TEAM A BREATH AWAY

ENDURANCE PROGRAM

BONNIE J. ADDARIO
LUNG CANCER
FOUNDATION
PATIENT FOUNDED. PATIENT FOCUSED.

2018
SPONSORSHIP **OPPORTUNITIES**

lungcancerfoundation.org/events/endurance

ABOUT ALCF

Patients fighting lung cancer today and those who will be diagnosed tomorrow are at the heart of our mission. Driven by the knowledge that lung cancer is the **number one cancer killer worldwide annually,** our imperative is to dramatically increase patient survival rate.

Because we are **patient founded, focused and funded,** we know how to answer their questions and support their immediate and long-term needs. To this end, we fund clinical research and provide patient programs, give patients hope and ensure that their voices are heard in advocating for changes to **transform lung cancer into a manageable, chronic disease and ultimately, a curable disease.**

Whether you choose to sponsor a city, participate as an individual or as a team, we are all here to cheer each other on and to recognize the courage and determination of people affected by lung cancer. Let's come together – step-by-step – and raise funds to extend and enhance the lives of patients and families affected by lung cancer.

PARTICIPATE IN THE BONNIE J. ADDARIO LUNG CANCER FOUNDATION (ALCF) ENDURANCE PROGRAM AND HELP RAISE FUNDS FOR LUNG CANCER RESEARCH.

Looking to take on an endurance challenge while raising money to help make lung cancer a chronically managed disease? Then join the Bonnie J. Addario Lung Cancer Foundation Endurance Program. Our team helps you work towards a goal of completing a marathon, half marathon or other distance event of your choice while making a positive impact in the world.
Contact endurance@lungcancerfoundation.org or (650) 596-2857 for more information.

EDUCATION. SUPPORT. EMPOWERMENT.

2023

Our goal is to transform lung cancer into a chronically managed disease by **2023** and ***ultimately find a cure***.

88%

88% of every dollar donated supports programs, services, outreach and research.

12% Administration

GuideStar PLATINUM PARTICIPANT

CHARITY NAVIGATOR ★★★★ Four Star Charity

Scientific Research*

46%

- More than 50 Research Grants, Fellowships and Awards Funded, Crowdsourcing / Machine Learning Challenge
- Currently working on 12 major studies to better understand lung cancer
- Pan-cancer Study on Ros1 Mutation
- Understanding Young Lung Cancer Liquid Biopsy Studies
- Immunotherapy Combination Trial

