities in accordance with state laws?	X	
6a Did the organization have any tax-exempt bonds outstanding during the year?		X
6b If "Yes" to line 6a, did the organization discharge or defease all of its tax-exempt bond liabilities during the tax year in accordance with the Internal Revenue Code and state laws?		
c If "Yes" on line 6b, describe in Part III how the organization defeased or otherwise settled these liabilities. If "No" on line 6b, explain in Part III.		

Part II Sale, Exchange, Disposition, or Other Transfer of More Than 25% of the Organization's Assets. Complete this part if the organization answered "Yes" on Form 990, Part IV, line 32, or Form 990-EZ, line 36. Part II can be duplicated if additional space is needed.

1	(a) Description of asset(s) distributed or transaction expenses paid	(b) Date of distribution	(c) Fair market value of asset(s) distributed or amount of transaction expenses	(d) Method of determining FMV for asset(s) distributed or transaction expenses	(e) EIN of recipient	(f) Name and address of recipient	(g) IRC section of recipient(s) (if tax-exempt) or type of entity

	Yes	No
2 Did or will any officer, director, trustee, or key employee of the organization:		
a Become a director or trustee of a successor or transferee organization?		
b Become an employee of, or independent contractor for, a successor or transferee organization?		
c Become a direct or indirect owner of a successor or transferee organization?		
d Receive, or become entitled to, compensation or other similar payments as a result of the organization's significant disposition of assets?		
e If the organization answered "Yes" to any of the questions on lines 2a through 2d, provide the name of the person involved and explain in Part III		

Part III **Supplemental Information.** Provide the information required by Part I, lines 2e and 6c, and Part II, line 2e. Also complete this part to provide any additional information.

SCHEDULE N, PART I

THE NORTH JERSEY AFFILATE OF THE SUSAN G. KOMEN BREAST CANCER FOUNDATION,
INC. DISSOLVED ON JULY 28, 2020, PURSUANT TO ITS GOVERNING DOCUMENTS AND
STATE LAW.

**SCHEDULE O
(Form 990 or 990-EZ)**

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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.

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

Name of the organization

THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP

Employer identification number

75-2462834

FORM 990, PART III - PROGRAM SERVICE ACCOMPLISHMENTS

SUSAN G. KOMEN'S MISSION IS TO SAVE LIVES FROM BREAST CANCER, BY FINDING
BREAKTHROUGHS TO PREVENT, DETECT, TREAT, AND CURE BREAST CANCER, AND BY
MEETING MOST CRITICAL NEEDS IN COMMUNITIES TO ENSURE EVERYONE GETS THE
BREAST CANCER CARE THEY NEED WHEN THEY NEED IT.

KOMEN TAKES A 360 DEGREE APPROACH TO FIGHT BREAST CANCER THROUGH
. RESEARCH, TO DRIVE BREAKTHROUGHS THAT WILL BRING US NEW KNOWLEDGE
AND ADVANCES IN CARE FOR ALL,

. COMMUNITY HEALTH, TO EMPOWER PEOPLE WITH TRUSTWORTHY INFORMATION
AND SUPPORT PEOPLE IN THEIR BREAST HEALTH JOURNEY THROUGH DIRECT
SERVICES, COMMUNITY PROGRAMS AND HEALTH SYSTEMS CHANGE.

. AND PUBLIC POLICY, WHERE WE ADVOCATE FOR POLICIES TO CREATE
SYSTEMIC AND LASTING CHANGES THAT WILL FUND AND FACILITATE RESEARCH AND
ALLEVIATE THE BURDEN ON PATIENTS AND PROTECT ACCESS TO AFFORDABLE,
HIGH-QUALITY HEALTH CARE FOR ALL.

KOMEN IS A LEADING GLOBAL BREAST CANCER ORGANIZATION, HAVING FUNDED MORE
BREAST CANCER RESEARCH THAN ANY OTHER NONPROFIT OUTSIDE OF THE U.S.
GOVERNMENT WHILE PROVIDING REAL TIME HELP TO THOSE FACING THE DISEASE.
SINCE ITS FOUNDING IN 1982, KOMEN HAS FUNDED OVER \$1.1 BILLION IN BREAST
CANCER RESEARCH IN MORE THAN 2700 GRANTS AND 500 CLINICAL TRIALS
CONDUCTED BY THOUSANDS OF THE WORLD'S BEST AND BRIGHTEST RESEARCHERS
ACROSS THE US AND AROUND THE WORLD. KOMEN HAS ALSO PROVIDED OVER \$2.3
BILLION IN FUNDING FOR PATIENT NAVIGATION, SCREENING, DIAGNOSIS,

Name of the organization THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP	Employer identification number 75-2462834
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TREATMENT, EDUCATION , ADVOCACY, AND PSYCHOSOCIAL SUPPORT PROGRAMS SERVING MILLIONS OF PEOPLE IN MORE THAN 60 COUNTRIES WORLDWIDE. KOMEN WAS FOUNDED BY NANCY G. BRINKER, WHO PROMISED HER SISTER, SUSAN G. KOMEN, THAT SHE WOULD END THE DISEASE THAT CLAIMED SUZY'S LIFE.

WITH THIS INVESTMENT, KOMEN IS SUPPORTING LABORATORY RESEARCH, TRANSLATIONAL STUDIES, AND CLINICAL TRIALS THAT ARE PAVING THE ROAD WITH SCIENTIFIC DISCOVERIES THAT ARE:

- UNRAVELLING THE BIOLOGY OF BREAST CANCER,
- LEADING TO THE DEVELOPMENT OF NEW BREAST CANCER DRUGS,
- DEVELOPMENT OF NEW TECHNOLOGIES AND TESTS, AND
- NEW INTERVENTIONS THAT ARE CHANGING THE STANDARD OF BREAST CANCER CARE AND IMPROVING THE DELIVERY OF THAT CARE.

OUR GOAL IS TO ADVANCE PERSONALIZED MEDICINE AND IMPROVE HEALTH OUTCOMES FOR EVERYONE. KOMEN HAS HAD MORE THAN 680 RESEARCH DISCOVERIES SINCE WE STARTED TRACKING THEM IN 2016 THAT ARE MOVING US CLOSER TO THAT GOAL. NEARLY TWO-THIRDS OF THESE DISCOVERIES FOCUS ON OUR RESEARCH PRIORITIES OF CONQUERING METASTATIC AND AGGRESSIVE BREAST CANCERS AND ELIMINATING BREAST CANCER DISPARITIES. THEY INCLUDE SUCH THINGS AS NEW BIOMARKERS, NEW DRUG TARGETS, NEW TREATMENTS, AND NEW HEALTHCARE DELIVERY TOOLS IN PAVING THIS ROAD WITH SCIENTIFIC DISCOVERIES, WE'RE ALSO PAVING IT WITH HOPE. THE HOPE THAT NEW WAYS TO DETECT, DIAGNOSE, TREAT, PREVENT - AND ULTIMATELY CURE - BREAST CANCER ARE AROUND THE CORNER. THERE WHEN PEOPLE WITH BREAST CANCER NEED THEM TO ALLOW THEM TO LIVE LONGER, WITH

Name of the organization THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP	Employer identification number 75-2462834
---	--

IMPROVED QUALITY OF LIFE.

RESEARCH

SINCE ITS FOUNDING IN 1982, KOMEN'S RESEARCH INVESTMENTS HAVE CONTRIBUTED TO MANY MAJOR ADVANCES IN BREAST CANCER. THE PROGRESS HAS BEEN SIGNIFICANT - TODAY, WE KNOW THAT BREAST CANCER IS MORE THAN A SINGLE DISEASE. WE HAVE A BETTER UNDERSTANDING OF THE GENETICS OF BREAST CANCER AND THE CRITICAL NEED TO TAILOR SCREENING, DIAGNOSIS, TREATMENT, AND PREVENTION STRATEGIES TO INDIVIDUALS THROUGH ADVANCES IN PRECISION MEDICINE.

KOMEN'S RESEARCH PROGRAMS ARE FOCUSED ON BREAKTHROUGH RESEARCH TO PREVENT AND CURE BREAST CANCER THROUGH BETTER APPROACHES FOR EARLY DETECTION AND DIAGNOSIS, UNDERSTANDING METASTASIS AND RECURRENCE, AND DEVELOPING NOVEL THERAPIES FOR ALL STAGES OF BREAST CANCER, WITH THE GOAL OF SUPPORTING WORK THAT HAS SIGNIFICANT POTENTIAL TO LEAD TO NEW TREATMENTS AND TECHNOLOGIES.

KOMEN'S RESEARCH PROGRAMS ARE GUIDED BY 46 OF THE WORLD'S LEADERS IN BREAST CANCER RESEARCH, ONCOLOGY AND ADVOCACY. THE SCIENTIFIC ADVISORY BOARD ASSISTS KOMEN IN SETTING ITS RESEARCH STRATEGY AND PRIORITIZING ITS RESEARCH INVESTMENT. THE KOMEN SCHOLARS LEAD AND PARTICIPATE IN KOMEN'S WORLD-CLASS SCIENTIFIC PEER REVIEW PROCESS. OUR ADVOCATES IN SCIENCE BRING THE COLLECTIVE PATIENT VOICE TO KOMEN'S RESEARCH PROGRAMS AND

Name of the organization THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP	Employer identification number 75-2462834
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SCIENTIFIC ACTIVITIES, EMPHASIZING URGENCY AND PATIENT IMPACT.

KOMEN AWARDS GRANTS TO INDIVIDUAL SCIENTISTS, RESEARCH TEAMS, AND ORGANIZATIONS AROUND THE WORLD THROUGH A FAIR, TRANSPARENT, RIGOROUS, AND COMPETITIVE REVIEW PROCESS THAT ENSURES MAXIMUM IMPACT FOR OUR RESEARCH INVESTMENT. IN FY21, KOMEN AWARDED 30 GRANTS THROUGH ITS RESEARCH PROGRAMS TO SUPPORT SCIENTIFIC RESEARCH, IN THE UNITED STATES, CANADA, AND ZIMBABWE. CAREER CATALYST RESEARCH GRANTS SUPPORT EARLY CAREER INVESTIGATORS CONDUCTING OUTSTANDING RESEARCH THAT WILL USE LIQUID BIOPSY TECHNOLOGY TO IMPROVE THE TREATMENT AND EARLY DETECTION OF METASTATIC BREAST CANCER. LEADERSHIP GRANTS SUPPORT KOMEN SCHOLARS PURSUING INNOVATIVE RESEARCH PROJECTS WHICH WILL IMPROVE THE UNDERSTANDING, DETECTION, TREATMENT OR PREVENTION OF BREAST CANCER, WITH A FOCUS ON CONQUERING METASTATIC BREAST CANCER AND ELIMINATING BREAST CANCER DISPARITIES.

WHILE AFFILIATES DO NOT FUND RESEARCH GRANTS DIRECTLY, A PORTION OF THE NET FUNDS RAISED BY EVERY AFFILIATE (APPROXIMATELY 25%) GOES TO SUPPORT THE RESEARCH PROGRAM AT KOMEN HEADQUARTERS. IN FY21, KOMEN AWARDED 4 GRANTS THROUGH ITS RESEARCH PROGRAMS TO SUPPORT SCIENTIFIC RESEARCH IN THE UNITED STATES.

EDUCATION

KOMEN IS A TRUSTED SOURCE OF BREAST CANCER INFORMATION FOR PEOPLE ALL OVER THE WORLD AND IS INSTRUMENTAL IN CONNECTING PEOPLE WITH THE

Name of the organization THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP	Employer identification number 75-2462834
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RESOURCES THEY NEED IN THEIR FIGHT AGAINST BREAST CANCER.

OUR WEBSITE, KOMEN.ORG, PROVIDES CURRENT, SAFE, ACCURATE, COMPREHENSIVE, AND UNBIASED INFORMATION ABOUT BREAST CANCER, BASED ON SCIENTIFIC EVIDENCE. CONTENT IS OFFERED IN A VARIETY OF FORMATS INCLUDING INTERACTIVE VIDEO USING ANIMATION AND VOICEOVER IN ENGLISH AND SPANISH, ILLUSTRATIONS, CHARTS, GRAPHS, AND SHORT VIDEOS TO MEET THE LEARNING PREFERENCES AND NEEDS OF OUR WEB VISITORS. THE "ABOUT BREAST CANCER" AND PORTIONS OF THE "PATIENT & CAREGIVER" SECTIONS OF KOMEN'S WEBSITE, CO-DEVELOPED WITH HARVARD MEDICAL SCHOOL FACULTY AND DANA-FARBER CANCER INSTITUTE STAFF, RECEIVED MORE THAN 4 MILLION PAGE VIEWS DURING FY21.

KOMEN AND ITS AFFILIATES DISTRIBUTE KOMEN'S EVIDENCED-BASED, EASY-TO-READ EDUCATIONAL MATERIALS IN DOWNLOADABLE FORMATS ON KOMEN.ORG. EXAMPLES OF KOMEN EDUCATIONAL MATERIALS INCLUDE:

- (A) BREAST SELF-AWARENESS MESSAGE CARDS IN MORE THAN 40 LANGUAGES;
- (B) BREAST CANCER SPECIFIC BROCHURES AND FACTSHEETS;
- (C) BOOKLETS WITH SUPPORT INFORMATION FOR SURVIVORS AND CO-SURVIVORS; AND
- (D) TOOLKITS FOR BREAST CANCER OUTREACH AND EDUCATION FOR HISPANIC/LATINO IN ENGLISH AND SPANISH, BLACK AND AFRICAN AMERICAN COMMUNITIES AND LESBIANS, BISEXUAL WOMEN AND TRANSGENDER AND QUESTIONING/QUEER PEOPLE.

IN ADDITION, IN FY21 KOMEN CONTINUED TO SUPPORT THE METASTATIC BREAST CANCER (MBC) COMMUNITY BY HOSTING 29 VIRTUAL EVENTS THROUGH THE MBC IMPACT SERIES WHICH INCLUDES EVENTS HELD BY AFFILIATES. THESE EVENTS

Name of the organization THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP	Employer identification number 75-2462834
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PROVIDED PEOPLE LIVING WITH METASTATIC BREAST CANCER AND THEIR LOVED ONES A SAFE, COLLABORATIVE SPACE TO GATHER INFORMATION AND DISCOVER PRACTICAL RESOURCES TO HELP MAKE DECISIONS FOR IMPROVED PHYSICAL AND EMOTIONAL HEALTH. IN COMMUNITIES AROUND THE UNITED STATES, KOMEN AFFILIATES SUPPORT PROGRAMS THAT SEEK TO EDUCATE THE PUBLIC ABOUT BREAST CANCER, ITS RISK FACTORS, AND WHERE TO GO FOR HELP. EXAMPLES ARE LISTED BELOW:

THE CHICAGO AFFILIATE PROVIDED FUNDING TO THE MICHAEL REESE RESEARCH AND EDUCATION FOUNDATION TO REDUCE BREAST CANCER MORTALITY BY ADDRESSING DISPARITIES, INCREASING ACCESS TO QUALITY AND TIMELY CARE, AND/OR IMPROVING OUTCOMES THROUGH PATIENT NAVIGATION. TWO ON STAFF PATIENT NAVIGATORS WILL CONDUCT COMMUNITY-BASED WORKSHOPS TO EDUCATE 300 UNINSURED, UNDERINSURED, AND/OR UNDERSERVED WOMEN FROM THE BLACK COMMUNITY AT OR BELOW THE FEDERAL POVERTY LINE ON BREAST HEALTH AND BREAST CANCER SCREENINGS. INDIVIDUALS IN NEED OF BREAST CANCER SCREENINGS WHO ATTEND THESE WORKSHOPS WILL BE SIGNED UP FOR NO COST CLINICAL BREAST EXAMS AND MAMMOGRAMS TO ELIMINATE BARRIERS TO CARE.

THE DALLAS COUNTY AFFILIATE AWARDED GRANT FUNDS TO THE METHODIST RICHARDSON MEDICAL CENTER FOUNDATION TO PROVIDE THE FULL BREAST HEALTH CONTINUUM OF CARE TO PRIMARILY LOW-INCOME ASIAN AND HISPANIC IMMIGRANTS WHO ARE UNINSURED OR UNDERINSURED. THIS PROGRAM UTILIZES ONE-ON-ONE EDUCATION IN THE CLIENT'S NATIVE LANGUAGE TO TEACH 400 WOMEN THE IMPORTANCE OF EARLY DETECTION. WOMEN IN NEED OF SCREENINGS OR THOSE WHO ARE IDENTIFIED AS HIGH-RISK ARE SCHEDULED FOR FREE OR REDUCED COST

Name of the organization THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP	Employer identification number 75-2462834
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MAMMOGRAMS FOLLOWING THE CULTURALLY COMPETENT EDUCATION SESSIONS.

THE MISSOURI AFFILIATE AWARDED GRANT FUNDS TO MERCY HEALTH FOUNDATION ST. LOUIS TO EDUCATE 600 UNDERSERVED AFRICAN-AMERICAN AND ASIAN WOMEN ON BREAST SELF-AWARNESS WITH AN EMPHASIS ON THE IMPORTANCE OF ANNUAL MAMMOGRAMS AND KNOWLEDGE OF WHAT IS NORMAL FOR EACH INDIVIDUAL. EDUCATED INDIVIDUALS WILL HAVE THE OPPORTUNITY TO RECEIVE FREE OR LOW-COST MAMMOGRAMS THROUGH THE MOBILE UNIT THAT IS ON-SITE FOR ALL EDUCATION EVENTS. IF A MAMMOGRAM COMES BACK WITH ABNORMAL RESULTS, INDIVIDUALS WILL BE NAVIGATED TO FREE OR LOW-COST DIAGNOSTIC SERVICES THROUGH CULTURALLY COMPETENT PATIENT NAVIGATION.

I AM KOMEN® IS THE MISSION ENGAGEMENT PROGRAM OF THE SUSAN G. KOMEN RACE FOR THE CURE® SERIES THAT MOTIVATES PEOPLE TO TAKE ACTION THAT MAY REDUCE THEIR RISK OF BREAST CANCER. THIS PROGRAM SPEAKS TO THE IMPORTANCE OF EARLY DETECTION AND HEALTHY LIVING WHILE ENCOURAGING PARTICIPANTS IN OUR KOMEN RACE EVENTS TO MAKE A PERSONAL COMMITMENT TO THEIR BREAST HEALTH. I AM KOMEN® IS A DECLARATION TO JOIN THE KOMEN COMMUNITY AS AN AMBASSADOR IN THE FIGHT AGAINST BREAST CANCER. OUR GOAL IS TO EDUCATE, ENGAGE, AND EMPOWER OUR RACE PARTICIPANTS AND CONNECT THEM TO OUR MISSION AND TO END BREAST CANCER FOREVER.

