Amended

AMENDED RETURN

Form **990-T**

Department of the Treasury
Internal Revenue Service (77)

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e)) 0808

For calendar year 2007 or other tax year beginning September 1 2007 and ending August 31 20 08 ▶ See separate instructions

OMB No 1545 0687

2007

Open to Public Inspection for 501(c)(3) Organizations Only

A ☐ Check box if address changed

B Exempt under section
☑ 501(C) (3)
☐ 408(e) ☐ 220(e)
☐ 408A ☐ 530(a)
☐ 529(a)

C Book value of all assets at end of year **1,618,555,503**

Print or Type

Name of organization (☐ Check box if name changed and see instructions)
American Cancer Society Inc (National Home Office)

Number street and room or suite no If a P O box see page 9 of instructions
250 Williams Street NW Suite 400

City or town state and ZIP code
Atlanta GA 30303 1002

D Employer identification number (Employees trust see instructions for Block D on page 9)
13 1788491

E Unrelated business activity codes (See instructions for Block E on page 9)
541800

F Group exemption number (See instructions for Block F on page 9) ▶

G Check organization type ▶ ☑ 501(c) corporation ☐ 501(c) trust ☐ 401(a) trust ☐ Other trust

H Describe the organization s primary unrelated business activity ▶ **Journal Advertising**

I During the tax year was the corporation a subsidiary in an affiliated group or a parent subsidiary controlled group? ▶ ☐ Yes ☑ No
If Yes enter the name and identifying number of the parent corporation ▶

J The books are in care of ▶ **Catherine E Mickle CFO** Telephone number ▶ (404) 329 7934

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales b Less returns and allowances c Balance ▶	1c			
2 Cost of goods sold (Schedule A line 7)	2			
3 Gross profit Subtract line 2 from line 1c	3	0		0
4a Capital gain net income (attach Schedule D)	4a			
b Net gain (loss) (Form 4797 Part II line 17) (attach Form 4797)	4b			
c Capital loss deduction for trusts	4c			
5 Income (loss) from partnerships and S corporations (attach statement)	5			
6 Rent income (Schedule C)	6			
7 Unrelated debt financed income (Schedule E)	7			
8 Interest annuities royalties and rents from controlled organizations (Schedule F)	8			
9 Investment income of a section 501(c)(7) (9) or (17) organization (Schedule G)	9			
10 Exploited exempt activity income (Schedule I)	10			
11 Advertising income (Schedule J)	11	34 026	0	34 026
12 Other income (See page 11 of the instructions attach schedule)	12			
13 **Total** Combine lines 3 through 12	13	34 026	0	34 026

RECEIVED JUL 12 2012 TPR BRANCH OGDEN

Part II Deductions Not Taken Elsewhere (See page 12 of the instructions for limitations on deductions) (Except for contributions deductions must be directly connected with the unrelated business income)			
14 Compensation of officers directors and trustees (Schedule K)		14	
15 Salaries and wages		15	
16 Repairs and maintenance		16	
17 Bad debts		17	
18 Interest (attach schedule)		18	
19 Taxes and licenses		19	
20 Charitable contributions (See page 14 of the instructions for limitation rules)		20	3 403
21 Depreciation (attach Form 4562)	21		
22 Less depreciation claimed on Schedule A and elsewhere on return	22a	22b	
23 Depletion		23	
24 Contributions to deferred compensation plans		24	
25 Employee benefit programs		25	
26 Excess exempt expenses (Schedule I)		26	
27 Excess readership costs (Schedule J)		27	0
28 Other deductions (attach schedule)		28	
29 **Total deductions** Add lines 14 through 28		29	3 403
30 Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13		30	30 623
31 Net operating loss deduction (limited to the amount on line 30)		31	
32 Unrelated business taxable income before specific deduction Subtract line 31 from line 30		32	30 623
33 Specific deduction (Generally $1 000 but see line 33 instructions for exceptions)		33	1 000
34 **Unrelated business taxable income** Subtract line 33 from line 32 If line 33 is greater than line 32 enter the smaller of zero or line 32		34	29 623