Patient Programs

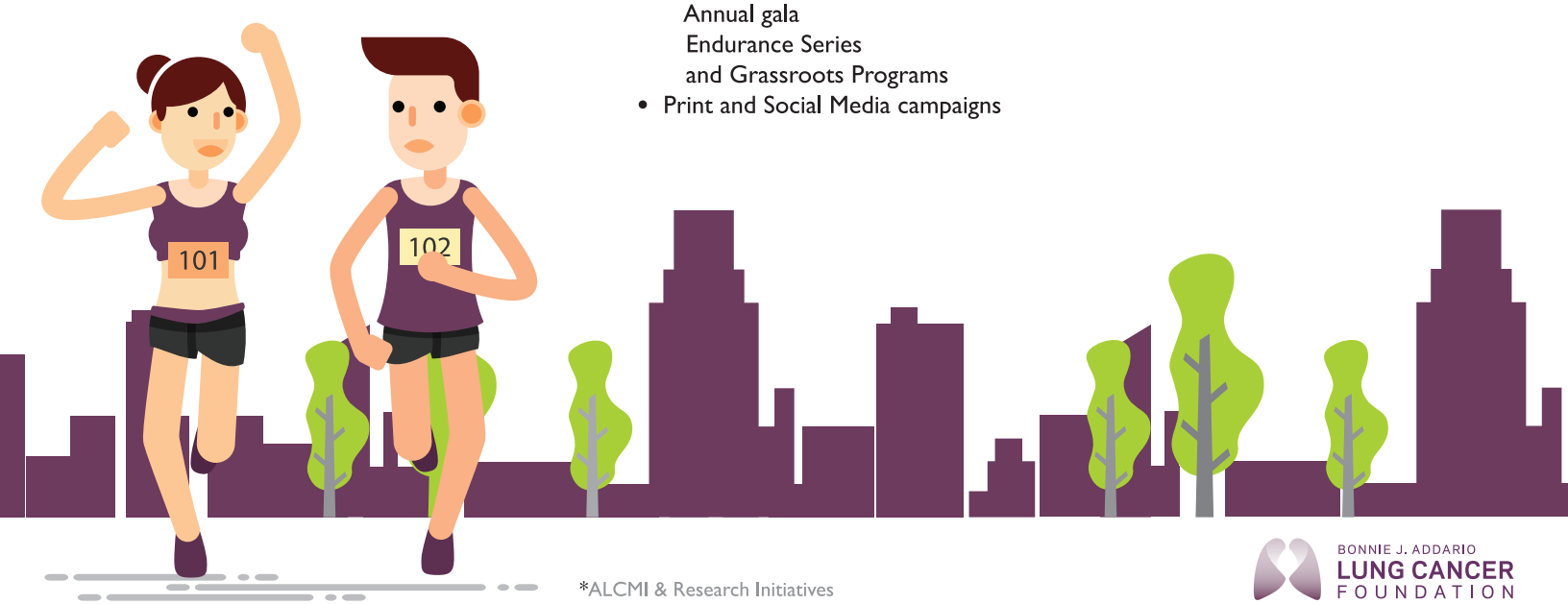
18%

- "Bring Hope Home" Lung Cancer Living Room education/support series
- Patient Education Handbook
- Education Video / Archive Llibrary
- Patient Registry
- Personal Navigation
- Community Hospital Centers of Excellence

Educational Awareness

24%

- Website
- E-Newsletter
- Patient Education Resource Centers at National Race Series
- Nearly 100 fundraising campaigns including:
  - Your Next Step is the Cure 5k runs
  - Annual Golf Outing
  - Annual gala
  - Endurance Series
  - and Grassroots Programs
- Print and Social Media campaigns



*ALCMI & Research Initiatives

BONNIE J. ADDARIO LUNG CANCER FOUNDATION

Sponsorship Opportunities

BRAND RECOGNITION	Spotlighter $10,000 (1 Available)	Starlight $5,000 (2 Available)	Ray of Hope $2,500 (3 Available)	Shooting Star $1,500 (5 Available)	Donation of your choice
Opportunity to include marketing collateral and promotional items in runners swag bag	✔	✔			
Recognition on ALCF social media sites	✔	✔	✔		
Mention in all event press releases and endurance promotional campaigns *	✔	✔	✔	✔	
Logo placement on marketing, advertising or promotional materials	✔	✔	✔	✔	
Logo inclusion and link, as applicable, on events website as well as ALCF's social media outlets	✔	✔	✔	✔	
Logo inclusion on email blasts to ALCF constituents	✔	✔	✔	✔	
Logo inclusion on the event jersey	✔	✔	✔	✔	
Complimentary event registration	5	3	2	1	

How can we benefit you? Propose your idea!

Form **W-9**
(Rev. December 2014)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

Print or type
See Specific Instructions on page 2.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
Bonnie J Addario A Breath Away from the Cure Foundation

2 Business name/disregarded entity name, if different from above
Bonnie J Addario Lung Cancer Foundation

3 Check appropriate box for federal tax classification; check only **one** of the following seven boxes:
☐ Individual/sole proprietor or single-member LLC ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate
☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____
Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.
☑ Other (see instructions) ▶ **501c3**

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
Exempt payee code (if any) _____
Exemption from FATCA reporting code (if any) **501c3**
(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.)
1100 Industrial Road, Suite 1

Requester's name and address (optional)

6 City, state, and ZIP code
San Carlos, CA 94070

7 List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number
			–			–				

or

Employer identification number
2	0	–	4	4	1	7	3	2	7

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here | **Signature of U.S. person ▶** Debi Beltrano | **Date ▶** 1/1/2018

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at *www.irs.gov/fw9*.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

SPONSORSHIP COMMITMENT FORM

Please fill out this form and submit via:
Fax: Attn. Katie Wilcox to 650-598-0282
Email: katie@lungcancerfoundation.org
OR
Mail: 1100 Industrial Road #1 San Carlos, CA 94070

Full Sponsor Name as you would like to be listed:

Contact:_____ Phone:_____ Fax:_____

Street:_____ City:_____

State:_____ Zip:_____ Email: _____

Website URL: _____

PLEASE INDICATE SPONSORSHIP LEVEL

☐ Spotlighter: $10.000 (One Available)

☐ Starlight: $5,000 (Two Available)

☐ Ray Of Hope: $2,500 (Three Available)

☐ Shooting Star: $1,500 (Five Available)

☐ Donation Amount of Your Choice:

$_____

Will you be submitting a logo? ☐ YES ☐ NO
Please send your logo to katie@lungcancerfoundation.org. Sponsor logos need to be submitted in a timely fashion to ensure inclusion across all marketing materials, signage, website, etc. (Please note that sponsors must commit by Jan 29, 2018 to be included on event marketing materials). Include the event name and sponsorship level in your email. Logos must be submitted in vector files (.eps or .ai) with outlined fonts.