PATIENT SUPPORT

FY21 MARKED THE CREATION OF THE SUSAN G. KOMEN PATIENT CARE CENTER. THE OVERARCHING GOAL OF OUR PATIENT CARE CENTER OFFERINGS IS TO SAVE LIVES BY

Name of the organization THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP	Employer identification number 75-2462834
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ENSURING PATIENTS STAY IN THE BREAST CANCER CONTINUUM OF CARE, OVERCOME BARRIERS AND CHALLENGES TO HIGH-QUALITY BREAST CARE SERVICES, COMPLETE TREATMENT, AND HAVE A HIGH QUALITY OF LIFE AND IMPROVED LONG-TERM OUTCOMES. WE SERVE TENS OF THOUSANDS OF INDIVIDUALS NATIONWIDE AND PROVIDE A SUITE OF ESSENTIAL PATIENT SERVICES, INCLUDING ONE-ON-ONE PERSONAL CONNECTION TO OFFER PSYCHOSOCIAL SUPPORT; RESOURCE NAVIGATION TO LOCAL SERVICES; BREAST HEALTH EDUCATION; CONNECTION TO CLINICAL TRIALS; AND FINANCIAL ASSISTANCE TO PATIENTS IN TREATMENT. THE PATIENT CARE CENTER INCLUDES THE SUSAN G. KOMEN BREAST CARE HELPLINE, THE TREATMENT ASSISTANCE PROGRAM, AND PATIENT NAVIGATION. THE CENTER SERVED OVER 17,000 PEOPLE IN FY21.

KOMEN WORKED WITHIN NUMEROUS COALITIONS TO ADDRESS INSURANCE PUBLIC POLICY AND ADVOCACY

SUSAN G. KOMEN IS THE NONPARTISAN VOICE OF MORE THAN 3.8 MILLION BREAST CANCER SURVIVORS, THOSE LIVING WITH THE DISEASE AND THE PEOPLE WHO LOVE THEM. KOMEN WORKS TO EDUCATE PEOPLE ABOUT PUBLIC POLICY ISSUES, SO THEY ARE EMPOWERED TO BECOME FORCEFUL ADVOCATES FOR THEMSELVES AND THEIR NEIGHBORS, AND THEN UNITES THEIR COLLECTIVE VOICES FOR MAXIMUM IMPACT. THROUGH OUR CENTER FOR PUBLIC POLICY, KOMEN ENSURES THAT OUR POLICYMAKERS ARE EDUCATED ABOUT THE NEEDS OF BREAST CANCER PATIENTS AND PRIORITIZE THE ISSUES IMPACTING THEM. ONLY THROUGH INFORMED GOVERNMENT ACTION CAN WE MAKE THE BROAD, SYSTEMIC AND LASTING CHANGE REQUIRED.

Name of the organization THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP	Employer identification number 75-2462834
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KOMEN'S 2020-2021 PUBLIC POLICY AND ADVOCACY PRIORITIES INCLUDED:
 EXPANDING ACCESS TO AFFORDABLE, HIGH-QUALITY HEALTH CARE FOR ALL PATIENT POPULATIONS; SUPPORTING INCREASED STATE AND FEDERAL FUNDING FOR BREAST CANCER RESEARCH AND INCREASED EDUCATION, UTILIZATION OF AND ACCESS TO CLINICAL TRIALS; SUPPORTING STATE AND FEDERAL FUNDING FOR THE CENTERS FOR DISEASE CONTROL AND PREVENTION'S (CDC) NATIONAL BREAST AND CERVICAL CANCER EARLY DETECTION PROGRAM (NBCCEDP); ADVOCATING FOR STATE AND FEDERAL POLICIES TO IMPROVE INSURANCE COVERAGE OF BREAST CANCER TREATMENTS, INCLUDING THOSE THAT WOULD REQUIRE ORAL PARITY, PRECLUDE SPECIALTY TIERS AND PREVENT STEP THERAPY PROTOCOLS; AND ADVOCATING FOR STATE AND FEDERAL POLICIES TO REDUCE OR ELIMINATE OUT-OF-POCKET COSTS FOR MEDICALLY NECESSARY DIAGNOSTIC IMAGING. KOMEN ENGAGED ON THESE PRIORITIES ACROSS THE COUNTRY, SOME EXAMPLES ARE INCLUDED BELOW:

IN ARKANSAS, FLORIDA, GEORGIA, IOWA, KANSAS, MASSACHUSETTS, MINNESOTA, AND TEXAS KOMEN WORKED TO INTRODUCE LEGISLATION THAT ELIMINATED PATIENT'S OUT-OF-POCKET COSTS FOR MEDICALLY NECESSARY DIAGNOSTIC IMAGING FOR STATE REGULATED HEALTH PLANS. COVERED IMAGING INCLUDES DIAGNOSTIC MAMMOGRAPHY, BREAST ULTRASOUND AND/OR BREAST MRI.

KOMEN WORKED WITHIN NUMEROUS COALITIONS TO ADDRESS INSURANCE BARRIERS TO CARE THROUGH LEGISLATION IN STATES ACROSS THE COUNTRY. THIS INCLUDES AN EFFORT IN NEW JERSEY TO LIMIT OUT-OF-POCKET COSTS PATIENTS EXPERIENCE FOR NEEDED TREATMENTS AND IN OHIO WHERE LEGISLATION WAS PASSED TO PROHIBIT THE USE OF STEP THERAPY PROTOCOLS FOR THERAPIES USED BY STAGE FOUR CANCER

Name of the organization THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP	Employer identification number 75-2462834
---	--

PATIENTS.

FUNDING AND ELIGIBILITY OF STATE BREAST AND CERVICAL CANCER SCREENING PROGRAMS CONTINUED TO BE A FOCUS FOR KOMEN. IN COLORADO, OUR ADVOCATES WERE ABLE TO PREVENT A 33 PERCENT CUT FOR THE WOMEN'S WELLNESS CONNECTION, THE STATE SCREENING PROGRAM.

IN MISSOURI AND OKLAHOMA, WE SUPPORTED COALITION EFFORTS TO PASS BALLOT INITIATIVES TO EXPAND MEDICAID ELIGIBILITY IN THE STATE.

KOMEN SUBMITTED COMMENT LETTERS ON PROPOSED STATE WAIVERS THAT WOULD PLACE BURDENSOME RESTRICTIONS ON MEDICAID ELIGIBILITY. THE PROPOSED WAIVERS CALLED FOR MINIMUM WORK OR COMMUNITY ENGAGEMENT REQUIREMENTS FOR MEDICAID RECIPIENTS. IN ADDITION, MANY OF THE STATES INCLUDED COVERAGE LOCK-OUTS FOR FAILURE TO COMPLY. THE PROPOSED PROVISIONS WOULD HAVE PLACED UNNECESSARY BURDENS ON WOMEN UNDERGOING TREATMENT, ULTIMATELY LEADING TO THE STATE'S MOST FRAGILE CITIZENS BECOMING INELIGIBLE FOR COVERAGE AND FACING THE REALITY OF FOREGOING CANCER TREATMENT OR EXPERIENCING UNTOLD MEDICAL DEBT.

SCREENING AND PATIENT NAVIGATION
GETTING REGULAR SCREENING TESTS, ALONG WITH EFFECTIVE AND QUALITY TREATMENT IF DIAGNOSED, LOWERS THE RISK OF DYING FROM BREAST CANCER. SCREENING TESTS CAN FIND BREAST CANCER EARLY, WHEN CHANCES FOR SURVIVAL ARE HIGHEST. PATIENT NAVIGATION IS A PROCESS BY WHICH AN INDIVIDUAL - A

Name of the organization THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP	Employer identification number 75-2462834
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PATIENT NAVIGATOR - GUIDES PATIENTS THROUGH AND AROUND BARRIERS IN THE COMPLEX CANCER CARE SYSTEM. EVIDENCE SHOWS NAVIGATION IMPROVES ADHERENCE TO SCREENING RECOMMENDATIONS, AND THUS IMPROVES OVERALL OUTCOMES.

KOMEN AFFILIATES SUPPORT FREE AND LOW-COST SCREENING PROGRAMS IN UNDERSERVED COMMUNITIES THAT HELP NAVIGATE WOMEN TO QUALITY CARE, AND/OR PROVIDE COVERAGE FOR SCREENING SERVICES TO WOMEN WITHOUT HEALTH INSURANCE, OR THOSE WITH HIGH CO-PAYS AND DEDUCTIBLES THAT MAKE SCREENING TOO COSTLY. KOMEN AFFILIATES ENGAGED IN SCREENING AND PATIENT NAVIGATION ACTIVITIES ACROSS THE COUNTRY, SOME EXAMPLES ARE INCLUDED BELOW:

THE NEW JERSEY AFFILIATE AWARDED FUNDING TO HACKENSACK MERIDIAN HEALTH TO PROVIDE PATIENT NAVIGATION THAT ASSISTS WITH APPOINTMENT SCHEDULING AND COMPLETION OF MAMMOGRAMS AND DIAGNOSTIC SERVICES FOR UP TO 250 WOMEN IN NEED OF IMAGING OR FOLLOW UP CARE. THIS PROGRAM ALSO PROVIDES TARGETED EDUCATION TO SPANISH SPEAKING INDIVIDUALS TO PROVIDE ENTRY INTO THE CONTINUUM OF CARE.

THE ORANGE COUNTY AFFILIATE AWARDED GRANT FUNDS TO KOREAN COMMUNITY SERVICES INC. TO PROVIDE CULTURALLY COMPETENT PATIENT NAVIGATION SERVICES. THE KOMEN FUNDED PATIENT NAVIGATOR INCREASES AWARENESS OF EXISTING RESOURCES AND HELPS BREAK DOWN BARRIERS TO CARE THROUGH TRANSLATION SERVICES AND TRANSPORTATION ASSISTANCE.

THE NORTH & WEST TEXAS AFFILIATE AWARDED GRANT FUNDS TO TEXAS HEALTH

Name of the organization THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP	Employer identification number 75-2462834
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RESOURCES TO PROVIDE 200 MAMMOGRAMS TO LOW-INCOME, UNDERINSURED/UNINSURED AND CULTURALLY AND/OR GEOGRAPHICALLY ISOLATED WOMEN. TEXAS HEALTH RESOURCES ALSO PROVIDES FOLLOW-UP DIAGNOSTIC SERVICES THROUGH ITS EDIT PROGRAM, WHICH REDUCES BARRIERS TO CARE VIA MOBILE SCREENINGS IN AN EFFORT TO MEET WOMEN WHERE THEY LIVE, WORK, PLAY AND PARY THROUGH THE PROVISION OF INDIVIDUALIZED PATIENT NAVIGATION SERVICES. THIS PROGRAM ALSO OFFERS ONE-ON-ONE AND GROUP EDUCATION UTILIZING COMMUNITY HEALTH WORKERS.

TREATMENT AND PATIENT NAVIGATION BARRIERS TO QUALITY CARE ARE OFTEN ASSOCIATED WITH POOR BREAST CANCER OUTCOMES AND RESULTANT CANCER DISPARITIES AMONG SPECIFIC POPULATION GROUPS. THE MOST COMMON BARRIERS TO QUALITY CARE INCLUDE: (1) AVAILABILITY OF LOCAL SERVICES; (2) BREAST CANCER EDUCATION; (3) CULTURAL/LANGUAGE; (4) FEAR; (5) FINANCIAL; (6) INSURANCE; (7) TRANSPORTATION.

PATIENT NAVIGATION IS A PROCESS BY WHICH AN INDIVIDUAL - A PATIENT NAVIGATOR - GUIDES PATIENTS THROUGH AND AROUND BARRIERS IN THE COMPLEX CANCER CARE SYSTEM TO ENSURE TIMELY DIAGNOSIS AND TREATMENT. EVIDENCE SHOWS NAVIGATION IMPROVES ADHERENCE TO TREATMENT RECOMMENDATIONS, AND THUS IMPROVES OVERALL OUTCOMES.

IN FY21, KOMEN AFFILIATES FUNDED PROGRAMS TO REDUCE STRUCTURAL, PERSONAL, SOCIOCULTURAL, AND FINANCIAL BARRIERS TO CARE, AND PROVIDE PATIENT

Name of the organization THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP	Employer identification number 75-2462834
---	--

NAVIGATION SERVICES FOR UNDERSERVED COMMUNITIES. KOMEN AFFILIATES ENGAGED IN TREATMENT AND PATIENT NAVIGATION ACTIVITIES ACROSS THE COUNTRY, SOME EXAMPLES ARE INCLUDED BELOW:

THE SAN DIEGO AFFILIATE GRANTED FUNDING TO JEWISH FAMILY SERVICES (JFS) OF SAN DIEGO TO HELP NATIVE SPANISH SPEAKERS, LOW INCOME AND UN/UNDERINSURED BREAST CANCER PATIENTS COMPLETE THEIR TREATMENT AND IMPROVE THEIR QUALITY OF LIFE. THE JFS COORDINATOR REACHS LOW INCOME AFRICAN AMERICAN, ASIAN, AMERICAN INDIAN, AND MIDDLE EASTERN WOMEN WHO ARE NEWLY DIAGNOSED OR LIVING WITH BREAST CANCER TO COMPLETE INDIVIDUAL NEEDS ASSESSMENTS AND SERVICE PLANS, CONDUCT HOME VISITS, AND MONITOR PROGRESS THROUGHOUT THEIR CARE. JFS PLANS TO PROVIDE CLIENT ASSESSMENT AND DEVELOP CLIENT CARE PLANS FOR 160 WOMEN AND EVALUATE SERVICES PROVIDED FOR 56 WOMEN.

THE KENTUCKY AFFILIATE PROVIDED FUNDING TO CHI SAINT JOSEPH HEALTH TO AWARD INDIVIDUAL GRANTS UP TO \$5000 FOR LOW-INCOME BREAST CANCER PATIENTS AT 250% OR BELOW THE FEDERAL POVERTY LINE TO USE FOR TREATMENT EXPENSES, SUCH AS CO-PAY/DEDUCTIBLE ASSISTANCE OR PHARMACEUTICAL COSTS, AND COST OF LIVING EXPENSES, SUCH AS HOUSING, FOOD, UTILITY PAYMENTS, AND CHILDCARE. APPLICATIONS FOR THESE INDIVIDUAL GRANTS ARE ACCEPTED ON A ROLLING BASIS AND PATIENTS HAVE UP TO ONE YEAR FROM THE TIME OF AWARD TO UTILIZE THE FUNDING.

THE ARKANSAS AFFILIATE PROVIDED FUNDING TO THE ANGEL FUND FOUNDATION INC TO DISTRIBUTE UP TO \$500 EACH TO INDIVIDUALS IN ACTIVE TREATMENT FOR

Name of the organization THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP	Employer identification number 75-2462834
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BREAST CANCER. THESE FUNDS ARE TARGETED TO LOW-INCOME BLACK PATIENTS TO ASSIST WITH TREATMENT AND COST OF LIVING EXPENSES, INCLUDING HOUSING, TRANSPORTATION, AND CO-PAY/DEDUCTIBLE ASSISTANCE, TO ENSURE PATIENTS COMPLETE TREATMENT, REDUCE STRESS CAUSED BY BILLS, AND IMPROVE QUALITY OF LIFE.

NUMBER OF VOTING MEMBERS OF THE GOVERNING BODY
FORM 990, PART VI, LINE 1A

THIS REPRESENTS THE TOTAL NUMBER OF BOARD MEMBERS THAT SERVE ON THE BOARDS OF THE AFFILIATES THAT COMPRISE THE KOMEN GROUP RETURN. BOARDS OF THE AFFILIATES THAT COMPRISE THE KOMEN GROUP RETURN. THE AFFILIATES THAT COMPRISE THE KOMEN GROUP RETURN.

EXECUTIVE COMMITTEE
FORM 990, PART VI, LINE 1A

THE MAJORITY OF KOMEN AFFILIATE BYLAWS (THE BYLAWS) PROVIDE FOR EXECUTIVE COMMITTEES TO BE COMPRISED OF A MINIMUM OF THREE MEMBERS INCLUDING THE BOARD PRESIDENT, TREASURER AND SECRETARY. MOST ALSO INCLUDE THE EXECUTIVE DIRECTOR OR CEO AS AN EX OFFICIO, NON-VOTING MEMBER OF THE COMMITTEE. ALL OTHER MEMBERS APPOINTED TO THIS COMMITTEE MUST BE BOARD DIRECTORS.

THE BYLAWS PROVIDE THAT THE EXECUTIVE COMMITTEE HAS THE POWER TO ACT IN PLACE OF THE BOARD OF DIRECTORS BETWEEN BOARD MEETINGS ON ALL MATTERS EXCEPT THOSE SPECIFICALLY RESERVED TO THE BOARD BY THE BYLAWS OR BY STATE LAW. ALL ACTIONS TAKEN BY THE EXECUTIVE COMMITTEE ARE REPORTED TO THE BOARD AT THE NEXT BOARD MEETING. THIS DELEGATION DOES NOT RELIEVE THE

Name of the organization THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP	Employer identification number 75-2462834
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BOARD OF ANY OF ITS RESPONSIBILITIES IMPOSED BY LAW.

DESCRIPTION OF RELATIONSHIPS

FORM 990, PART VI, QUESTION 2

MILWAUKEE AFFILIATE: WENDY CARLSON, BOARD MEMBER, AND ROBIN LUTHER, AFFILIATE MISSION MANAGER, HAVE A FAMILY RELATIONSHIP.

EAST TENNESSEE AFFILIATE: HAL BIBEE, BOARD MEMBER, AND KATY BIBEE, AFFILIATE COORDINATOR, HAVE A FAMILY RELATIONSHIP.

EXPLANATION OF SIGNIFICANT CHANGES MADE TO THE BYLAWS OF SELECTED AFFILIATES FOR SUSAN G. KOMEN FOR FY2021

FORM 990, PART VI, QUESTION 4

THE CENTRAL AND SOUTH JERSEY AFFILIATE OF THE SUSAN G. KOMEN BREAST CANCER FOUNDATION, INC.

* REGISTERED AGENT OF THE CORPORATION WILL NOW BE DESIGNATED BY THE SUSAN G. KOMEN BREAST CANCER FOUNDATION, INC.

* THE CORPORATION MAY HAVE ONE OR MORE MEMBERS AND CLASSES OF MEMBERSHIP.

* CHANGED THE MAXIMUM NUMBER OF BOARD DIRECTORS FROM 15 TO 17.

*ADDED THAT IF THE NUMBER OF DIRECTORS IS INCREASED, THE TERM OF A DIRECTOR ELECTED TO SUCH A NEWLY CREATED VACANCY SHALL END AT SUCH TIME SO THAT THE TERM OF NO MORE THAN ONE-THIRD OF THE DIRECTORS SHALL EXPIRE IN ANY SINGLE YEAR.