RECEIVED JUL 09 2012 OGDEN UT E1-1

No Statute Issue JUL 16 2012
Kathy M Gallegos
0436558083
JUL 05 2012
ENVELOPE POSTMARK DATE
SCANNED JUL 19 2012

Part III Tax Computation

35	**Organizations Taxable as Corporations** See instructions for tax computation on page 15 Controlled group members (sections 1561 and 1563) check here ▶ ☐ **See instructions** and		
a	Enter your share of the $50 000 $25 000 and $9 925 000 taxable income brackets (in that order) (1) $ (2) $ (3) $		
b	Enter organization s share of **(1)** Additional 5% tax (not more than $11 750) $ **(2)** Additional 3% tax (not more than $100 000) $		
c	Income tax on the amount on line 34 ▶	35c	4 443
36	**Trusts Taxable at Trust Rates** See instructions for tax computation on page 16 Income tax on the amount on line 34 from ☐ Tax rate schedule or ☐ Schedule D (Form 1041) ▶	36	
37	**Proxy tax** See page 16 of the instructions ▶	37	
38	Alternative minimum tax	38	
39	**Total** Add lines 37 and 38 to line 35c or 36 whichever applies	39	4 443

Part IV Tax and Payments

40a	Foreign tax credit (corporations attach Form 1118 trusts attach Form 1116)	40a			
b	Other credits (see page 17 of the instructions)	40b			
c	General business credit Check here and indicate which forms are attached ☐ Form 3800 ☐ Form(s) (specify) ▶	40c			
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	40d			
e	**Total credits** Add lines 40a through 40d			40e	0
41	Subtract line 40e from line 39			41	4 443
42	Other taxes Check if from ☐ Form 4255 ☐ Form 8611 ☐ Form 8697 ☐ Form 8866 ☐ Other (attach schedule)			42	
43	**Total tax** Add lines 41 and 42			43	4 443
44a	Payments A 2006 overpayment credited to 2007	44a	375		
b	2007 estimated tax payments	44b			
c	Tax deposited with Form 8868	44c			
d	Foreign organizations Tax paid or withheld at source (see instructions)	44d			
e	Backup withholding (see instructions)	44e	8 362		
f	Other credits and payments ☐ Form 2439 ☐ Form 4136 ☐ Other Total ▶	44f			
45	**Total payments** Add lines 44a through 44f			45	8 737
46	Estimated tax penalty (see page 4 of the instructions) Check if Form 2220 is attached ▶ ☐			46	
47	**Tax due** If line 45 is less than the total of lines 43 and 46 enter amount owed ▶			47	
48	**Overpayment** If line 45 is larger than the total of lines 43 and 46 enter amount overpaid ▶			48	4 294
49	Enter the amount of line 48 you want **Credited to 2008 estimated tax** ▶ 3 783 **Refunded** ▶			49	511

Part V Statements Regarding Certain Activities and Other Information (see instructions on page 18)

		Yes	No
1	At any time during the 2007 calendar year did the organization have an interest in or a signature or other authority over a financial account (bank securities or other) in a foreign country? If YES the organization may have to file Form TD F 90 22 1 If YES enter the name of the foreign country here ▶		✓
2	During the tax year did the organization receive a distribution from or was it the grantor of or transferor to a foreign trust? If YES see page 5 of the instructions for other forms the organization may have to file		✓
3	Enter the amount of tax exempt interest received or accrued during the tax year ▶ $		

Schedule A—Cost of Goods Sold Enter method of inventory valuation ▶

1	Inventory at beginning of year	1		6	Inventory at end of year	6	
2	Purchases	2		7	**Cost of goods sold** Subtract line 6 from line 5 Enter here and in Part I line 2	7	
3	Cost of labor	3					
4a	Additional section 263A costs (attach schedule)	4a		8	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
b	Other costs (attach schedule)	4b					
5	**Total** Add lines 1 through 4b	5					