PAYMENT INFORMATION

☐ **NAME AND ADDRESS SAME AS ABOVE**

Name:_____

Street:_____ City: _____

State:_____ Zip:_____ Email: _____

Phone: _____ Fax:_____

Checks payable to ALCF or Credit Card (Circle one): AMEX VISA MC

please charge my credit card $_____.

Card #:_____ Expiration Date: _____ CVC #: _____

Signature: _____ Date:_____

Bonnie J. Addario Lung Cancer Foundation, 1100 Industrial Road Suite 1, San Carlos, CA 94070
For more information call Katie at (408) 455-4265 or email Katie@lungcancerfoundation.org
Bonnie J. Addario Lung Cancer Foundation is a 501(c)(3) non-profit organization ID 20-4417327.
Sponsorships are non-refundable.

www.lungcancerfoundation.org // info@lungcancerfoundation.org

CENTERS OF EXCELLENCE

- ALCF is working with an elite team of specialists to create an unsurpassed paradigm for lung cancer treatment worldwide-a patient-centric, collaborative model that provides all patients access to the newest, most effective diagnostic and therapeutic techniques.
- The "standard of care" established at community hospitals is accompanied by a seal of excellence awarded by ALCF and ensures no lung cancer patient is left behind.

COMMUNITY HOSPITALS CENTERS OF EXCELLENCE

Baptist Memorial Hospital
Memphis, TN

Community Medical Centers associated with UCSF Fresno Medical Education Program
Fresno, CA

Dignity Health Cancer Center – Mercy Cancer Center
Carmichael, CA

Dignity Health St. Joseph's Hospital and Medical Center
Phoenix, AZ

El Camino Hospital
Mountain View, CA

Florida Hospital Tampa
Tampa, FL

First Health Moore Regional
Pinehurst, NC

Gibbs Cancer Center
Spartanburg, SC

Gunderson Health
Lacrosse, WI

Haywood Regional Medical Center
Clyde, NC

Leo W. Jenkins Cancer Center
Greenville, NC

Memorial Cancer Institute
Hollywood, FL

Orange Coast Memorial Medical Center
Fountain Valley, CA

OSF St. Francis
Peoria, IL

St. Thomas Health West
Nashville, TN

Tahoe Forest Cancer Center
Lake Tahoe, NV

Texas Oncology – Presbyterian Cancer Center Dallas
Dallas, TX

ALCMI HOSPITAL CENTERS OF EXCELLENCE

Alta Bates Summit Medical Center
Oakland, CA

Boca Raton Regional Hospital
Boca Raton, FL

Catalan Institute of Oncology
Barcelona, Spain

Dana-Farber Cancer Institute
Boston, MA

El Camino Hospital
Mountain View, CA

Hoag Hospital
Newport Beach, CA

Institute Gustave Roussy
Paris, France

LA County Hospital
Barbara Gitlitz, MD
Los Angeles, CA

Lahey Clinic Hospital
Burlington, MA

Memorial Cancer Institute
Hollywood, FL

New York University
New York, NY

Northside Hospital System
Atlanta, GA

Ohio State University
Columbus, OH

Palo Alto Medical Foundation
Palo Alto, CA

Tahoe Forest Cancer Center
Truckee, CA

Vanderbilt University
Nashville, TN

University of California at Davis
Sacramento, CA

University of California, San Francisco
San Francisco, CA

University of Southern California
Los Angeles, CA

University of Torino
Torino, Italy

SPOTLIGHTER: $10,000 *(ONE AVAILABLE)*

- Title sponsor for ALCF Endurance Program
- Priority mention in all event press releases and endurance promotional campaigns
- Priority logo placement on marketing, advertising or promotional materials
- Logo inclusion and link, as applicable, on events website as well as ALCF's social media outlets
- Logo inclusion on email blasts to ALCF constituents
- Exclusive logo placement on event jersey

STARLIGHT: $5,000 *(TWO AVAILABLE)*

- Secondary sponsor for the event
- Mention in press releases and Endurance Program promotional campaigns
- Premier logo placement on event website, marketing materials, signage and event emails
- Logo inclusion and link, as applicable, on events website as well as ALCF's social media outlets
- Exclusive logo placement on event jersey
- Logo inclusion on email blasts to ALCF constituents

RAY OF HOPE: $2,500 *(THREE AVAILABLE)*

- Special logo placement on event website, marketing materials, signage and event emails
- Link to your company website on event website
- Logo inclusion on event registration pages and email blasts to donors/participants
- Exclusive logo placement on event jersey

SHOOTING STAR: $1,500 *(FIVE AVAILABLE)*

- Lead company name and logo display on event website, marketing materials, signage and event emails
- Link to your company website on event website
- Recognition on social media platforms
- Exclusive logo placement on event jersey

DONATION AMOUNT OF YOUR CHOICE: $_____