* CHANGED THE RESIGNATION PROCEDURE FOR THE PRESIDENT OF THE BOARD OF DIRECTORS.

* ADDED VICE PRESIDENT AS OFFICER POSITION.

Name of the organization THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP	Employer identification number 75-2462834
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DECISIONS OF GOVERNING BODY SUBJECT TO APPROVAL BY OTHER PERSONS
FORM 990, PART VI, LINE 7B

IN ADDITION TO RECEIVING APPROVAL FROM ITS BOARD OF DIRECTORS, A KOMEN
AFFILIATE MUST RECEIVE THE APPROVAL OF KOMEN PARENT PRIOR TO AMENDING ITS
ARTICLES OF INCORPORATION/ CERTIFICATE OF FORMATION AND BYLAWS. A KOMEN
AFFILIATE IS ALSO SUBJECT TO ITS AFFILIATION AGREEMENT WITH KOMEN PARENT
AND OTHER POLICIES PROMULGATED BY KOMEN PARENT.

DESCRIBE THE PROCESS USED BY MANAGEMENT &/OR GOVERNING BODY TO
REVIEW FORM 990

FORM 990, PART VI, LINE 11B

AS PART OF THE YEAR END FINANCIAL STATEMENT AND FORM 990 PREPARATION
PROCESS, THE MANAGEMENT OF EACH AFFILIATE PREPARES A WORKBOOK DETAILING
KEY INFORMATION NECESSARY TO ACCURATELY COMPLETE THE GROUP FORM 990. THIS
INFORMATION IS REVIEWED BY THE PARENT ORGANIZATION'S MANAGEMENT AND USED
TO PREPARE THE MATERIALS FOR THE FORM 990 WITH THE ASSISTANCE OF AND
REVIEW BY EXTERNAL ACCOUNTANTS. SENIOR LEVELS OF THE PARENT
ORGANIZATION'S MANAGEMENT REVIEW AND COMMENT ON THE FINAL DRAFT OF THE
FORM 990, WHICH IS THEN PRESENTED TO THE KOMEN PARENT AUDIT COMMITTEE OF
THE BOARD OF DIRECTORS. THE AUDIT COMMITTEE REVIEWS AND APPROVES THE FORM
990 PRIOR TO FILING. THE PUBLIC DISCLOSURE COPY OF THE GROUP FORM 990 IS
ALSO MADE AVAILABLE TO EACH AFFILIATE BOARD PRIOR TO FILING.

DESCRIPTION OF PROCESS TO MONITOR TRANSACTIONS FOR CONFLICTS OF
INTEREST

FORM 990, PART VI, LINE 12C

Name of the organization THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP	Employer identification number 75-2462834
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THE ORGANIZATION REQUIRES EVERY AFFILIATE BOARD MEMBER, COMMITTEE MEMBER, KEY VOLUNTEER, AND EMPLOYEE TO AVOID CONFLICTS OF INTEREST. IT ALSO REQUIRES THESE PERSONS TO REPORT ANY ACTUAL AND/OR POTENTIAL CONFLICTS OF INTEREST AS SOON AS POSSIBLE. ADDITIONALLY, EACH OF THESE PERSONS IS REQUIRED TO COMPLETE AN ANNUAL STATEMENT ACKNOWLEDGING THE POLICY AND REPORTING ANY ADDITIONAL ACTUAL/POTENTIAL CONFLICTS OF INTEREST. ANY REPORTED CONFLICTS ARE REVIEWED BY KOMEN AFFILIATE STAFF AND REPORTED TO THE AFFILIATE'S BOARD OF DIRECTORS. EACH AFFILIATE BOARD IS RESPONSIBLE FOR REVIEWING REPORTED ACTUAL/POTENTIAL CONFLICTS OF INTEREST AND TAKING ANY NECESSARY AND APPROPRIATE ACTION, SUCH AS RECUSAL FROM DECISIONS IMPACTED BY THE CONFLICT OF INTEREST.

OFFICERS & POSITIONS FOR WHICH PROCESS WAS USED, & YEAR PROCESS WAS BEGUN

FORM 990, PART VI, LINES 15A & 15B

EACH KOMEN AFFILIATE IS INDEPENDENTLY RESPONSIBLE FOR DETERMINING THE COMPENSATION FOR ITS CHIEF EXECUTIVE OFFICER, EXECUTIVE DIRECTOR, TOP MANAGEMENT OFFICIALS, OTHER OFFICERS, OR KEY EMPLOYEES OF THE AFFILIATE.

THE GENERAL PROCESS IS AS FOLLOWS:

THE INDEPENDENT MEMBERS OF THE BOARD, A COMMITTEE OR DESIGNEE OF THE BOARD RESEARCHES SALARY RANGES FOR COMPARABLE DESCRIPTIONS AND ACCORDINGLY SETS THE SALARY TO A REASONABLE AND COMPARABLE LEVEL, TAKING INTO CONSIDERATION FACTORS SUCH AS GEOGRAPHIC LOCATION, SKILL SET, EXPERIENCE, AND JOB REQUIREMENTS. THE INDEPENDENT MEMBERS OF THE BOARD BASE THEIR FINAL DECISION ON THIS INFORMATION, SUCH DECISION BEING MADE

Name of the organization THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP	Employer identification number 75-2462834
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PRIOR TO THE PAYMENT OF ANY COMPENSATION.

AVAIL OF GOV DOCS, CONFLICT OF INTEREST POLICY, & FIN STMTS TO
GEN PUBLIC

FORM 990, PART VI, LINE 19

THE ORGANIZATION'S AUDITED FINANCIAL STATEMENTS AND THE GROUP FORM 990
ARE PUBLICLY AVAILABLE AT WWW.KOMEN.ORG. THE ARTICLES OF
INCORPORATION/CERTIFICATION OF FORMATION ARE AVAILABLE IN THE STATE IN
WHICH EACH AFFILIATE IS INCORPORATED, AND OTHER GOVERNING DOCUMENTS ARE
MADE AVAILABLE AS REQUIRED BY STATE LAW. FORM 1023 IS NOT ONLINE BUT
AVAILABLE TO THE PUBLIC UPON REQUEST.

ADDITIONAL DETAIL ON GRANTS

FORM 990, PART IX, LINE 1

FOR NEARLY 40 YEARS, SUSAN G. KOMEN HAS WORKED TO FULFILL ITS VISION OF
CREATING A WORLD WITHOUT BREAST CANCER THROUGH ITS MISSION OF SAVING
LIVES BY MEETING THE MOST CRITICAL NEEDS IN OUR COMMUNITIES AND INVESTING
IN BREAKTHROUGH RESEARCH TO BETTER DETECT, PREVENT, TREAT BREAST CANCERS.

OVER THE LAST YEAR, KOMEN CONTINUED TO IMPLEMENT A SERIES OF CHANGES
BEGUN IN 2020 TO STRENGTHEN ITS FINANCIAL AND OPERATIONAL POSITION IN
RESPONSE TO THE CHANGING NEEDS OF THE BREAST CANCER COMMUNITY AND
ECONOMIC CONDITIONS RESULTING FROM THE COVID-19 PANDEMIC. KOMEN HAS
NEARLY COMPLETED THE CONSOLIDATION OF ALL OPERATIONS OF ITS INDEPENDENT
AFFILIATES INTO ITS HEADQUARTERS ORGANIZATION, RESULTING IN A SINGLE
ORGANIZATION. THIS CONSOLIDATION IS ENABLING KOMEN TO LEVERAGE THE

Name of the organization THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP	Employer identification number 75-2462834
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COMBINED EXPERTISE OF ITS MISSION LEADERS TO DELIVER A UNITED MISSION PROGRAM, UTILIZING TECHNOLOGY AS A KEY DRIVER TO CONNECT TO PEOPLE WHO NEED TO ACCESS CARE WHERE THEY ARE AND TO HELP IMPROVE THE PATIENT EXPERIENCE, AS WELL AS RESULTED IN ADMINISTRATIVE AND OPERATIONAL EFFICIENCIES.

IN FY20, AS A RESULT OF THE ECONOMIC PRESSURES GENERATED FROM THE COVID-19 PANDEMIC, KOMEN REDUCED HEADQUARTERS STAFFING BY 24% IN THE FIRST QUARTER. HOWEVER, AS A RESULT OF THE ORGANIZATION'S CONSOLIDATION AND THE TRANSITION TO PROVIDE MISSION SERVICES DIRECTLY, KOMEN HIRED 84 FORMER AFFILIATE STAFF FOR COMMUNITY DEVELOPMENT AND 42 MISSION STAFF. WE ANTICIPATE THIS TRANSITION OF KOMEN'S OPERATIONAL STRUCTURE AND MISSION DELIVERY WILL RESULT IN FUTURE STAFF ADDITIONS TO SUPPORT LOCAL ENGAGEMENT AND MISSION DELIVERY. IN ADDITION, KOMEN WILL CONTINUE TO SHIFT COMMUNITY MISSION SPENDING FROM GRANTS TO THIRD-PARTY ORGANIZATIONS TO DIRECT MISSION SERVICES AND GRANTS TO INDIVIDUALS THROUGH OUR TREATMENT ASSISTANCE PROGRAM AND PATIENT CARE CENTER.

CENTRAL TO KOMEN'S VISION IS A STEADFAST COMMITMENT TO INVESTING IN BREAKTHROUGH RESEARCH. KOMEN REMAINED COMMITTED TO INVESTING IN RESEARCH FOCUSED ON ITS PRIMARY FOCUS ON METASTATIC BREAST CANCER AND UNDERSTANDING AND ELIMINATING DISPARITIES IN BREAST CANCER OUTCOMES BETWEEN BLACK AND WHITE PATIENTS. DESPITE THE ECONOMIC UNCERTAINTY AND CHALLENGING FUNDRAISING ENVIRONMENT, KOMEN AWARDED \$14 MILLION IN NEW RESEARCH AWARDS.

Name of the organization THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP	Employer identification number 75-2462834
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WE HAVE INVESTED MORE THAN \$1 BILLION IN OVER 2700 RESEARCH GRANTS AND MORE THAN 500 CLINICAL TRIALS, WHICH HAVE RESULTED IN MORE THAN 680 RESEARCH DISCOVERIES SINCE 2016. WHILE WE CONTINUE TO INVEST IN RESEARCH INTO NEW TREATMENTS, KOMEN SUPPORTS PEOPLE WHO ARE FACING BREAST CANCER TODAY THROUGH A GROWING SUITE OF PATIENT CARE SERVICES, INCLUDING DIRECT FINANCIAL ASSISTANCE THROUGH ITS TREATMENT ASSISTANCE PROGRAM, ELIGIBLE TO HELP PAY FOR EXPENSES THAT MAY SERVE AS A BARRIER TO ATTAINING THE CARE NEEDED TO SURVIVE, SUCH AS CO-PAYS, TRANSPORTATION, CHILDCARE OR RENT.

PAYMENTS TO AFFILIATES

FORM 990, PART IX, LINE 21

THE SUSAN G. KOMEN BREAST CANCER FOUNDATION AFFILIATES (THE KOMEN AFFILIATES) PAY A PREDETERMINED PERCENTAGE (MINIMUM OF 25%) OF THEIR NET MONIES RAISED TO THE FOUNDATION (THE KOMEN PARENT) TO HELP FUND THE KOMEN PARENT RESEARCH GRANT PROGRAMS.

FOR FURTHER INFORMATION, SEE FORM 990, PART III, PRIMARY EXEMPT PURPOSE AND PROGRAM SERVICE ACCOMPLISHMENTS.

OTHER CHANGES IN NET ASSETS

FORM 990, PART XI, LINE 9

MERGER RELATED ACTIVITY: -\$28,229,563

RESCINDED GRANTS: \$421,686

Name of the organization THE SUSAN G. KOMEN BREAST CANCER FDN, GROUP	Employer identification number 75-2462834
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TOTAL - \$27,807,877

ATTACHMENT 1

FORM 990, PART VI, LINE 17 - STATES

AL, AR, CA, CO, CT,
 FL, GA, HI, IL, IN, KS, KY, ME, MD, MA, MI,
 MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA,
 SC, TN, UT, VA, WA, WI,

ATTACHMENT 2

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
721 INDUSTRIES LLC 598 HALKIRK ST SANTA BARBARA, CA 93110	EVENT PRODUCTION	101,324.
CSM SPORT AND ENTERTAINMENT INC. 6625 NETWORK WAY SUITE 300 INDIANAPOLIS, IN 46278	PUBLIC RELATIONS	127,310.

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Susan G. Komen Breast Cancer Foundation - Group
Year ended March 31, 2021

EIN: 75-2162834
2020 Form 990

Part VII - Compensation of Officers, Directors, Key Employees and Fiver Highest Employees

Business Unit	Affiliate	Name	Title/Position	Avg Hours Per Week (Filing Org)	Avg Hours per Week (Related)	Individual Trustee or Director	Officer	Key Employee	Highest Compensated Employee	Reportable Compensation from the Organization	Reportable Compensation from Related Organization	Estimated Amount of Other Compensation
AL100	North Central Alabama	Jennifer McInerney	President	1	0		X			0	0	0
AL100	North Central Alabama	Meg Farmer	Board Member	1	0	X				0	0	0
AL100	North Central Alabama	Susan Moon	Board Member	1	0	X				0	0	0
AL100	North Central Alabama	Bea Tatum	Board Member	1	0	X				0	0	0
AL100	North Central Alabama	Jeannine Bailey	Board Member	1	0	X				0	0	0
AL100	North Central Alabama	Bernard Nomberg	Board Member	0.5	0	X				0	0	0
AL100	North Central Alabama	Jennifer Bail	Board Member	0.5	0	X				0	0	0
AL100	North Central Alabama	Thelma Brown	Board Member	2	0	X				0	0	0
AL100	North Central Alabama	Rebecca DiPiazza	Secretary	1	0		X			0	0	0
AR100	Ozark	Lori Kumar	Board Member	1	0	X				0	0	0
AR100	Ozark	Stephan Rosenfeld	Board Member	1	0	X				0	0	0
AR100	Ozark	Richard Reaves	Board Member	1	0	X				0	0	0
AR100	Ozark	Sandy Steinmetz	Board Member	1	0	X				0	0	0
AR100	Ozark	April Gage	Board Member	1	0	X				0	0	0
AR100	Ozark	Danyel Bischof-Forsyth	Board Member	1	0	X				0	0	0
AR100	Ozark	Alex Vasquez	Board Member	1	0	X				0	0	0
AR100	Ozark	Danna Grear	President	1	0		X			0	0	0
AR100	Ozark	Richard Hays	Treasurer	1	0		X			0	0	0
AR100	Ozark	Trisha Smith	Board Member (Term 9/1/20)	1	0	X				0	0	0
AR100	Ozark	Mary Zettle	Board Member (Term 9/21/20)	1	0	X				0	0	0
AR100	Ozark	Susan Redfield	Board Member (Term 9/21/20)	1	0	X				0	0	0
AR100	Ozark	Carol Johnston	Board Member (Term 10/26/20)	2	0	X				0	0	0
AR100	Ozark	Kari Nikolish	Board Member (Term 3/15/21)	1	0	X				0	0	0
AR101	Arkansas	Kim Cook	President	1	0		X			0	0	0
AR101	Arkansas	Pricilla Johnson	Board Member	1	0	X				0	0	0
AR101	Arkansas	Shawna Long	Board Member	1	0	X				0	0	0
AR101	Arkansas	Laura LaCroix	Board Member	1	0	X				0	0	0
AR101	Arkansas	Alesa Garner	Board Member	1	0	X				0	0	0
AR101	Arkansas	Carey Thompson	Board Member	5	0	X				0	0	0
AR101	Arkansas	Leititia Bailey	Board Member	5	0	X				0	0	0
AR101	Arkansas	Sharp Malak	Board Member	5	0	X				0	0	0
AR101	Arkansas	Susie Haynes	Board Member	1	0	X				0	0	0
AR101	Arkansas	Tjuana Byrd	Board Member	5	0	X				0	0	0
AR101	Arkansas	Candice Cole	Treasurer	5	0		X			0	0	0
AR101	Arkansas	Nicole Winters	Vice President	5	0		X			0	0	0
CA100	Orange County	Carrie Strom	Board Member	2	0	X				0	0	0
CA100	Orange County	Lisa Guerra	Board Member	2	0	X				0	0	0
CA100	Orange County	Scott Sherman	President	2	0		X			0	0	0
CA100	Orange County	Michael Waldman	Board Member	2	0	X				0	0	0
CA100	Orange County	Carrie Swanson	Board Member	5	0	X				0	0	0
CA100	Orange County	DeVera Heard	Board Member	2	0	X				0	0	0
CA100	Orange County	January Lopez	Board Member	2	0	X				0	0	0
CA100	Orange County	Ralphie Giron	Board Member	2	0	X				0	0	0
CA100	Orange County	Rebecca Hultquist	Board Member	2	0	X				0	0	0
CA100	Orange County	Jaspreet Kaur	Secretary	2	0		X			0	0	0
CA100	Orange County	Rita Parvaneh	Treasurer	2	0		X			0	0	0
CA101	Northern and Central California	Lana Miller, RN	Board Member	4	0	X				0	0	0
CA101	Northern and Central California	Stephanie Landrum	Board Member	5	0	X				0	0	0
CA101	Northern and Central California	Twa'Lea Jordan	Board Member	5	0	X				0	0	0
CA101	Northern and Central California	Shennel Beasley	Treasurer	5	0		X			0	0	0
CA101	Northern and Central California	Dion Cooks	Vice President	5	0		X			0	0	0
CA101	Northern and Central California	James Farrell	President	5	0		X			0	0	0
CA101	Northern and Central California	Jenna Kieckhaefer	Board Member	4	0	X				0	0	0

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Susan G. Komen Breast Cancer Foundation - Group
 Year ended March 31, 2021

EIN: 75-2162834
 2020 Form 990

Part VII - Compensation of Officers, Directors, Key Employees and Fiver Highest Employees