Sign Here

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

Signature of officer: [signature] Date: 7-5-12 Title: Chief Financial Officer

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

Paid Preparer's Use Only

Preparer s signature ▶ [signature]	Date 07/02/2012	Check if self employed ☐	Preparer s SSN or PTIN P00292940
Firm s name (or yours if self employed) address and ZIP code ▶ ERNST & YOUNG U S LLP 1901 6TH AVENUE NORTH STE 1200 BIRMINGHAM AL 35203		EIN 34 6565596	Phone no (205) 251 2000

Schedule C—Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions on page 20)

1 Description of property

(1)
(2)
(3)
(4)

	2 Rent received or accrued		3 Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
	(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	
(1)			
(2)			
(3)			
(4)			
Total		Total	

Total income Add totals of columns 2(a) and 2(b) Enter here and on page 1 Part I line 6 column (A) ▶

Total deductions Enter here and on page 1 Part I line 6 column (B) ▶

Schedule E—Unrelated Debt-Financed Income (see instructions on page 20)

	1 Description of debt financed property	2 Gross income from or allocable to debt financed property	3 Deductions directly connected with or allocable to debt financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				

	4 Amount of average acquisition debt on or allocable to debt financed property (attach schedule)	5 Average adjusted basis of or allocable to debt financed property (attach schedule)	6 Column 4 divided by column 5	7 Gross income reportable (column 2 × column 6)	8 Allocable deductions (column 6 × total of columns 3(a) and 3(b))
(1)			%		
(2)			%		
(3)			%		
(4)			%		
				Enter here and on page 1 Part I line 7 column (A)	Enter here and on page 1 Part I line 7 column (B)
Totals			▶		
Total dividends received deductions included in column 8				▶	

Schedule F—Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions on page 21)

1 Name of Controlled Organization	2 Employer Identification Number	Exempt Controlled Organizations			
		3 Net unrelated income (loss) (see instructions)	4 Total of specified payments made	5 Part of column 4 that is included in the controlling organization's gross income	6 Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7 Taxable Income	8 Net unrelated income (loss) (see instructions)	9 Total of specified payments made	10 Part of column 9 that is included in the controlling organization's gross income	11 Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10 Enter here and on page 1 Part I line 8 column (A)	Add columns 6 and 11 Enter here and on page 1 Part I line 8 column (B)
Totals		▶		

Schedule G—Investment Income of a Section 501(c)(7), (9), or (17) Organization

(see instructions on page 22)

1 Description of income	2 Amount of income	3 Deductions directly connected (attach schedule)	4 Set asides (attach schedule)	5 Total deductions and set asides (col 3 plus col 4)
(1)				
(2)				
(3)				
(4)				
Totals ▶	Enter here and on page 1 Part I line 9 column (A)			Enter here and on page 1 Part I line 9 column (B)

Schedule I—Exploited Exempt Activity Income, Other Than Advertising Income

(see instructions on page 22)

1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain compute cols 5 through 7	5 Gross income from activity that is not unrelated business income	6 Expenses attributable to column 5	7 Excess exempt expenses (column 6 minus column 5 but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals ▶	Enter here and on page 1 Part I line 10 col (A)	Enter here and on page 1 Part I line 10 col (B)				Enter here and on page 1 Part II line 26

Schedule J—Advertising Income (see instructions on page 22)

Part I Income From Periodicals Reported on a Consolidated Basis

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5 but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II line (5)) ▶						

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II fill in columns 2 through 7 on a line by-line basis)

(1) Cancer &						
(2) Cancer Cytopathology	34 026	0	34 026	0	0	0
(3)						
(4)						
(5) Totals from Part I						
Totals Part II (lines 1 5) ▶	Enter here and on page 1 Part I line 11 col (A) 34 026	Enter here and on page 1 Part I line 11 col (B) 0				Enter here and on page 1 Part II line 27 0

Schedule K—Compensation of Officers, Directors, and Trustees (see instructions on page 23)

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
		%	
		%	
		%	
		%	
Total Enter here and on page 1 Part II line 14 ▶			

Printed on recycled paper