Business Unit	Affiliate	Name	Title/Position	Avg Hours Per Week (Filing Org)	Avg Hours per Week (Related)	Individual Trustee or Director	Officer	Key Employee	Highest Compensated Employee	Reportable Compensation from the Organization	Reportable Compensation from Related Organization	Estimated Amount of Other Compensation
CA103	Inland Empire	Paul Cramer	President	10	0		X			0	0	0
CA103	Inland Empire	Yundra Thomas	Board Member	5	0	X				0	0	0
CA103	Inland Empire	Eileen Hards	Board Member	5	0	X				0	0	0
CA103	Inland Empire	James Persinger	Board Member	5	0	X				0	0	0
CA103	Inland Empire	Stan Morrison	Board Member	5	0	X				0	0	0
CA103	Inland Empire	Sandra Finestone	Board Member	10	0	X				0	0	0
CA103	Inland Empire	Michelle DeArmond	Board Member	6	0	X				0	0	0
CA103	Inland Empire	Kevin Peete	Board Member	5	0	X				0	0	0
CA103	Inland Empire	Neil Slawson	Secretary	10	0		X			0	0	0
CA103	Inland Empire	Kendra Dockham	Treasurer	10	0		X			0	0	0
CA104	Los Angeles County	Mark Osmer	President	3	0		X			0	0	0
CA104	Los Angeles County	Amy Johnson	Board Member	3	0	X				0	0	0
CA104	Los Angeles County	Elvia Soukup	Board Member	3	0	X				0	0	0
CA104	Los Angeles County	Marveina Peters	Board Member	3	0	X				0	0	0
CA104	Los Angeles County	Nicole Wells	Board Member	3	0	X				0	0	0
CA104	Los Angeles County	Russell Ching	Board Member	3	0	X				0	0	0
CA104	Los Angeles County	Adrienne Lee	Board Member	3	0	X				0	0	0
CA104	Los Angeles County	Candice Witek	Board Member	3	0	X				0	0	0
CA104	Los Angeles County	Bradley Schmidt	Secretary	3	0		X			0	0	0
CA104	Los Angeles County	Jeff Thomas	Treasurer	3	0		X			0	0	0
CA104	Los Angeles County	Josh Neman	Board Member	3	0	X				0	0	0
CA105	San Diego	Carl Pinkard	Board Member	0.5	0	X				0	0	0
CA105	San Diego	Barbara Parker	Board Member	1	0	X				0	0	0
CA105	San Diego	James Fujiwara	Board Member	1	0	X				0	0	0
CA105	San Diego	Karyn Cerulli	Board Member	1	0	X				0	0	0
CA105	San Diego	Charles Larry Davis	Board Member	1	0	X				0	0	0
CA105	San Diego	Lilian Vanviedt	Board Member	0.5	0	X				0	0	0
CA105	San Diego	Trisha Millican	Board Member	0.5	0	X				0	0	0
CA105	San Diego	Pam Walton	Treasurer	2	0		X			0	0	0
CA105	San Diego	Merrilee Neal	President	5	0		X			0	0	0
CA105	San Diego	Christine Trimble	Board Member	0.5	0	X				0	0	0
CA105	San Diego	Holly Chrzanowski Winter	Board Member	0.5	0	X				0	0	0
CA105	San Diego	Linda Amaro	Board Member	5	0	X				0	0	0
CA105	San Diego	Steven L. Chen	Board Member	0.5	0	X				0	0	0
CA106	San Francisco Bay Area	Carol Benz	Board Member	1	0	X				0	0	0
CA106	San Francisco Bay Area	Carol Batte	Board Member	1	0	X				0	0	0
CA106	San Francisco Bay Area	Patrick Barber	President	3	0		X			0	0	0
CA106	San Francisco Bay Area	Gail Haan DeMartini	Board Member	3	0	X				0	0	0
CA106	San Francisco Bay Area	Carrie Becks	Board Member	1	0	X				0	0	0
CA106	San Francisco Bay Area	Paul Duryea	Board Member (Term 12/1/20)	3	0	X				0	0	0
CA106	San Francisco Bay Area	Antoinette Harris	Board Member	3	0	X				0	0	0
CO102	Colorado	Cindy Bolin	Board Member	5	0	X				0	0	0
CO102	Colorado	Joby Koren	Board Member	25	0	X				0	0	0
CO102	Colorado	Belinda Woodall	Board Member	3	0	X				0	0	0
CO102	Colorado	Peg Ellefson	Board Member	5	0	X				0	0	0
CO102	Colorado	Peggy Thomas	Board Member	10	0	X				0	0	0
CO102	Colorado	John DellaSalle	Board Member	5	0	X				0	0	0
CO102	Colorado	Laura Peterson	Board Member	10	0	X				0	0	0
CO102	Colorado	Sarah Tyson	Board Member	10	0	X				0	0	0
CO102	Colorado	Alisha Brown	Board Member	5	0	X				0	0	0
CO102	Colorado	Carolyn Paul	President	5	0		X			0	0	0
CO102	Colorado	Brandee Green	Secretary	5	0		X			0	0	0
CO102	Colorado	Cody Daniels	Treasurer	10	0		X			0	0	0

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Susan G. Komen Breast Cancer Foundation - Group
 Year ended March 31, 2021

EIN: 75-2162834
 2020 Form 990

Part VII - Compensation of Officers, Directors, Key Employees and Fiver Highest Employees

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CT100	New England	Nikla Emambokus	Board Member	3	0	X				0	0	0
CT100	New England	Victoria E. Abbott	Board Member	3	0	X				0	0	0
CT100	New England	Bharath Ramachandran	Treasurer	3	0		X			0	0	0
CT100	New England	Camelia Lawrence	Vice President	3	0		X			0	0	0
FL103	Miami/Ft. Lauderdale	Kim Heard	President	5	0		X			0	0	0
FL103	Miami/Ft. Lauderdale	Dawn Piper	Vice President	1	0		X			0	0	0
FL103	Miami/Ft. Lauderdale	Cindy Cast	Board Member	1	0	X				0	0	0
FL103	Miami/Ft. Lauderdale	Tamara Rodriguez	Board Member	1	0	X				0	0	0
FL103	Miami/Ft. Lauderdale	Lisa Magalian	Board Member	1	0	X				0	0	0
FL103	Miami/Ft. Lauderdale	Susan Tribby	Secretary	1	0		X			0	0	0
FL103	Miami/Ft. Lauderdale	Bethany Reeb Sutherland	Board Member (Term 11/14/20)	1	0	X				0	0	0
FL105	Florida	Amy Siegel Oran	President	1	0		X			0	0	0
FL105	Florida	Jill G. Weiss	Board Member	20	0	X				0	0	0
FL105	Florida	Karen List	Board Member	1	0	X				0	0	0
FL105	Florida	Jason Utton	Secretary	2	0		X			0	0	0
FL105	Florida	Patricia Abramson	Treasurer	1	0		X			0	0	0
FL105	Florida	Heather Laughlin	Vice President	1	0		X			0	0	0
FL105	Florida	Elizabeth Hamma	Board Member	2	0	X				0	0	0
FL105	Florida	T.A. Walker	Board Member	1	0	X				0	0	0
FL105	Florida	Kirsten Stanley	Board Member	1	0	X				0	0	0
FL105	Florida	Matthew Choy	Board Member	2	0	X				0	0	0
FL105	Florida	Sharon Prolow	Board Member	2	0	X				0	0	0
GA100	Greater Atlanta	Darrell Green	President	5	0		X			0	0	0
GA100	Greater Atlanta	Harlan Clark	Board Member	5	0	X				0	0	0
GA100	Greater Atlanta	Milton Little	Board Member	5	0	X				0	0	0
GA100	Greater Atlanta	Natalia Franco	Board Member	5	0	X				0	0	0
GA100	Greater Atlanta	Bennie Harris	Board Member	5	0	X				0	0	0
GA100	Greater Atlanta	Erin Bowman	Board Member	5	0	X				0	0	0
GA100	Greater Atlanta	Keisha Hines	Board Member	5	0	X				0	0	0
GA100	Greater Atlanta	Kristy Brown	Board Member	5	0	X				0	0	0
GA100	Greater Atlanta	Nadeem Moiz	Board Member	5	0	X				0	0	0
GA100	Greater Atlanta	Nesa Hall	Board Member	5	0	X				0	0	0
GA100	Greater Atlanta	Selena Bauman	Board Member	5	0	X				0	0	0
GA100	Greater Atlanta	Stacy Hughes	Board Member	5	0	X				0	0	0
GA100	Greater Atlanta	Janice McKenzie-Crayton	Board Member	5	0	X				0	0	0
GA100	Greater Atlanta	Liz McLaughlin	Board Member	1	0	X				0	0	0
GA100	Greater Atlanta	Rebecca Seidel	Board Member	1	0	X				0	0	0
GA100	Greater Atlanta	Sidney Kirschner	Board Member	1	0	X				0	0	0
GA100	Greater Atlanta	Sheila Weidman-Farley	Secretary	5	0		X			0	0	0
GA100	Greater Atlanta	Joyce Reto	Treasurer	5	0		X			0	0	0
GA102	Coastal Georgia	Erica Backus	Board Member	2	0	X				0	0	0
GA102	Coastal Georgia	Larry Silbermann	Board Member	3	0	X				0	0	0
GA102	Coastal Georgia	Sarah Lamar	Board Member	3	0	X				0	0	0
GA102	Coastal Georgia	Danny Mahfet	Treasurer (Term 7/30/20)	3	0		X			0	0	0
GA102	Coastal Georgia	Leesa Bohler	Board Member (Term 7/31/20)	5	0	X				0	0	0
GA102	Coastal Georgia	Melanie Lloyd-Orsini	Board Member (Term 7/31/20)	3	0	X				0	0	0
GA102	Coastal Georgia	Melinda Spiso	Board Member (Term 7/31/20)	2	0	X				0	0	0
GA102	Coastal Georgia	Abra Lattany-Reed	Board Member (Term 7/31/20)	2	0	X				0	0	0
GA102	Coastal Georgia	Heather Lundy	Secretary (Term 7/31/20)	5	0		X			0	0	0
GA102	Coastal Georgia	Ray Rudolph	President	5	0		X			0	0	0
GA102	Coastal Georgia	Emily Dickinson	Board Member	3	0	X				0	0	0
GA102	Coastal Georgia	Dr. Fariborz Zaer	Board Member	3	0	X				0	0	0
GA102	Coastal Georgia	Dr. Diane Weems	Board Member	1	0	X				0	0	0

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Year ended March 31, 2021

EIN: 75-2162834
2020 Form 990

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GA102	Coastal Georgia	Ginger Graham	Board Member	1	0	X				0	0	0
GA102	Coastal Georgia	Kevin Pope	Board Member	1	0	X				0	0	0
GA102	Coastal Georgia	Robyn Iannone	Board Member	1	0	X				0	0	0
HI100	Hawaii	Cera Kim-Sunada	Board Member	2	0	X				0	0	0
HI100	Hawaii	Eva Borden - Kanoho	Board Member	2	0	X				0	0	0
HI100	Hawaii	Karen Mukai	Board Member	2	0	X				0	0	0
HI100	Hawaii	Mirella Vasquez-Brooks	Board Member	2	0	X				0	0	0
HI100	Hawaii	Miriam Loui	Board Member	2	0	X				0	0	0
HI100	Hawaii	Paulette Williams	Vice President	2	0			X		0	0	0
HI100	Hawaii	Sarah Love	Secretary	2	0			X		0	0	0
HI100	Hawaii	Scott Mackenzie	Board Member	2	0	X				0	0	0
HI100	Hawaii	Sheree Loui	President	2	0			X		0	0	0
HI100	Hawaii	Stacy Kilty	Treasurer	2	0			X		0	0	0
IA103	Greater Iowa	Rebecca A Brommel	President	1	0			X		0	0	0
IA103	Greater Iowa	Andrea James	Board Member	1	0	X				0	0	0
IA103	Greater Iowa	Todd Frederickson	Board Member	1	0	X				0	0	0
IA103	Greater Iowa	Jessica Kramer	Board Member	1	0	X				0	0	0
IA103	Greater Iowa	Gayla Harrison	Board Member	1.5	0	X				0	0	0
IA103	Greater Iowa	Cathy Belmont	Board Member	1.2	0	X				0	0	0
IA103	Greater Iowa	Darcy Johnson	Board Member	2.8	0	X				0	0	0
IA103	Greater Iowa	Staci Krier	Board Member	2	0	X				0	0	0
IA103	Greater Iowa	Martha Watters	Secretary/Treasurer	6.1	0			X		0	0	0
IA103	Greater Iowa	Sara Lira	Board Member (Term 8/31/20)	1	0	X				0	0	0
ID100	Idaho Montana	Amy Pinkley (Rhoades)	President	2	0			X		0	0	0
ID100	Idaho Montana	Cheryl Hackett	Vice President	2	0			X		0	0	0
ID100	Idaho Montana	Lynn Kelley	Treasurer	2	0			X		0	0	0
ID100	Idaho Montana	Michelle Weaver Knowles	Board Member	2	0	X				0	0	0
ID100	Idaho Montana	Stephanie Hodson	Board Member	2	0	X				0	0	0
ID100	Idaho Montana	Tammie Sherner	Board Member	2	0	X				0	0	0
IL101	Chicago	Suzet McKinney	President	1	0			X		0	0	0
IL101	Chicago	Brett Blue	Board Member	1	0	X				0	0	0
IL101	Chicago	Betina Yanez	Board Member	1	0	X				0	0	0
IL101	Chicago	Kirstin Chernawsky	Board Member	1	0	X				0	0	0
IL101	Chicago	Michelle Leigh Green	Board Member	1	0	X				0	0	0
IL101	Chicago	Karriem Watson	Board Member	1	0	X				0	0	0
IL101	Chicago	Tony Iannessa	Board Member	1	0	X				0	0	0
IL101	Chicago	Elizabeth Sawyer	Treasurer	1	0			X		0	0	0
IL102	Memorial	Brian Brackney	Board Member (Term 12/3/20)	1	0	X				0	0	0
IL102	Memorial	Courtney Newgard	Board Member	1	0	X				0	0	0
IL102	Memorial	Helene M Peterson	Board Member	1	0	X				0	0	0
IL102	Memorial	Jessica Guingrich	Board Member	1	0	X				0	0	0
IL102	Memorial	John Miller	President	1	0			X		0	0	0
IL102	Memorial	Kathryn Spitznagle	Board Member	1	0	X				0	0	0
IL102	Memorial	Kimberly Leman	Board Member	1	0	X				0	0	0
IL102	Memorial	Lisa Hansen	Board Member	1	0	X				0	0	0
IL102	Memorial	Mary A Corrigan	Board Member	1	0	X				0	0	0
IL102	Memorial	Nicholas Esser	Board Member	2	0	X				0	0	0
IL102	Memorial	Pamela Veerman	Treasurer	2	0			X		0	0	0
IL102	Memorial	Shellie McEvers	Board Member	1	0	X				0	0	0
IL102	Memorial	Shermian Woodhouse	Board Member	1	0	X				0	0	0
IL102	Memorial	Vicki Baumgarten	Board Member	1	0	X				0	0	0
IN100	Evansville Tri-State	Kimberly Moman	President	2	0			X		0	0	0
IN100	Evansville Tri-State	BreeAna Wilzbacher Kempf	Board Member	1	0	X				0	0	0

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Susan G. Komen Breast Cancer Foundation - Group
Year ended March 31, 2021

EIN: 75-2162834
2020 Form 990

Part VII - Compensation of Officers, Directors, Key Employees and Fiver Highest Employees

Business Unit	Affiliate	Name	Title/Position	Avg Hours Per Week (Filing Org)	Avg Hours per Week (Related)	Individual Trustee or Director	Officer	Key Employee	Highest Compensated Employee	Reportable Compensation from the Organization	Reportable Compensation from Related Organization	Estimated Amount of Other Compensation
IN100	Evansville Tri-State	Brian Lowe	Board Member	1	0	X				0	0	0
IN100	Evansville Tri-State	Misty Wolford	Board Member	1	0	X				0	0	0
IN100	Evansville Tri-State	Angie Peters	Board Member	2	0	X				0	0	0
IN100	Evansville Tri-State	Regina Lander	Board Member	1	0	X				0	0	0
IN100	Evansville Tri-State	Tijuana Tolliver	Board Member	1	0	X				0	0	0
IN100	Evansville Tri-State	Jeff Aydelott	Board Member	1	0	X				0	0	0
IN100	Evansville Tri-State	Brennan Phillips	Board Member	1	0	X				0	0	0
IN100	Evansville Tri-State	Anne Johnston	Secretary	1	0			X		0	0	0
IN100	Evansville Tri-State	Alyssa Guthrie	Treasurer	1	0			X		0	0	0
IN100	Evansville Tri-State	Melody Littrell	Vice President	2	0			X		0	0	0
IN100	Evansville Tri-State	Tanya Mauck	Board Member (Term 1/26/21)	1	0	X				0	0	0
IN101	Central Indiana	Ryan Randolph	Vice President (Term 6/30/20)	2	0			X		0	0	0
IN101	Central Indiana	Jayna Cacioppo	President	4	0			X		0	0	0
IN101	Central Indiana	Neal Brackett	Board Member	2	0	X				0	0	0
IN101	Central Indiana	Barry Hart	Board Member	2	0	X				0	0	0
IN101	Central Indiana	Liz Childers	Board Member	2	0	X				0	0	0
IN101	Central Indiana	Riesa Burnett MD	Board Member	2	0	X				0	0	0
IN101	Central Indiana	Sunny Lu Williams	Secretary	2	0			X		0	0	0
IN101	Central Indiana	Kim Borges	Board Member (Term 12/31/20)	4	0	X				0	0	0
IN101	Central Indiana	Tim DuVall	Board Member (Term 12/31/20)	2	0	X				0	0	0
IN101	Central Indiana	James Keough	Board Member (Term 12/31/20)	2	0	X				0	0	0
IN101	Central Indiana	Jill Mercer	Board Member (Term 12/31/20)	2	0	X				0	0	0
IN101	Central Indiana	Hadley Ritter	Board Member (Term 12/31/20)	2	0	X				0	0	0
IN101	Central Indiana	Beth Glynn	Treasurer (Term 12/31/20)	4	0			X		0	0	0
KY101	Kentucky	Mike Davis	President	1	0			X		0	0	0
KY101	Kentucky	Jennifer Hawkins	Board Member	1	0	X				0	0	0
KY101	Kentucky	Alexa Hix	Secretary	1	0			X		0	0	0
KY101	Kentucky	Carrie Merrill	Treasurer	1	0			X		0	0	0
KY101	Kentucky	Haley Roberts	Board Member (Term 1/31/21)	1	0	X				0	0	0
KY101	Kentucky	Dennis E. Doherty M.D.	Board Member (Term 1/31/21)	1	0	X				0	0	0
LA101	Louisiana	Christine Powell	Board Member	1	0	X				0	0	0
LA101	Louisiana	Claudia Wade	Board Member	1	0	X				0	0	0
LA101	Louisiana	Hayden Moore	Secretary	1	0			X		0	0	0
LA101	Louisiana	Joseph Vicknair	Board Member	1	0	X				0	0	0
LA101	Louisiana	Michelle McCalope	Board Member	1	0	X				0	0	0
LA101	Louisiana	Natalie Ingles	Board Member	1	0	X				0	0	0
LA101	Louisiana	Phala Mire	Board Member	1	0	X				0	0	0
LA101	Louisiana	Stacie Williams	Board Member (Term 7/31/20)	1	0	X				0	0	0
LA101	Louisiana	Timothy Huck	Board Member	1	0	X				0	0	0
LA101	Louisiana	Ty Scroggins	President	1	0			X		0	0	0
LA101	Louisiana	Tyrah Phillips	Treasurer	1	0			X		0	0	0
LA102	New Orleans	Cherise Gibson	Board Member	3	0	X				0	0	0
LA102	New Orleans	Christina Chifici	Treasurer	5	0			X		0	0	0
LA102	New Orleans	Elizabeth Williams	Board Member	5	0	X				0	0	0
LA102	New Orleans	Ellen Zakris, M.D.	Board Member	3	0	X				0	0	0
LA102	New Orleans	Frank Liantonio	Board Member	3	0	X				0	0	0
LA102	New Orleans	Janis van Meerveld	Secretary (Term 11/17/20)	5	0			X		0	0	0
LA102	New Orleans	Joseph Briand	Board Member	3	0	X				0	0	0
LA102	New Orleans	Judge Paula Brown	Board Member	3	0	X				0	0	0
LA102	New Orleans	Mollie Copeland	President	3	0			X		0	0	0
MD100	Maryland	Shaji Matthew	Board Member	1	0	X				0	0	0
MD100	Maryland	Mardel Kowalewski	President	3	0			X		0	0	0
MD100	Maryland	Amy Bennett	Secretary	1	0			X		0	0	0

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Susan G. Komen Breast Cancer Foundation - Group
 Year ended March 31, 2021

EIN: 75-2162834
 2020 Form 990

Part VII - Compensation of Officers, Directors, Key Employees and Fiver Highest Employees

Business Unit	Affiliate	Name	Title/Position	Avg Hours Per Week (Filing Org)	Avg Hours per Week (Related)	Individual Trustee or Director	Officer	Key Employee	Highest Compensated Employee	Reportable Compensation from the Organization	Reportable Compensation from Related Organization	Estimated Amount of Other Compensation
MD100	Maryland	Carmen Gonzales	Board Member	1	0	X				0	0	0
MD100	Maryland	Bradley Chambers	Board Member	1	0	X				0	0	0
MD100	Maryland	Michele Renaud	Board Member	1	0	X				0	0	0
MD100	Maryland	Jamie Davis	Board Member	1	0	X				0	0	0
MD100	Maryland	Barry Diggins	Board Member	1	0	X				0	0	0
MD100	Maryland	Dina Clark	Board Member	1	0	X				0	0	0
MD100	Maryland	Shelley Collins	Board Member	1	0	X				0	0	0
MD100	Maryland	Yvonne Mhra	Board Member	1	0	X				0	0	0
MD100	Maryland	Diane Mason	Treasurer	1	0			X		0	0	0
MD100	Maryland	Desmond Connall	Board Member (Term 12/31/20)	1	0	X				0	0	0
MI101	Michigan	Chuck Christmas	President	2	0			X		0	0	0
MI101	Michigan	Marlene Holstine	Board Member	1	0	X				0	0	0
MI101	Michigan	Nikki Coy	Board Member	1	0	X				0	0	0
MI101	Michigan	Joyce Weise	Board Member	1	0	X				0	0	0
MI101	Michigan	Karen Yacobucci	Board Member	1	0	X				0	0	0
MI101	Michigan	Michelle Andersen	Board Member	1	0	X				0	0	0
MI101	Michigan	Sharon Blizzard	Board Member	1	0	X				0	0	0
MI101	Michigan	Laura Contu	Secretary	2	0			X		0	0	0
MI101	Michigan	Yolanda Ross	Board Member	1	0	X				0	0	0
MI101	Michigan	Anna Kraai	Treasurer	2	0			X		0	0	0
MI103	Greater Detroit	Gwen Moore	President	12	0			X		0	0	0
MI103	Greater Detroit	Michele Cote	Secretary	4	0			X		0	0	0
MI103	Greater Detroit	Kathi Sitek	Board Member	12	0	X				0	0	0
MI103	Greater Detroit	Jennifer Pierce	Board Member	4	0	X				0	0	0
MI103	Greater Detroit	Blaine Veldhuis	Board Member	4	0	X				0	0	0
MI103	Greater Detroit	Gloria Larkins	Treasurer	4	0			X		0	0	0
MI103	Greater Detroit	Susan Perry-Nolte	Vice President	12	0			X		0	0	0
MN101	Minnesota	Valoris Hallgren	President	4	0			X		0	0	0
MN101	Minnesota	Michael Burns	Board Member	2	0	X				0	0	0
MN101	Minnesota	Nicole Hartung	Board Member	2	0	X				0	0	0
MN101	Minnesota	Susan Pappas-Varco	Board Member	2	0	X				0	0	0
MN101	Minnesota	Todd Tuttle	Board Member	2	0	X				0	0	0
MN101	Minnesota	Douglas Yee	Board Member	2	0	X				0	0	0
MN101	Minnesota	Larry Berg	Board Member	2	0	X				0	0	0
MN101	Minnesota	Nancy Goldstein	Treasurer	2	0			X		0	0	0
MN101	Minnesota	Ann Shaw	Board Member	2	0	X				0	0	0
MO101	Kansas	Alix Kumer	Vice President	5	0			X		0	0	0
MO101	Kansas	Richard Winston	President	10	0			X		0	0	0
MO101	Kansas	Jennifer Kenyon	Secretary	5	0			X		0	0	0
MO101	Kansas	Kristin Cargin	Board Member	20	0	X				0	0	0
MO101	Kansas	Allison Swaters	Treasurer	1	0			X		0	0	0
MO101	Kansas	Ryan Hallenback	Board Member (Term 2/1/21)	5	0	X				0	0	0
MO101	Kansas	Peggy Johnson	Board Member (Term 2/1/21)	5	0	X				0	0	0
MO101	Kansas	Jacob Holman	Board Member (Term 2/1/21)	10	0	X				0	0	0
MO101	Kansas	Kevin Zimmermann	Board Member (Term 2/1/21)	1	0	X				0	0	0
MO101	Kansas	Shawn Lancelot	Board Member (Term 2/1/21)	1	0	X				0	0	0
MO101	Kansas	Tammy Ham	Board Member (Term 2/1/21)	1	0	X				0	0	0
MO102	Missouri	Tracey Guthrie	Board Member	1	0	X				0	0	0
MO102	Missouri	Trina Claggett	Board Member	1	0	X				0	0	0
MO102	Missouri	Susan Kraenzle	Board Member	1	0	X				0	0	0
MO102	Missouri	Kelly Murrie	Board Member	1	0	X				0	0	0
MO102	Missouri	Krystal Weigl	Board Member	1	0	X				0	0	0
MO102	Missouri	Anne McKeough	Board Member	1	0	X				0	0	0

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Susan G. Komen Breast Cancer Foundation - Group
Year ended March 31, 2021

EIN: 75-2162834
2020 Form 990

Part VII - Compensation of Officers, Directors, Key Employees and Fiver Highest Employees

Business Unit	Affiliate	Name	Title/Position	Avg Hours Per Week (Filing Org)	Avg Hours per Week (Related)	Individual Trustee or Director	Officer	Key Employee	Highest Compensated Employee	Reportable Compensation from the Organization	Reportable Compensation from Related Organization	Estimated Amount of Other Compensation
MO102	Missouri	Chantelle L Evans	Board Member	1	0	X				0	0	0
MO102	Missouri	Sharon Spence	Board Member	1	0	X				0	0	0
MO102	Missouri	Jennifer Kingston	President	1	0		X			0	0	0
MO102	Missouri	Renee Hall	Treasurer	1	0		X			0	0	0
NC100	Charlotte	Honora Gabriel	President	5	0		X			0	0	0
NC100	Charlotte	Robert Meyer	Secretary	5	0		X			0	0	0
NC100	Charlotte	Jason Bernd	Board Member	5	0	X				0	0	0
NC100	Charlotte	Michelle Adams	Board Member	5	0	X				0	0	0
NC100	Charlotte	John Bullins	Vice President	5	0		X			0	0	0
NC100	Charlotte	Melissa Perez	Board Member	5	0	X				0	0	0
NC100	Charlotte	Dante Taylor-Anderson	Board Member	5	0	X				0	0	0
NC100	Charlotte	Martha Alexander	Board Member	1	0	X				0	0	0
NC100	Charlotte	Shelly Hill Crawford	Board Member	1	0	X				0	0	0
NC100	Charlotte	Andrea Frohning	Board Member	1	0	X				0	0	0
NC100	Charlotte	Ed McMenamin	Board Member	1	0	X				0	0	0
NC100	Charlotte	Debbie Kleman	Board Member	5	0	X				0	0	0
NC100	Charlotte	Shundrikka Owens	Board Member	5	0	X				0	0	0
NC100	Charlotte	Terry Sarantou MD	Board Member	5	0	X				0	0	0
NC100	Charlotte	Amy Hastings	Board Member	1	0	X				0	0	0
NC100	Charlotte	Karen Bardales	Board Member	1	0	X				0	0	0
NC100	Charlotte	Ryan Richmond	Board Member	1	0	X				0	0	0
NC101	North Carolina Triangle to the Coast	Valencia Davis	President	5	0		X			0	0	0
NC101	North Carolina Triangle to the Coast	Fara Palumbo	Board Member	5	0	X				0	0	0
NC101	North Carolina Triangle to the Coast	Suzanne Herman	Board Member	10	0	X				0	0	0
NC101	North Carolina Triangle to the Coast	Tracy Jackson	Treasurer	5	0		X			0	0	0
NC101	North Carolina Triangle to the Coast	Teresa Dunlap	Vice President	2	0		X			0	0	0
NC101	North Carolina Triangle to the Coast	Diane Jewell	Secretary	2	0		X			0	0	0
NC101	North Carolina Triangle to the Coast	Carole Wilson	Board Member	1	0	X				0	0	0
NC101	North Carolina Triangle to the Coast	Danielle Wellman	Board Member	2	0	X				0	0	0
NC101	North Carolina Triangle to the Coast	Donald McDonnell	Board Member	2	0	X				0	0	0
NC101	North Carolina Triangle to the Coast	Tom Blue	Board Member	2	0	X				0	0	0
NC101	North Carolina Triangle to the Coast	Daniel Stevens	Board Member	2	0	X				0	0	0
NC101	North Carolina Triangle to the Coast	Mitch Perry	Board Member	2	0	X				0	0	0
NC101	North Carolina Triangle to the Coast	Priscilla Awkard	Board Member	2	0	X				0	0	0
NE100	Great Plains	Debra Graeve	President	1	0		X			0	0	0
NE100	Great Plains	Andy Kammerer	Board Member	1	0	X				0	0	0
NE100	Great Plains	Christina Farruggia	Board Member	1	0	X				0	0	0
NE100	Great Plains	Emily Poeschl	Board Member	1	0	X				0	0	0
NE100	Great Plains	Ann Yager	Board Member	1	0	X				0	0	0
NE100	Great Plains	Laura Heisterkamp	Board Member	1	0	X				0	0	0
NE100	Great Plains	Cynthia Hume	Board Member	1	0	X				0	0	0
NE100	Great Plains	Patty Bauer	Board Member	1	0	X				0	0	0
NE100	Great Plains	Susan Hardina	Board Member	1	0	X				0	0	0
NE100	Great Plains	Douglas Koch	Board Member	1	0	X				0	0	0
NE100	Great Plains	Elvira Rios	Board Member	1	0	X				0	0	0
NE100	Great Plains	Tonya Arnold-Tornquist	Board Member	1	0	X				0	0	0
NE100	Great Plains	Richard Kumm	Board Member	1	0	X				0	0	0
NE100	Great Plains	Kellen Garrison	Treasurer	2	0		X			0	0	0
NE100	Great Plains	Michael Chase	Vice President	1	0		X			0	0	0
NJ100	New Jersey	Celia Moncholi	President	5	0		X			0	0	0
NJ100	New Jersey	Gary Tuma	Secretary	1	0		X			0	0	0
NJ100	New Jersey	Steve Tripp	Board Member	1	0	X				0	0	0
NJ100	New Jersey	Elizabeth James	Board Member	1	0	X				0	0	0

PUBLIC INSPECTION COPY

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 Year ended March 31, 2021

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NJ100	New Jersey	Mary Ellen Meara	Board Member	1	0	X				0	0	0
NJ100	New Jersey	Karen Correa	Board Member	1	0	X				0	0	0
NJ100	New Jersey	Melissa Surdez	Board Member	1	0	X				0	0	0
NJ100	New Jersey	Jason Haugh	Treasurer	1	0		X			0	0	0
NJ100	New Jersey	Scott Present	Board Member (Term 2/1/21)	1	0	X				0	0	0
NJ101	North Jersey	Ellen Schum	Secretary (Term 7/20/20)	5	0		X			0	0	0
NJ101	North Jersey	Joan Sheridan	Board Member (Term 7/20/20)	4	0	X				0	0	0
NJ101	North Jersey	Chuck Titone	Treasurer (Term 7/20/20)	4	0		X			0	0	0
NJ101	North Jersey	Rosanne Rotondo	President	4	0		X			0	0	0
NV100	Nevada	Jo Duszkievicz	President	10	0		X			0	0	0
NV100	Nevada	Cybill Dotson	Secretary	10	0		X			0	0	0
NV100	Nevada	Maurice Maharaj	Board Member	6	0	X				0	0	0
NV100	Nevada	Dr. Stephani Christensen	Board Member	10	0	X				0	0	0
NV100	Nevada	Steven Keltie	Board Member	10	0	X				0	0	0
NV100	Nevada	Lindsay Knox	Board Member	10	0	X				0	0	0
NV100	Nevada	Mae Worthey Thomas	Board Member	1	0	X				0	0	0
NV100	Nevada	Rev. Kelcey West	Board Member	10	0	X				0	0	0
NV100	Nevada	Rhonda Nolan	Board Member	1	0	X				0	0	0
NV100	Nevada	Jill Anderson	Treasurer	20	0		X			0	0	0
NY100	Upstate New York	Scott Philbin	President	5	0		X			0	0	0
NY100	Upstate New York	Marcia Kimball	Secretary	5	0		X			0	0	0
NY100	Upstate New York	Diane Butrym	Board Member	1	0	X				0	0	0
NY100	Upstate New York	Maria Winston	Board Member	1	0	X				0	0	0
NY100	Upstate New York	Arsyl DeJesus	Board Member	1	0	X				0	0	0
NY100	Upstate New York	Mila Meier	Board Member	1	0	X				0	0	0
NY100	Upstate New York	Peggy Jacobsen	Board Member	1	0	X				0	0	0
NY100	Upstate New York	Sarah Bruno-Robichaud	Board Member	1	0	X				0	0	0
NY100	Upstate New York	Gina Fedele	Board Member	1	0	X				0	0	0
NY100	Upstate New York	Linda Gray	Board Member	1	0	X				0	0	0
NY100	Upstate New York	Adam Desmond	Board Member	1	0	X				0	0	0
NY100	Upstate New York	Colleen L L Nossavage	Board Member	1	0	X				0	0	0
NY100	Upstate New York	Stephen Edge	Board Member	1	0	X				0	0	0
NY100	Upstate New York	Justin Reid	Treasurer	3	0		X			0	0	0
NY100	Upstate New York	Debra Sottolano	Vice President	1	0		X			0	0	0
NY100	Upstate New York	Susan Duffy	Board Member	1	0	X				0	0	0
NY100	Upstate New York	Virginia Wheeler	Board Member	1	0	X				0	0	0
NY104	Greater New York City	Josie Thomas	Board Member (Term 11/1/20)	1	0	X				0	0	0
NY104	Greater New York City	Martha Beard	Board Member (Term 11/6/20)	1	0	X				0	0	0
NY104	Greater New York City	Patrick Borgen, MD	Board Member (Term 11/6/20)	1	0	X				0	0	0
NY104	Greater New York City	Nicole Gresham Perry	Board Member (Term 11/6/20)	1	0	X				0	0	0
NY104	Greater New York City	Jill Maura Rabin, MD	Board Member (Term 11/6/20)	1	0	X				0	0	0
NY104	Greater New York City	Regina Fitzpatrick	Board Member (Term 11/6/20)	1	0	X				0	0	0
NY104	Greater New York City	Eric Brinker	Board Member (Term 11/6/20)	1	0	X				0	0	0
NY104	Greater New York City	Felice Javit, Esq.	Board Member (Term 11/6/20)	1	0	X				0	0	0
NY104	Greater New York City	Sommer Bazuro, PhD	Board Member (Term 11/6/20)	1	0	X				0	0	0
NY104	Greater New York City	Gerri Willis	Board Member (Term 11/6/20)	1	0	X				0	0	0
NY104	Greater New York City	Nancy Geller	Board Member (Term 11/6/20)	1	0	X				0	0	0
NY104	Greater New York City	Rachel Ferguson	Board Member (Term 11/6/20)	1	0	X				0	0	0
NY104	Greater New York City	Debbie Madden	Board Member (Term 11/6/20)	1	0	X				0	0	0
NY104	Greater New York City	Donna-Marie Manasseh, MD	Board Member (Term 11/6/20)	1	0	X				0	0	0
NY104	Greater New York City	Grace Ormond	President	1	0		X			0	0	0
NY104	Greater New York City	Rose Bollman	Board Member	1	0	X				0	0	0
NY104	Greater New York City	Kelly Mathieson	Secretary/Treasurer	1	0		X			0	0	0

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Susan G. Komen Breast Cancer Foundation - Group
Year ended March 31, 2021

EIN: 75-2162834
2020 Form 990

Part VII - Compensation of Officers, Directors, Key Employees and Fiver Highest Employees

Business Unit	Affiliate	Name	Title/Position	Avg Hours Per Week (Filing Org)	Avg Hours per Week (Related)	Individual Trustee or Director	Officer	Key Employee	Highest Compensated Employee	Reportable Compensation from the Organization	Reportable Compensation from Related Organization	Estimated Amount of Other Compensation
NY104	Greater New York City	Edward Flanders, Esq.	Board Member	1	0	X				0	0	0
NY104	Greater New York City	Emily Silver	Board Member (Term 11/6/20)	1	0	X				0	0	0
OH100	Southwest Ohio	Molly McKnight	President	12	0		X			0	0	0
OH100	Southwest Ohio	Liane Rousseau	Board Member	4	0	X				0	0	0
OH100	Southwest Ohio	James Teater	Board Member	4	0	X				0	0	0
OH100	Southwest Ohio	Kathy Walsh	Board Member	6	0	X				0	0	0
OH100	Southwest Ohio	Meghan Mongillo	Board Member	4	0	X				0	0	0
OH101	Northeast Ohio	Scott Sargent	Board Member	2	0	X				0	0	0
OH101	Northeast Ohio	Cherokee Susman	Board Member	1	0	X				0	0	0
OH101	Northeast Ohio	Corbin Bayles	Board Member	2	0	X				0	0	0
OH101	Northeast Ohio	Kimberly Sanders	Board Member	2	0	X				0	0	0
OH101	Northeast Ohio	Patricia Gajda	Board Member	1	0	X				0	0	0
OH101	Northeast Ohio	Sandy Rosenberg	Board Member	2	0	X				0	0	0
OH101	Northeast Ohio	Christine Polisen	President	2	0		X			0	0	0
OH101	Northeast Ohio	Cynthia Reynolds	Board Member	2	0	X				0	0	0
OH101	Northeast Ohio	Joel Feldman	Board Member	1	0	X				0	0	0
OH101	Northeast Ohio	Marlo Schmidt	Board Member	2	0	X				0	0	0
OH101	Northeast Ohio	Susan Smith	Board Member	1	0	X				0	0	0
OH101	Northeast Ohio	Lynn Koster	Treasurer	2	0		X			0	0	0
OH102	Columbus	Craig Sivers	Board Member (Term 4/16/20)	2	0	X				0	0	0
OH102	Columbus	David Standley	President	2	0		X			0	0	0
OH102	Columbus	Bobbi Jo Allan	Secretary	2	0		X			0	0	0
OH102	Columbus	Chrishonda Smith	Board Member	2	0	X				0	0	0
OH102	Columbus	Gina Woods	Board Member	1	0	X				0	0	0
OH102	Columbus	Jane Coleman-Porter	Board Member	2	0	X				0	0	0
OH102	Columbus	Jeff Kasler	Board Member	2	0	X				0	0	0
OH102	Columbus	Tracey Townsend	Board Member	2	0	X				0	0	0
OH102	Columbus	Carrie Boston	Board Member	1	0	X				0	0	0
OH102	Columbus	Denise Hayes	Board Member	1	0	X				0	0	0
OH102	Columbus	Gina Terrell	Board Member	2	0	X				0	0	0
OH102	Columbus	Jenny Nelson-Carney	Board Member	2	0	X				0	0	0
OH102	Columbus	Devin Hughes	Treasurer	2	0		X			0	0	0
OH103	Northwest Ohio	Susan Gilmore	Secretary	3	0		X			0	0	0
OH103	Northwest Ohio	Amy Thorpe-Wiley	Board Member	5	0	X				0	0	0
OH103	Northwest Ohio	Bill Conlisk	Board Member	3	0	X				0	0	0
OH103	Northwest Ohio	Jacqueline Hylant Berenzweig	Board Member	3	0	X				0	0	0
OH103	Northwest Ohio	Shaili Desai	Board Member	3	0	X				0	0	0
OH103	Northwest Ohio	Marianne Peters	President	4	0		X			0	0	0
OH103	Northwest Ohio	John Skeldon	Board Member	3	0	X				0	0	0
OH103	Northwest Ohio	Malcolm Doyle	Board Member	3	0	X				0	0	0
OH103	Northwest Ohio	Anne Marie Hinkle	Board Member	3	0	X				0	0	0
OH103	Northwest Ohio	Derryl Glaze	Board Member	3	0	X				0	0	0
OH103	Northwest Ohio	Michelle Kranz	Board Member	3	0	X				0	0	0
OH103	Northwest Ohio	Brian King	Treasurer	3	0		X			0	0	0
OH103	Northwest Ohio	Vallie Bowman-English	Vice President	3	0		X			0	0	0
OK101	Oklahoma	Dawne Stafford	Secretary	10	0		X			0	0	0
OK101	Oklahoma	Courtney Hall	Board Member	10	0	X				0	0	0
OK101	Oklahoma	Sandra McClelland	Board Member	10	0	X				0	0	0
OK101	Oklahoma	Christina Henson	Board Member	10	0	X				0	0	0
OK101	Oklahoma	Anna Rohleder	Board Member	10	0	X				0	0	0
OK101	Oklahoma	Matt Echols	Board Member	10	0	X				0	0	0
OK101	Oklahoma	Valerie Simmons	Board Member	10	0	X				0	0	0
OK101	Oklahoma	LeAnne Taylor	President	20	0		X			0	0	0

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Susan G. Komen Breast Cancer Foundation - Group
Year ended March 31, 2021

EIN: 75-2162834
2020 Form 990

Part VII - Compensation of Officers, Directors, Key Employees and Fiver Highest Employees

Business Unit	Affiliate	Name	Title/Position	Avg Hours Per Week (Filing Org)	Avg Hours per Week (Related)	Individual Trustee or Director	Officer	Key Employee	Highest Compensated Employee	Reportable Compensation from the Organization	Reportable Compensation from Related Organization	Estimated Amount of Other Compensation
OK101	Oklahoma	Hayley Rose	Board Member	10	0	X				0	0	0
OK101	Oklahoma	Tony Otto	Treasurer	20	0		X			0	0	0
OK101	Oklahoma	Moira Watson	Vice President	20	0		X			0	0	0
OK101	Oklahoma	Frieda Larson	Board Member (Term 3/11/21)	20	0	X				0	0	0
OK101	Oklahoma	Michelle Fox	Board Member (Term 3/11/21)	20	0	X				0	0	0
OK101	Oklahoma	Susanna Gattoni	Board Member (Term 3/11/21)	10	0	X				0	0	0
OK101	Oklahoma	John Frame	Board Member (Term 3/11/21)	10	0	X				0	0	0
OK101	Oklahoma	Chris Calvert	Board Member (Term 3/11/21)	10	0	X				0	0	0
OR100	Oregon and SW Washington	Brad Johnson	Secretary (Term 1/27/21)	2	0			X		0	0	0
OR100	Oregon and SW Washington	Javier Nieto	Board Member (Term 1/27/21)	2	0	X				0	0	0
OR100	Oregon and SW Washington	Elise McClure	Board Member (Term 1/27/21)	2	0	X				0	0	0
OR100	Oregon and SW Washington	Aletha Anderson	President	2	0		X			0	0	0
OR100	Oregon and SW Washington	Patricia Brown	Board Member	3	0	X				0	0	0
OR100	Oregon and SW Washington	Toni Storm-Dickerson	Board Member	2	0	X				0	0	0
OR100	Oregon and SW Washington	Bori Gilchrist	Board Member	1	0	X				0	0	0
OR100	Oregon and SW Washington	Sharon Gary-Smith	Board Member	1	0	X				0	0	0
OR100	Oregon and SW Washington	Kelly Michaels	Board Member	1	0	X				0	0	0
OR100	Oregon and SW Washington	Lisa O'Malley	Board Member	1	0	X				0	0	0
PA101	Greater Pennsylvania	Lisa Sturiale	President	1	0		X			0	0	0
PA101	Greater Pennsylvania	Paul Horton	Treasurer	1	0		X			0	0	0
PA101	Greater Pennsylvania	Barbara Bossi	Board Member	1	0	X				0	0	0
PA101	Greater Pennsylvania	Caroline Johns	Board Member	1	0	X				0	0	0
PA101	Greater Pennsylvania	Jennifer May	Board Member	1	0	X				0	0	0
PA101	Greater Pennsylvania	Jim McQuade	Board Member	1	0	X				0	0	0
PA101	Greater Pennsylvania	Marguerite Bonaventura	Board Member	1	0	X				0	0	0
PA101	Greater Pennsylvania	Troy Treanor	Board Member	1	0	X				0	0	0
PA101	Greater Pennsylvania	Laura Long	Vice President	1	0		X			0	0	0
PA101	Greater Pennsylvania	Crystal Ross	Board Member	1	0	X				0	0	0
PA101	Greater Pennsylvania	Kate Burroughs	Board Member	1	0	X				0	0	0
PA101	Greater Pennsylvania	Richard Emanuelson	Board Member	1	0	X				0	0	0
PA101	Greater Pennsylvania	Nathan Rost	Board Member	1	0	X				0	0	0
SC100	South Carolina	Kim Simmons	Board Member (Term 4/22/20)	2	0	X				0	0	0
SC100	South Carolina	Leslie Crews	Board Member (Term 11/18/20)	1	0	X				0	0	0
SC100	South Carolina	Mary Jane Weir	Board Member	1	0	X				0	0	0
SC100	South Carolina	Mary Jensen	Board Member	1	0	X				0	0	0
SC100	South Carolina	Kristen Thompson	President	3	0		X			0	0	0
SC100	South Carolina	John Muscarella	Board Member	1	0	X				0	0	0
SC100	South Carolina	Sarah Paul	Treasurer	1	0		X			0	0	0
SC100	South Carolina	Charlotte Rufail	Board Member	2	0	X				0	0	0
SC100	South Carolina	Chris Fowler	Vice President	1	0		X			0	0	0
TN103	East Tennessee	Martha Chill	Board Member (Term 5/4/20)	1	0	X				0	0	0
TN103	East Tennessee	Adam Allen	Board Member (Term 6/16/20)	3	0	X				0	0	0
TN103	East Tennessee	Kimberly Bozich	Board Member (Term 7/31/20)	6	0	X				0	0	0
TN103	East Tennessee	Mayra Clark	Board Member (Term 8/19/20)	2	0	X				0	0	0
TN103	East Tennessee	Hal Bibee	President	1	0		X			0	0	0
TN103	East Tennessee	Wynne Caffey - Knight	Secretary	2	0		X			0	0	0
TN103	East Tennessee	Pauline Douglas	Board Member	1	0	X				0	0	0
TN103	East Tennessee	Russ Jensen	Board Member	1	0	X				0	0	0
TN103	East Tennessee	Wayne McDaniel	Board Member	1	0	X				0	0	0
TN103	East Tennessee	Marty Millsaps	Treasurer	1	0		X			0	0	0
TN104	Memphis-MidSouth Mississippi	Gretchen Reaves	Secretary	2	0		X			0	0	0
TN104	Memphis-MidSouth Mississippi	John Anthony	Board Member	1	0	X				0	0	0
TN104	Memphis-MidSouth Mississippi	Danielle Bowlin	Board Member	1	0	X				0	0	0

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Susan G. Komen Breast Cancer Foundation - Group
 Year ended March 31, 2021

EIN: 75-2162834
 2020 Form 990

Part VII - Compensation of Officers, Directors, Key Employees and Fiver Highest Employees

Business Unit	Affiliate	Name	Title/Position	Avg Hours Per Week (Filing Org)	Avg Hours per Week (Related)	Individual Trustee or Director	Officer	Key Employee	Highest Compensated Employee	Reportable Compensation from the Organization	Reportable Compensation from Related Organization	Estimated Amount of Other Compensation
TN104	Memphis-MidSouth Mississippi	Christy Moore	Board Member	1	0	X				0	0	0
TN104	Memphis-MidSouth Mississippi	Nikki Huffman	Board Member	1	0	X				0	0	0
TN104	Memphis-MidSouth Mississippi	Eddie Jean Carr	Board Member	1	0	X				0	0	0
TN104	Memphis-MidSouth Mississippi	Michael Davis	Board Member	1	0	X				0	0	0
TN104	Memphis-MidSouth Mississippi	Danielle Williams	Board Member	1	0	X				0	0	0
TN104	Memphis-MidSouth Mississippi	Raphael McInnis	Board Member	1	0	X				0	0	0
TN104	Memphis-MidSouth Mississippi	William Winstead	President	5	0		X			0	0	0
TN104	Memphis-MidSouth Mississippi	Melody McAnally	Board Member	1	0	X				0	0	0
TN104	Memphis-MidSouth Mississippi	Sophia Cole	Board Member	1	0	X				0	0	0
TN104	Memphis-MidSouth Mississippi	Karen Sock	Board Member	1	0	X				0	0	0
TN104	Memphis-MidSouth Mississippi	Barbara Bowman	Board Member	1	0	X				0	0	0
TN104	Memphis-MidSouth Mississippi	Barbara Craft	Board Member	1	0	X				0	0	0
TN104	Memphis-MidSouth Mississippi	Danielle White	Board Member	1	0	X				0	0	0
TN104	Memphis-MidSouth Mississippi	Kyle McGowan	Treasurer	2	0		X			0	0	0
TN105	Central Tennessee	Andrea Birch	Board Member	1	0	X				0	0	0
TN105	Central Tennessee	April Bell	Board Member	1	0	X				0	0	0
TN105	Central Tennessee	Barbara Marshall	Board Member	1	0	X				0	0	0
TN105	Central Tennessee	Carol Money	Board Member	1	0	X				0	0	0
TN105	Central Tennessee	Marta Parker	Secretary	1	0			X		0	0	0
TN105	Central Tennessee	Haden McWhorter	Board Member	1	0	X				0	0	0
TN105	Central Tennessee	Robert Higham	Board Member	1	0	X				0	0	0
TN105	Central Tennessee	Caroline Harris	Board Member	1	0	X				0	0	0
TN105	Central Tennessee	Erica Saeger	Treasurer	4	0		X			0	0	0
TN105	Central Tennessee	Karen Clark	Board Member	1	0	X				0	0	0
TN105	Central Tennessee	Scott Mertie	Board Member	1	0	X				0	0	0
TN105	Central Tennessee	Franklin Pogue	Board Member	1	0	X				0	0	0
TN105	Central Tennessee	Kathy Winn	Board Member	2	0	X				0	0	0
TN105	Central Tennessee	Erika Hamilton	Board Member	1	0	X				0	0	0
TN105	Central Tennessee	Gene Boerger	President	1	0		X			0	0	0
TN105	Central Tennessee	Randall Hebert	Board Member	1	0	X				0	0	0
TN105	Central Tennessee	Troy Abruzzo	Board Member	1	0	X				0	0	0
TX101	Greater Central and East Texas	Sandra Henry	Board Member	1	0	X				0	0	0
TX101	Greater Central and East Texas	Jae Borgard	Board Member	1	0	X				0	0	0
TX101	Greater Central and East Texas	Julie Malouf	Board Member	1	0	X				0	0	0
TX101	Greater Central and East Texas	Karin Foster	President	1	0		X			0	0	0
TX101	Greater Central and East Texas	Bridgette Thomasson	Secretary	1	0		X			0	0	0
TX101	Greater Central and East Texas	Lorrie Schultz	Board Member	1	0	X				0	0	0
TX101	Greater Central and East Texas	Mary Ellen Dugan	Board Member	2	0	X				0	0	0
TX101	Greater Central and East Texas	Lakshmi Balasubramanian	Board Member	1	0	X				0	0	0
TX101	Greater Central and East Texas	Lisa Galloway	Board Member	1	0	X				0	0	0
TX101	Greater Central and East Texas	Scott OBrien	Board Member	2	0	X				0	0	0
TX101	Greater Central and East Texas	Bobbi Dangerfield	Board Member	1	0	X				0	0	0
TX101	Greater Central and East Texas	Yvonne McGill	Board Member	1	0	X				0	0	0
TX101	Greater Central and East Texas	David Lofye	Board Member	1	0	X				0	0	0
TX101	Greater Central and East Texas	Janet Etlinger	Board Member	1	0	X				0	0	0
TX101	Greater Central and East Texas	Jennifer Mollo	Board Member	1	0	X				0	0	0
TX101	Greater Central and East Texas	Vanessa Casanova	Board Member	1	0	X				0	0	0
TX102	Dallas County	Allison Dipasquale	President	3	0		X			0	0	0
TX102	Dallas County	Shelisa Brock	Secretary	1	0		X			0	0	0
TX102	Dallas County	Jamele R Medina	Treasurer	1	0		X			0	0	0
TX102	Dallas County	Pam Randall	Board Member	1	0	X				0	0	0
TX102	Dallas County	Stephanie Vosper	Board Member	1	0	X				0	0	0
TX102	Dallas County	Sharon Lakes	Board Member	1	0	X				0	0	0

PUBLIC INSPECTION COPY

Susan G. Komen Breast Cancer Foundation - Group
 Year ended March 31, 2021

EIN: 75-2162834
 2020 Form 990

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Business Unit	Affiliate	Name	Title/Position	Avg Hours Per Week (Filing Org)	Avg Hours per Week (Related)	Individual Trustee or Director	Officer	Key Employee	Highest Compensated Employee	Reportable Compensation from the Organization	Reportable Compensation from Related Organization	Estimated Amount of Other Compensation
TX102	Dallas County	Bill Peterson	Board Member	3	0	X				0	0	0
TX102	Dallas County	Patricia Escoe	Board Member	1	0	X				0	0	0
TX102	Dallas County	Leeanne Metcalfe	Board Member	1	0	X				0	0	0
TX102	Dallas County	Julia Koprivnik	Board Member	1	0	X				0	0	0
TX102	Dallas County	Maria Madrigal	Board Member	1	0	X				0	0	0
TX104	Greater Fort Worth	Susie Henning	Board Member (Term 12/31/20)	1	0	X				0	0	0
TX104	Greater Fort Worth	Mary Nan Doran	President	3	0		X			0	0	0
TX104	Greater Fort Worth	Lisa de la Garza	Secretary	1	0		X			0	0	0
TX104	Greater Fort Worth	Christy Cates	Treasurer	1	0		X			0	0	0
TX104	Greater Fort Worth	Ginny Tigie	Board Member	1	0	X				0	0	0
TX104	Greater Fort Worth	Jennifer Sweeney	Board Member	1	0	X				0	0	0
TX104	Greater Fort Worth	Joan Katz	Board Member	1	0	X				0	0	0
TX104	Greater Fort Worth	Kristin Jenkins Tesmer	Board Member	1	0	X				0	0	0
TX104	Greater Fort Worth	Rozanne Rosenthal	Board Member	1	0	X				0	0	0
TX104	Greater Fort Worth	Brock Peters	Board Member	1	0	X				0	0	0
TX104	Greater Fort Worth	Kelly Hanley	Board Member	1	0	X				0	0	0
TX104	Greater Fort Worth	Kim Linnear	Board Member	1	0	X				0	0	0
TX104	Greater Fort Worth	Jeremy Byrd	Board Member	1	0	X				0	0	0
TX104	Greater Fort Worth	Marie Forbes	Board Member	1	0	X				0	0	0
TX104	Greater Fort Worth	M. Jessica Fiesta	Board Member	1	0	X				0	0	0
TX104	Greater Fort Worth	Maggie Estes	Board Member	1	0	X				0	0	0
TX104	Greater Fort Worth	Sandra Garcia Acevedo	Board Member	1	0	X				0	0	0
TX104	Greater Fort Worth	Bert Thompson	Vice President	1	0		X			0	0	0
TX105	Houston	Ann Williams	Treasurer (Term 10/20/20)	1	0		X			0	0	0
TX105	Houston	Diana Moore	President	1	0		X			0	0	0
TX105	Houston	Cecilia Sarabia	Secretary	1	0		X			0	0	0
TX105	Houston	Betsy Kamin	Board Member	1	0	X				0	0	0
TX105	Houston	Jane Parker	Board Member	1	0	X				0	0	0
TX105	Houston	Christine Carbo Marziotti	Board Member	1	0	X				0	0	0
TX105	Houston	Hilary Ware	Board Member	1	0	X				0	0	0
TX105	Houston	Jane Marmion	Board Member	1	0	X				0	0	0
TX105	Houston	Mary Lynn Kallina	Board Member	1	0	X				0	0	0
TX105	Houston	Robert Mease	Board Member	1	0	X				0	0	0
TX105	Houston	Ellen Elam	Vice President	1	0		X			0	0	0
TX107	North & West Texas	Dennis Stolkey	President	4	0		X			0	0	0
TX107	North & West Texas	Diane Gerstner	Treasurer	4	0		X			0	0	0
TX107	North & West Texas	Nancy Hahn	Board Member	2	0	X				0	0	0
TX107	North & West Texas	Barb Barton Weiszhaar	Board Member	6	0	X				0	0	0
TX107	North & West Texas	Layla Powers	Board Member	6	0	X				0	0	0
TX107	North & West Texas	Amanda Loughmiller	Vice President	4	0		X			0	0	0
TX108	San Antonio	Travis Kowalski	Board Member (Term 7/31/20)	3	0	X				0	0	0
TX108	San Antonio	Marci Aguirre	Treasurer (Term 8/9/20)	3	0		X			0	0	0
TX108	San Antonio	Cynthia Ellis Rosen	President	3	0		X			0	0	0
TX108	San Antonio	Desaree LaMacchia	Secretary	3	0		X			0	0	0
TX108	San Antonio	Jennifer Boland	Board Member	3	0	X				0	0	0
TX108	San Antonio	Debra Guerrero	Board Member	3	0	X				0	0	0
TX108	San Antonio	Sanjie Garza-Cox	Board Member	3	0	X				0	0	0
TX108	San Antonio	Dr. Karen Carcamo	Board Member	1	0	X				0	0	0
TX108	San Antonio	Frank Arredondo	Board Member	3	0	X				0	0	0
TX108	San Antonio	Lorrena Paz	Board Member	1	0	X				0	0	0
TX108	San Antonio	Brennan Kucera	Vice President	3	0		X			0	0	0
VA100	Central & Eastern Virginia	Shannon Satterwhite	Board Member (Term 5/4/20)	10	0	X				0	0	0
VA100	Central & Eastern Virginia	Lisa Chandler	President	15	0		X			0	0	0

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Susan G. Komen Breast Cancer Foundation - Group
 Year ended March 31, 2021

EIN: 75-2162834
 2020 Form 990

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VA100	Central & Eastern Virginia	Jen Miller	Secretary	1	0		X			0	0	0
VA100	Central & Eastern Virginia	Nicole Kint	Treasurer	15	0		X			0	0	0
VA100	Central & Eastern Virginia	Billy Irvin	Board Member	1	0	X				0	0	0
VA100	Central & Eastern Virginia	Katrina Forrest	Board Member	1	0	X				0	0	0
VA100	Central & Eastern Virginia	Susan Quisenberry	Board Member	1	0	X				0	0	0
VA100	Central & Eastern Virginia	Beryl Love	Board Member	10	0	X				0	0	0
VA100	Central & Eastern Virginia	Ron Kody	Board Member	1	0	X				0	0	0
VA100	Central & Eastern Virginia	Du'Neika Easley	Vice President	1	0			X		0	0	0
VA101	Virginia Blue Ridge	Tara Nepper	President	4	0			X		0	0	0
VA101	Virginia Blue Ridge	Lisa Gay-Milliken	Secretary	1	0			X		0	0	0
VA101	Virginia Blue Ridge	Melanie Wheeler	Treasurer	4	0			X		0	0	0
VA101	Virginia Blue Ridge	David Jones	Board Member	1	0	X				0	0	0
VA101	Virginia Blue Ridge	John Conner	Board Member	1	0	X				0	0	0
VA101	Virginia Blue Ridge	Susan Mole	Board Member	1	0	X				0	0	0
VA101	Virginia Blue Ridge	Charlotte Tyson	Board Member	1	0	X				0	0	0
VA101	Virginia Blue Ridge	Eileen Kenny	Board Member	1	0	X				0	0	0
VA101	Virginia Blue Ridge	Matthew Fink	Board Member	1	0	X				0	0	0
VA101	Virginia Blue Ridge	MJ Dixon	Board Member	1	0	X				0	0	0
VA101	Virginia Blue Ridge	Tim Hutchens	Board Member	1	0	X				0	0	0
VA101	Virginia Blue Ridge	HB Hunter	Board Member	1	0	X				0	0	0
WA100	Puget Sound	Amy Sing	President	5	0			X		0	0	0
WA100	Puget Sound	Nicole Grogan	Secretary	6	0			X		0	0	0
WA100	Puget Sound	Kim Albrecht	Board Member	10	0	X				0	0	0
WA100	Puget Sound	Vince Claudio	Treasurer	5	0			X		0	0	0
WA100	Puget Sound	Janie Lee	Board Member	4	0	X				0	0	0
WA100	Puget Sound	Sean Ferree	Board Member	4	0	X				0	0	0
WA100	Puget Sound	Mitra Azizirad	Board Member	5	0	X				0	0	0
WA100	Puget Sound	Carlo Malaguzzi	Board Member	5	0	X				0	0	0
WA100	Puget Sound	Fengting Yan	Board Member	4	0	X				0	0	0
WA100	Puget Sound	Thomas Brown	Board Member	5	0	X				0	0	0
WI101	Wisconsin	Kristine Alston	Board Member (Term 3/1/21)	6	0	X				0	0	0
WI101	Wisconsin	Tammy Garcia	President	3	0			X		0	0	0
WI101	Wisconsin	Jen Kent	Secretary	1	0			X		0	0	0
WI101	Wisconsin	Kelli Harpel	Treasurer	2	0			X		0	0	0
WI101	Wisconsin	Chandra Cooper	Board Member	1	0	X				0	0	0
WI101	Wisconsin	Jeff Sledge	Board Member	1	0	X				0	0	0
WI101	Wisconsin	Kari Wisinski	Board Member	1	0	X				0	0	0
WI101	Wisconsin	Kate Westfall	Board Member	1	0	X				0	0	0
WI101	Wisconsin	Teresa Joranlien	Board Member	1	0	X				0	0	0
WI101	Wisconsin	Sue Weiss	Board Member	1	0	X				0	0	0
WI101	Wisconsin	Christina Italiano	Board Member	1	0	X				0	0	0
WI101	Wisconsin	Sara Barncard	Board Member	1	0	X				0	0	0
WI101	Wisconsin	Julie Gerber	Board Member	1	0	X				0	0	0
WI101	Wisconsin	Katerina Gryparis	Board Member	1	0	X				0	0	0

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Susan G. Komen Breast Cancer - Group
 Year ended March 31, 2021
 Form 990, Item H - List of Subordinate Organizations

Business Unit ID	Komen Operations Name	Incorporation Name	EIN	Physical Street	Physical City	Physical State	Physical Zip/Postal Code
AL100	North Central Alabama Affiliate	North Central Alabama Affiliate of the Susan G. Komen Breast Cancer Foundation Inc.	75-2844656	1909 27th Ave. South	Homewood	AL	35209
AR100	Ozark Affiliate	Ozark Affiliate of the Susan G. Komen Breast Cancer Foundation	75-2845062	403 W. Maple St.	Springdale	AR	72764
AR101	Arkansas Affiliate	The Arkansas Affiliate of the Susan G. Komen Breast Cancer Foundation	71-0724429	904 Autumn Road, Suite 500	Little Rock	AR	72211
CA100	Orange County Affiliate	The Orange County Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	33-0487943	2817 McGraw	Irvine	CA	92614
CA101	Northern and Central California Affiliate	Sacramento Valley Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	94-3169358	2880 Sunrise Blvd Suite 220	Rancho Cordova	CA	95742
CA103	Inland Empire Affiliate	Inland Empire Affiliate of the Susan G. Komen Breast Cancer Foundation	33-0802964	7177 Brockton Avenue Suite 108	Riverside	CA	92506
CA104	Los Angeles County Affiliate	The Los Angeles County Chapter of the Susan G. Komen Breast Cancer Foundation	95-4582064	5901 W. Century Blvd Suite 800	Los Angeles	CA	90045
CA105	San Diego Affiliate	The San Diego Chapter of the Susan G. Komen Breast Cancer Foundation	33-0638911	4699 Murphy Canyon Road, Suite 102	San Diego	CA	98123
CA106	San Francisco Bay Area Affiliate	The San Francisco Bay Area Affiliate of the Susan G. Komen Breast Cancer Foundation	94-3047626	1469 Pacific Avenue	San Francisco	CA	94109
CO102	Colorado Affiliate	The Denver Metropolitan Affiliate of the Susan G. Komen Breast Cancer Foundation	84-1199858	PO Box 16734	Denver	CO	80216
CT100	New England Affiliate	Connecticut Affiliate of the Susan G. Komen Breast Cancer Foundation Inc.	75-2844629	PO Box 127	Waban	MA	02468
FL103	Miami/Ft. Lauderdale Affiliate	Miami Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	75-2844638	1333 South University Drive, Suite 204	Plantation	FL	33324
FL105	Florida Affiliate	The South Florida Chapter of the Susan G. Komen Foundation, Inc.	65-0254225	1309 North Flagler Drive, 5th Floor	West Palm Beach	FL	33401
GA100	Greater Atlanta Affiliate	The Greater Atlanta Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	58-1959763	3525 Piedmont Road 5-215	Atlanta	GA	30305
GA102	Coastal Georgia Affiliate	Hawaii Affilate of the Susan G. Komen Breast Cancer Foundation Inc.	75-2844635	7505 Waters Avenue #A10	Savannah	GA	31406
HI100	Hawaii Affiliate	Hawaii Affilate of the Susan G. Komen Breast Cancer Foundation Inc.	75-2844635	3555 Harding Avenue Suite 2D	Honolulu	HI	96816
IA103	Greater Iowa Affiliate	The Des Moines Chapter of the Susan G. Komen Breast Cancer Foundation	42-1438018	1701 22nd Street, Suite 107	West Des Moines	IA	50266
ID100	Idaho Montana Affiliate	Boise, Idaho Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	75-2854965	1203 S. Five Mile	Boise	ID	83709
IL101	Chicagoland Affiliate	The Chicagoland Area Chapter of the Susan G. Komen Breast Cancer Foundation	36-4111723	213 W. Institute Place, Suite 302	Chicago	IL	60610
IL102	Memorial Affiliate	The Peoria Memorial Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	37-1286285	900 Main Street, Suite 160	Peoria	IL	61603
IN100	Evansville Tri-State Affiliate	Greater Evansville Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	75-2844632	4424 Vogel Road, Suite 205	Evansville	IN	47715
IN101	Central Indiana Affiliate	Indianapolis Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	75-2941627	3500 DePauw Blvd. Ste 2070	Indianapolis	IN	46268
KY101	Kentucky Affiliate	Louisville, Kentucky Affilate of the Susan G. Komen Breast Cancer Foundation Inc.	75-2855046	1201 Story Avenue, Suite 205	Louisville	KY	40206
LA101	Baton Rouge Affiliate	Baton Rouge Affiliate of the Susan G. Komen Breast Cancer Foundation Inc.	75-2854972	6120 Perkins Road Suite 300	Baton Rouge	LA	70808
LA102	New Orleans Affiliate	The Susan G. Komen Breast Cancer Foundation, New Orleans Chapter	72-1222127	4141 Veterans Memorial Blvd. Suite 207 Metairie	LA	70002	

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Susan G. Komen Breast Cancer - Group
 Year ended March 31, 2021
 Form 990, Item H - List of Subordinate Organizations

Business Unit ID	Komen Operations Name	Incorporation Name	EIN	Physical Street	Physical City	Physical State	Physical Zip/Postal Code
MD100	Maryland Affiliate	Maryland Affiliate of the Susan G. Komen Breast Cancer Foundation Inc.	52-2053491	303 International Circle, Suite 390	Hunt Valley	MD	21030
MI101	Michigan Affiliate	Grand Rapids Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	75-2844631	2922 Fuller Ave NE Suite 107B	Grand Rapids	MI	49505
MI103	Greater Detroit Affiliate	Detroit Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	81-5065680	100 Galleria Offcentre, Suite 409	Southfield	MI	48034
MN101	Minnesota Affiliate	Minnesota Affiliate of the Susan G. Komen Breast Cancer Foundation	41-1924790	960 Southdale Center	Edina	MN	55435
MO101	Kansas and Western Missouri Affiliate	Greater Kansas City Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	75-2844634	8900 State Line Road #333	Leawood	KS	66206
MO102	Missouri Affiliate	St. Louis Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	75-2854959	PO Box 31483	Des Peres	MO	63131
NC100	Charlotte Affiliate	Charlotte Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	75-2845066	2316 Randolph Road	Charlotte	NC	28207
NC101	North Carolina Triangle to the Coast Affilia	NC Triangle Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	26-0056671	600 Airport Blvd., Ste 100	Morrisville	NC	27560
NE100	Great Plains Affiliate	Nebraska Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	43-2052349	8707 West Center Road Suite 101	Omaha	NE	68124
NJ100	New Jersey Affiliate	Central and South Jersey Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	43-2052349	Two Princess Road, Suite D	Lawrenceville	NJ	08648
NJ101	North Jersey Affiliate	The North Jersey Affiliate of the Susan G. Komen Breast Cancer Foundation	22-3528454	Two Princess Road, Suite D	Lawrenceville	NJ	08648
NV100	Nevada Affiliate	The Las Vegas Chapter of the Susan G. Kome Breast Cancer Foundation	88-0372386	1091 S. Cimarron Suite A4	Las Vegas	NV	89145
NY100	Upstate New York Affiliate	Western New York Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	75-2875179	742 Delaware Avenue	Buffalo	NY	14209
NY104	Greater New York City Affiliate	Greater New York City Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	91-2049420	246 West 38th Street, Suite 503	New York	NY	10018
OH100	Southwest Ohio Affiliate	Greater Cincinnati Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	75-2855038	6120 South Gilmore Road Suite 206	Fairfield	OH	45014
OH101	Northeast Ohio Affiliate	The Northeast Ohio Chapter of the Susan G. Komen Breast Cancer Foundation	34-1793460	5350 Transportation Blvd. Suite 22	Garfield Heights	OH	44125
OH102	Columbus Affiliate	Columbus Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	75-2844651	929 Eastwind Drive Suite 211	Westerville	OH	43081
OH103	Northwest Ohio Affiliate	Northwest Ohio Affiliate of the Susan G. Komen Breast Cancer Foundation Inc.	75-2845063	3100 W. Central Aven. Suite 235	Toledo	OH	43606
OK101	Oklahoma Affiliate	Tulsa Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	75-2854974	10153 East 79th St. Suite 236	Tulsa	OK	74114
OR100	Oregon and SW Washington Affiliate	The Oregon & SW Washington Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	93-1068897	1500 SW First Ave. Suite 270	Portland	OR	97201
PA101	Greater Pennsylvania Affiliate	Pittsburgh Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	81-0665396	1133 S. Braddock Ave.	Pittsburgh	PA	15218
SC100	South Carolina Affiliate	Lowcountry Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	75-2844655	1064 Gardner Rd., Ste 303	Charleston	SC	29407
TN103	East Tennessee Affiliate	Knoxville Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	75-2854955	318 Nancy Lynn Lane, #13	Knoxville	TN	37919
TN104	Memphis-Midsouth Mississippi Affiliate	Memphis-Midsouth Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	75-2942859	6645 Poplar Ave., Suite 211	Germantown	TN	38138

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Susan G. Komen Breast Cancer - Group
 Year ended March 31, 2021
 Form 990, Item H - List of Subordinate Organizations

Business Unit ID	Komen Operations Name	Incorporation Name	EIN	Physical Street	Physical City	Physical State	Physical Zip/Postal Code
TN105	Central Tennessee Affiliate	The Greater Nashville Chapter of the Susan G. Komen Breast Cancer Foundation, Inc.	62-1671774	4009 Hillsboro Pike, Suite 209	Nashville	TN	37215
TX101	Greater Central and East Texas Affiliate	Austin Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	75-2854966	411 W Monroe	Austin	TX	78704
TX102	Dallas County Affiliate	Dallas County Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	75-2444724	13747 Montfort Drive, Suite 200	Dallas	TX	75240
TX104	Greater Fort Worth Affiliate	The Susan G. Komen Breast Cancer Foundation, Tarrant County Affiliate	75-2445070	2216 Green Oaks Road	Ft. Worth	TX	76116
TX105	Houston Affiliate	The Houston Chapter of the Susan G. Komen Breast Cancer Foundation, Inc.	76-0360372	602 Sawyer #201	Houston	TX	77007
TX107	North & West Texas Affiliate	North Texas Affiliate of the Susan G. Komen Breast Cancer Foundation Inc.	75-2356437	6130 W. Parker Road, Suite 312	Plano	TX	75093
TX108	San Antonio Affiliate	The San Antonio Chapter of the Susan G. Komen Breast Cancer Foundation, Inc.	74-2856696	85 NE Loop 410 Suite 407	San Antonio	TX	78216
VA100	Central & Eastern Virginia Affiliate	Greater Richmond Virginia Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	75-2844659	611 N. Courthouse Road, Suite 110	N. Chesterfield	VA	23236
VA101	Virginia Blue Ridge Affiliate	Greater Roanoke Valley Area Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	56-2619425	4910 Valley View Blvd. NW #212	Roanoke	VA	24012
WA100	Puget Sound Affiliate	The Puget Sound Chapter of the Susan G. Komen Foundation	91-1624040	112 5th Avenue N	Seattle	WA	98109
WI101	Wisconsin Affiliate	Milwaukee Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.	75-2844639	2025 W. Oklahoma Avenue Suite 116	Milwaukee	WI	53215

CSC

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CSC- Ewing
Suite 160
100 Princeton South Corporate Center
Ewing, NJ 08628
800-631-2155
609-530-0877 (Fax)

Matter# 000125-016316

Order# 369827-5

Project Id :

Order Date 07/28/2020

Entity Name : THE NORTH JERSEY AFFILIATE OF THE SUSAN G. KOMEN BREAST
CANCER FOUNDATION, INC.

Jurisdiction : NJ-State of New Jersey

Request for : Dissolution Filing
File# : 0100713143
File date : 07/29/2020

Result : Filed

Ordered by ERIC JOHN OLSON at DLA PIPER LLP (US)

Thank you for using CSC. For real-time 24 hour access to the status of any order placed with CSC, access our website at www.cscglobal.com.

If you have any questions concerning this order or CSCGlobal, please feel free to contact us.

Ronique Raysor
rraysor@cscinfo.com

The responsibility for verification of the files and determination of the information therein lies with the filing officer; we accept no liability for errors or omissions.

STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
CERTIFICATE OF DISSOLUTION

0100713143

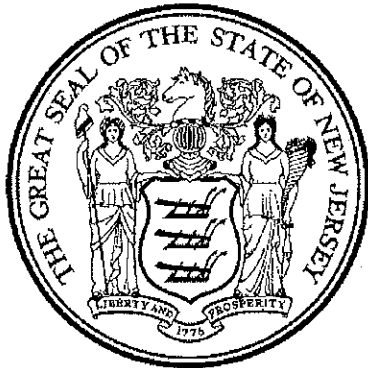
THE NORTH JERSEY AFFILIATE OF THE SUSAN G. KOMEN
BREAST CANCER FOUNDATION, INC.

With the Previous or Alternate Name
SUSAN G. KOMEN NORTH JERSEY

*I, the Treasurer of the State of New Jersey, do hereby certify,
that the above-named New Jersey Non Profit Corporation
did on the 28th of July, 2020, file and record in
this department a Certificate of Dissolution for*

THE NORTH JERSEY AFFILIATE OF THE SUSAN
G. KOMEN BREAST CANCER FOUNDATION, INC.

as required by the statutes of this State.



IN TESTIMONY WHEREOF, I have
hereunto set my hand and
affixed my Official Seal
at Trenton, this
5th day of August, 2020

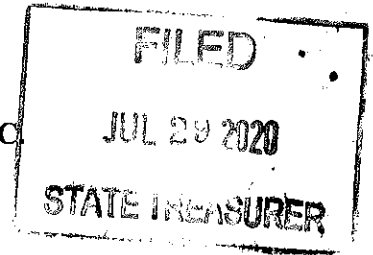
Elizabeth Maher Muoio
State Treasurer

Certificate Number: 142311088

Verify this certificate online at

<https://www.njportal.com/DOR/businessrecords/Validate.aspx>

THE NORTH JERSEY AFFILIATE OF THE
SUSAN G. KOMEN BREAST CANCER FOUNDATION, INC.
CERTIFICATE OF DISSOLUTION
PURSUANT TO ACTION OF THE BOARD
(New Jersey Nonprofit Corporation Act 15a:12-5)



July 24, 2020

1. **Name of Corporation:** The North Jersey Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. (the "Corporation").
2. **Corporation Number:** 0100713143
3. **Registered Agent:** Corporation Service Company
Registered Office: Princeton South Corporate Center, Suite 160
100 Charles Ewing Blvd.
Ewing, New Jersey 08628
4. **Names and Addresses of the Trustees and Officers:**
Chuck Titone: 6 Old Mill Drive, Denville, NJ 07834
Joan Sheridan: 239 Zion Road, Hillsborough, NJ 08844
Ellen Schum: 61 Timberhill Drive, East Hanover, NJ 07936
Rosanne Rotondo: 35 Junard Drive, Morristown, NJ 07960
Karen Meleta: 23 Lackawanna Boulevard, Gillette, NJ 07933
5. **Attestations:** The Corporation is dissolved. The dissolution was authorized pursuant to a unanimous vote of the Corporation's Board of Trustees (the "Board") on July 9, 2020.
6. **Attachments:** Please see the attached the Unanimous Written Consent of the Board, Plan of Dissolution, and Dissolution and Transfer Agreement. Adequate provisions have been made for the discharge of the liabilities of the Corporation.

[Signature Page Follows]

IN WITNESS WHEREOF, the undersigned, constituting all members of the Board of Trustees of The North Jersey Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc., have executed this Certificate of Dissolution as of the day and year first written above.

TRUSTEES:

DocuSigned by:

Chuck Titone

6CC105E7E7C54B4

Chuck Titone

Date: 7/24/2020

DocuSigned by:

Joan Sheridan

C50A6AE2C4F04FD...

Joan Sheridan

Date: 7/24/2020

DocuSigned by:

Ellen Schum

2F35A93814A04C2...

Ellen Schum

Date: 7/24/2020

DocuSigned by:

Rosanne Rotondo

227874762E38464

Rosanne Rotondo

Date: 7/27/2020

DocuSigned by:

Karen Meleta

52C2C224BE454BD...

Karen Meleta

Date: 7/24/2020

**THE NORTH JERSEY AFFILIATE OF THE
SUSAN G. KOMEN BREAST CANCER FOUNDATION, INC.
UNANIMOUS WRITTEN CONSENT OF THE BOARD
OF TRUSTEES IN LIEU OF MEETING**

JULY 9, 2020

WHEREAS, THIS UNANIMOUS WRITTEN CONSENT of the Board of Trustees (the “Board”) of The North Jersey Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc., a New Jersey nonprofit corporation (the “Affiliate”), is given by the undersigned Trustees (the “Trustees”):

Dissolution of the Affiliate

WHEREAS, the Board believes that it is in the best interests of the Affiliate that it be dissolved and wound down and its net assets be distributed (the “Dissolution”) pursuant to the Bylaws of the Affiliate and that certain Fourth Amended and Restated Affiliation Agreement, effective as of April 1, 2020, by and between the Affiliate and The Susan G. Komen Breast Cancer Foundation, Inc. d/b/a Susan G. Komen (the “Affiliation Agreement”);

WHEREAS, the Affiliate has no outstanding debts, claims, or obligations, including any contingent, conditional, or unmatured contractual claims;

WHEREAS, the Affiliate and The Susan G. Komen Breast Cancer Foundation, Inc. are parties to that certain Irrevocable Power of Attorney, entered into as of July 1, 2020, as required by Section 6(f) and Section 10(a)(i) of the Affiliation Agreement and attached hereto as Exhibit A.

WHEREAS, pursuant to the terms of the Bylaws of the Affiliate, any action required or permitted to be taken at a meeting of the Board may be taken without a meeting if a written consent which sets forth the action is signed by all the Trustees and is filed with the minutes of proceedings of the Board; and

WHEREAS, as of the date hereof, the undersigned Trustees constitute all of the Trustees of the Affiliate.

NOW, THEREFORE, BE IT RESOLVED, that the Affiliate does hereby approve, ratify and confirm the Dissolution, as set forth in that certain Plan of Dissolution (the “Plan,” attached hereto as Exhibit B) and that certain Dissolution and Transfer Agreement (the “Dissolution Agreement,” attached hereto as Exhibit C);

FURTHER RESOLVED, that any officer of the Affiliate and such other officers of the Affiliate as the President of the Affiliate may designate, with full power to each of them to act alone, be, and each hereby is, authorized, acting on behalf of the Affiliate, to execute and deliver Dissolution documentation, including without limitation, (i) the Plan, and (iii) the Dissolution Agreement in each case, with such changes, additions, deletions and modifications as shall be made therein in accordance with these resolutions with the approval of the President or any other

and the execution by the President or any other such officer shall be conclusive evidence of such approval;

FURTHER RESOLVED, that the Affiliate, by its duly authorized officers, immediately upon adoption of these resolutions, shall proceed to liquidate and distribute all of the remaining assets of the Affiliate as the Board shall determine for one or more exempt purposes within the meaning of Section 501(c)(3) of the Code, consistent with Article Two of the Affiliate's Certificate of Incorporation and Section 6.06 of the Affiliate's Bylaws, withholding from distribution only those assets required for the payment of any federal or state taxes and other liabilities, the amount to be retained (if any) to be determined by the President of the Affiliate;

FURTHER RESOLVED, that the Affiliate, by its duly authorized officers, immediately upon adoption of these resolutions, shall proceed to transfer or convey all assets received and held by the Affiliate, subject to limitations, permitting their use only for charitable, religious, eleemosynary, benevolent, educational, or similar purposes, but not held upon a condition requiring return, transfer, or conveyance by reason of the dissolution, to Susan G. Komen Breast Cancer Foundation, Inc., a Texas nonprofit corporation, which is an organization recognized as exempt under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended, to which contributions are deductible under Section 170(c)(2) of the Code, and which is engaged in activities substantially similar to those of the Affiliate;

FURTHER RESOLVED, that the corporate office of the Affiliate be closed effective as of June 18, 2020;

FURTHER RESOLVED, that the proper officers of the Affiliate, with full power to each alone, be and each of them hereby is, authorized, acting on behalf of the Affiliate, to execute, deliver, file or cause to be filed all documents and instruments and perform any and all other acts as such officer or officers may deem necessary or advisable in connection with and in order to effectuate the foregoing resolutions and the Dissolution;

FURTHER RESOLVED, that the officers of the Affiliate, and any of them, are each hereby authorized to pay all such fees and taxes and to take such action and to execute any and all certificates and other documents necessary or advisable in order to wind up the business affairs of the Affiliate and to carry out the Dissolution; and

FURTHER RESOLVED, that any and all actions heretofore taken by any officer or agent of the Affiliate within the authority and in furtherance of the purposes of the foregoing resolutions be, and such act is, hereby authorized, approved, ratified and confirmed in all respects.

IN WITNESS WHEREOF, the undersigned have executed this Unanimous Written Consent of the Board of Trustees in Lieu of Meeting of The North Jersey Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. as of the day and year first written above.

TRUSTEES:



Chuck Titone

Joan Sheridan

Ellen Schum

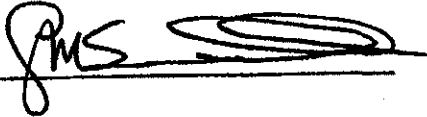
Rosanne Rotondo

Karen Meleta

IN WITNESS WHEREOF, the undersigned have executed this Unanimous Written Consent of the Board of Trustees in Lieu of Meeting of The North Jersey Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. as of the day and year first written above.

TRUSTEES:

Chuck Titone

Joan Sheridan 
Joan Sheridan

Ellen Schum

Rosanne Rotondo

Karen Meleta

IN WITNESS WHEREOF, the undersigned have executed this Unanimous Written Consent of the Board of Trustees in Lieu of Meeting of The North Jersey Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. as of the day and year first written above.

TRUSTEES:

Chuck Titone

Joan Sheridan

Ellen M. Schum

Ellen Schum

Rosanne Rotondo

Karen Meleta

IN WITNESS WHEREOF, the undersigned have executed this Unanimous Written Consent of the Board of Trustees in Lieu of Meeting of The North Jersey Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. as of the day and year first written above.

TRUSTEES:

Chuck Titone

Joan Sheridan

Ellen Schum

**Rotondo
Rosanne**

Digitally signed by Rotondo Rosanne
DN: dc=com, dc=novartis, ou=people,
ou=GR, serialNumber=915325, cn=Rotondo
Rosanne
Date: 2020.07.09 22:15:48 -04'00'

Rosanne Rotondo

Karen Meleta

IN WITNESS WHEREOF, the undersigned have executed this Unanimous Written Consent of the Board of Trustees in Lieu of Meeting of The North Jersey Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. as of the day and year first written above.

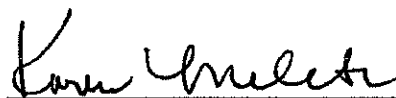
TRUSTEES:

Chuck Titone

Joan Sheridan

Ellen Schum

Rosanne Rotondo



Karen Meleta

Exhibit A

Power of Attorney
See attached.

EXHIBIT D

IRREVOCABLE POWER OF ATTORNEY

This Irrevocable Power of Attorney is being entered into as of July 1, 2020 by The North Jersey Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc. (the "*Affiliate*"), an affiliate of the Susan G. Komen Breast Cancer Foundation, Inc., a Texas nonprofit charitable corporation ("*Komen*").

WHEREAS, the Affiliation Agreement provides that in the event of Affiliate's cessation of operations, Affiliate will enter into a power of attorney with Komen to allow Komen to take over all aspects of management and operations of Affiliate; and

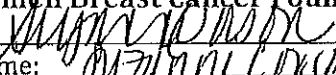
WHEREAS, Affiliate desires to grant this power of attorney to Komen to allow Komen to take over all aspects of management and operations of Affiliate.

For good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, Affiliate hereby constitutes and appoints Komen, with full power of substitution, as Affiliate's true and lawful attorney-in-fact to take over all aspects of management and operations of Affiliate and to take any actions necessary, appropriate or advisable in connection therewith.

Affiliate waives all rights to revoke this Irrevocable Power of Attorney and acknowledges and agrees that the power of attorney granted hereby is irrevocable. Affiliate is fully informed as to the scope of this Irrevocable Power of Attorney and understands the full import of the grant of powers to Komen provided herein.

The undersigned authorized representative of Affiliate has caused this Irrevocable Power of Attorney to be executed as of the date first set forth above.

**The North Jersey Affiliate of the Susan G.
Komen Breast Cancer Foundation, Inc.**

By: 
Name: Suzanne Larson
Its Authorized Representative

STATE OF NEW JERSEY

) ss.:
COUNTY OF MERCER)

On this 20 day of JUNE, 2020, before me, a Notary Public duly commissioned, qualified and acting, within the State of N.J., appeared in person the within named SUZANNE CORSON to me personally known, who stated that he is duly authorized to execute the foregoing instrument, and further stated and acknowledged that he has so signed, executed and delivered the foregoing instrument.

 In testimony whereof, I have hereunto set my hand and official seal this 20 day of JUNE, 2020.

Donna M Soos
Notary Public

My commission expires: 9-3-20

DONNA M. SOOS
NOTARY PUBLIC OF NEW JERSEY
My Commission Expires 9/3/2020

Exhibit B

Plan of Dissolution

See attached.

**PLAN OF DISSOLUTION
OF
THE NORTH JERSEY AFFILIATE OF THE
SUSAN G. KOMEN BREAST CANCER FOUNDATION, INC.**

JULY 9, 2020

This Plan of Dissolution of The North Jersey Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc., a New Jersey nonprofit corporation (the "**Company**"), provides for the distribution of the assets of the Company as part of the implementation of the Company's voluntary dissolution in the manner permitted under Section 15A:12-8 of the New Jersey Nonprofit Corporation Act (the "**Act**").

The assets of the Company shall be applied and distributed as follows:

1. All liabilities and obligations of the Company shall be paid, satisfied, and discharged, or adequate provision shall be made therefor.
2. Assets held by the Company upon condition requiring return, transfer, or conveyance, if any, which condition occurs by reason of the dissolution, shall be returned, transferred, or conveyed in accordance with such requirements.
3. Assets received and held by the Company subject to limitations, permitting their use only for charitable, religious, eleemosynary, benevolent, educational, or similar purposes, but not held upon a condition requiring return, transfer, or conveyance by reason of the dissolution, shall be transferred or conveyed to Susan G. Komen Breast Cancer Foundation, Inc., a Texas nonprofit corporation, which is an organization recognized as exempt under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended, to which contributions are deductible under Section 170(c)(2) of the Code, and which is engaged in activities substantially similar to those of the Company (the "**Komen Foundation**").
4. Any remaining assets shall be transferred or conveyed in kind, or sold and the proceeds, after paying obligations of the Company, shall be transferred to the Komen Foundation to be used exclusively for purpose consistent with the charitable purposes of the Company.

[Signature page follows.]

I, Rosanne Rotondo, Authorized Representative of the Company, certify that the substance of the foregoing Plan of Distribution was duly adopted by the Board of Trustees on July 9, 2020.

By: Rotondo Rosanne
Name:
Title:

Digitally signed by Rotondo Rosanne
DN: dc=com, dc=Novartis, ou=people, ou=GR,
serialNumber=915325, cn=Rotondo, Rosanne
Reason: I am approving this document
Date: 2020.07.09 22:24:59 -0400

Exhibit C

Dissolution and Transfer Agreement

See attached.

DISSOLUTION AND TRANSFER AGREEMENT

THIS DISSOLUTION AND TRANSFER AGREEMENT ("Agreement") is by and between The North Jersey Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc., a New Jersey nonprofit corporation ("Transferor"), and Susan G. Komen Breast Cancer Foundation, Inc., a Texas nonprofit corporation, which is an organization recognized as exempt under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended (the "Code"), to which contributions are deductible under Section 170(c)(2) of the Code ("Transferee").

WHEREAS, the Board of Transferor has decided to wind up and dissolve the Transferor (the "Dissolution") in the manner permitted under Section 15A:12 of the New Jersey Nonprofit Corporation Act (the "Act");

WHEREAS, the Board of Transferor has adopted a plan of dissolution ("Plan") which stipulates that assets received and held by the Transferor, subject to limitations permitting their use only for charitable, religious, eleemosynary, benevolent, educational, or similar purposes, but not held upon a condition requiring return, transfer, or conveyance by reason of the Dissolution, shall be transferred or conveyed to the Transferee;

WHEREAS, Transferee desires to accept from Transferor all such assets according to the Plan; and

WHEREAS, Transferor shall transfer its entire assets of a total of \$858,537.00 in cash to Transferee (the "Asset");

NOW THEREFORE, FOR VALUABLE CONSIDERATION, the receipt, adequacy, and sufficiency of which are hereby acknowledged, the parties agree as follows:

1. Transferor warrants and covenants that (a) it has obtained all requisite corporate approval to execute and deliver this Agreement, (b) it has and does here ratify the transfer of the Asset to Transferee as a part of the Plan, and (c) it will not execute any document or instrument in conflict herewith; and
2. Transferee warrants and covenants that it shall use the Asset, along with any other assets from Transferor according to the Plan (if any), to first pay any and all outstanding liabilities and obligations owed by Transferor, and then, with any remaining funds, for charitable purposes consistent with the charitable purposes of the Transferor.

[Signature Page Follows]

IN WITNESS WHEREOF, Transferor and Transferee have caused this Agreement to be effective as of the 9th day of July, 2020.

Transferor:

The North Jersey Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.

By: Rotondo Rosanne

Digitally signed by Rotondo Rosanne
DN: dc=com, dc=novartis, ou=people, ou=GR, serialNumber=915325,
cn=Rotondo Rosanne
Reason: I am approving this document
Date: 2020.07.09 22:29:00 -0400

Name: Rosanne Rotondo

Title: Acting Board President, North Jersey Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.

Transferee:

Susan G. Komen Breast Cancer Foundation, Inc.

By: _____

Name:

Title:

IN WITNESS WHEREOF, Transferor and Transferee have caused this Agreement to be effective as of the 20th day of July, 2020.

Transferor:

The North Jersey Affiliate of the Susan G. Komen Breast Cancer Foundation, Inc.

By: _____
Name:
Title:

Transferee:

Susan G. Komen Breast Cancer Foundation, Inc.

By: 
Name: Eunice Nakamura
Title: General Counsel & Corporate Secretary